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Letter from Secretary General:

Esteemed Participants of YTUMUN'24,

As the Secretary-General of Yildiz Technical University Model United Nations 2024, it is my utmost pleasure to express my warmest welcome to every one of you.

YTUMUN'24 aims to provide a platform for students to engage in diplomatic simulations and discuss pressing global issues. Delegates from all over the world will gather to represent different countries and work towards finding innovative solutions to complex problems. Through lively debates, negotiations, and resolutions, YTUMUN'24 fosters critical thinking, diplomacy, and teamwork among participants.

Our conference has been very well prepared with the contributions of our brilliant and hard working academic team. I am beyond pleased to have worked with every one of them and to have been given the opportunity of coordinating these excellent individuals.

As YTUMUN'24 Academic Team we cannot wait to have you all witness the outcome of our endless effort making the second annual edition of YTUMUN. I hope this conference makes a difference in every related way one can think of. Our goal is to make sure every single participant leaves with so much more than they had come with and widens their vision and perspective on these complex issues which they will be discussing in the committee sessions throughout these 3 days.

I am eagerly looking forward to meet each one of you and wish everyone fruitful debates and success in the upcoming conference. Together, let us be the difference we all are looking for in ourselves and our world. Let us aim high and work cooperatively in order to make this conference memorable. Together, let us reach for the stars.

Best Regards,

Dilay Örüng



I. Letter from the Committee Board

Dear participants,

It is our utmost honor to welcome you all to our committee, UNODC. We are Reysi Kurtaran from Bahçeşehir University and Ege Öner from Istanbul Technical University; We are proud to serve you as your Committee Board.

Our agenda item is unified under the global discussions on legalizing addictive substances, weighing possible advantages like lower crime rates against worries about rising drug abuse and the difficulties of international treaties. We are expecting you to both acknowledge and find solutions to the agenda item.

Before wrapping up, we want to thank our Academic Assistant İrem Çavlak for her valuable contributions and our honorable Secretary-General, Ms. Dilay Örüng and her deputies, Ms. Ada Yazıcı and Mr. Doğukan Berke Aşık for offering this spot for the both of us.

We hope you have as much fun as we had preparing this guide, and we're looking forward to meeting you in a few weeks! If you have any further questions, please do not hesitate to contact us before, during and after the conference.

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Our warmest regards,

Reysi Kurtaran & Ege Öner



II. Introduction to the Committee: UNODC

The United Nations Office on Drugs and Crime (UNODC) is a global leader in the fight against illicit drugs, transnational organized crime, terrorism and corruption, and is the guardian of most of the related conventions, particularly:

- The United Nations Convention against Transnational Organized Crime and its three protocols (against trafficking in persons, smuggling of migrants and trafficking in firearms)
- The United Nations Convention Against Corruption
- The International Drug Control Conventions

UNODC was established in 1997 as a result of the merging of the United Nations Centre for International Crime Prevention and the United Nations International Drug Control Programme. It was established by the Secretary-General of the United Nations to enable the Organization to focus and enhance its capacity to address the interrelated issues of drug control, crime and international terrorism in all its forms.

In the same year, UNODC Southern Africa was formed and now covers 11 countries in the region, namely: Angola, Botswana, the Democratic Republic of the Congo, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.

The funding of UNODC's programmes is fully dependent on the continued support of the donor community.

UNODC is committed to achieving security and justice for all by making the world safer from drugs, crime and terrorism. To assist countries in this goal, UNODC Southern Africa's work is structured around six key objectives:

- 1. Strengthening the legislative and judicial capacity of Southern African countries to ratify and implement international conventions and instruments on drug control, organized crime, corruption, terrorism and money-laundering
- 2. Assisting Southern African countries in reducing drug trafficking and in controlling precursor chemicals
- 3. Enhancing the capacity of Government institutions and civil society organizations in the Southern African region to prevent drug use and the spread of related infections, including HIV, among youth and other vulnerable populations, particularly in prison settings
- 4. Enhancing the capacity of Government institutions and civil society organizations in the Southern African region to counter trafficking in persons and smuggling of migrants



- 5. Creating awareness about and reducing the incidence of domestic violence in Southern Africa in cooperation with civil society and Governments
- 6. Promoting victim empowerment by improving coordination, building capacity and strengthening relations between Governments and civil society in order to improve services to victims, especially women and children

IV. Introduction to the Agenda Item: Legalization of Addictive Substances and Limitations on their Public Usage and Safety

A. Definition of Addictive Substances

Addiction is defined as the psychological or physical dependence on something/someone. The term is often referred to as substance use disorder or substance dependence, and can be applied to non-substance-related behavioral addictions, such as sex, exercise, and gambling. When this term applies to a chemical that has crucial potential for producing dependence is defined as an addictive drug. (APA Dictionary of Psychology, n.d.). A person is at the risk of being addicted to a substance when it especially contains the ingredients which sends the brain a feeling of pleasure to the reward systems, the most common ones being dopamine and opioids. Brain imaging studies in humans reported the activation of dopamine and opioid neurotransmitters during alcohol and other substance use (including nicotine). Other studies show that antagonists, or inhibitors, of dopamine and opioid receptors can block drug and alcohol seeking in both animals and humans (National Library of Science, 2016). Addiction has three stages in the brain and these are listed as:

- 1. Binge/Intoxication: where the individual starts to use the substance and has that pleasure feeling.
- 2. Withdrawal: where the individual feels the negative effects in the absence of the substance.
- 3. Preoccupation/Anticipation: where the individual relapses and starts to use the substance again.

There are many substances that produce dopamine in the brain and cause addiction in the individual. Furthermore, some of the substances are illegal in some countries due to the risk of populations' tendency to overuse and consume them out of their area of usage. That is why, every country has special law regulations for specific substances, or in some cases in specific levels of some specified substances. Even though addictive substances don't show its psychological and physical effects in the short term, they have many harmful effects that show themselves in the long term and result in distortions in physical form and internal organs.



VI. Legalization of Addictive Substances

A. Potential Benefits and Challenges

The debate on drug legalization is a contentious and multifaceted issue that elicits strong opinions from various stakeholders, including policymakers, law enforcement agencies, healthcare professionals, and the general public. Understanding the arguments surrounding drug legalization is essential to navigate this complex topic effectively. Debate revolves around whether certain drugs should be made legal for medical use, recreational use, or both. Advocates argue that legalization can lead to positive outcomes, such as economic benefits, reduced crime rates, and improved regulation and quality control. However, opponents express concerns about potential increases in drug use, public health risks, and societal impacts.

Proponents of drug legalization present compelling arguments, including potential economic benefits such as tax revenue generation and job creation. They also highlight the potential for a reduction in drug-related crimes and improved regulation and quality control under a legalized framework. However, opponents raise concerns about increased drug use, public health risks, and potential societal impacts associated with legalization.

Advocates of drug legalization often highlight three key advantages: economic benefits, reduction in crime, and regulation and quality control. Legalization can create new revenue streams through taxation, disrupt the illicit drug market, and ensure safer drug production and distribution.

Critics of drug legalization express concerns about potential increases in drug use, public health risks, and societal impacts. Legalization may lead to higher addiction rates, strain public health resources, and have negative social consequences such as impaired productivity and increased crime rates. The debate on drug legalization encompasses various approaches, including decriminalization and legalization. Decriminalization reduces or eliminates criminal penalties for drug possession, while legalization removes legal restrictions on drug production, distribution, and consumption. Case studies from countries with different drug policies, such as Portugal and Uruguay, offer valuable insights into the potential effects of different approaches.

Analyzing these case studies reveals valuable lessons, including the importance of prioritizing public health, implementing strict regulations and quality control measures, and addressing underlying social factors contributing to drug use. By learning from real-world experiences, policymakers can make informed decisions regarding drug legalization that promote public health and safety. While exploring the pros and cons of drug legalization, it is crucial to consider factors such as balancing individual freedom and public safety, potential social and cultural implications, and addressing the root causes of drug use. Striking a balance between individual liberties and public health concerns is essential for developing effective drug policies.



In conclusion, the debate on drug legalization is complex and multifaceted, with various arguments and considerations to weigh. By understanding the different perspectives and examining real-world examples, policymakers can make informed decisions that promote public health and safety while addressing the challenges associated with drug use and addiction.

A. Decriminalization of Substances

The term "decriminalization" describes a strategy intended to eliminate criminal penalties for breaking drug laws, usually pertaining to personal possession. "The process through which an offense is reclassified from criminal to non-criminal through legislative action" is how the INCB defines decriminalization. Even while the behavior is still illegal, there are alternatives to using the criminal justice system to deal with it. It describes the use of treatment, education, aftercare, rehabilitation, and social reintegration in lieu of a criminal prosecution for minor offenses involving the use of psychotropic and narcotic drugs. Reliability for small amounts of drugs for personal use and possession is documented by regulatory agencies to be compliant with drug control convention provisions. One potential alternative to establish a human rights-based and balanced approach to drug policy is the decriminalization of the use of psychotropic and narcotic drugs. The current regulatory framework provides options to modify the current procedures in the context of decriminalizing the use of psychotropic chemicals and narcotic medications.

The NDPS Act contains provisions similar to depanelizing the use of certain substances, as was previously mentioned. On the other hand, there are reservations regarding the application of this clause. Although the possession of drugs for personal use and consumption accounted for about half of all cases registered under the NDPS Act 1985 in 2020, there is a high percentage of these cases still pending in the courts (>80% in 2019 and >90% in 2020). These proportions were even higher in prior years. Furthermore, the existing decriminalization regulations fail to take into account the complexity of various patterns of use of psychotropic and narcotic drug usage. "Detoxification or de-addiction" programs are designed to support those who have become addicted to substances; however, they are not appropriate for individuals who use these substances recreationally or in a non-dependent manner. Within the current legal framework, prompt processing of such instances in conjunction with a broader range of interventions targeting the use of narcotic medicines and psychotropic substances can be put into place. Furthermore, it is possible to implement the depenalization provisions within the current regulatory framework by taking a person-first and rights-based approach. In addition, it is possible to include recovery-focused interventions, screening, evaluation, and management procedures within the current criminal justice system and prisons. The Indian government's current NDPS policy only allows for "de-addiction" in jail environments. 23 One successful criminal justice tactic has been found to be applying alternatives to conviction or punishment, such as drug dependence therapy for individuals in need. Furthermore, it has been documented that treatment as an alternative to conviction or punishment contributes to public health and safety in an integrated manner and is covered by the current international regulatory frameworks. It is crucial that the effects of these changes are systematically assessed as and when they are made. It is necessary to



update the legal framework with newer provisions and enhance the application of present ones, given the status of the law and its application at the moment. From a medical, public health, human rights, and humanitarian standpoint, this is significant.

B. Cross-Border Implications

The extraordinary impacts of legalizing addictive substances can change broadly depending on different variables such as the substance in address, the administrative system actualized, societal demeanors, and existing open wellbeing framework. Be that as it may, here are a few potential results:

Legalization seem lead to a surge in utilization due to expanded accessibility, decreased disgrace, and simpler get to. This might result in more individuals creating substance utilize disarranges and it may worsen open wellbeing issues related to substance manhandle, counting overdose passings, addiction-related maladies (such as liver malady from liquor or lung illness from smoking), and mental wellbeing disarranges.

Substance mishandle can have noteworthy social costs, counting strained healthcare frameworks, expanded wrongdoing rates (due to exercises like robbery to back medicate propensities), and diminished work environment efficiency and it can have suggestions for universal relations and worldwide sedate control endeavors. It may strain connections with nations that contradict sedate liberalization and affect universal sedate trafficking courses and criminal systems.

Legalization might excessively influence helpless populaces, such as low-income communities and minority bunches, driving to assist marginalization and wellbeing incongruities.

Controlling addictive substances requires vigorous authorization instruments to anticipate mishandle and guarantee item security. Disappointment to execute compelling directions might lead to an uncontrolled dark advertise or corrupted items, coming about in unintended results.

VII. Health Care Implications

Even though the high dosages and measures of some drugs, or even the entrance of the substance is forbidden in most of the countries due to its possible addictive behavior on the individual, some of the substances are used when needed in the health sector by the professionals. Common reasons for usage of these drugs are usually for decreasing the harmful effects of psychological disorders, to treat the aches of an individual who is being treated in hospital before/during/after the operation or surgery, or often used for research purposes of researchers and clinicians despite the legal barriers.

For instance, it is possible to see the usage of Methylenedioxymethamphetamine, publicly known as MDMA and Psilocybin in the psychology field. They are used to treat mostly anxiety and depression and even addiction. Often they are used in the treatment of



Post-traumatic Stress Disorder (PTSD) because this condition brings anxiety and depression as a result in most cases. It is reported that these substances decrease the hyperarousal and the fear activity in the amygdala, while increasing the efficiency of memory integration activation of emotional regulation in associated brain regions. Moreover, these substances regulate the mood by reuptake of neurotransmitters such as serotonin, dopamine and other reward systems and mood related hormones in the brain.

Another example can be given is the usage of Marijuana, also known as cannabis, is an illegal substance that is banned from many countries due to its long-term impacts and its highly addictive structure. However, it is also known as one of the best painkillers for certain conditions. In that case, cannabis became legalized in numerous countries only for medical uses, but it remains illegal for other recreational purposes.

It should not be forgotten that these doses of addictive substances are used for only medical and research purposes and nothing more, sometimes using these drugs or substances become a necessity for the patient to feel less pain, mentally or physically, even if this situation exceeds the legal borders of the countries' policy. Legislative changes for medical purposes also embrace the furnishing of patient access, product safety, quality and amount control by the regulatory agencies.

VIII. Safety Measures

A. Regulation and Distribution

The type and level of regulatory control over narcotic and psychotropic chemicals are still being debated around the world. The existing regulatory framework for narcotic and psychotropic substances, primarily guided by the three United Nations conventions (the Single Convention on Narcotic Drugs, 1961, as amended by the 1972 Protocol; the Convention on Psychotropic Substances, 1971; and the Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988), has been criticized. The existing policies for narcotic and psychotropic substances have been defined as probationary. They have been characterized as providing limited space and opportunity for reform in the context of narcotic drug and psychotropic substance usage.

In addition, policies regarding narcotic and psychotropic medications have shifted throughout time in many countries. India has signed the UN Conventions on Narcotic Drugs and Psychotropic Substances. The Narcotic Drugs and Psychotropic Substances Act of India (NDPS Act of 1985, with revisions throughout time) provides the regulatory framework for narcotic and psychotropic substances in the country. This article seeks to provide insight into the significance of medical use, decriminalization, and legalization of narcotics and psychotropic substances. It also seeks to provide insight on the current state of medical use, decriminalization, and legalization of narcotic and psychotropic substances in India. It also seeks to provide insight on the current state of medical use, decriminalization, and legalization of narcotic and psychotropic substances in India. Both the 1971 Convention on Psychotropic Chemicals and the 1961 Single Convention on Narcotic Drugs emphasize the need of allowing the use of psychotropic chemicals and narcotic drugs for "legitimate purposes". Furthermore, these treaties stipulate that "such substances' availability for medical and scientific purposes should not be unduly restricted." These medicines and psychoactive chemicals are really classed as "controlled" substances. A few of these treaty articles provide



provisions for their use in medicine and science. Furthermore, some narcotics, such as heroin, have been used medicinally despite being categorized as Schedule IV drugs. This includes the use of heroin in the treatment of opioid use disorders. Legalization, depenalization, and decriminalization are legal systems that differ from the usual notion that simple drug use and possession must be criminalized. Legalization is frequently associated with regulating and commercializing controlled narcotic drugs and psychotropic substances for nonmedical and nonscientific purposes, with no penalty (criminal, administrative, civil, or otherwise) for producing, manufacturing, exporting, importing, or distributing the drug. INCB recognizes this to be in breach of the conventions on narcotic medicines and psychotropic substances. Existing models of decriminalization and legalization of narcotic drugs and psychotropic substances in many jurisdictions might help us better grasp the various approaches to the problem. As of 2022, approximately 30 countries throughout the world have changed their laws to allow for medicinal usage while also decriminalizing personal use and possession of narcotic drugs and psychotropic chemicals. The influence of most of these models has not been thoroughly investigated. Among those studied, the impact of the policy change varied by jurisdiction. While we do not want to provide a full critique of these models here, we do share a few findings from the current literature to demonstrate the variability of the outcomes of such metrics.

There was little change in the incidence of drug use and a lower rate of blood-borne viral infections in nations (like Portugal) where the liberalization of illicit drug use was coupled with an expansion of preventive, treatment, and harm-reduction programs. Drug-related high-risk behaviors decreased, the number of overdose deaths trended downward, and the rate of voluntarily seeking treatment climbed. Mexico changed its drug laws in 2009 to support harm reduction and the "partial" decriminalization of small amounts of illegal drug possession. A research on the impact demonstrated how success is hampered by the absence of concomitant reforms in the health sector. Health care was either unavailable or financially unfeasible for individuals referred by the courts. The most current World Drug Report, 2022, featured a section on the consequences of cannabis legalization in certain jurisdictions, and it cautioned against the potential negative public health impact of such policies in some of those areas.

B. Harm Reduction Strategies

Injecting drugs: Harm reduction therapies for illicit drugs concentrate on the risks associated with injecting: blood-borne viruses (HIV and hepatitis), overdose, and other injection-related complications. The most extensively mentioned and investigated harm reduction intervention is needle syringe programs (NSP). The impact of needle sharing in HIV and other infectious diseases is well recognized; sharing is still the single most important risk factor for dissemination within IDU communities. The primary goal of NSP is to reduce the spread of infectious diseases (HIV, hepatitis), with secondary goals of increasing access to harm reduction support and treatment services; providing information and advice on safer injecting drug use (and safer sexual practices); and making contact with hidden populations. Multiple methodologies have been used to evaluate NSP, including pre- and post-NSP comparisons, comparisons of NSP attendees versus non-attendees (on variables such as BBV

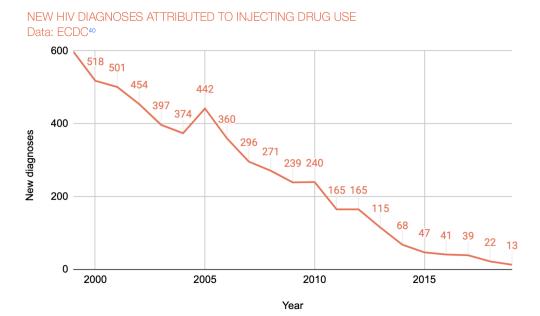


risk), longitudinal cohort studies, case-control studies, regression of risk factors (seropositive versus seronegative), population prevalence and country comparisons, and dynamic epidemiological and mathematical modeling. Iatrogenic effects have also been investigated. On self-reported improvements in risk behavior, with research designs that primarily employed pre-and post- or comparisons of attendees with non-attendees, there is a substantial body of data supporting reductions in risk behavior related with NSP. While changes in risk behavior might be considered as a significant outcome, research on changes in HIV and HCV infection rates provides a more direct assessment of efficacy. NSP has been shown in studies to be effective in lowering HIV seroconversion. Ecological studies, mathematical modeling, and other simulation methodologies have all been used to analyze the efficacy of NSP in lowering HIV prevalence and incidence, and all have shown that NSP has a considerable beneficial effect on HIV reduction. The cost-effectiveness of NSP has been calculated using estimates of the number of HIV and/or HCV infections avoided by the programme. All except one of these economic assessments (Pollack's 2001 review of the cost-effectiveness of NSP for HCV prevention) found NSP to be cost-effective and cost-saving overall. There have been several concerns raised concerning the potential iatrogenic consequences of NSP, including the possibility that they may encourage drug use and injection, as well as the possibility that, from a community perspective, they may reduce the perceived hazards of injecting, resulting in a greater number of new initiates to inject. The study evidence does not support these conclusions. The second area of worry surrounding NSP has been in relation to public amenity, including concerns about discarded syringes and increasing public disorder in places proximal to NSP, which are again not supported by study evidence. The likelihood of a needlestick injury from a publicly dumped syringe is quite minimal. There is no evidence of an increase in crime rates in regions where NSP operates. Not all studies on the effects of NSP on HIV infection rates have been beneficial.

Outreach is defined as contacting drug users in their home communities. The most common interventions are the provision of information about risk behavior and risk-reduction strategies, the provision of clean injecting equipment, access to BBV testing, and referral to relevant services. Peers (present or past drug users) can do outreach, as can 'conventional' outreach workers (social workers or other health professionals), although peer-based models are more effective. There have been no controlled trials of outreach, hence the evidence supporting its usefulness and effectiveness is limited to observational pre-post studies. In 1998, a comprehensive review was published, summarizing the existing research (36 investigations). While accepting the limitations of the assessment designs, the authors found that there is excellent evidence to support the success of outreach in terms of: accessing a hard-to-reach demographic; reducing needle sharing; and increasing risk-reduction behavior. The reduction in risk conduct (re-use of injection equipment) for persons receiving outreach programs was approximately 27%. More current research backs up these conclusions. There have been attempts to assess the cost-benefit of outreach as a harm-reduction measure. Most of this work is based on mathematical modeling. Wilson and Kahn simulate the optimal resource allocations between methadone maintenance and street outreach throughout the course of an HIV epidemic. They report that outreach is the most effective investment (at the epidemic stage of the cycle). An examination of the cost-effectiveness of the National AIDS Demonstration Research Program revealed that the program was overall cost-effective (due to



avoided HIV infections). In the context of harm reduction, education and information are intended to provide accurate and credible information in order to encourage risk-reducing action. Education/information can be offered in a variety of ways, including public awareness campaigns, targeted campaigns, peer networks, and outreach programs; health services; and the use of posters, pamphlets, movies, booklets, and other materials. The evidence supporting the efficacy and effectiveness of education and information is limited. The majority of the published studies focuses on the conventional NIDA HIV preventive intervention. A meta-analysis on the efficacy of educational programs found an overall positive effect. Several studies have compared the NIDA intervention to enhanced brief interventions.



VIII. Criminal Justice Reform

A. Relevance to UNODC

Criminal Justice Reform is to address structural problems in the criminal justice system, such as racial profiling, police brutality, overcriminalization, mass incarceration, and recidivism. It can occur anywhere in the world when the criminal justice system intervenes in people's lives, including in legislation, policing, and sentencing. UNODC covers and offers assistance in differing aspects of justice systems across the world. They are involved in judiciary, prison reforms, legal defense and aid and such areas that are relevant to the international legal frameworks.

Police Reform

Police reform represents diverse proposals to make changes in the policing practices across countries. Naturally, the role of police in the criminal justice reform is undebatable when it comes to maintaining peace and security in accordance with the law and in many countries, police have powers where they are the direct organs of government policies, and the extensions of ministerial authority. In other kinds of countries, they are more independent



from the government and they just sustain the peace of a given area. Either way, they are accountable for the way they act with the powers that are given by superior orders and use this power accordingly, not by exceeding and using unnecessary power.

What UNODC provides for this program is that;

- i. Advancing the police's ability to enhance accountability, oversight, and integrity systems and mechanisms and methods;
- ii. Providing support for an all inclusive police reform through organizational change management and strategic planning;
 - iii. Increasing the police's ability to enhance urban safety (community policing);
 - iv. Preventing crime in collaboration with civil society and local authorities;
 - v. Endorsing initiatives to stop and address violence against women; and
- vi. Evaluating Public Safety and Police Service Delivery, Police Integrity and Accountability, Crime Investigation, and Police Information and Intelligence Systems).

Prosecution

Public prosecutors appear as the representatives of the people on behalf of the government in the trial. They are responsible for accusing and ensuring a fair trial conforming to the country's law. In 1990, the 8th United Nations Congress on the Prevention of Crime and the Treatment of Offenders assembled in Havana, Cuba. As a result, they accepted the Guidelines on the Role of Prosecutors to protect the basic human rights and values under their serving as a prosecutor. Not limited to this, this guideline leads the Member States to adopt a framework that provisions international standards.

UNODC assists prosecutors in:

- i. Promote prosecutorial independence and autonomy through legislative reforms.
- ii.Improve accountability and public's perception of the prosecution service.
- iii. Enhance professional and administrative skills to handle complex criminal cases.

Access to Legal Defence and Legal Aid

According to the laws of international human rights, when a person's basic human rights are at risk, they have a right to ask for legal assistance and the State must fulfill its necessities encouraged by law. In 2014, The Johannesburg Declaration on the Implementation of the United Nations Principles and Guidelines on Access to Legal Aid in Criminal Justice Systems were adopted by experts, UNODC and other related sub-branches of the United Nations. UNODC helps by involving in:

- i. Evaluating the legal aid system and providing assistance governments in establishing a national strategy for providing legal aid at all stages of the criminal justice process;
- ii. Supporting in building the capacity of public defenders' offices, mentoring public defenders/defense lawyers, and training defense lawyers on specific thematic issues. Creating legal aid services for victims and child-friendly legal assistance:
- iii. Facilitating in establishing paralegal connections to provide legal advice in communities, police stations, and prisons. Constructing legal empowerment and information programs for the criminal justice system.
 - iv. Obtain data on legal aid delivery using the Global Study on Legal Aid.



Prison Reform

When someone is accused of breaking the law or is found guilty of a crime, detention, and jail are the primary penalties applied in the majority of the world's nations. In addition to violating the rights of the innocent, the overuse of jails creates a number of mutually reinforcing difficulties in meeting the demands of criminals for social reintegration. Prison overcrowding, unsanitary prison conditions, inadequate prison healthcare, a lack of social reintegration programs, a lack of information systems and strategic planning, a lack of inter-institutional communication, a lack of inspection and monitoring procedures, a lack of information and support for civil society, a lack of financial and human resources, and an increase in the number of inmates with special needs who are seldom met by prisons are some of the major issues surrounding prisons. The UN's standards and norms on crime prevention and criminal justice, as well as the promotion of prison reform, are underpinned by the promotion of human rights. However, in nations with limited financial and human resources, this justification frequently falls short of enacting jail reform. When evaluating the need for prison reform, one must evaluate the negative effects of incarceration on not only people but also families, communities, and the economy. It is imperative that prison reform programs incorporate activities that target vulnerable populations, such as women, children, and convicts with special needs.

Services

The mission of UNODC is to support nations in developing and modernizing their jail systems, as well as in enforcing non-custodial penalties and measures that adhere to human rights principles and UN standards and norms in the areas of criminal justice and crime prevention.

UNODC provides support in:

enhancing prisoner legal protections;

Including and expanding the range of alternatives to incarceration until trial in national criminal codes;

lowering sentences for some offenses, decriminalizing some behaviors, and expanding the range of options available to replace incarceration; supporting criminals and ex-offenders in meeting their needs for social reintegration (including in the fields of criminal justice, labor, education, and social welfare).

Restorative Justice

An approach to criminal offenses known as restorative justice involves the victim, the perpetrator, the community, judicial authorities, and their social networks. Programs for restorative justice are founded on the essential idea that criminal activity harms victims and the community in addition to breaking the law. When addressing the repercussions of illegal action, it is best to include both the offender and the harmed parties while also offering the assistance and support that both the victim and the offender need. A procedure known as restorative justice involves holding offenders accountable for their acts, making amends for the harm done to victims, and frequently including the community in the resolution of the dispute.



IX. Economical Aspects

The 'drug problem' is currently one of the most publicly discussed concerns in many nations, and it consistently ranks near the top of surveys asking people what they believe is the most pressing societal concern. The scale of drug use is significant. According to the 1995 National Household Survey on Drug Abuse, 10 million Americans had used marijuana in the previous month, while 1.5 million had used cocaine, and 72 million Americans aged twelve and up had taken illegal substances at least once in their lives. Of the latter, 66 million had tried marijuana, while 40 million had tried another illegal substance. It has been estimated that revenue in the U.S. illegal drug business is \$100 billion per year. In 1992, the FBI recorded over one million drug-abuse arrests, with 58% of federal prison inmates receiving drug-related terms (Chambliss, 1994). Despite the issue's high notoriety, there has been little economic study. This paper discusses one topic that has received a lot of attention: legalization. It questions if drug legalization would raise societal welfare, what price legal drugs should be sold at, and what the expected impacts of legalization on the quantity of drugs consumed, drug spending, and the tax received from drug sales are. Standard theory suggests that governments should intervene in drug markets due to the negative externalities associated with drug sales and consumption. However, one of the most widely implemented measures, prohibition, has not worked as intended. Making drugs illegal has not eliminated drug use; rather, it has altered the supply and demand model by driving all residual usage into the criminal market. Purchasing a drug on the illegal market is likely to have more negative externalities than purchasing it in the legal market, while all drug use has some negative consequences. These extra externalities include the "environmental" impact of drug trade on neighborhoods, the violence connected to the black market (where there is no legal recourse in the event of a dispute), the potential for income-generating crime due to the high prices of the black market, the criminalization of black market buyers, the potential deterrent effect of what is perceived as high-profit criminal activity on education and labor force participation, the health costs associated with adulterated and variable strength drugs, the elevated risk of infection from sharing needles, and so forth. Therefore, while Prohibition has probably shrunk the scale of the drug market, it has also guaranteed that there are more unfavorable effects attached to every drug taken: One of the main factors taken into account in the welfare analysis of drug policy is the balance between these two effects. Drug policies impact consumption through price effects, which can be divided into two parts: (1) how policies influence pricing and (2) how drug prices impact demand. Drugs will have varying demand elasticities. However, without adequate data on human medication consumption habits in relation to effective market prices, it will be extremely impossible to forecast elasticities for a given drug with any degree of accuracy. Attempts can be made to derive demand elasticities using government survey data on drug usage and market price estimates; however, both consumption and price data are likely to be severely incorrect. There have been essentially no studies on the price elasticity of demand for illegal drugs in humans. Brown and Silverman (1974) provided an interesting and timely research of the association between heroin prices and crime rates. Recognizing substantial issues with both price and crime data, the authors gave preliminary estimates of the price elasticity of five main crime categories in New York



City. In general, they discovered an increase in rates in most crime categories when heroin prices rose, with all elasticities less than 1.0. Unfortunately, this methodology cannot be directly applied to the assessment of the price elasticity of demand for heroin itself.

X. Youth and Prevention

A. Control of Usage in Young People

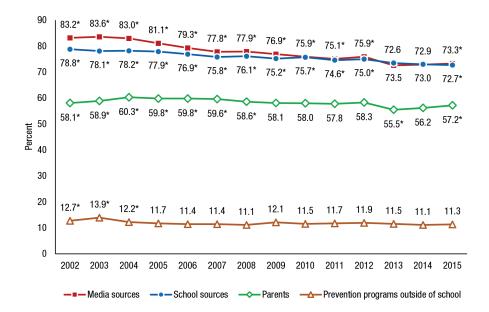
Alcohol, nicotine, and drug use pose a significant global health risk, leading to accidents, violence, chronic diseases, and hindering young people's development and societal contributions. Substance use prevention efforts primarily target adolescents, recognizing that most substance use begins during this stage. The primary objective of drug use prevention is to help people, often young people in particular, to avoid or delay initiation into the use of drugs, or, if they have started already, to avoid developing disorders and other negative consequences. Prevention also has a broader purpose, which is to support the development of children and youth, enabling them to realize their talents and potential (UNODC, 2013). Survey data shows adolescent substance use peaked in the late 1970s and early 1980s, declined in the late 1980s, rose again in the 1990s, and has been gradually declining since. In 2008, among high school seniors, 22% smoked cigarettes in the past month, 67% used alcohol in the past year, and 37% reported recent illicit drug use. Lifetime prevalence rates were 73% for alcohol, 48% for illicit drugs, 42% for marijuana, 9% for hallucinogens, and 12% for amphetamines.

Preventing substance use requires tailored approaches for different developmental stages and settings. Effective systems encompass strategies targeting the young people. Listening to young people's needs informs accessible prevention activities, while universal interventions strengthen social supports and counter risk factors. Examples include prenatal care classes and skills-based education programs for adolescents, aiming indirectly to reduce future substance use.

Controlling the usage of addictive substances among young people is an obligation in the digital age, where access to information and illicit substances is easier than ever before. The digital revolution has transformed the landscape of substance use, creating new challenges for regulation and enforcement. Legalization of these substances without intensifying controls could exacerbate the problem, leading to increased accessibility and normalization of substance use among youth.

By integrating digital strategies into regulatory frameworks, policymakers can develop targeted interventions that combat substance misuse effectively, harnessing technology for education, prevention, and early intervention initiatives. To address this issue comprehensively, it's essential to enforce vigorous regulatory measures, enhance public education campaigns, and promote healthy alternatives and coping mechanisms for adolescents, ensuring their well-being in the digital age.





A. Preventive Measures in Schools

Schools focus on preventing adolescent drug abuse due to their access to large student populations and alignment with education goals. Early methods lacked theory-based strategies but contemporary programs emphasize psychosocial theories, focusing on risk and protective factors. These include social resistance skills, normative education, and competence enhancement. Education for drug abuse prevention in schools involves a comprehensive approach, integrating formal and informal health curricula, and promoting a safe and supportive environment.

Key components of education for drug abuse prevention in schools include:

- -A curriculum rooted in drug abuse prevention principles, integrated into the school's core curriculum, aims to equip youth with drug knowledge, life skills to navigate situations without drugs, and resistance to peer pressure. Establishing a safe and supportive school environment through clearly communicated policies and procedures. These policies provide care, counseling, and support for all students and promote cooperation among staff, students parents, and relevant professionals.
- -Strategies to ensure active participation and support from all members of the school community in implementing drug policies and procedures.
- -Providing appropriate professional development and training for staff to effectively address drug-related issues.
- -Offering information and support to parents, particularly those of students involved in illicit drug use, to help them understand and address these challenges.



-Implementing mechanisms for continuous monitoring and review of the school's approach to drug abuse prevention and incident management, ensuring effectiveness and responsiveness to evolving needs and circumstances.

The school environment is vital for effective drug abuse prevention education, shaping student behavior and overall well-being. Schools serve as crucial venues for promoting health skills and fostering a sense of belonging. Key elements for positive change include effective leadership, teacher satisfaction, resources, and supportive relationships

UNODC's Global Youth Network highlights schools as crucial settings for evidence-based interventions that effectively combat substance abuse among students. These interventions involve comprehensive educational, social, and environmental strategies to promote healthy behaviors and reduce substance use risk factors.

UNODC emphasizes the importance of education programs in schools, equipping students with information and decision-making skills to resist peer pressure. Creating supportive school environments strengthens protective factors against substance abuse.

Moreover, UNODC stresses implementing strict policies and disciplinary measures in schools to enforce zero-tolerance for substance use. Collaborating with community organizations and law enforcement agencies further enhances preventive measures. Integrating UNODC's evidence-based approaches into school curricula and fostering a culture of health can effectively safeguard young people's health and future amidst evolving attitudes towards addictive substances.

B. Parental & Community Involvement

Parenting interventions stand as crucial pillars in the prevention of drug abuse, particularly given the significant stress many parents experience and the pervasive anxiety surrounding their children's potential involvement in substance use. This stress is often compounded by societal shifts, such as high divorce rates, which contribute to unstable family environments and an increase in single-parent households.

Numerous studies have underscored the paramount importance of parenting and family interventions in mitigating family risk factors associated with future substance use. These interventions have demonstrated effectiveness in addressing substance abuse issues within families, offering hope for reducing the prevalence of drug abuse among youth. While a variety of approaches to family intervention exist, empirical evidence strongly supports certain methods as particularly impactful.

Despite the demonstrated effectiveness of these interventions, a significant challenge persists in reaching and engaging families effectively. Many empirically supported interventions struggle to achieve widespread adoption and participation, limiting their



potential impact. To address this issue, there is a pressing need for a comprehensive, multilevel, population-based strategy that transcends individual families and targets entire communities and populations.

By embracing a multilevel prevention approach that prioritizes promoting positive parenting of preadolescent children, key principles of prevention programming can be highlighted. This approach emphasizes the importance of addressing substance abuse issues at a broader societal level, recognizing that societal factors, community resources, and cultural norms all play significant roles in shaping individuals' behaviors and choices related to substance use.

Through concerted efforts to implement multilevel prevention strategies, we can enhance access to effective parenting interventions and foster broader community engagement in substance abuse prevention initiatives. By addressing substance abuse issues comprehensively and holistically, it can strive towards creating safer, healthier environments for our families and communities.

XI. Long Term Impacts

A. Impacts on Crime Rates

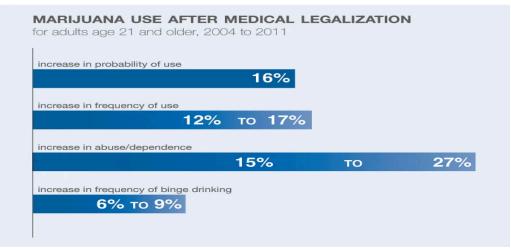
In 2016, a 22-year-old woman was charged with manslaughter after murdering a man and one of his twin daughters in a car accident while high on lawfully obtaining marijuana. In November 2012, voters in Colorado and Washington adopted Amendment 64, which legalized the purchase of marijuana for recreational purposes. These were the first states in the United States to authorize the sale and consumption of marijuana for any purpose. Although marijuana has been legalized in several places in America, the black market for the substance still exists, and the licit and criminal marijuana industries are forming a positive feedback loop in which both markets grow in size and strength. Despite a widespread belief that marijuana is hazardous, several states have allowed its recreational use. Marijuana is currently classed as a Schedule 1 substance on the federal level, which places it in the same category as heroin. It has been desired to be legalized so that drug consumption could be taxed, quality regulated, and gang violence reduced. To collect taxes on marijuana sales, policymakers had to strike a compromise between a high enough tax to raise money and a low enough charge to drive people away from the criminal market. Currently, as an example Colorado's marijuana tax comprises a 15% excise tax on marijuana sales from cultivators to retailers, as well as a 15% sales tax on retail sales to customers. This is sufficient for the state to generate revenue, but voters prefer to gradually raise tax rates. If they act too quickly, the black markets will prosper since the price of illegal marijuana will be significantly lower. If they gradually increase the rate, the illegal markets will fade out of the economy, leaving the legal market far more popular.

Legalization has benefited consumers as well. Marijuana legalization has resulted in increased quality and safety controls, as well as a decrease in drug-related gang violence, allowing law enforcement to focus on more serious crimes. Marijuana has been found to be



contaminated with many hazardous substances. If marijuana sales are regulated by the state, buyers will know exactly what they are buying. Legalization also reduces the number of gangs that perpetrate violent crimes. Violent crimes in states where marijuana has been legalized have decreased by 12.5%. Gangs are typically associated with illegal substances, and legalization has reduced the number of gangs while allowing victims of gang violence to turn to the authorities. Finally, legalizing marijuana will reduce the number of arrested Individuals. Before legalization, marijuana arrests accounted for 52% of all drug arrests in the country. Citizens will no longer face criminal charges for possessing modest amounts of marijuana if it is legalized.

The negative impacts of marijuana legalization include an increase in fatal car accidents where the driver tested positive for marijuana, an increase in homelessness, and a surge in young marijuana use. Driving drunk has always been risky, and driving high poses similar concerns. Detecting smoking in drivers is currently very tough because everyone's level of impairment varies. Since marijuana legalization, Colorado has had the highest rate of homelessness of any state. Employees at homeless shelters relate this to the availability of marijuana in their facilities.



B. Impacts on Illicit Drug Trade

As drug prohibitions evolved, the meaning of the marijuana black market also altered over time. It generally refers to the illegal cultivation, distribution, and consumption of cannabis in defiance of the law and established protocols. Prior to the recent legalization of marijuana for recreational use, all activities involving the production, distribution, and use of cannabis had to take place on the illegal market, with the exception of those allowed by state legislation for medical use. Since the legalization of marijuana has included a wide range of marijuana-related activities, the size of the illicit market for cannabis has drastically decreased. Along with the legislation and regulations, it also draws a boundary between the legitimate and illicit markets. However, it also makes the marijuana black market's composition more difficult because it is illegal. Even though they are carried out in the same way, illegal and legitimate actions need to be distinguished from one another. In real life,



depending on one's knowledge and willingness to follow rules and regulations, the line separating lawful from illegal transactions may become blurry for some people. The current study focuses on a nebulously defined black market that encompasses all cannabis production and distribution that defies current legalization and regulatory frameworks. Legalization of marijuana aims to establish a well-regulated legal market in place of the illegal one, thus ending the black market.

The illegal market, however, has not completely disappeared as predicted in places where marijuana is legal for recreational use, according to the available data. The rules themselves can be the cause. Tight rules govern the legal marijuana sector in states where it has been legalized. One of the main points of agreement amongst the ballots that legalized marijuana for recreational use is the establishment of a state-level regulatory and taxation framework for retail marijuana enterprises. As an illustration, California's Proposition 64 requests that the state set guidelines and limitations for the product's labeling, packaging, marking, and promotion (California Proposition 64, 2016). The specifics of state laws governing legal marijuana producers and retailers vary, but generally speaking, they fall into one of several major categories: licensing; production and distribution restrictions; packaging and labeling laws; installation of tracking and security systems; advertising; and taxes. An application price of \$1,000 and an annual license fee of \$5,000 are required to open a new retail marijuana store in Alaska (Alaska Department of Commerce, Community, and Economic Development, 2018).

Generally speaking, marijuana has a high "sin tax." According to the Colorado Department of Revenue (2018) and the Washington State Liquor and Cannabis Board (2018), Washington State levies a 25% excise tax on marijuana at every stage of sales, but Colorado only charges 15% from cultivation through processing and retail.

The overall tax rate on cannabis goods is actually substantially higher. For instance, in California, it might reach 45% due to a 15% state excise tax, \$9.25 per ounce for cannabis flower and \$2.75 per ounce for leaves in state cultivation taxes, and state and local sales taxes that currently range from 7.75% to 9.75% (The Bond Buyer, 2017). The politicians' reluctance to legalize cannabis and their goal to tightly control its use and production are reflected in these onerous and stringent laws and levies. However, it could also be the fundamental reason why the criminal market persists in states where recreational marijuana usage has been legalized. Heavy financial and tax costs for marijuana businesses, for example, have already begun to be cited by some analysts as a potential strategy to "complicate such [increased enforcement] efforts by diverting in-state sales to the black market." Similar points are also made in certain scholarly works.

XIII. Questions to be Addressed

- i. How can public safety from the harmful effects of addictive substances be ensured without changing countries' legal borders?
- ii. In what ways can the legalization of addictive substances be separated from individual freedom while ensuring public health?



- iii. Which organizations, foundations, and NGOs can cooperate to address the addressed situation and to raise awareness?
- iv. How can the stigmas against the legalization of addictive substances be broken on a global level?
- v. How can the effects of addictive substances to the public health and society be reduced without changing the countries' policies?
- vi. What are the potential benefits and harms of decriminalization of addictive substances? vii. What are some ways to reduce the illegal trades of addictive drugs in the countries that criminalize the addictive substances?

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