

**Forum:** World Health Organization

**Issue:** Establishing measures to combat the global opioid crisis

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## Introduction

The global opioid crisis has emerged as one of the most pressing public health challenges of our time. In the past few decades, since the 1990s the global opioid crisis has silently woven its web of addiction. With devastating consequences for individuals, families, and communities, this crisis transcends geographical boundaries, affecting nations across the world and leaving no corners of the globe untouched. The Centers for Disease Control and Prevention has estimated that the number of people who died from a drug overdose in 2021 was over six times the number in 1999. The number of drug overdose deaths increased more than 16% from 2020 to 2021. Over 75% of the nearly 107,000 drug overdose deaths in 2021 involved an opioid. Opioids, both legal and illicit, have become widely available and highly addictive substances, leading to a surge in overdose deaths, rampant substance abuse, and significant social and economic burdens.

In addition, the opioid crisis has also brought a great number of economic losses. Adapting a methodology used by the CDC to estimate the cost of the opioid epidemic in 2017, the JEC estimates the opioid epidemic cost \$1.04 trillion in 2018, \$985 billion in 2019 and nearly \$1.5 trillion in 2020. This health crisis has also disrupted the labor forces in various nations, creating workforce shortages, reducing employee productivity, and elevating personnel costs.

The urgency to address the global opioid crisis is paramount. It requires a comprehensive and coordinated response that combines medical, social, and policy interventions to tackle the multifaceted nature of the problem. Establishing effective measures to combat this crisis is essential not only to save lives but also to prevent further escalation and provide support to those affected.

## Definition of Key Terms

### **Opioid**

Opioids are a class of drugs that derive from, or mimic, natural substances found in the opium poppy plant. Opioids work in the brain to produce a variety of effects, including pain relief. Opioid drugs include prescription pain medicine and illegal drugs.

### **Overdose**

A lethal or toxic amount of drug.

### **Paradigm**

A coherent constellation of beliefs, habits, and procedures for achieving certain goals in society.

### **Pharmaceutical companies**

Companies that conduct the discovery, development, and manufacture of drugs and medications.

### **Illicit drugs**

An illicit drug is one that is illegal to have (for example, cannabis, heroin, and cocaine), and the non-medical use of drugs that are legally available such as pain killers and sleeping pills.

### **Drug Misuse**

The use of a substance for a purpose not consistent with legal or medical guidelines.

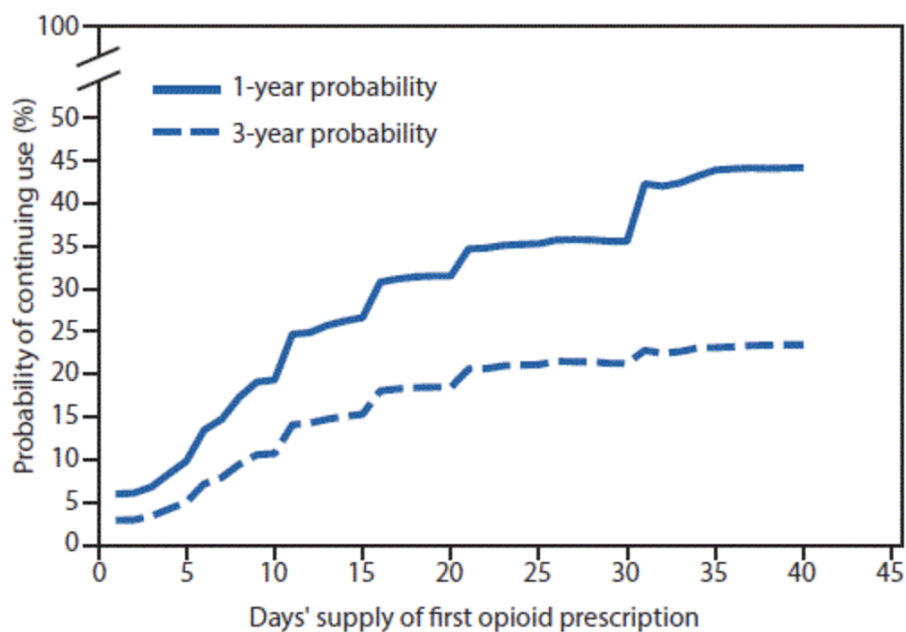
### **Potentially inappropriate prescribing (PIP)**

Is when healthcare providers (HCPs) prescribe medications that may cause more harm than benefit, are not cost-effective, or are not clinically indicated.

## Background

### The Beginning of the Opioid Crisis

The opioid crisis has been surrounding us for the past few decades, this means that the beginning of this health crisis dates all the way back to the 1980s. The main reason for this uprising crisis was because of the increasing prescription of opioids. The increase in the prescription of opioids in the 1980s can be attributed to a combination of factors, including evolving medical practices, changing attitudes towards pain management, and the influence of pharmaceutical companies. But here are some key involvements to the increase in opioid prescriptions. First, in the 1980s there was a major shift in the medical community's approach to pain management. Previously, there was a tendency that under – treated pain the medical community were more concerned about the potential for addiction and dependence on opioids and painkillers. However, professionals began to acknowledge the vital importance and aspect of patient care and quality of life.



**Figure 1:** A line graph 1 and 3-year probabilities of continued opioid use among opioid-naïve patients, by number of days' supply\* of the first opioid prescription in the United States from 2006 to 2015 (CDC)

\* Days' supply of the first prescription is expressed in days (1–40) in 1-day increments. If a patient had multiple prescriptions on the first day, the prescription with the longest days' supply was considered the first prescription.

Secondly, due to this medical paradigm shift, pharmaceutical companies began to produce and develop new opioid medications which were frequently marketed to provide long-lasting pain relief. Such as the OxyContin introduced later in the 1990s. This led to the belief in opioid safety which gave pharmaceutical companies the chance to heavily promote the idea that opioids were safe and effective for long-term use, downplaying the risks of addiction and dependence. They disseminated information suggesting that the risk of addiction was low when opioids were used for legitimate medical purposes. Then in the late 1990s (1996), the American Pain Society advocated for the inclusion of pain as the "fifth vital sign" alongside temperature, blood pressure, pulse, and

respiratory rate. This emphasized the importance of assessing and managing pain in clinical settings, potentially further accelerating opioid promotion and prescription.

Finally, medical education, influential studies, and more research on opioids created more reliance toward the use of opioids as a source of pain management. Multiple influential studies and publications released in the 1980s directed that opioids were exceptionally effective in certain conditions, such as cancer related pain. These studies, along with articles in medical journals, contributed to a broader acceptance and endorsement of opioids for pain management.

However, it should be taken into consideration that the opioid crisis is one that is complex, and that the intentions of these decisions and actions made at the time did not anticipate such consequences.

### *Key Issues related to the opioid crisis*

Over the past few decades, the opioid crisis has brought many global issues to our attention. These issues have contributed to creating severity and great impact. Whether it is the scope of the issue or the magnitude of the issue, opioid has become wildly addictive and widespread.

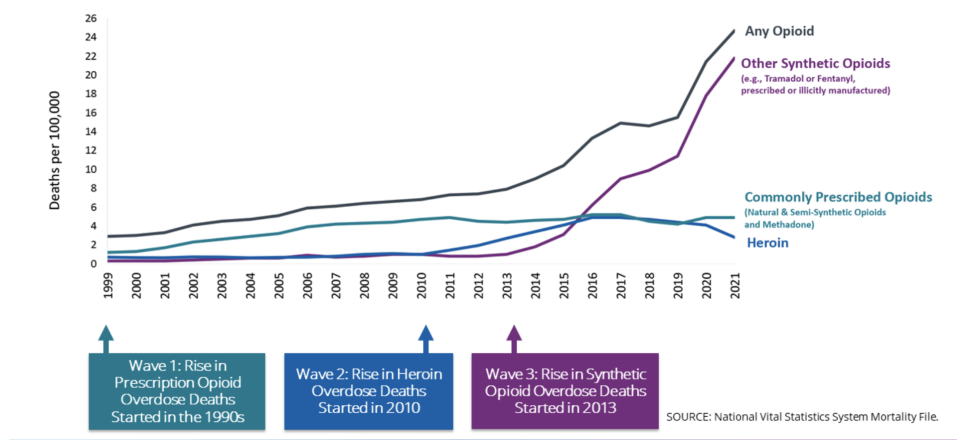
Overprescription and inappropriate prescribing were caused by the vast spread of opioid related medicines. Opioids were prescribed at high rates and for conditions that may not have warranted their use, leading to a surplus of prescription opioids in circulation. Inadequate assessment of pain, excessive prescription quantities, and long durations of use contributed to the overprescribing issue.

Unreasonable pharmaceutical practices also became an issue spotlighted by the reliance on opioids. The aggressive marketing and promotion of opioids by pharmaceutical companies, including downplaying the risks of addiction and misrepresenting their benefits, played a significant role in driving the crisis. Misleading marketing tactics influenced healthcare providers' prescribing practices and contributed to the widespread availability of opioids. These marketing methods also lead to a higher population becoming addictive to the use of opioids and a cycle of dependency on these drugs.

Above were some relatable issues, the following issues created will be much more direct and important towards the modern perspective on the opioid crisis.

The transition to Heroin and various illicit substances has become rather popular in recent years due to the high cost of specific opioids and safe medicines. As prescription opioids became harder to obtain or more expensive, some individuals turned to illicit opioids such as heroin as a cheaper and more accessible alternative. Moreover, the illicit drug market saw the introduction of potent synthetic opioids like fentanyl, leading to an increase in overdose deaths. Not only has the reliability of illicit drugs increased due to the influence of the opioid crisis but the increase in overdose deaths is also caused by the stigma and stereotypes that our society holds. The stigma associated with addiction prevented many individuals from seeking help and support. Discrimination against people with substance use disorders further hindered their access to healthcare, housing, employment, and social support systems, exacerbating the challenges they faced.

### Three Waves of Opioid Overdose Deaths



**Figure 2:** A line graph describing the increasing death rates due to opioid misuse or overdose from 1999 to 2021 (CDC or as sourced by the CDC, National Vital Statistics System Mortality File.)

#### Current situation and overview

- The current status is that the opioid crisis still remains a significant public health issue. Opioid overdose deaths have continued to rise in many major countries, such as the United States. Synthetic opioids, particularly illicitly manufactured fentanyl, have been a major driver of overdose deaths. The misuse and diversion of prescription opioids remains a high concern. While efforts have been made to improve prescribing practices and reduce the overprescribing of opioids, there is still a need for continued vigilance and education among healthcare providers and patients. Some statistics provided by the CDC include that just in 2020 alone, there has been an estimated amount of 69,710 drug overdose deaths occurred in the United States, with opioids involved in the majority of cases. Synthetic opioids, such as fentanyl, accounted for a significant portion of opioid overdose deaths, with a sharp increase in recent years. According to the UN the global production of opium, the raw material for opioids such as heroin, increased in recent years, primarily driven by production in Afghanistan. North America and Western and Central Europe are the regions with the highest opioid consumption, both in prescription opioids and illicit opioids.

#### Major Parties Involved

## United States

Opioid addiction and abuse in the United States has become a prolonged epidemic, endangering public health, economic output, and national security. The addiction to opioids in the US is quite dispersed and widespread. This public health crisis has brought a lot of downsides to the US economy. As it prevents many employees and workers from focusing on their jobs, thus causing a vast amount of labor inefficiency in almost all states and regions.

## Afghanistan

Afghanistan is the largest opioid-included medicine producer around the world. The raw material in creating an opioid is primarily opium, causing Afghanistan to be driven by the production of opium. According to the UN, Afghanistan is home to almost 4 million drug users, close to 10% of the total population. Drug abuse is rampant in the country. The Centre has therefore focused primarily on monitoring the production and cultivation of the extremely profitable plant-based substance used to produce heroin.

## United Nations Office on Drugs and Crime

The UNODC has always played a vital role in combating the opioid crisis. The UNODC has launched multiple projects and goals to prevent the further spread of the opioid crisis. As a branch of the UN, the UNODC is also trying to raise more awareness towards this issue. Their research on this high severity crisis is accurate, reliable and holds the most conducive or at least possible solutions towards this global health crisis.

## Previous Attempts to Resolve the Issue

In response to this global issue, there have been many solutions acted upon in the past years. In 2018, UNODC launched the Opioid Strategy, encouraging countries to spread awareness of this health crisis. Since then, the crisis has grown more complex and more global. In response, UNODC launched the Synthetic Drug Strategy in 2021. The synthetic drugs strategy, building on UNODC's experience in dealing with the opioid crisis, provides a balanced, comprehensive and science-based framework to address the global problem of synthetic drugs. In addition, the activities under the Opioid Strategy, including the UN Toolkit on Synthetic Drugs, are now integrated into the project portfolio of the Synthetic Drugs Strategy. Other branches of the UN such as the INCB which is an independent body responsible for monitoring and promoting the implementation of the international drug control conventions has also been involved in combatting the opioid crisis. It assesses the global availability of opioids, monitors their legitimate medical use, and provides recommendations to governments to ensure access to opioids for medical purposes while preventing their misuse.

Many countries such as the United States have recognized the severity of the opioid crisis within recent years. Thus, many states implemented PDMPs to track and monitor the prescribing and dispensing of controlled substances, including opioids. These programs aim to identify patterns of overprescribing, doctor shopping, and

diversion of prescription drugs, enabling healthcare providers to make more informed decisions when prescribing opioids. There have also been possible opioid harm reduction initiatives introduced in various continents. Such as Naloxone which is an opioid overdose reversal medication that can save lives in emergency situations. Many jurisdictions have implemented naloxone distribution programs, making it more accessible to individuals at risk of overdose. Harm reduction initiatives, such as needle exchange programs and safe injection sites, aim to reduce the harm associated with opioid use, prevent the spread of diseases, and provide connections to healthcare and support services.

## Possible Solutions

Since the last section has mentioned multiple past solutions made by different organizations and branches under the UN. In this section you will be encouraged to find possible solutions that may be effective. However, please note that delegates are highly encouraged to research according to their country's stance on possibly effective solutions because this section will only be providing direction for fellow delegates. The first solution has been recognized by many organizations and highly prestigious schools that focus on the medical field. Increasing access to evidence-based treatment options for opioid use disorder, such as medication-assisted treatment (MAT), which combines medications like methadone or buprenorphine with counseling and behavioral therapies. Expand the number of healthcare providers authorized to prescribe MAT and ensure insurance coverage for addiction treatment services. Quoted from Yale School of medicine, “The solution to the opioid crisis has to be a multipronged approach,” Professor David A. Fiellin states, “We need to decrease the availability of all types of opioids, and we need to increase the availability of the most effective forms of treatment.” So, it is highly crucial for the medical field and paradigm to fall more towards reliance on other effective forms of treatment rather than the further use of opioid included medicines.

Another possible solution or a preventative measure could be promoting harm reducing strategies. Implement and expand harm reduction initiatives, such as naloxone distribution programs, which provide overdose-reversing medication to individuals at risk and their loved ones. Support needle exchange programs, safe injection sites, and education on safe drug use practices to reduce the transmission of infectious diseases and prevent overdose deaths. This can reduce and alleviate the rising death rates of the opioid crisis and save those who have frequently misused opium-included medicine.

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