

HMDC Presents... WHO: Full Report

HMDC Presents... World Health Organization (WHO): Social Effects of Addiction (Research Report, December 2026)

Prepared for HMDC delegates attending Harvard Model United Nations Online, December 5-6, 2026. Every fact below comes from a page that was opened and read in October 2026. Each evidence entry names its publication and date so you can always trace a fact back to its source.

WHAT OUR CHAIRS WILL FOCUS ON

Harvard explains that this committee studies the worldwide problem of drug use and substance abuse, and how it hurts health, growth and the safety of whole societies. The October session looks at money and economies, but our December session looks at the same problem from a social side: how addiction changes life in communities, and how it hurts the people who are least able to protect themselves, such as children, poor families and people without homes. Our chairs will ask us to work together and build solutions backed by evidence that lead to "healthier and more resilient communities." That means our papers and resolutions should show real people and real neighbourhoods, not only numbers about money.

Harvard Model United Nations, HMUN Online Committee Page, Last Accessed: October 2026

<https://www.harvardmun.org/who-online>

The parts of this HMDC report that match this focus most closely are Section A entries 1.2, 1.3, 1.5, 1.6 and 1.10, Solution 1 (treatment and overdose response), Solution 3 (treating drug use as a health matter instead of a crime), and Part 3 entries 3.1 to 3.3 on harm reduction and community services.

How we use this report: Harvard's December focus is drugs, alcohol and other substances, and what they do to families, communities and vulnerable groups. This report gives a lot of room to gambling, sports betting and gaming (entries 1.7, 1.8, 1.9, 1.11, 1.21 and Solution 4), and Harvard does not name these at all, so we treat them as background only and never make them the centre of a speech, a position paper or a resolution. Solution 2 (health taxes) leans toward the economic view from the October session, so we use it only as a way to pay for treatment and family support. We spend most of our preparation time on the social harms of substance use and on treatment, harm reduction and community care.

TABLE OF CONTENTS

- Introduction: What This Committee Is Really Debating

- PART 1, THE TOPIC

- Section A: The Harms

- 1.1 World Health Organization, June 25, 2024: Alcohol and Drug Deaths
- 1.2 UN News, June 26, 2026: Record Drug Use Worldwide
- 1.3 UNODC World Drug Report 2026 Findings, Last Accessed October 14, 2026: The Treatment Gap
- 1.4 World Health Organization, October 6, 2025: Tobacco and Vaping
- 1.5 World Health Organization, June 28, 2024: Alcohol Harms to Other People
- 1.6 University of Michigan, March 3, 2025: Children in Affected Homes
- 1.7 World Health Organization, December 2, 2024: Gambling Harms
- 1.8 UNSW Sydney, October 25, 2024: The Lancet Gambling Commission
- 1.9 WHO Regional Office for Europe, September 25, 2024: Teens, Screens and Gaming
- 1.10 WHO Regional Office for Africa, April 19, 2024: The Kush Crisis
- 1.11 CGAP (World Bank), September 3, 2019: Youth Sports Betting in Africa
- 1.21 Harvard Gazette, January 6, 2026: Sports Betting Moves Onto Phones

- Section B: Major Potential Solutions

- Solution 1: Expanding Treatment and Overdose Response
 - 1.12 World Health Organization, August 29, 2025: Naloxone and Opioid Treatment
 - 1.13 UN News, April 2, 2026: Updated WHO Opioid Guidelines
 - 1.14 University of North Carolina Health, February 12, 2025: A New Medicine Under Study
 - 1.22 NPR, May 28, 2026: Overdose Deaths Fall, but Not Everywhere
- Solution 2: Raising Health Taxes on Addictive Products
 - 1.15 World Health Organization, July 2, 2025: The "3 by 35" Initiative
 - 1.16 World Health Organization, January 13, 2026: Cheaper Alcohol
 - 1.17 Pan American Health Organization, October 7, 2025: Methanol Poisoning
 - 1.23 University of Glasgow, March 21, 2023: A Minimum Price for Alcohol in Scotland
- Solution 3: Treating Drug Use as a Health Matter Instead of a Crime
 - 1.18 UNSW Sydney, November 2024: The Portugal Model
 - 1.19 Brookings Institution, September 17, 2024: The Pacific Northwest Reversal
 - 1.24 Brown University, November 13, 2023: Overdose Prevention Centres in New York
- Solution 4: Regulating Gambling and Digital Products
 - 1.20 UNSW Sydney, October 25, 2024: Gambling Regulation Recommendations

- Section C: Lesser Solutions (Brief List)

- PART 2, THE UNITED NATIONS RECORD

- Table of UN Resolutions and Major Instruments

- What Is Working and What Is Not

- 2.1 World Health Organization, May 22, 2010: The Global Alcohol Strategy
- 2.2 World Health Organization, June 20, 2024: Global Alcohol Action Plan 2022-2030
- 2.3 World Health Organization, June 26, 2026: SAFER Progress Report
- 2.4 WHO Framework Convention on Tobacco Control, Last Accessed October 14, 2026: Treaty Parties
- 2.5 WHO Regional Office for Europe, July 4, 2025: MPOWER Progress
- 2.6 World Health Organization, May 25, 2019: ICD-11 Adoption
- 2.7 UN Digital Library, December 15, 2022: A Divided Vote on Drug Policy
- 2.8 UNODC, March 22, 2024: Commission on Narcotic Drugs, 67th Session
- 2.9 UN Official Documents, December 17, 2024: Resolution 79/191
- 2.10 UN Digital Library, December 15, 2025: Resolution 80/117
- 2.11 International Drug Policy Consortium, March 19, 2026: Every Drug Resolution Goes to a Vote
- 2.12 UNODC, March 12, 2026: An Expert Panel for the 2029 Review
- 2.13 UNODC, March 13, 2026: The 69th Commission on Narcotic Drugs
- 2.14 NPR, January 20, 2026: The United States Leaves Without Paying

- WHERE THE MAJOR BLOCS STAND

- PART 3, INTERNATIONAL EFFORTS
 - Map of the Main International Actors
 - 3.1 Harm Reduction International, December 12, 2024: Global State of Harm Reduction
 - 3.2 Harm Reduction International, November 19, 2025: Funding Cuts
 - 3.3 UNAIDS, May 13, 2025: Community Services Under Pressure
 - 3.4 International Drug Policy Consortium, April 16, 2024: Harm Reduction at the CND
 - 3.5 Global Commission on Drug Policy, February 26, 2026: INCB Annual Report
 - 3.6 Colombo Plan, January 2025: Nitazene Health Alert
 - 3.7 European Union Drugs Agency, June 2025: Drug-Induced Deaths in Europe
 - 3.8 Brookings Institution, December 4, 2024: Preparing Europe for a Third Wave
 - 3.9 Stanford University, February 24, 2022: Stopping the Opioid Crisis From Spreading
 - 3.10 UNODC, June 24, 2026: Two Nitazenes Placed Under Control
 - 3.11 Pan American Health Organization, November 24, 2025: The Eleventh Tobacco Treaty Conference
 - 3.12 World Health Organization, May 15, 2026: Nicotine Pouches and Young People
 - 3.13 Al Jazeera, January 24, 2025: The United States Leaves the WHO
 - 3.14 Council on Foreign Relations, November 21, 2025: How Fentanyl Reaches the United States
 - 3.15 RAND Corporation, March 13, 2025: Cutting Off Synthetic Opioid Supply
 - 3.16 African Union, November 19, 2025: A New African Drug Plan
 - Proposed and Future International Efforts
- KEY VOCABULARY
- DISCUSSION QUESTIONS

Introduction: What This Committee Is Really Debating

Addiction is usually discussed as a medical problem inside one person's body. This topic asks a wider question: what does addiction do to families, schools, workplaces, neighbourhoods and whole countries? The WHO is the UN agency for health, so delegates will be expected to write resolutions about prevention, treatment, health taxes, regulation of products such as alcohol, tobacco and gambling, and support for the families and communities who carry the cost.

The topic covers both **substance addictions** (alcohol, tobacco and nicotine, illegal drugs, misused medicines) and **behavioural addictions** (gambling and gaming, which the WHO formally recognises as disorders). Social media use is a newer and more disputed area: the WHO measures "problematic" use but does not classify it as a formal addiction.

Remember one practical limit: the WHO gives advice and sets standards, but it cannot force countries to change their laws. Drug control laws are mostly decided through three UN treaties and a separate body, the Commission on Narcotic Drugs (CND). A strong WHO resolution therefore usually *recommends*, *requests*, *encourages* and *funds*, instead of commanding.

PART 1, THE TOPIC

Section A: The Harms

The harms of addiction fall on three groups: the person with the addiction, the people around them (children, partners, victims of road crashes and violence), and society as a whole (health systems, police and courts, the economy). The entries below move from the largest numbers to the more specific social effects.

1.1 World Health Organization, June 25, 2024: Alcohol and Drug Deaths

Tagline: Counting deaths from alcohol and drugs Source: According to... World Health Organization, June 25, 2024 Link: <https://www.who.int/news/item/25-06-2024-over-3-million-annual-deaths-due-to-alcohol-and-drug-use-majority-among-men> Fact: It states... that alcohol causes about 2.6 million deaths a year (4.7% of all deaths on Earth) and other drugs cause about 0.6 million, mostly among men. About 400 million people live with an alcohol use disorder, and young adults aged 20-39 carry the highest share of alcohol deaths. Among teenagers aged 15-19, almost one in four already drinks. Treatment reaches somewhere between less than 1% and at most 35% of people who need it, depending on the country. This means... the scale is enormous and treatment is badly under-supplied almost everywhere. A resolution that only talks about awareness will not touch the treatment gap; delegates should consider how to finance and staff treatment services.

1.2 UN News, June 26, 2026: Record Drug Use Worldwide

Tagline: Measuring the rise in drug use Source: According to... UN News, June 26, 2026 Link: <https://news.un.org/en/story/2026/06/1167817> Fact: It states... that the UN World Drug Report 2026 estimates 331 million people used drugs in 2024, which is 6.2% of people aged 15-64, up from 5.2% ten years earlier. Cannabis is the most used drug (256 million people), followed by opioids (63 million). Women move into dependence faster than men, and women who inject drugs are 20% more likely than men to be living with HIV. The report says harm depends heavily on poverty, homelessness, poor mental health and unequal access to care, and that refugees and displaced people are especially exposed. This means... drug use is growing, not shrinking, and its social effects are tied to poverty and inequality. Delegates can argue that addiction policy must be linked to housing, mental health and humanitarian aid, not only to policing.

1.3 UNODC World Drug Report 2026 Findings, Last Accessed October 14, 2026: The Treatment Gap

Tagline: Showing who misses out on treatment Source: According to... United Nations Office on Drugs and Crime, Last Accessed: October 14, 2026 (the page shows no publication date) Link: <https://www.unodc.org/unodc/frontpage/2026/june/wdr26-findings.html> Fact: It states... that only 1 in 12 people with a drug use disorder receives treatment, and for women the figure is only 1 in 23, compared with 1 in 9 for men. In 2024 about 5.9 million people had formal contact with police and courts for drug offences, and roughly two-thirds of those cases involved only use or possession; about 3.7 million people were prosecuted and about 2.2 million convicted. About 755 new psychoactive substances were on the market in 2024, 118 of them seen for the first time. This means... most people with a drug disorder meet the justice system more easily than they meet a doctor. This is the central tension of the topic: should countries move resources from punishment toward treatment, and how should women be reached?

1.4 World Health Organization, October 6, 2025: Tobacco and Vaping

Tagline: Tracking tobacco and vaping addiction Source: According to... World Health Organization, October 6, 2025 Link: <https://www.who.int/news/item/06-10-2025-who-tobacco-trends-report-1-in-5-adults-still-addicted-to-tobacco> Fact: It states... that 1.2 billion people still used tobacco in 2024, about one adult in five, down from 1.38 billion in 2000. More than 100 million people now use e-cigarettes, including at least 15 million children aged 13-15, and where data exist children are on average nine times more likely than adults to vape. The world missed its 2025 target of a 30% reduction in tobacco use (it reached 27%). This means... tobacco control is a real success story, but new nicotine products are pulling young people back toward addiction. Delegates will likely debate whether e-cigarettes should be regulated like cigarettes.

1.5 World Health Organization, June 28, 2024: Alcohol Harms to Other People

Tagline: Revealing harm beyond the drinker Source: According to... World Health Organization, June 28, 2024 Link: <https://www.who.int/news-room/fact-sheets/detail/alcohol> Fact: It states... that in 2019, of 298,000 deaths from alcohol-related road crashes, 156,000 were caused by someone else's drinking. Alcohol is also linked to sexual assault, intimate partner violence, suicide, family breakdown, job loss and money problems. Drinking during pregnancy can cause fetal alcohol spectrum disorders, which bring lifelong disabilities to the child. This means... alcohol is not only a personal choice; more than half of alcohol road deaths are other people. This "harm to others" argument is the strongest reason a government can give for stricter alcohol rules.

1.6 University of Michigan, March 3, 2025: Children in Affected Homes

Tagline: Exposing harm to children at home Source: According to... University of Michigan, March 3, 2025 Link: <https://news.umich.edu/millions-of-children-live-with-parents-who-have-a-substance-use-disorder> Fact: It states... that a study in the Journal of Addiction Medicine found nearly 17 million children and teenagers in the United States (about one in four) live with a parent who has a substance use disorder, most often alcohol. These children face higher risk of their own substance use, mental health problems, and contact with child-welfare and legal systems. This means... addiction passes across generations. Even though this study covers one country, it shows why family support programmes and child protection belong in a WHO resolution on social effects. Delegates should look for similar data from their own country.

1.7 World Health Organization, December 2, 2024: Gambling Harms

Tagline: Describing the social cost of gambling Source: According to... World Health Organization, December 2, 2024 Link: <https://www.who.int/news-room/fact-sheets/detail/gambling> Fact: It states... that about 1.2% of adults worldwide have a gambling disorder, and for every person gambling at high risk, about six other people (usually family members) are affected. Harms include relationship breakdown, family violence, poverty, neglect of children, crime such as theft and fraud, and suicide; people with gambling disorder in a Swedish study were 15 times more likely to die by suicide. Only about 0.14% of people seek help, partly because of shame. Global gambling revenue is expected to reach US\$700 billion by 2028, driven by smartphones in low- and middle-income countries. This means... gambling is a fast-growing addiction whose damage falls mostly on families. Unlike alcohol and tobacco, there is no UN treaty or global WHO strategy for gambling, which is an open space for a new resolution.

1.8 UNSW Sydney, October 25, 2024: The Lancet Gambling Commission

Tagline: Estimating gambling harm worldwide Source: According to... UNSW Sydney, October 25, 2024 Link: <https://www.unsw.edu.au/news/2024/10/new-commission-calls-for-regulatory-reform-to-tackle-the-health> Fact: It states... that the Lancet Public Health Commission on gambling estimates about 449 million adults gamble at some level of risk and about 80 million have a gambling disorder. Online casino and slot products are especially dangerous: up to 15.8% of adults and 26.4% of adolescents who use them may develop a disorder. Commercial gambling is now available in more than 80% of countries, and gambling features are increasingly built into video games. This means... online and mobile gambling are a youth problem, not only an adult one. Delegates may propose age limits, limits on in-game gambling-like features, and advertising rules.

1.9 WHO Regional Office for Europe, September 25, 2024: Teens, Screens and Gaming

Tagline: Measuring problematic screen use in teens Source: According to... WHO Regional Office for Europe, September 25, 2024 Link: <https://www.who.int/europe/news/item/25-09-2024-teens--screens-and-mental-health> Fact: It states... that in a survey of nearly 280,000 young people aged 11-15, problematic social media use rose from 7% in 2018 to 11% in 2022, higher among girls (13%) than boys (9%). About 12% of adolescents were at risk of problematic gaming, with boys (16%) much higher than girls (7%). This means... digital habits are now part of the addiction debate for young people. Delegates should be careful: "problematic social media use" is measured but is not an official diagnosis, while "gaming disorder" is.

1.10 WHO Regional Office for Africa, April 19, 2024: The Kush Crisis

Tagline: Showing a youth drug emergency Source: According to... WHO Regional Office for Africa, April 19, 2024 Link: <https://www.afro.who.int/fr/node/19609> Fact: It states... that "Kush," a cheap and highly addictive mixture sold mainly to young people in Sierra Leone, has caused many deaths and severe mental illness. Its low price makes it easy for unemployed youth to buy, feeding a wider social crisis. WHO and partners agreed a plan covering prevention, treatment and rehabilitation, and WHO also pressed for action on youth unemployment as a root cause. Africa accounts for half of all global seizures of pharmaceutical opioids, especially tramadol. This means... in many low-income countries the problem is new, cheap, unpredictable drug mixtures combined with joblessness. A resolution should include help for countries with very few treatment services and should link addiction to employment and education.

1.11 CGAP (World Bank), September 3, 2019: Youth Sports Betting in Africa

Tagline: Linking mobile phones to youth gambling Source: According to... CGAP (Consultative Group to Assist the Poor, housed at the World Bank), September 3, 2019 Link: <https://www.cgap.org/blog/sports-betting-highway-to-hell-or-on-ramp-to-digital-finance> Fact: It states... that a survey found over 54% of young people (ages 17-35) in Sub-Saharan Africa had tried gambling, mostly sports betting, and that in Kenya 96% of betting is done on mobile phones. It reports students using school fees to bet, dropping out, and borrowing digital loans to gamble, and a Kenyan government minister calling sports betting "a curse on youth." This means... this source is older (2019) but shows how mobile money and phones carried gambling into countries with high youth unemployment. Delegates from Africa and Asia can use it to argue that gambling regulation must cover phone-based betting and digital lending.

1.21 Harvard Gazette, January 6, 2026: Sports Betting Moves Onto Phones

Tagline: Tracking the boom in phone betting Source: According to... Harvard Gazette, January 6, 2026 Link: <https://news.harvard.edu/gazette/story/2026/01/sports-betting-worries-grow-as-wagers-skyrocket/> Fact: It states... that in the United States, legal sports bets grew from US\$4.9 billion in 2017 to US\$121.1 billion in 2023, and 94% of those bets were placed online. Since a 2018 Supreme Court decision, 39 states have allowed sports betting. Internet searches for help with gambling addiction rose 23% between that ruling and June 2024, and 43% of adults now say legal sports betting is harmful for society, up from 34% in 2022. A Harvard Kennedy School expert links new forms of gambling to falling savings and more missed credit card and mortgage payments, and experts say phone apps with push notifications and constant advertising encourage addictive behaviour. This means... when gambling moves onto phones it grows very fast, and its costs show up in family budgets and debt. Delegates can use this to support two ideas named by experts in the article: banning betting advertisements during sports events, and training ordinary doctors to screen patients for gambling problems.

Section B: Major Potential Solutions

Four solutions are most likely to appear in committee. Each has evidence for and against. Strong delegates will not simply pick one; they will combine them and show how to pay for them.

Solution 1: Expanding Treatment and Overdose Response

Advantages: Medical treatment for opioid dependence has the strongest evidence of any option, prevents deaths, and is cost-effective. Naloxone can reverse an overdose in minutes. New medicines may help alcohol addiction. **Disadvantages:** Treatment needs trained staff and steady money, which poorer countries lack. Methadone and buprenorphine are themselves controlled medicines, so some governments resist them. New medicines are expensive and not yet proven.

1.12 World Health Organization, August 29, 2025: Naloxone and Opioid Treatment

Tagline: Proving overdose deaths are preventable Source: According to... World Health Organization, August 29, 2025 Link: <https://www.who.int/news-room/fact-sheets/detail/opioid-overdose> Fact: It states... that about 125,000 people died of opioid overdose in 2019 and that these deaths are preventable with basic life support and quick use of naloxone, a medicine that reverses an opioid overdose and has almost no effect on someone who has not taken opioids. Methadone or buprenorphine maintenance treatment has the strongest evidence of effectiveness, yet fewer than 10% of people who need it receive it, and only half of countries provide it. WHO recommends giving naloxone to people likely to witness an overdose, such as family and friends. This means... the most proven tools already exist; the problem is access. A realistic resolution could set a target for naloxone availability and for opioid treatment coverage.

1.13 UN News, April 2, 2026: Updated WHO Opioid Guidelines

Tagline: Updating treatment guidance for opioids Source: According to... UN News, April 2, 2026 Link: <https://news.un.org/en/story/2026/04/1167248> Fact: It states... that WHO updated its guidance on treating opioid dependence and managing overdoses in the community. WHO reaffirmed methadone and oral buprenorphine and added a long-acting injectable form of buprenorphine, recommended with some caution while more evidence is gathered. Fewer than 10% of the 64 million people with drug use disorders receive treatment. The full guideline is expected in late 2026 or early 2027. This means... WHO's own guidance is changing right now, so delegates can "welcome" the update and "request" WHO to help countries put it into practice.

1.14 University of North Carolina Health, February 12, 2025: A New Medicine Under Study

Tagline: Testing weight-loss drugs against alcohol Source: According to... University of North Carolina Health, February 12, 2025 Link: <https://news.unhealthcare.org/2025/02/semaglutide-shows-promise-in-reducing-cravings-for-alcohol-heavy-drinking/> Fact: It states... that a small trial published in JAMA Psychiatry found that semaglutide (the medicine in Ozempic) reduced alcohol cravings, drinks per drinking day and heavy drinking days compared with a placebo. The study had only 48 adults and lasted nine weeks, and the authors call the results preliminary. This means... new medicines may one day help, but they are not proven and are costly. Delegates can call for more research and fair access, without claiming a cure exists.

1.22 NPR, May 28, 2026: Overdose Deaths Fall, but Not Everywhere

Tagline: Showing overdose response saves lives Source: According to... NPR, May 28, 2026 Link: <https://www.kunc.org/npr-news/2026-05-28/u-s-street-drug-deaths-keep-dropping-but-some-western-states-see-deadly-overdose-surge> Fact: It states... that early government data show overdose deaths in the United States fell about 14% in 2025, to 69,973, roughly 11,300 fewer than in 2024 and far below the peak of 112,418 in mid-2023. Experts credit wide access to naloxone, more use of medicines that reduce opioid cravings, weaker street fentanyl and fewer young people using drugs. However, deaths rose sharply in Arizona, New Mexico and North Dakota, where strong methamphetamine is common and some rural patients must drive more than two hours to reach opioid treatment, and Native American communities die from overdose at about double the national rate. This means... the tools in Solution 1 work when they actually reach people, but the gains are uneven. Delegates can argue that the next step is reaching rural areas and minority communities, and that falling deaths are a reason to keep funding these services, not to cut them.

Solution 2: Raising Health Taxes on Addictive Products

Advantages: Taxes reduce use, especially among young people and people with low incomes, and they raise money that can fund treatment. WHO calls taxes one of the most cost-effective tools. Scotland's minimum price for alcohol cut deaths most in its poorest areas. **Disadvantages:** Higher prices can push some people toward cheaper illegal or home-made alcohol, which can be poisonous. Taxes fall hardest on poorer households, and industries lobby strongly against them.

1.15 World Health Organization, July 2, 2025: The "3 by 35" Initiative

Tagline: Raising prices to save lives Source: According to... World Health Organization, July 2, 2025 Link: <https://www.who.int/news/item/02-07-2025-who-launches-bold-push-to-raise-health-taxes-and-save-millions-of-lives> Fact: It states... that WHO launched the "3 by 35" initiative, asking countries to raise the real prices of tobacco, alcohol and sugary drinks by at least 50% by 2035 through taxes. WHO says this could raise about US\$1 trillion over ten years, and that a one-time 50% price increase could prevent 50 million early deaths over 50 years. Nearly 140 countries raised tobacco taxes between 2012 and 2022. This means... health taxes are WHO's flagship idea and come with a ready-made target. Delegates can endorse "3 by 35" and argue about whether tax money should be set aside for treatment and prevention.

1.16 World Health Organization, January 13, 2026: Cheaper Alcohol

Tagline: Warning that alcohol is getting cheaper Source: According to... World Health Organization, January 13, 2026 Link: <https://www.who.int/news/item/13-01-2026-cheaper-drinks-will-see-a-rise-in-noncommunicable-diseases-and-injuries> Fact: It states... that since 2022 alcohol has become cheaper or stayed the same price in most countries because taxes have not kept up with inflation or rising incomes. Wine is not taxed at all in at least 25 countries, mostly in Europe. Very few countries automatically raise alcohol taxes with inflation. A WHO official said cheaper alcohol "drives violence, injuries and disease." This means... even countries that have alcohol taxes are letting them shrink. A practical proposal is to index alcohol taxes to inflation so prices do not quietly fall.

1.17 Pan American Health Organization, October 7, 2025: Methanol Poisoning

Tagline: Highlighting the danger of illegal alcohol Source: According to... Pan American Health Organization, October 7, 2025 Link: <https://www.paho.org/en/documents/epidemiological-alert-risk-methanol-poisoning-7-october-2025> Fact: It states... that at least five countries in the Americas reported methanol poisoning cases and deaths in the past five years, and that Brazil confirmed 16 cases linked to adulterated alcoholic drinks. PAHO asked countries to strengthen poison surveillance, treat cases quickly, warn the public and stop contaminated drinks from circulating. This means... unregulated alcohol can kill. Opponents of high alcohol taxes argue that price rises push people to these illegal drinks; supporters reply that strong enforcement and monitoring must come with any tax. Either way, a resolution on taxes should include action against illegal alcohol.

1.23 University of Glasgow, March 21, 2023: A Minimum Price for Alcohol in Scotland

Tagline: Testing a lowest legal price for alcohol Source: According to... University of Glasgow, March 21, 2023 Link: https://www.gla.ac.uk/news/headline_929949_en.html Fact: It states... that a study by Public Health Scotland and the University of Glasgow, published in The Lancet, found that Scotland's minimum unit pricing (a law setting the lowest price at which each unit of alcohol can be sold) cut deaths caused wholly by alcohol by 13.4% and alcohol-related hospital admissions by 4.1%, compared with England, which did not use the policy. That is about 150 deaths and 400 hospital admissions avoided each year. The largest benefits went to men and to people in the 40% most deprived areas, where alcohol death rates are more than five times higher than in the least deprived areas. This means... a minimum price answers one of the main objections to health taxes: it targets the cheapest, strongest drinks, and it helped poorer communities most instead of hurting them. Delegates can offer it as a partner to the "3 by 35" tax plan (entry 1.15), especially for countries worried about the effect of taxes on low-income families.

Solution 3: Treating Drug Use as a Health Matter Instead of a Crime

Advantages: Removing criminal penalties for personal use can reduce prison crowding and stigma and encourage people to seek help, as Portugal's results suggest. Supervised overdose prevention centres in New York stopped more than 700 overdoses without a measurable rise in crime. **Disadvantages:** Without enough treatment services, public drug use and disorder can rise and voters may reject the policy, as happened in Oregon and British Columbia. Many countries strongly oppose any weakening of drug laws, and the international drug treaties limit how far countries can go.

1.18 UNSW Sydney, November 2024: The Portugal Model

Tagline: Evaluating Portugal's decriminalisation results Source: According to... UNSW Sydney Drug Policy Modelling Program, November 2024 Link: <https://unsw.edu.au/content/dam/pdfs/ada/sprc/research-reports/dpmp-drug-summit-2024-explainers/2024-11-was-decriminalisation-effective-in-portugal-v3.pdf> Fact: It states... that in 2001 Portugal made possession of small amounts of drugs an administrative offence and sent people to health-and-social-work panels instead of courts. Afterward, the share of prisoners held for drug offences fell from 44% (1999) to 21% (2008), HIV and hepatitis C among drug users fell, drug deaths fell, and overall drug use did not rise more than in neighbouring countries. The social cost of drug use fell by 18% over 11 years. However, funding cuts after 2008 weakened the system, and overdoses in Lisbon have recently risen. This means... decriminalisation seemed to work in Portugal because it came with heavy investment in treatment. The lesson for delegates is that changing the law without paying for services is unlikely to work.

1.19 Brookings Institution, September 17, 2024: The Pacific Northwest Reversal

Tagline: Explaining why decriminalisation was reversed Source: According to... Brookings Institution, September 17, 2024 Link: <https://www.brookings.edu/articles/the-rise-and-fall-of-drug-decriminalization-in-the-pacific-northwest/> Fact: It states... that Oregon (USA) and British Columbia (Canada) removed criminal penalties for personal drug possession but later reversed course. Arrests fell, but overdose deaths kept rising, treatment did not expand quickly, and residents complained about open drug use and disorder; about two-thirds of Oregon voters later wanted the law repealed in whole or in part. The author argues that treatment capacity, careful design and rules on public drug use decide whether such a policy succeeds. This means... this is the main counter-example to Portugal. Delegates who support decriminalisation must answer this evidence, and delegates who oppose it can use it, but both should note that the failure was about poor design and missing services.

1.24 Brown University, November 13, 2023: Overdose Prevention Centres in New York

Tagline: Testing whether supervised sites raise crime **Source:** According to... Brown University, November 13, 2023 **Link:** <https://www.brown.edu/news/2023-11-13/overdose-prevention-centers> **Fact:** It states... that a study in JAMA Network Open, co-led by a Brown University researcher, examined New York City's two official overdose prevention centres (places where people use drugs under the watch of trained staff), which opened in late November 2021. By February 2023, more than 2,300 people had made about 55,000 visits, staff stepped in to stop more than 700 overdoses, and no one died. Compared with 17 similar neighbourhoods, the areas around the centres showed no significant change in violent crime, property crime, 911 crime calls or complaints about public drug use, and calls about homelessness-related problems fell. This means... one of the biggest fears about harm reduction, that it brings crime into a neighbourhood, did not appear in this study. Supporters of these sites can cite it, while opponents may point out that it covers only two sites in one city over about one year.

Solution 4: Regulating Gambling and Digital Products

Advantages: Regulation can limit advertising, protect children and reduce the number of people harmed before they become addicted. **Disadvantages:** Online gambling crosses borders easily, and governments earn tax money from gambling. There is no international treaty, so each country acts alone.

1.20 UNSW Sydney, October 25, 2024: Gambling Regulation Recommendations

Tagline: Recommending public-health rules for gambling **Source:** According to... UNSW Sydney, October 25, 2024 **Link:** <https://www.unsw.edu.au/news/2024/10/new-commission-calls-for-regulatory-reform-to-tackle-the-health> **Fact:** It states... that the Lancet Public Health Commission recommends treating gambling like alcohol and tobacco: strong regulation in every country, limits on access, advertising and sponsorship, protection of policy from industry influence, affordable treatment, and global action including a World Health Assembly resolution and a new international alliance. This means... experts are directly asking the World Health Assembly to act on gambling. This gives delegates a clear, evidence-backed idea for a new clause in this committee.

Section C: Lesser Solutions (Brief List)

- **Prevention in schools and families:** programmes that build life skills and support parents; widely supported but slow to show results.
- **Reducing stigma:** training health workers and using respectful language so people seek help sooner.
- **Peer support and mutual-help groups:** the WHO reports that almost half of responding countries offer none.
- **Advertising and sponsorship bans:** already standard for tobacco; proposed for alcohol and gambling.
- **Drug-checking services:** testing drugs for dangerous ingredients such as nitazenes; disputed in many countries.
- **Screening in primary care:** short check-ups and advice by ordinary doctors and nurses, a part of the WHO SAFER package.
- **Employment and housing support:** addressing joblessness and homelessness, which the UN identifies as drivers of harm.

PART 2, THE UNITED NATIONS RECORD

The UN works on addiction through two separate tracks. The **health track** (WHO and the World Health Assembly) handles alcohol, tobacco, gambling, gaming and treatment. The **drug control track** (the General Assembly, the Commission on Narcotic Drugs, the International Narcotics Control Board and UNODC) handles illegal drugs under three treaties. These tracks sometimes disagree, especially about harm reduction.

Table of UN Resolutions and Major Instruments

Every symbol below was confirmed on an official UN or WHO site (un.org, digitallibrary.un.org, documents.un.org, unodc.org, who.int, apps.who.int, cdn.who.int, fctc.who.int).

Symbol / Instrument	Year	Body	What it does
Single Convention on Narcotic Drugs (amended by 1972 Protocol)	1961	UN treaty	Controls opium, cocaine, cannabis and similar drugs while keeping them available for medicine.
Convention on Psychotropic Substances	1971	UN treaty	Extends international control to synthetic drugs such as stimulants and sedatives.
UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances	1988	UN treaty	Requires countries to fight drug trafficking and money laundering.
A/RES/42/112	1987	General Assembly	Creates June 26 as the International Day against Drug Abuse and Illicit Trafficking.
A/RES/S-20/2	1998	General Assembly (special session)	Political Declaration on international drug control.
WHA56.1	2003	World Health Assembly	Adopts the WHO Framework Convention on Tobacco Control, the first global health treaty.
WHA63.13	2010	World Health Assembly	Adopts the Global Strategy to Reduce the Harmful Use of Alcohol with ten areas for national action.
A/RES/70/1	2015	General Assembly	Adopts the Sustainable Development Goals, including Target 3.5 (prevention and treatment of substance abuse) and 3.a (tobacco treaty).
A/RES/S-30/1	2016	General Assembly (UNGASS)	"Our joint commitment" outcome document on the world drug problem, adding health and human rights themes.
A/RES/73/2	2018	General Assembly	Political declaration on noncommunicable diseases, covering tobacco and harmful alcohol use.

WHA72.15	2019	World Health Assembly	Adopts ICD-11 (effective January 1, 2022), which includes gaming disorder as a diagnosis.
WHA75(11)	2022	World Health Assembly (decision)	Adopts the Global Alcohol Action Plan 2022-2030.
A/RES/77/238	2022	General Assembly	Drug policy resolution passed by a divided vote of 124 to 9 with 45 abstentions.
CND resolution 67/4	2024	Commission on Narcotic Drugs	On preventing and responding to overdose; encourages naloxone and uses the words "harm reduction," which civil society groups called a breakthrough.
A/RES/79/191	2024	General Assembly	Drug policy resolution inviting countries to consider medication-assisted therapy, injecting-equipment programmes and HIV prevention.
CND resolution 68/6	2025	Commission on Narcotic Drugs	Creates an independent panel of 19 experts to recommend improvements to the drug control system before the 2029 review (panel announced March 12, 2026).
FCTC/COP11(9)	2025	Conference of the Parties to the WHO tobacco treaty	"Smoke- and aerosol-free United Nations": calls for a full ban on using and selling tobacco and nicotine products on all UN premises.
A/RES/80/117	2025	General Assembly	Political declaration on noncommunicable diseases and mental health, with a target of 150 million fewer tobacco users by 2030 and calls for alcohol and tobacco taxes.
CND decisions 69/1 and 69/2	2026	Commission on Narcotic Drugs	Place two nitazenes (super-strong synthetic opioids) under the strictest international control, in force from May 29, 2026.

Gap to note: there is no UN or World Health Assembly resolution specifically on gambling. This research found none.

What Is Working and What Is Not

Working: tobacco control (a binding treaty, steady decline in users), growing support for harm reduction, and a strong evidence base for opioid treatment. **Not working:** the alcohol action plan is weakly funded, health taxes have fallen behind inflation, treatment reaches very few people, and member states remain divided on drug policy.

2.1 World Health Organization, May 22, 2010: The Global Alcohol Strategy

Tagline: Setting the first global alcohol strategy Source: According to... World Health Organization, May 22, 2010 Link: <https://www.who.int/news/item/22-05-2010-wha63-adoption-of-the-global-strategy-to-reduce-the-harmful-use-of-alcohol> Fact: It states... that the World Health Assembly adopted resolution WHA63.13, a global strategy with ten areas for national action, including health services, community action, drink-driving rules, limits on availability, marketing rules, pricing policies and monitoring. This means... the WHO has had an alcohol plan for over 15 years, but it is voluntary. Delegates should ask why alcohol deaths remain at 2.6 million a year despite it.

2.2 World Health Organization, June 20, 2024: Global Alcohol Action Plan 2022-2030

Tagline: Turning strategy into an action plan Source: According to... World Health Organization, June 20, 2024 Link: <https://www.who.int/publications/i/item/9789240090101> Fact: It states... that member states endorsed a Global Alcohol Action Plan for 2022-2030 to put the 2010 strategy into practice, with six action areas: high-impact policies, advocacy, partnership, technical support, data systems and resource mobilisation. This means... the plan's deadline is 2030, so this committee is meeting at the halfway point. A resolution could review progress and ask for stronger funding.

2.3 World Health Organization, June 26, 2026: SAFER Progress Report

Tagline: Reviewing progress on alcohol policies Source: According to... World Health Organization, June 26, 2026 Link: <https://www.who.int/philippines/news/detail-global/26-06-2026-new-who-report-charts-progress-on-the-safer-alcohol-policy-initiative> Fact: It states... that WHO's SAFER initiative promotes five proven alcohol policies: limiting availability, drink-driving countermeasures, screening and treatment, marketing restrictions, and higher prices through taxes. Progress is real but uneven: all 53 European countries endorsed a regional framework, and the Western Pacific became the first WHO region to adopt SAFER as its organising framework in October 2025. However, only 9 of 135 UN country cooperation plans (7%) treated alcohol as a priority, and the report cites limited money, weak data and persistent industry interference. This means... alcohol is called "one of the most preventable, and most neglected" health threats. Delegates can push to make alcohol a priority in UN development planning and to protect policy from industry pressure.

2.4 WHO Framework Convention on Tobacco Control, Last Accessed October 14, 2026: Treaty Parties

Tagline: Showing the reach of tobacco treaty Source: According to... WHO Framework Convention on Tobacco Control Secretariat, Last Accessed: October 14, 2026 (the page shows no publication date) Link: <https://fctc.who.int/who-fctc/overview/parties> Fact: It states... that the tobacco treaty has 183 parties covering more than 90% of the world's people and entered into force on February 27, 2005. The most recent country to join was Malawi, for which the treaty took effect on August 18, 2023. This means... a binding health treaty on an addictive product is possible and nearly universal. Delegates can ask whether a similar framework convention should exist for alcohol or gambling, though many countries would resist.

2.5 WHO Regional Office for Europe, July 4, 2025: MPOWER Progress

Tagline: Measuring tobacco policy coverage worldwide Source: According to... WHO Regional Office for Europe, July 4, 2025 Link: <https://www.who.int/europe/news/item/04-07-2025-new-who-report-pushes-for-stronger-tobacco-control-policies> Fact: It states... that the WHO global tobacco report found over 6.1 billion people are covered by at least one MPOWER tobacco control measure, and 110 countries now require graphic health warnings, up from 9 in 2007. However, only about a third of people can get cost-covered help to quit, and only 15% live under best-practice tobacco taxes. Tobacco kills over 7 million people a year and costs over US\$1.4 trillion annually. This means... the tobacco model works where it is fully used, but quit services and taxes lag. These are concrete gaps a resolution can target.

2.6 World Health Organization, May 25, 2019: ICD-11 Adoption

Tagline: Recognising gaming disorder officially Source: According to... World Health Organization, May 25, 2019 Link: <https://www.who.int/news/item/25-05-2019-world-health-assembly-update> Fact: It states... that member states agreed to adopt the eleventh revision of the International Classification of Diseases (ICD-11), to come into effect on January 1, 2022. (WHO's ICD-11 guidance defines gaming disorder as loss of control over gaming that continues despite serious harm to family, school or work, usually for at least 12 months.) This means... gaming disorder is an official diagnosis in every country that uses ICD-11, so health systems can now count and treat it. Delegates can call for services for gaming and gambling disorders.

2.7 UN Digital Library, December 15, 2022: A Divided Vote on Drug Policy

Tagline: Revealing division among member states Source: According to... UN Digital Library, December 15, 2022 Link: <https://digitallibrary.un.org/record/4000190> Fact: It states... that General Assembly resolution A/RES/77/238, "Addressing and countering the world drug problem through a comprehensive, integrated and balanced approach," was adopted by a recorded vote of 124 in favour, 9 against and 45 abstentions. This means... drug policy no longer has full consensus at the UN. Delegates should expect the same split in committee between countries favouring health approaches and countries favouring strict control.

2.8 UNODC, March 22, 2024: Commission on Narcotic Drugs, 67th Session

Tagline: Adopting resolutions on overdose and recovery Source: According to... United Nations Office on Drugs and Crime, March 22, 2024 Link: <https://www.unodc.org/unodc/en/frontpage/2024/March/twenty-three-new-substances-precursors-placed-under-international-control-four-resolutions-passed-at-67th-session-of-the-commission-on-narcotic-drugs.html> Fact: It states... that the CND's largest session ever (140 member states) adopted four resolutions, including one on rehabilitation and recovery and one on preventing and responding to overdose, placed 23 new substances and precursors under international control, and held a midterm review of the 2019 Ministerial Declaration, with a final review planned for 2029. The overdose resolution (67/4) encourages naloxone and harm reduction measures. This means... the drug control system is slowly adding health language. A WHO resolution can build on 67/4 instead of starting from nothing, and 2029 is the next major review date.

2.9 UN Official Documents, December 17, 2024: Resolution 79/191

Tagline: Inviting evidence-based health measures Source: According to... UN Official Document System, December 17, 2024 Link: <https://documents.un.org/doc/undoc/gen/n24/411/30/pdf/n2441130.pdf> Fact: It states... that resolution A/RES/79/191 invites national authorities to consider measures that reduce the health and social harms of drug use, including medication-assisted therapy, injecting-equipment programmes and HIV prevention, while avoiding the exact phrase "harm reduction." This means... the General Assembly accepts the content of harm reduction but avoids the label because some countries object to it. Careful wording will matter when drafting clauses.

2.10 UN Digital Library, December 15, 2025: Resolution 80/117

Tagline: Setting 2030 targets for tobacco Source: According to... UN Digital Library, December 15, 2025
 Link: https://digitallibrary.un.org/record/4097012/files/A_RES_80_117-EN.pdf Fact: It states... that the General Assembly adopted A/RES/80/117 by 175 votes to 2, with 1 abstention. It sets a 2030 target of 150 million fewer tobacco users and 150 million more people with access to mental health care, asks countries to consider tobacco and alcohol taxes, calls for scaling up support for harmful alcohol and substance use while reducing stigma, and warns about social media risks such as excessive screen time and loneliness for children. This means... this is the newest and broadest UN commitment touching addiction. Delegates can cite its targets directly and argue that this committee's resolution helps meet them.

2.11 International Drug Policy Consortium, March 19, 2026: Every Drug Resolution Goes to a Vote

Tagline: Showing the split at the CND Source: According to... International Drug Policy Consortium, March 19, 2026 Link: <https://idpc.net/blog/2026/03/stubborn-progress-in-a-fractured-system-reflections-on-a-cnd-in-transition> Fact: It states... that at the March 2026 session of the Commission on Narcotic Drugs, every resolution went to a vote, for the second year in a row, instead of being agreed by consensus. A Norway and Finland resolution on a public health approach that mentions harm reduction passed with 45 votes; the United States and Argentina voted against it. To win support, the text added a footnote saying "harm reduction is not a universally agreed concept among Member States." The United States also opposed references to the WHO, the Sustainable Development Goals and gender, and argued that harm reduction "contributes to the normalisation of drug use." China, which voted against harm reduction in 2024, voted in favour this time, and Russia lost its voting rights on the Commission for the first time. This means... the old habit of agreeing drug policy by consensus has broken down. Delegates should expect votes on any clause that names harm reduction, and can study the footnote as an example of compromise wording that still lets a text pass.

2.12 UNODC, March 12, 2026: An Expert Panel for the 2029 Review

Tagline: Preparing the next global drug review Source: According to... United Nations Office on Drugs and Crime, March 12, 2026 Link: <https://www.unodc.org/unodc/en/press/releases/2026/March/commission-on-narcotic-drugs-establishes-expert-panel-for-2029-global-drug-policy-review.html> Fact: It states... that the Commission on Narcotic Drugs set up a panel of 19 independent experts, created by CND resolution 68/6, to write "clear, specific and actionable" recommendations for improving how the drug treaties are carried out. Ten members were chosen by the Commission, five by the UN Secretary-General, three by the International Narcotics Control Board and one by the WHO Director-General. The co-chairs are Allan Rock of Canada and Natalie Yu-Lin Morris-Sharma of Singapore. Its work feeds into the 2029 global drug policy review. This means... the WHO has only one seat out of 19 on the panel that will shape the next decade of drug policy. A WHO resolution can ask the panel to give real weight to health evidence, treatment and the social effects of addiction.

2.13 UNODC, March 13, 2026: The 69th Commission on Narcotic Drugs

Tagline: Summing up this year's drug policy session Source: According to... United Nations Office on Drugs and Crime, March 13, 2026 Link: <https://www.unodc.org/unodc/en/frontpage/2026/March/cnd-closing.html> Fact: It states... that the 69th session of the Commission on Narcotic Drugs closed in Vienna after five days, with 2,078 participants from 134 member states, 20 intergovernmental organisations, nine UN entities and 198 non-governmental organisations. Following recommendations from the WHO, it placed three new substances under international control (two nitazenes and one synthetic cannabinoid) and completed the 19-member expert panel for the 2029 review. It adopted five resolutions, including one on faster early-warning systems for new drugs and one promoting public health responses "from prevention and treatment to recovery," with better access to controlled medicines and a basis in human rights. This means... the WHO already has a formal role in drug control, because its scientific advice decides which new drugs are controlled. Delegates can build on this link and propose that the WHO help poorer countries set up the early-warning systems the Commission has called for.

2.14 NPR, January 20, 2026: The United States Leaves Without Paying

Tagline: Questioning how the United States exit works Source: According to... NPR, January 20, 2026 Link: <https://www.whro.org/2026-01-20/the-u-s-says-its-divorce-from-who-is-final-on-jan-22-does-who-agree> Fact: It states... that the United States declared its withdrawal from the WHO final on January 22, 2026, while still owing US\$278 million in dues for 2024-2025, and said it would make no payments before leaving. The WHO constitution has no withdrawal clause; the United States relies on an exception its Congress set in 1948, and a WHO legal officer said member states themselves would decide whether and when the exit takes effect, with talks expected at the Executive Board in February and the World Health Assembly in May. A leading global health law professor called leaving without paying "unlawful," and Director-General Tedros called the situation "lose-lose" and said he hoped the United States would return. This means... the WHO's largest past funder has left, and even the rules for leaving are disputed. Delegates must decide whether a resolution should invite the United States back, look for new donors, or push countries to pay for their own addiction services (see entry 3.13).

WHERE THE MAJOR BLOCS STAND

Countries do not debate this topic as 193 separate voices. Most fall into a few groups with shared views on drug control, harm reduction and health taxes, and knowing these groups helps a delegate find partners quickly. The positions below are current as of the dates of their sources.

1. The United States (with Argentina): At the March 2026 Commission on Narcotic Drugs, the United States called a vote against the harm reduction resolution and opposed references to the WHO, the Sustainable Development Goals and gender; Argentina was its only reported partner in voting. Now outside the WHO, it favours strict control and law enforcement over health-based language. Source: According to... International Drug Policy Consortium, March 19, 2026 Link: <https://idpc.net/blog/2026/03/stubborn-progress-in-a-fractured-system-reflections-on-a-cnd-in-transition>

2. The European Union: The EU calls reducing health and social harm "a central objective" of its drug policy, and its Council endorsed a new drugs strategy in March 2026 that includes overdose prevention, treatment and recovery, and alternatives to criminal punishment for people who use drugs. Expect EU members to support harm reduction wording while also pressing hard against trafficking. Source: According to... Council of the European Union, June 29, 2026 Link: <https://www.consilium.europa.eu/en/policies/eu-drugs-policy/>

3. Russia, China and the strict-control group: At the 2024 Commission on Narcotic Drugs, Russia led opposition to the words "harm reduction," read a statement backed by 40 countries criticising cannabis legalisation and calling for "a society free of drug abuse," and, together with China, voted against the harm reduction resolution. China has since shifted and voted in favour in 2026 (entry 2.11), so delegates should not assume these two powers always vote together. Source: According to... Global Initiative Against Transnational Organized Crime, April 9, 2024 Link: <https://globalinitiative.net/analysis/uncertain-future-drug-policy-commission-narcotic-drugs-united-nations/>

4. Latin American reformers, led by Colombia: In 2024 Colombia read a statement on behalf of 62 countries, including most of Europe and the Americas, calling for a review of the international drug control system and for respect for human rights, and Chile led a resolution on recovery services that passed by consensus. These countries, which have suffered decades of trafficking violence, tend to favour health and development over punishment, although Argentina now votes with the United States. Source: According to... Global Initiative Against Transnational Organized Crime, April 9, 2024 Link: <https://globalinitiative.net/analysis/uncertain-future-drug-policy-commission-narcotic-drugs-united-nations/>

5. ASEAN (South-East Asia): At their May 2026 summit in Cebu, Philippines, ASEAN leaders committed to a "zero-tolerance approach" to the illegal drug trade and to the goal of a drug-free region. Their statement did not mention treatment or rehabilitation, so health clauses are more likely to win ASEAN votes when they are framed as prevention and protection of young people. Source: According to... The Star (Malaysia), May 10, 2026 Link: <https://www.thestar.com.my/aseanplus/aseanplus-news/2026/05/10/039this-will-be-a-drug-free-region039-asean-vows-zero-tolerance-against-illicit-drugs>

6. The African Union: The AU is preparing a 2026-2030 continental plan that it says will address both "drug supply and demand reduction," with prevention, treatment and better data among its pillars (entry 3.16). African delegates are likely to welcome help with treatment services and data, and to be wary of any plan that comes without money attached. Source: According to... African Union, November 19, 2025 Link: <https://au.int/en/pressreleases/20251119/au-convenes-experts-develop-action-plan-drug-control-and-crime-prevention>

PART 3, INTERNATIONAL EFFORTS

Map of the Main International Actors

- **UN bodies:** WHO (health guidance, alcohol and tobacco), UNODC (drug data, prevention and treatment programmes), the Commission on Narcotic Drugs (drug policy decisions, deciding which substances are controlled), the International Narcotics Control Board (treaty monitoring), UNAIDS (HIV among people who inject drugs).
- **Treaty bodies:** the Conference of the Parties to the WHO tobacco treaty.
- **Regional organisations:** the European Union Drugs Agency (EUDA), the Colombo Plan Drug Advisory Programme (Asia-Pacific), the Pan American Health Organization, the African Union, ASEAN.
- **Research institutions:** the Council on Foreign Relations, the RAND Corporation and the Brookings Institution study drug supply and policy; universities such as Harvard, Stanford, Brown and Glasgow study treatment, gambling and pricing.
- **International NGOs:** Harm Reduction International (London), the International Drug Policy Consortium (London), the International Network of People who Use Drugs, the Global Commission on Drug Policy (Geneva).

3.1 Harm Reduction International, December 12, 2024: Global State of Harm Reduction

Tagline: Mapping harm reduction services worldwide Source: According to... Harm Reduction International, December 12, 2024 Link: <https://hri.global/flagship-research/the-global-state-of-harm-reduction/the-global-state-of-harm-reduction-2024/> Fact: It states... that 93 countries have needle and syringe programmes, 94 offer opioid substitution treatment, 34 provide take-home naloxone, and 18 have supervised drug consumption rooms. Only US\$151 million went to harm reduction in low- and middle-income countries in 2022, about 6% of the US\$2.7 billion needed each year. This means... harm reduction exists in about half the world but is badly underfunded. A resolution could set a funding goal or ask donors to close the gap.

3.2 Harm Reduction International, November 19, 2025: Funding Cuts

Tagline: Documenting closures after aid cuts Source: According to... Harm Reduction International, November 19, 2025 Link: <https://hri.global/publications/global-state-of-harm-reduction-2025-update-to-key-data/> Fact: It states... that after the United States halted most foreign aid in January 2025, harm reduction services closed or shrank in several countries: in South Africa almost 5,000 people lost methadone treatment, and Uganda was left with one treatment site and one needle programme. Modelling estimates about 3,739 extra HIV infections and 6,770 extra hepatitis C infections among people who inject drugs within a year. Countries with supportive harm reduction policy rose from 108 to 112. This means... international programmes depend on a few large donors. Delegates should discuss how to make addiction services survive when donors withdraw, for example through domestic budgets or health taxes.

3.3 UNAIDS, May 13, 2025: Community Services Under Pressure

Tagline: Reporting service losses for drug users Source: According to... UNAIDS, May 13, 2025 Link: https://unaids.org/en/resources/presscentre/featurestories/2025/may/20250512_community-led-services Fact: It states... that a survey by the International Network of People who Use Drugs found nearly half of community organisations lost between a quarter and all of their harm reduction budgets. 47% saw people go without clean syringes and naloxone, 30% saw overdose deaths rise, and 62% reported more stigma and discrimination. Of organisations serving women who use drugs, 68% stopped outreach. This means... funding cuts quickly turn into social harm: more disease, more deaths and more stigma, with women hit hardest. This supports clauses protecting community-led and women-specific services.

3.4 International Drug Policy Consortium, April 16, 2024: Harm Reduction at the CND

Tagline: Marking a shift in UN language Source: According to... International Drug Policy Consortium, April 16, 2024 Link: <https://idpc.net/news/2024/04/a-groundbreaking-win-at-the-united-nations-commission-on-narcotic-drugs> Fact: It states... that a United States-led resolution at the March 2024 CND session was approved by a vote and encourages countries to use "harm reduction" measures to respond to overdoses, which civil society groups called a groundbreaking change because the term had long been blocked. This means... the fact that it needed a vote shows the issue is still divided. Delegates whose countries support harm reduction can point to this precedent; opponents may insist on "prevention, treatment and recovery" language instead.

3.5 Global Commission on Drug Policy, February 26, 2026: INCB Annual Report

Tagline: Summarising the treaty watchdog's findings Source: According to... Global Commission on Drug Policy, February 26, 2026 Link: <https://globalcommissionondrugs.org/policyspotlight/annual-report-2025-incb/> Fact: It states... that the International Narcotics Control Board's 2025 report focuses on international cooperation under the three drug treaties, finds that monitoring systems help stop controlled medicines leaking into illegal markets, and notes persistent inequality in access to affordable pain-relief medicines. This means... the same treaties that restrict drugs also require that medicines like morphine be available, and many poorer countries lack them. A balanced resolution can address both addiction and fair access to essential medicines.

3.6 Colombo Plan, January 2025: Nitazene Health Alert

Tagline: Warning about super-potent synthetic opioids Source: According to... Colombo Plan, January 2025 Link: https://cfsre.org/images/content/reports/public_alerts/Nitazene_Alert_Jan2025_ColomboPlan_010625_Final.pdf Fact: It states... that nitazenes, a family of synthetic opioids estimated at roughly 1.5 to 20 times stronger than fentanyl, have caused deaths in Australia, Brazil, Europe, New Zealand, the United Kingdom (over 179 deaths from June 2023 to May 2024), the United States, and West Africa, where they were found in Kush samples. Naloxone still works but more than one dose may be needed. This means... the drug supply is becoming more dangerous and more international. Early-warning systems and naloxone supplies are practical areas for international cooperation.

3.7 European Union Drugs Agency, June 2025: Drug-Induced Deaths in Europe

Tagline: Tracking overdose deaths across Europe Source: According to... European Union Drugs Agency, June 2025 Link: https://euda.europa.eu/publications/european-drug-report/2025/drug-induced-deaths_en Fact: It states... that the EU recorded at least 7,459 overdose deaths in 2023, up from 7,145 in 2022, and that opioids were involved in about 7 in 10. Nitazenes drove sharp rises in Estonia and Latvia, and deaths among people aged 50-64 more than doubled between 2013 and 2023. This means... even wealthy regions with strong services face rising deaths. The EUDA's data system is a model that other regions could copy with WHO help.

3.8 Brookings Institution, December 4, 2024: Preparing Europe for a Third Wave

Tagline: Warning Europe about synthetic opioids Source: According to... Brookings Institution, December 4, 2024 Link: <https://www.brookings.edu/articles/opioids-in-europe-preparing-for-a-third-wave/> Fact: It states... that the opioid death rate in the United States is more than 10 times higher than in the European Union, partly because Europe adopted medical treatment such as methadone and buprenorphine earlier. Europe has already lived through two waves of opioid harm, and a third wave of synthetic opioids such as fentanyls and nitazenes may be starting, especially if the supply of Afghan heroin falls. The paper recommends getting more people into treatment, expanding drug checking and overdose prevention services, collecting better data on synthetic opioids, and aiming police work at the networks that bring these drugs in. This means... Europe's lower death rate shows that early treatment and harm reduction save lives. Delegates can argue that the WHO should help other regions prepare before synthetic opioids arrive, instead of waiting for a crisis like North America's.

3.9 Stanford University, February 24, 2022: Stopping the Opioid Crisis From Spreading

Tagline: Preventing a worldwide opioid pandemic Source: According to... Stanford University Center for Innovation in Global Health, February 24, 2022 Link: <https://globalhealth.stanford.edu/?p=5072> Fact: It states... that the Stanford-Lancet Commission on the North American Opioid Crisis made seven groups of recommendations, and the seventh is about stopping similar crises in other countries. It reports that opioid use has risen sharply in the Netherlands, Spain and Israel since 2002, and that a sister company of the maker of OxyContin reportedly used similar marketing in Brazil, China, Egypt and Mexico. The commission says the risk of spread is greatest where COVID-19 weakened health systems and where drug companies face little regulation. It proposes banning dangerous opioid marketing worldwide and having the WHO coordinate the delivery of low-cost generic morphine to hospitals in low-income countries. This means... a balanced resolution must do two things at once: stop aggressive marketing of addictive painkillers, and still make sure poor countries get the pain medicine they need. This links to the INCB's concern about unequal access to medicines (entry 3.5).

3.10 UNODC, June 24, 2026: Two Nitazenes Placed Under Control

Tagline: Controlling new super-strong opioids Source: According to... United Nations Office on Drugs and Crime, June 24, 2026 Link: <https://www.unodc.org/LSS/Announcement/Details/3db07226-3a0e-4471-bcd7-319c487b8f34> Fact: It states... that two nitazenes, N-pyrrolidino isotonitazene and N-desethyl etonitazene, were added to Schedule I of the 1961 Single Convention by CND decisions 69/1 and 69/2, taking effect on May 29, 2026. A synthetic cannabinoid, MDMB-FUBINACA, was added to Schedule II of the 1971 Convention by decision 69/3, taking effect on November 25, 2026. This means... the UN can ban new drugs one by one, but makers keep changing the formula, as entry 1.3 shows with 118 brand-new substances in one year. Delegates can argue that control lists must be joined by early-warning systems, drug checking and naloxone, which save lives no matter which new drug appears.

3.11 Pan American Health Organization, November 24, 2025: The Eleventh Tobacco Treaty Conference

Tagline: Reporting new tobacco treaty decisions Source: According to... Pan American Health Organization, November 24, 2025 Link: <https://www.paho.org/en/news/24-11-2025-global-tobacco-control-conference-concludes-decisions-environment-and-liability> Fact: It states... that the eleventh Conference of the Parties to the WHO tobacco treaty met in Geneva from November 17 to 22, 2025, with 160 parties and a record of more than 1,600 registered delegates. The treaty now has 183 parties covering 90% of the world's people. Decisions covered the environmental harm of trillions of plastic cigarette butts, legal liability of the tobacco industry, national funding for tobacco control, protection from industry interference, and a complete ban on using and selling tobacco and new nicotine products on all UN premises. The next conference will be held in Yerevan, Armenia, in 2027. This means... the tobacco treaty is a living system that meets every two years and keeps adding new rules. Delegates who want a treaty for alcohol or gambling can point to this model of regular meetings, shared decisions and protection from industry pressure.

3.12 World Health Organization, May 15, 2026: Nicotine Pouches and Young People

Tagline: Warning about a fast-growing nicotine product Source: According to... World Health Organization, May 15, 2026 Link: <https://www.who.int/news/item/15-05-2026-who-warns-nicotine-pouch-brands-targeting-youth-as-sales-surge> Fact: It states... that more than 23 billion nicotine pouches were sold in 2024, over 50% more than the year before, and the market was worth nearly US\$7 billion in 2025. About 160 countries have no specific rules for these products; 16 ban them, and 32 regulate them in some way. Some brands sell pouches labelled for "beginners" and "experts," with up to 150 mg of nicotine. WHO asks countries to ban or limit flavours, ban advertising (including on social media and through influencers), check ages, require health warnings and plain packaging, limit nicotine content and tax the products. This means... new nicotine products are spreading faster than laws can keep up, and most countries have no rules at all. This gives delegates a concrete, recent list of measures to copy into a clause protecting young people.

3.13 Al Jazeera, January 24, 2025: The United States Leaves the WHO

Tagline: Losing the WHO's largest funder Source: According to... Al Jazeera, January 24, 2025 Link: <https://www.aljazeera.com/amp/news/2025/1/24/united-nations-confirms-us-will-leave-world-health-organization-in-2026> Fact: It states... that the United Nations confirmed the United States would leave the WHO on January 22, 2026, one year after its formal letter. The United States provided about 18% of WHO funding, and experts warned that its exit would weaken the WHO's ability to respond to crises such as tuberculosis, HIV and pandemics. United States government staff working with the WHO were recalled. This means... this committee is meeting in the WHO's first year without its biggest donor. Any resolution that asks the WHO to do more must also explain who will pay, for example through health taxes (entry 1.15) or larger national budgets.

3.14 Council on Foreign Relations, November 21, 2025: How Fentanyl Reaches the United States

Tagline: Following fentanyl across three countries Source: According to... Council on Foreign Relations, November 21, 2025 Link: <https://www.cfr.org/articles/how-does-fentanyl-reach-united-states> Fact: It states... that overdose deaths in the United States peaked at more than 111,000 a year in 2022, mostly from fentanyl, and fell to fewer than 74,000 in the 12 months ending April 2025. China banned fentanyl and all its variants in 2019, but Chinese companies still make precursor chemicals, many with legal medical uses, which Mexican criminal groups buy to make the drug. China agreed in 2024 to tighten controls on these chemicals; in March 2025 the United States placed tariffs on China, Canada and Mexico, citing fentanyl; and in November 2025 it said it would lift a 10% tariff on Chinese goods in return for China's promise to stop precursor flows. Canada supplies less than 1% of street fentanyl in the United States. This means... one drug crisis can involve several countries, and progress has depended on trade deals between powerful governments as much as on health agencies. Delegates can argue that supply control and health care must work together, and that cooperation tends to break down when trade tensions rise.

3.15 RAND Corporation, March 13, 2025: Cutting Off Synthetic Opioid Supply

Tagline: Planning cooperation against synthetic opioids Source: According to... RAND Corporation, March 13, 2025 Link: <https://www.rand.org/pubs/commentary/2025/03/reducing-deaths-from-fentanyl-and-other-illicit-opioids.html> Fact: It states... that nearly 87,000 Americans died of overdoses in the 12 months ending September 2024, down from 114,000 a year earlier, and that overdose is the leading cause of death for Americans aged 18 to 44. A 2022 commission made 78 recommendations, more than three dozen of them about cutting supply and international cooperation: sharing intelligence with Mexico, working with China on precursor chemicals, engaging India (which could replace China as a producer), screening parcels sent by express couriers, and working with social media companies to stop online drug sales. Most of these recommendations have not been carried out, and more than 40% of Americans know someone who died of an overdose. This means... experts expect drug production to move to new countries whenever one source is closed. Delegates from China, India, Mexico and other producing or transit countries should be ready to explain their own actions, and a resolution can ask online platforms to remove drug sales.

3.16 African Union, November 19, 2025: A New African Drug Plan

Tagline: Drafting Africa's next five-year drug plan Source: According to... African Union, November 19, 2025 Link: <https://au.int/en/pressreleases/20251119/au-convenes-experts-develop-action-plan-drug-control-and-crime-prevention> Fact: It states... that African Union experts met in Maputo, Mozambique, from November 18 to 20, 2025, to draft a new continental framework and action plan on drug control and crime prevention for 2026-2030. It follows a review of the 2019-2025 plan, which COVID-19 had delayed. The planned pillars include prevention, treatment, law enforcement, data systems, and advocacy and communication, together with sustainable financing and coordination at continental, regional and national levels. This means... Africa is writing its own five-year plan just as kush and other synthetic drugs spread (entries 1.10 and 3.6). Delegates can propose that the WHO support the treatment and data pillars of this plan, since those are where many African countries have the fewest services.

Proposed and Future International Efforts

- **A World Health Assembly resolution on gambling** and a new international alliance, as proposed by the Lancet Public Health Commission (see entry 1.20).
- **WHO "3 by 35" health taxes**, asking countries to raise real prices of tobacco, alcohol and sugary drinks by half by 2035 (see entry 1.15).
- **A UN model policy on alcohol industry interference**, being developed according to the SAFER progress report (see entry 2.3).
- **The final review of the 2019 Ministerial Declaration on drugs in 2029**, prepared by a new 19-member expert panel (see entries 2.8 and 2.12).
- **The next tobacco treaty conference (COP12) in Yerevan, Armenia, in 2027** (see entry 3.11).
- **Rules for nicotine pouches and other new nicotine products**, following WHO's May 2026 recommendations (see entry 3.12).
- **Coordinated delivery of low-cost generic morphine** to hospitals in low-income countries, as proposed by the Stanford-Lancet Commission (see entry 3.9).
- **The full WHO opioid treatment guideline**, expected late 2026 or early 2027 (see entry 1.13).
- **Meeting the 2030 targets** in A/RES/80/117 and the end of the Global Alcohol Action Plan in 2030.
- **The African Union's 2026-2030 drug control plan**, now being finalised (see entry 3.16).
- **Stronger early-warning systems for new drugs**, called for by the Commission on Narcotic Drugs in March 2026 (see entry 2.13).
- **Minimum unit pricing for alcohol**, which other countries could copy from Scotland (see entry 1.23).

KEY VOCABULARY

1. **Addiction (dependence):** a condition where a person keeps using a substance or doing an activity even though it causes serious harm, and finds it very hard to stop.
 2. **Substance use disorder:** the medical name for a pattern of drug or alcohol use that damages a person's health, relationships or work.
 3. **Behavioural addiction:** an addiction to an activity rather than a substance, such as gambling or gaming.
 4. **Harm reduction:** policies that reduce the damage from drug use without requiring people to stop first, such as clean needles, naloxone and substitution treatment.
 5. **Naloxone:** a medicine that quickly reverses an opioid overdose.
 6. **Opioid agonist (substitution) treatment:** long-term medical treatment with methadone or buprenorphine that replaces street opioids and reduces overdose risk.
 7. **Decriminalisation:** removing criminal penalties (such as prison) for using or possessing small amounts of drugs, while the drugs stay illegal to sell.
 8. **Health tax (excise tax):** a tax on harmful products like tobacco or alcohol, meant to reduce use and raise money.
 9. **Stigma:** shame and negative judgement that make people hide their addiction and avoid help.
 10. **Treatment gap:** the difference between the number of people who need treatment and the number who receive it.
 11. **New psychoactive substances (NPS):** new drugs, often made in laboratories, designed to copy existing drugs and escape the law.
 12. **Fetal alcohol spectrum disorders (FASD):** lifelong disabilities in a child caused by alcohol use during pregnancy.
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DISCUSSION QUESTIONS

1. Only about 1 in 12 people with a drug use disorder receives treatment. Where should the money for treatment come from in low-income countries: donors, health taxes or national budgets?
 2. Should the WHO support "harm reduction" by name, even though some member states oppose the term? What wording could win a large majority?
 3. Portugal's decriminalisation is often described as a success, while Oregon's was reversed. What conditions must be in place before a country changes its drug laws?
 4. Gambling has no UN resolution or treaty. Should this committee create the first one, and what should it require for online and phone-based betting?
 5. Should e-cigarettes and other new nicotine products be taxed and regulated the same way as cigarettes, especially to protect children?
 6. Alcohol causes more deaths than all illegal drugs combined, yet it gets much less international attention. Why, and should there be a binding treaty on alcohol like the tobacco treaty?
 7. How can a resolution protect children and families, the "hidden victims" of addiction, through schools, child protection and family support?
 8. How should the WHO respond when the alcohol, tobacco or gambling industries try to influence health policy?
 9. The United States has left the WHO, and China changed its vote on harm reduction in 2026. How should your country build a majority in a committee where the old partnerships are shifting?
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