FORUM: General Assembly Sixth Committee
QUESTION OF: Developing measures to eradicate the manufacturing and trafficking of counterfeit medicines
SUBMITTED BY: Grand Duchy of Luxembourg
CO-SUBMITTERS: Mali, France, World Health Organization, Egypt, United States of America, Germany, Russian Federation, Ecuador, Philippines, Vietnam, Gambia, International Labour Organisation, The Netherlands, Japan, India, China, ECE, Serbia, Kiribati, Barbuda

THE GENERAL ASSEMBLY,

Emphasizing that the definition of counterfeit medicines is "a product that is: deliberately and fraudulently mislabelled with respect to source and/or identity" as defined by the World Health Organization (WHO),

Deeply concerned by the fact that according to the WHO, 1 in 10 medical products in developing countries is substandard or falsified,

Alarmed that India contains 15,000 fake drug factories that produce more than 75% of the world's counterfeit drugs,

Aware that unlicensed medications are deadly, as demonstrated by over 200,000 deaths that are caused by counterfeit antimalarial medication in Africa alone,

Bearing in mind the 30% market share that these products hold, as estimated by the WHO, and the monetary valuation of the counterfeit market being that of 75 Billion USD,

Acknowledging the United Nations Convention against Transnational Organized Crime and the Protocols thereto passed on 29th of September 2003, in accordance with article 38, introduced by resolution 55/25, allowing for the development of frameworks regarding minimization and persecution of the illegal counterfeit drug trade,

Deeply disturbed by the 90% increase in worldwide illegal pharmaceuticals sales over the last decade,

Emphasizing the growing concern of counterfeit medicine as evidenced by the 500% growth in confiscated drugs by the European customs authority,

Concerned by the growing threat of antimicrobial resistance (AMR) caused by said illegal substances,

1. Calls for all member states, and their local governments, to ensure the safety, effectiveness, and quality of medicines by means such as:
    a) affirming that the legislation and regulations to control pharmaceutical products are effectively in place by means such as but not limited to:
        i. enacting specific national legislation and implementing the appropriate infrastructure to avoid circulation of counterfeit medicines
        ii. imposing sanctions on counterfeiters and showing that people involved in the illegal medicine business gets apprehended and prosecuted
        iii. ensuring the confiscation and subsequent destruction of counterfeit medicines
        iv. focusing on strengthening and enforcing relevant laws to abate illegal online drug sales;
    b) regulating the processes of manufacturing, exporting, importing, storing, distributing, supplying and sale of medicines by:
        i. financially incentivizing manufacturers to adhere to the requirements for the production of medicines stated in the Good Manufacturing Practice (GMP) for pharmaceutical products

ii. incentivizing distributors to store and distribute medicines in accordance with good storage and good distribution practices as provided in the WHO guidelines
iii. only allowing individuals to acquire pharmaceutical licenses if they comply with the mentioned guidelines and subsequently

c) establishing strong National Medicines Regulatory Authorities (NMRA) by providing:
i. close cooperation and communication between the NMRA, police and customs in local governments to be able to crack down on the trafficking of illicit drugs
ii. adequate and sustainable human, financial and other resources, which should include training of NMRA personnel and enforcement officers to combat the illegal activities of the counterfeiters
iii. access to the WHO database on counterfeit medicines

d) all financial subsidization will be approved through the WHO and given through the UNDP fund and IFC;

2. Proposes a dedication of the UN's budget and resources devoted to initiating project action plans under the WHO regarding educating individuals about the trade, distribution, negative effects, methods of identifying real medicine (via certifications), and contents of counterfeit medicines by means such as but not limited to:
a) direct marketing by means such as but not limited to:
i. emails specifically chosen from unanimously consenting medical sources with irreplaceable anti-counterfeit validation
ii. online adverts targeting prime consumers of medicine (e.g elderly and diseased)
iii. brochures with consenting official pharmaceutical companies designed to incentivize and educate consumers, ergo, making the medicine more accessible
iv. television and radio announcements in areas most affected by the issue
v. aid from Cell Phone Carrier companies, who might be responsible for sending awareness messages

b) public service announcements by means such as but not limited to:
i. advertisements on undifferentiated marketing platforms such as television, magazines, newspapers, and public billboards
ii. advertisements on differentiated marketing platforms such as emailing advertisements, online adverts, methods of guerrilla marketing correlating with the APENS model, and sales promotions with consenting authorized pharmaceutical companies (authorized in accordance with the local federal organization dedicated to medicinal drug authorization)
iii. advertisements distributed upon all platforms accessible to relevant UN organizations

c) education courses integrated into local education systems through the utilization of monetary incentivization for individual or national education systems willing to host, incorporate and facilitate courses regarding the aforementioned topics;

3. Calls upon countries to increase efforts regarding the location and subsequent confiscation of counterfeit medication by means such as but not limited to:
a) implementing random inspections of factories and the subsequent testing of drugs via The International Criminal Police Organization, or INTERPOL
b) implementing a certification system in which companies and factories will be verified and certified by the WHO based on their results from the aforementioned inspections
c) implementing a system wherein factories that have passed the examination will be able to paste a verification code specific to the type of medicine on their safe product;

4. Encourages victims of counterfeit medicine to seek out aid from the Doctors without Borders NGO;

5. Urges for the creation of an Authentication Program for Medicine Distributors (APMD), which will create an improved verification and certification system by means such as but not limited to:

a) implementing a certification system comprised of the factory certification for products and the verified utilization of the GMP and various other good handling principles
b) used to verify medicine providers and their shipments
c) requiring a penetration pricing model wherein suppliers will be contractually obligated to employ a penetration pricing model for universal medicines;

6. Strongly encourages the creation of a worldwide price limit on basic and universal medicines (e.g. ibuprofen, penicillin, aspirin, etc.) enforced by the WHO in an effort to make authorized medicine more affordable for developing markets, since most of the counterfeit medicine purchases are caused by the high prices of authorized medicine, which companies will need to partake in order to achieve certification by the WHO;

7. Requests the allocation of the UN's annual budget for the purpose of ensuring the minimization of the manufacturing and trafficking of counterfeit medicines by means such as:
    a) providing monetary funds by means such as but not limited to:
        i. financially aiding the programs regarding the education of individuals as to the dangers of counterfeit drugs overseen by the WHO
        ii. financially aiding the implementation of an identification system the factories and manufacturers involved in a medicinal transaction
        iii. financially aiding the legislative improvements mentioned in Clause 1
        iv. offering incentivization for resistant third parties
    b) supervising all fund usage by subsidiaries and NGOs by the WHO by means such as but not limited to:
        i. the mandatory collection, compilation and subsequent analysis of reports of the utilization of provided monetary funds,
        ii. the publishing of an annual report detailing the utilization and effect of funds, supervised by the World Bank and International Finance Corporation;

8. Creating an international database of counterfeit medicines seized to obtain a more official database to make it easier to control the trade worldwide; the data in each report for each case should include:
    a) the state in which the seizure was made
    b) the commercial makers of the drug
    c) active against and dose indicated on the packaging
    d) active against and dose indicated in a laboratory test
    e) the presence of any drugs found at the seizure.