

# Drug Abuse As A Global Public Health Concern: A Comparative Study Of National And International Legal Responses

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## ABSTRACT

Drug abuse, as a global public health concern, raises a question regarding the nature of individual autonomy, state responsibility, and the limits of criminal law. At its core, the issue reflects a tension between the liberal principle of personal liberty which recognizes an individual's right to make choices concerning their own body and the paternalistic role of the State, which seeks to regulate behaviour in the interest of public health, morality, and social order. This duality frames the legal discourse on drug control across jurisdictions.

This research paper highlight that how different legal systems conceptualize drug abuse whether as a moral failing deserving punishment, a disease requiring treatment, or a social condition necessitating structural reform. Drawing upon theories of legal moralism, utilitarianism, the paper interrogates the legitimacy of criminalizing personal drug consumption in the absence of direct harm to others. It further evaluates whether punitive legal frameworks undermine the dignity and autonomy of individuals or serve a justified deterrent function. The analysis extends to international legal instruments and the Indian legal framework under the Narcotic Drugs and Psychotropic Substances Act, 1985, is critically assessed as embodying a hybrid model that oscillates between strict enforcement and therapeutic intervention. Ultimately, this study argues that an ethically coherent and legally sound response to drug abuse must reconcile individual freedom with collective welfare, moving beyond rigid prohibition towards a nuanced framework grounded in public health, human dignity, and social justice

**Key words:** Drug abuse, human health, NDPS Act, WHO, NCRB.

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## Introduction:

Drug is medicine, if it is consumed in appropriate way. There is a fundamental difference between drug and drug abuse. Therapeutic Index of a drug is greater than ED50 then it gives a negative response in the body, which is harmful for the human health. Drug abuse has emerged as one of the most pressing global public health challenges of the 21st century, transcending national boundaries and socio-economic divisions. It not only undermines individual health and well-being but also imposes a significant burden on healthcare systems, economies, and social structures worldwide. The complexity of drug abuse lies in its multifaceted nature, encompassing medical, legal, social, and psychological dimensions. Addressing this issue requires a comprehensive and coordinated international response grounded in public health principles, human rights, and evidence-based policy-making.

Target 3.5 of UN Sustainable Development Goal 3 sets out a commitment by governments to strengthen the prevention and treatment of substance abuse. Several

other targets are also of particular relevance to drug policy-related health issues, especially target 3.3, referring to ending the AIDS epidemic and combating viral hepatitis; target 3.4, on preventing and treating non communicable diseases and promoting mental health; target 3.8, on achieving universal health coverage; and target 3.b, with its reference to providing access to affordable essential medicines.

## Understanding of Drugs:

Drugs are a medicine or other substance which has a physiological effect when ingested or otherwise introduced into the body. The WHO defines drug abuse as the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. UNODC describes drug abuse as: The use of controlled substances for non-medical purposes in a manner that may impair health and social functioning.

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**Essential narcotic Drug** means a narcotic drug notified by the central Government for medical and scientific use<sup>1</sup>.

A drug is any substance (with the exception of food and water) which, when taken into the body, alters the body's function either physically and/or psychologically. Drugs may be legal (e.g. alcohol, caffeine and tobacco) or illegal (e.g. cannabis, ecstasy, cocaine and heroin)

### Stages of drugs addiction

Drug abuse may exist with or without dependence and dependence may occur without abuse. Improper or excessive use of therapeutic drugs may be termed as abuse even in the absence of addiction. Addiction is defined as a chronic disorder characterized by compulsive use of drugs resulting in physical, psychological and social harm, and continued use despite evidence of that harm. Addiction evolves through the followings stages: Habituation, Dependence, and tolerance. Drug habituation is a condition resulting from the repeated consumption of a drug in which there is a psychological or emotional dependency on the drug<sup>2</sup>. Physical dependencies defined as an alteration in neural systems which are manifested by tolerance and appearance of withdrawal phenomena when a chronically administered drug is discontinued or displaced from its receptor. Withdrawal illness occurs after abrupt discontinuation of the drug. Tolerance is an interesting phenomenon characterized by the need of increasing amount of a drug to obtain the same therapeutic effect. So that they may increase his drug dosage causes toxicity and death<sup>3</sup>.

### Key Elements of Drug Abuse

- Non-medical or excessive use of substances (e.g., opioids, cannabis, stimulants, alcohol).
- Loss of control over consumption.
- Continued use despite harmful consequences.
- Development of tolerance (needing more of the substance for the same effect).
- Possible addiction or dependence.

Indian courts have increasingly recognized drug abuse as a public health issue rather than merely a criminal offence. The judiciary emphasizes treatment and rehabilitation, particularly for addicts, balancing punitive and welfare approaches under Article 21 of the Constitution of India.

In *Union of India v. Mohanlal*<sup>4</sup> is a landmark judgment in the field of narcotics control law, particularly under the Narcotic Drugs and Psychotropic Substances Act, 1985 (NDPS Act). The case primarily addressed the

issue of improper handling, storage, and disposal of seized narcotic drugs and psychotropic substances, which had serious implications not only for criminal justice administration but also for public health and safety.

The Court recognized that improper handling of seized drugs poses a direct threat to society. If such substances re-enter the market, they contribute to the spread of addiction, increase overdose risks, and exacerbate the burden on healthcare systems. The ruling indirectly aligns with the principles advocated by the World Health Organization, which emphasizes reducing the availability of harmful substances as a key strategy for protecting public health. By ensuring the safe and timely destruction of narcotics, the Court aimed to curb illegal supply chains and prevent further abuse.

Additionally, the judgment reflects an understanding that drug abuse is not merely a criminal issue but also a public health crisis. Preventing the re-circulation of seized drugs helps reduce exposure, particularly among vulnerable populations such as youth.

The judgment in *Arif Khan @ Agha Khan v. State of Uttarakhand*<sup>5</sup> is a significant decision of the Supreme Court of India interpreting the procedural safeguards under the Narcotic Drugs and Psychotropic Substances Act, 1985 (NDPS Act). The case primarily revolves around the mandatory requirement of informing an accused of their rights under Section 50 of the NDPS Act, and it has broader implications not only for criminal justice but also for public health and human dignity. A fair and transparent legal system enhances public trust, which is essential for effective public health interventions. Individuals are more likely to seek treatment for substance abuse if they are not fearful of arbitrary legal consequences.

### Global Magnitude and Statistical Data

Drug abuse has reached alarming proportions worldwide. Recent global estimates indicate that approximately 296 million people aged 15–64 used drugs in 2021, representing a substantial portion of the global population. Among them, around 39.5 million people suffer from drug use disorders, requiring medical treatment and rehabilitation. The mortality associated with drug abuse is equally concerning. It is estimated that about 0.6 million deaths annually are directly attributable to drug use. Furthermore, drug abuse contributes to over 36 million disability-adjusted life years (DALYs) lost globally, reflecting both premature death and years lived with disability. In addition, the global illicit drug market is vast and economically significant, with estimates suggesting an annual turnover of approximately \$400 billion, making it one of the largest illegal industries worldwide<sup>6</sup>.

In addition, India has a large chemical industrial base with pharmaceutical industry. This has resulted in substantial rise in the recreational abuse of prescription

<sup>1</sup> Section 2 (viii) of the NDPS Act, 1985 inserted by amendment Act, 2014

<sup>2</sup> Islam RN and et al., A Case Study of Drug Abuse, *Medicine Today*, Volume 24, Number 2012.P- 83

<sup>3</sup> Reddy KSN. Drug dependence and Abuse. *The essentials of Forensic Medicine and Toxicology*. 26th edition. Hyderabad. K.Suguna devi 2007:531-37

<sup>4</sup> (2016) 3 SCC 379

<sup>5</sup> (2018) 18 SCC 380

<sup>6</sup> World Health Organization

drugs especially Codeine based cough syrups, sedatives etc<sup>7</sup>.

WHO play a vital role in prevention of drug use and reduction of vulnerability and risks; treatment and care of people with drug use disorders; prevention and management of the harms associated with drug use; access to controlled medicines; and monitoring and evaluation.

The word addiction means getting habituated with something. In case of drugs when a human body gets dependent on some stimulating things, and after a certain period it creates a habit which means that the body has become dependent on the stimulant which is addiction. It creates different types of excitement both in the body and mind. Finally, it makes a person passionate to drugs. In the long run the user has to increase the dose day by day<sup>8</sup>.

### **Impact of Drug Abuse on Public Health**

The signs or harmful effects of drug abuse could be physical, emotional, family dynamics, school behaviours, and social problems. They include cardiovascular disease; abnormalities in brain structure and function; respiratory problems; weakened immune system; insomnia; reduction in libido or sexual dysfunction; anxiety and irritability; loss or increase in appetite; and poor judgment<sup>9</sup>.

#### **1. Physical Health Consequences**

Drug abuse leads to a wide range of physical health problems. Prolonged use of substances such as opioids, cocaine, and synthetic drugs can damage vital organs including the brain, liver, heart, and lungs. Intravenous drug use significantly increases the risk of infectious diseases such as HIV/AIDS, hepatitis B, and hepatitis C due to needle sharing and unsafe practices.

Overdose deaths represent one of the most severe outcomes of drug abuse. The increasing availability of potent synthetic opioids has contributed to a global rise in fatal overdoses, placing emergency healthcare systems under immense pressure.

#### **2. Mental Health Impact**

Substance abuse is closely linked with mental health disorders. Individuals who abuse drugs often experience depression, anxiety, psychosis, and suicidal tendencies. In many cases, drug use both contributes to and exacerbates pre-existing mental illnesses, creating a cycle of dependency and psychological distress.

#### **3. Spread of Communicable Diseases**

Drug abuse contributes significantly to the spread of communicable diseases. The United Nations Office on

Drugs and Crime highlights that unsafe injection practices are a major driver of HIV transmission among drug users. Additionally, weakened immune systems among substance users make them more susceptible to infections.

#### **4. Burden on Healthcare Systems**

Drug abuse imposes a heavy burden on healthcare infrastructure. Increased hospital admissions, demand for rehabilitation services, and long-term treatment requirements strain public health resources. In developing countries, limited healthcare facilities exacerbate the problem, leading to inadequate treatment and rising mortality rates.

#### **5. Maternal and Child Health Effects**

Drug abuse during pregnancy can result in serious complications such as premature birth, low birth weight, and neonatal abstinence syndrome. Children born to drug-dependent parents are also at higher risk of neglect, malnutrition, and developmental disorders, creating long-term public health challenges.

#### **6. Social and Community Health Impact**

Drug abuse affects community health by contributing to crime, violence, and social instability. It disrupts family structures and increases the incidence of domestic abuse and child neglect. Communities with high levels of drug abuse often experience reduced productivity, unemployment, and poverty, further aggravating public health issues.

#### **7. Economic Burden**

The economic impact of drug abuse is substantial. Governments incur significant costs in healthcare, law enforcement, and social welfare. Loss of workforce productivity due to illness, disability, and premature death further hampers economic development.

#### **8. Stigma and Barriers to Treatment**

Social stigma associated with drug abuse prevents individuals from seeking medical help. Discrimination in healthcare settings and fear of legal consequences often lead to delayed treatment, worsening health outcomes and increasing the risk of disease transmission

#### **Legislative and Policy response to drug abuse in India**

In colonial Bharat, there were two enactments which deal with drug that is Opium Act 1878, Dangerous Drug Act 1930. First time, Government of India introduced the national policy on NDPS in India. The objective was to guide various ministries/departments, state governments, international organizations, and non-governmental organizations (NGOs) and re-assert India's commitment to combat the drug menace holistically. The policy, inter alia, states the role of the government in the treatment, rehabilitation, and social

<sup>7</sup> Report of National Control Bureau, 2023

<sup>8</sup> Luscher C. Drugs of Abuse. Basic and Clinical Pharmacology. 10th edition. Mc Graw Hill. Lange 2007:511-25

<sup>9</sup> John, M.L. and et al., An Overview of Drug Abuse: Causes, Effects, and Control Measures, Asian Journal of Medicine and Health (2023)21 (11):263-68.

reintegration of drug addicts.<sup>10</sup>Inspired by the philosophy of Mahatma Gandhi ji, the Constitution makers Under Article 47 of the Indian Constitution clearly focus on the improvement of human health for the same state prohibit the intoxicating drink and drugs harmful for the health except for the medical purpose<sup>11</sup>.

S. No.	States	Registered Cases (2022)
1.	Kerala	26,619
2.	Maharashtra	13,830
3.	Punjab	12,442
4.	Uttar Pradesh	11,541
5.	Tamil Nadu	10,385
6.	Karnataka	6,399
7.	Madhya Pradesh	4,811
8.	Rajasthan	3,821
9.	Haryana	3,815
10.	Assam	2,902

Source: NCRB Report, (2022)

According to the report (2022) of National Crime report Bureau, these are the top ten states where complaints relating to drugs are continuously increasing day by day. (NCRB) So, this becomes important to control such drug abuse and drug trade. NDPS Act covers both the aspects.

### The Narcotic Drugs and Psychotropic Substances Act, 1985

This Act is the primary legislation in India regulating narcotic drugs and psychotropic substances. Enacted to consolidate earlier laws and to fulfill India's international obligations under various UN conventions, the Act aims to control drug abuse and curb illicit trafficking while permitting the use of such substances for legitimate medical and scientific purposes. The law covers a wide range of substances, including opium, cannabis, heroin, cocaine, and several synthetic drugs. These substances are regulated through a licensing and authorization system managed by the government. Under Section 8, it prohibits the production, manufacture, possession, sale, purchase, transport, and consumption of narcotic drugs and psychotropic substances except for authorized purposes. After the 2001 amendment NDPS Act introduced the strict punishment. Offences are categorized based on the quantity involved small

<sup>10</sup> Ramsey Tedela, The problem of drug abuse in India, International Journal of Criminal, Common and Statutory Law 2021; 1(1): 33-36

<sup>11</sup> Article 47 of Indian Constitution: The State shall regard the raising of the level of nutrition and the standard of living of its people and the improvement of public health as among its primary duties and, in particular, the State shall endeavour to bring about prohibition of the consumption except for medicinal purposes of intoxicating drinks and of drugs which are injurious to health.

quantity, intermediate quantity, and commercial quantity. Punishments vary accordingly: minor offences may attract up to one year of imprisonment, while offences involving commercial quantities can result in rigorous imprisonment ranging from 10 to 20 years along with heavy fines. Repeat offenders may face enhanced penalties under Section 31, and in certain serious cases, the law provides for stringent punishments to deter large-scale drug trafficking. Moreover, Section 37 of the said Act makes stringent provision for the bail<sup>12</sup>. This makes bail under the NDPS Act particularly restrictive compared to other criminal laws.

The most significant aspect of this legislation is that it adopts the rehabilitative approach towards the criminals along with punitive measures. It works on both control of drug trafficking and treatment of drug abuse. Keeping this thing in mind various agencies like **Narcotics Control Bureau (NCB)**, state police, and customs authorities enforce this legislation in society effectively.

Hira Singh & Anr. v Union of India & anr<sup>13</sup> the honorable Supreme court of India overruled the E. Micheal Raj vs. Intelligence Officer, Narcotic Control Bureau<sup>14</sup> judgment and held that under the NDPS Act, "the total weight of a seized substance, including neutral materials mixed with narcotic drugs, should be considered to determine whether the quantity is "small" or "commercial" for sentencing". Moreover, the Apex court highlight the objective of Narcotic Drugs and Psychotropic Substances (NDPS) Act attends in addressing the issues related to drug trafficking and illicit drug use which affect the human health. Its primary focus is *on* regulating and controlling the use of narcotic drugs and psychotropic substances to prevent their misuse. Misuse often occurs through the adulteration of drugs or the addition of neutral

<sup>12</sup> Section 37 of NDPS Act, 1985- (1) Notwithstanding anything contained in the Code of Criminal Procedure, 1973 (2 of 1974),--

(a) every offence punishable under this Act shall be cognizable;

(b) no person accused of an offence punishable for [offences under section 19 or section 24 or section 27A and also for offences involving commercial quantity] shall be released on bail or on his own bond unless--

(i) the Public Prosecutor has been given an opportunity to oppose the application for such release, and

(ii) where the Public Prosecutor opposes the application, the court is satisfied that there are reasonable grounds for believing that he is not guilty of such offence and that he is not likely to commit any offence while on bail.

(2) The limitations on granting of bail specified in clause (b) of sub-section (1) are in addition to the limitations under the Code of Criminal Procedure, 1973 (2 of 1974) or any other law for the time being in force on granting of bail.

<sup>13</sup> (2020) 20 SCC 272

<sup>14</sup> (2004) 4 SCC 446

substances, which enable traffickers to increase volume and reduce costs.

### **National Policy on Narcotic Drugs and Psychotropic Substance, 2012**

Government of India introduced the National Policy on Narcotic drug and Psychotropic Substance, 2012 to guide and provide directions to the various ministries, departments, state governments, Ngo's etc. to reaffirm their commitment to combat the menace of drugs in India. This policy states the role of the Government for treatment, rehabilitation and social reintegration of drug addicts. For the purpose of drug demand reduction, the policy lists out the roles of various Ministries/Departments which include conducting National Survey on Drug Abuse, training of doctors in Government Hospitals in de-addiction, supporting other hospitals in setting up de-addiction and treatment facilities, establishing separate patients, developing minimum standards of care to be followed by de-addiction centres and inclusion of rehabilitation and social reintegration programmes<sup>15</sup>.

### **Programs introduced by Government of India to combat the drug abuse**

Government of India formulated and implemented the National action plan for drug demand reduction to cater the problem of drug abuse in India. This government plan include many initiatives such as<sup>16</sup>:

- Nasha Mukta Bharat Abhiyan was launched by the Government in all the district and appoint 10000 volunteers to control this problem at ground level. This Abhiyan benefited more than 14.79 crore people (4.96 crore youth and 2.97 women) .
- Government of India supported 350 Integrated Rehabilitation Centre for Addicts for the drug victims, preventive education, awareness generation, motivational counselling, after care and re-integration into the society.
- To support the vulnerable, children and adolescents government start 46 community based peer led intervention centres.
- Government also support the 74 Outreach and Drop in Centres to provide safe and secure space for treatment, rehabilitation, screening, assessment, counselling, referral, linkage for treatment and rehabilitation services for substance users.
- Government also operate the toll- free helpline no. 14446 for providing the primary counselling and immediate assistance to drug addicts.
- Awareness programs and sensitization sessions for the students, teachers and parents by the collaborative efforts of the Union and state government institutions like national institute of social defence and state counsel of educational

research training , Kendriya Vidyalaya Sangathan etc.

- Navchetna Modules, teachers training modules have been developed by Ministry of Social Justice & Empowerment (MoSJE) for sensitizing students (6<sup>th</sup> – 11<sup>th</sup> standard), teachers and parents on drug dependence, related coping strategies and life skills.

### **International Initiatives to combat the menace of Drug Abuse**

#### **International Conventions**

The right to health is a fundamental human right and an important goal of the International Drug Control Conventions. Sustainable Development Goal 3 calls for worldwide collaboration to ensure that medications, including narcotics and psychotropic substances, reach those in need, reducing reliance and health degradation. This mechanism encourages worldwide trading in medical and scientific fields.

The current worldwide drug control system originated with the worldwide Opium Commission, which resulted in the approval of the International Opium Convention in 1912. This resulted in the adoption of the International Convention on Dangerous Drugs in 1925 and the Convention for the Suppression of Illicit Traffic in Dangerous Drugs in 1936. Following World War II and the dissolution of the League of Nations in 1946, the Single Convention on Narcotic Drugs was adopted in 1961, replacing all previous drugs control measures. The Convention of 1961 was expanded in 1972 to form the Single Convention on Narcotic Drugs of 1961. The worldwide Narcotics Control Board (INCB) was founded in 1968 to oversee worldwide traffic in restricted narcotics and ensure that they are only traded for legitimate purposes. The INCB assists governments with monitoring their international trade by sending pre-export alerts and estimating annual lawful requirements.

#### **Single Convention on Narcotic Drugs, 1961**

The convention intends to combat drug usage through coordinated intervention by signatory countries. 171 The convention aims to limit practices like: consumption, distribution, export/import, international trade, possession and Non-medical use.

Single Convention, 1961 and subsequent treaties likewise aimed to combat illicit trade and deter drug dealers. The Single Convention labels substances that fall under the scope of the convention, which includes, but is not limited to, the following: Cocaine, Opiates, morphine, heroin, cannabis. Psychotropic drugs, Synthetic drugs, any medicines with comparable narcotic-like effects.

Countries like Mexico, Colombia, and Pakistan, who face substantial issues in the drug trade, play critical roles in this convention. In recent years, more than 184 countries have joined the treaty. This indicates that these countries officially recognised the treaty's terms and agreed to implement its provisions domestically. Although several governments attempt to circumvent

<sup>15</sup> Implementation Framework Of National Action Plan For Drug Demand Reduction, Ministry of Social Justice and Empowerment, Government of India.

<sup>16</sup> Measures to prevent drug abuse and combat illegal drug trade, Ministry of Home Affairs

the treaty, its basis against harmful pharmaceuticals remains important today.

#### **Convention on Psychotropic Substances, 1971**

The Convention on Psychotropic substances, adopted in 1971, established a global regulatory mechanism for these chemicals. This convention broadened and widened the definition of drug misuse. It also implemented particular limitations on certain synthetic medications based on their potential for abuse and medicinal utility<sup>17</sup>.

#### **United Nations Convention against illicit traffic in narcotic drugs and psychotropic substances, 1988**

Beside 1961 and 1971 International arrangements, drug use continued rising in every part of the planet. Additionally, the global market for illegal medicines has grown into a multibillion-dollar sector. "The United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances", focuses on strengthened law enforcement, primarily against organised crime. This treaty requires governments to impose criminal sanctions for drug supply, manufacture, trafficking, and use. This pact also asked nations to seize the revenues of the crime. It also facilitates international extradition for drug-related offences. India is a signatory of these three United Nation conventions.

#### **International forces for checking drug abuse**

The 1961 Single Convention on Narcotic Drugs established the International Narcotics Control Board (INCB), an independent, more or less judicial specialised organisation. "The Permanent Central Narcotics Board, which was created by the "1925 International Opium Convention", and the "Drug Supervisory Body", which was created by the "1931 Convention for Limiting the Manufacture and Regulation of the Distribution of Narcotic Drugs", merged to form this new organisation. The INCB keeps an eye on and assists states in adhering to international drug control agreements<sup>18</sup>.

INCB is a 13-member board elected by the Economic and Social Council, including five WHO medical, pharmacological, or pharmaceutical experts and ten government representatives. They command public trust because of their competence, impartiality, and independence. The Council protects INCB's technical independence and maintains a secretariat for treaty-related activities. INCB works with UNODC, other international organisations, INTERPOL, and WCO.<sup>19</sup>

INCB is a body established under treaties such as the "Single Convention on Narcotic Drugs of 1961, the Convention on Psychotropic Substances of 1971, and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988." Its duties include assuring sufficient supply of drugs for scientific and medical applications, keeping an eye on how governments regulate the chemicals used in illegal drug manufacture, spotting flaws in national and regional control frameworks, and evaluating the substances used in illegal drug production. INCB administers a system of estimates for narcotic drugs and psychotropic substances, monitors licit activities, promotes measures to prevent drug diversion, analyses information from governments, and maintains dialogue with governments to help them comply with their obligations under international drug control treaties. It can also recommend stopping drug imports or exports from defaulting countries. INCB acts in close cooperation with governments and participates in regional training seminars and programs for drug control administrators.

With financial and technological backing from participating nations, the INCB and UNODC created the Internet-based system known as I2ES to enable the online exchange of both imported and exported authorisations for paperless trade in internationally banned substances. Its purpose is to speed up the process of providing authorisations for narcotic drug and psychotropic substance export and import by competent national authorities (CNA) in importing and exporting countries. I2ES enables CNA to authenticate such authorisations and provide export authorisation endorsements in a secure and real-time manner. In its initial phase, I2ES allows enterprises to communicate information on applications for authorisations to export and import narcotic pharmaceuticals and psychotropic substances, as well as generate authorisations electronically in paper form. I2ES is expected to eventually enable for the electronic generation, issuing, and exchange of authorisations for the export and import of narcotic pharmaceuticals and psychotropic substances.

This is a safe and secure platform for generating and exchanging trade authorisations between trading countries, and it is available to all governments for free. It also ensures full adherence to all terms of the 1961 and 1971 Conventions. The technology assists competent national agencies in reducing data entry errors, allowing for faster and more cost-effective trading.

<sup>17</sup>

<https://www.unodc.org/unodc/en/treaties/psychotropics.html> visited on 22/4/26

<sup>18</sup> Global Issues, Drugs , visited on 24/4/26 <https://www.incb.org/incb/en/about.html>

<sup>19</sup>Report of the International Narcotics Control Board for 2024, retrieved from: <https://www.incb.org/documents/Publications/Annual>

Reports/AR2024/Annual Report/E-INCB-2024-1-ENG.pdf (Last visited on May 31, 2025). 154 Report of the International Narcotics Control Board for 2024, retrieved from: <https://www.incb.org/documents/Publications/Annual> Reports/AR2024/Annual Report/E-INCB-2024-1-ENG.pdf (Last visited on April 310, 2026).

### **INTERNATIONAL CASE LAWS: A BRIEF ANALYSIS**

At international level the menace of drug abuse is no different, with changing borders the form of drug abuse may change but more or less it remains same in general. Some cases are discussed to understand how the courts across the borders are dealing with this menace.

#### **Barrett v. Claycomb<sup>20</sup>**

The ACLU and the ACLU of Eastern Missouri filed a grievance in September 2011 to challenge Linn State's policy of requiring drug testing for all incoming students, even though the educational institution had no justification to suspect any specific learner of consuming illegal substances and many of them would not be involved in risky activities. Since the drug test is considered a probe as part of the Fourth Amendment, any pupil who rejected it would not be allowed to carry out their education at Linn State.

A federal district judge found that a Missouri public college must discontinue its unconstitutional program of mandating all students, regardless of field of study, to submit to suspicion less drug testing.

#### **United States v. Hendrickson<sup>21</sup>**

Decided by the District Court for the Northern District of Iowa, includes the punishment of Kailab Hendrickson, who pleaded guilty to possessing stolen guns under 18 U.S.C. §922(j). The court considered whether Hendrickson's drug addiction could be a mitigating circumstance under 18 U.S.C. § 3553(a). Judge Mark W. Bennett examined the relationship between addiction and guilt, emphasizing that addiction should be regarded a mitigating factor, particularly for young defendants with a history of drug misuse.

When science began to study addictive behaviour in the 1930s, people addicted to drugs were thought to be morally flawed and lacking in willpower. Those views shaped society's responses to drug abuse, treating it as a moral failing rather than a health problem, which led to an emphasis on punitive rather than preventative and therapeutic actions. Today, thanks to science, our views and our responses to drug abuse have changed dramatically."

The opinion comments on the changing understanding of addiction as a public health concern rather than a moral failing, and advocates for a more therapeutic approach to sentencing.

#### **Conclusion:**

Drug abuse has emerged as a persistent global public health crisis, transcending national boundaries and demanding a coordinated legal and policy response. The comparative analysis of national and international frameworks reveals that while substantial progress has been made through legislative instruments,

enforcement mechanisms, and international cooperation, significant gaps continue to exist in addressing the multifaceted nature of drug abuse. International conventions such as the Single Convention on Narcotic Drugs, 1961, the Convention on Psychotropic Substances, 1971, and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988 have laid a strong foundation for global drug control. However, their effectiveness largely depends on domestic implementation.

At the national level, countries have adopted diverse approaches ranging from punitive criminal justice models to health-oriented and rehabilitative strategies. While stringent laws may deter trafficking, over-criminalization often undermines public health objectives by stigmatizing users and limiting access to treatment. In contrast, progressive models emphasizing harm reduction, decriminalization, and rehabilitation demonstrate better health outcomes and social reintegration.

In conclusion, an effective response to drug abuse requires a shift from a purely punitive paradigm to a comprehensive, human rights-based approach that prioritizes health, dignity, and sustainable development, ensuring that legal frameworks serve as instruments of both control and care.

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<sup>20</sup> 319 U.S. 192 (1943)

<sup>21</sup> 26 F. Cas. 295 (C.C.D. Or. 1875)