

Interview - Juliet Sorensen

Written by E-International Relations

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E-INTERNATIONAL RELATIONS, FEB 8 2017

Juliet Sorensen is the Harry R. Horrow Professor in International Law with Northwestern Pritzker School of Law's Center for International Human Rights, where her teaching and research interests include health and human rights, international criminal law, and corruption. Professor Sorensen is a founder of the Northwestern Access to Health Project, an interdisciplinary partnership that analyzes access to health in resource limited settings. Professor Sorensen received the Excellence in Teaching Award from the Master's in Public Health Program in 2014 and 2015. From 2003-2010, Professor Sorensen was an Assistant U.S. Attorney in the U.S. Attorney's Office in Chicago, focusing on fraud and public corruption. She was also a maternal and child health volunteer with the U.S. Peace Corps in Morocco from 1995 to 1997. She received her B.A. in politics from Princeton University and her J.D. from Columbia University School of Law. Professor Sorensen was a term member of the Council on Foreign Relations (2000-2005), and was a Chicago Council on Global Affairs "Emerging Leader" (2008-2010). She has taught trial advocacy on behalf of the Department of Justice to prosecutors in South America and West Africa.

Where do you see the most exciting debates happening in your field?

The most exciting debates in the field of health and human rights related to opioids are the vigorous discussions about how best to coordinate disparate approaches to opioids abuse and addiction. The failure of siloed approaches – criminal enforcement without regard to treatment or preventive education, for example- has led, finally, to prosecutor's offices and police stations partnering with community-based social services and safe spaces for counseling, treatment and medication disposal, as well as prevention education and outreach. A related development is the acknowledgment that naloxone, the lifesaving antidote to an opioid overdose, must be widely available and affordable. These debates have resulted in multifaceted initiatives such as DEA 360 and the Lake County Opioid/Heroin Prevention Task Force.

Can you tell us a little about the scope of the opioid epidemic in the US and how it might compare to that of other countries?

In brief, the opioid epidemic is exponentially worse in the United States. The US Center for Disease Control and Prevention reported that in 2015, there were almost 22,000 deaths involving prescription opioids. This is an increase from approximately 19,000 in 2014.¹ A significant portion of the increase was due to deaths involving synthetic opioids other than methadone, which includes fentanyl. By contrast, the UK suffered a total of 3,674 drug-related deaths – from illegal and legal drugs, including but not limited to opioids- in 2015. Canada, which has yet to record national numbers, has recorded much smaller death rates by province, with 529 deaths in Ontario, its most populous province, in 2015. To be sure, these countries have smaller populations than the US, but are have comparable wealth. An illustrative graphic showing the size of the opioid epidemic in the US relative to other countries is here.

What would you say is the most concerning aspect of the opioid epidemic in relation to international law?

There are several aspects of the opioid epidemic that are deeply troubling from an international perspective. The first is that while the U.S. medical establishment is slowly moving away from the facile prescription of opioid painkillers that contributed significantly to the epidemic—prescriptions for OxyContin have fallen nearly 40% since

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2010—pharmaceutical companies are now aggressively marketing opioid painkillers around the world, in places that lack the resources to address abuse and addiction. Marketing practices in large markets such as Brazil and China include training seminars where doctors are urged to overcome “opiophobia”; advertising campaigns that encourage people to seek medical treatment for chronic pain; and patient discounts. An extensive analysis of this phenomenon can be found [here](#).

A second area of potential concern in the international arena is limited access to non-addictive treatments due to intellectual property and trade protections. Even as the major pharmaceutical companies are working to make non-addictive and less physically harmful pain management agents for consumers in the US, other countries could see a rise in opioid addiction if older opioid drugs become more affordable and available. The case of Tramadol – an older drug whose abuse around the world is facilitated because it is highly accessible and cheap – is instructive, as described in this article.

Finally, international law is often significantly impacted by the trends of countries with a major voice in the Security Council, like the United States. However, the United States is navigating an unparalleled struggle with opioids, perhaps because of its singular approach to both pain management and health care finance. Because of America’s problem, the world has turned its attention to opioid abuse, neglecting other problems related to pain and addiction. Restrictions on opioid access in the United States should not automatically translate into restrictions on the appropriate distribution of painkillers in other parts of the world.

There is talk that criminal justice reform could help alleviate the burden of drug abuse in areas most affected by it. What are your thoughts?

I believe that criminal justice reform is necessary for several reasons related to the opioid epidemic: first, incarceration is not an effective way to treat addiction. Addicts need long-term treatment, not a lengthy mandatory sentence with scant resources put into rehabilitation and recovery.

Second, the traffic of illegal opioids such as heroin and fentanyl is, at least in part, directed by hierarchical criminal organizations within and outside the United States. Those at the top of the hierarchy profit the most from the drug trade, but are the most difficult to investigate and prosecute successfully. Jailing the foot soldiers of the organization, while it may take a relatively small amount of drugs of the streets, puts barely a dent in the profits of the organization and allows the leaders to continue to operate with impunity.

Finally, incarceration is expensive. A reduced prison population would free up funding to invest in schools, roads and job training in the areas you describe.

How would you say the opioid epidemic impacts relations between countries, if at all?

The complexity of the opioids epidemic, including the international chain of commerce of both legal and illegal opioids and the addictiveness of opioids, has sparked increased international cooperation to address the crisis. Significantly, in October, the UN Office on Drugs and Crime and the World Health Organization co-hosted a meeting of experts on “Treatment and Care for People with Drug Use Disorders in Contact with the Criminal Justice System: Alternatives to Conviction and Punishment,” bringing together more than 60 health and justice practitioners from 30 countries, as well as civil society and international organizations, to strategize and discuss effective alternatives to incarceration.

The media has recently increased its mention of the “opioid crisis” in America. What, in your opinion, has changed over the past few years to get us to this point?

Simply put, the crisis in the United States has reached a fevered pitch that is impossible to ignore. The nationwide scope of the crisis; the truly alarming overdose statistics; disturbing stories, widely circulated on social media, about children who are victimized by their parents’ inexorable addiction; and even the highly publicized deaths of celebrities such as Philip Seymour Hoffmann and Prince have all contributed to focusing media attention on the opioid epidemic.

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You recently spoke at the Interdisciplinary Opioids Symposium at the Northwestern University Feinberg School of Medicine. Could you tell us a little about the symposium's goals?

The goal of the symposium was to bring together the many stakeholders in the opioid crisis in Illinois – in the fields of science, medicine, law enforcement, social services, and public policy- to strategize and identify best practices and opportunities for collaboration. The epidemic was caused by many factors, so only a coordinated, multi-factorial response to the epidemic will succeed. More on the opioid epidemic in Illinois can be found in this Crain's op-ed, which I wrote.

Are there any new innovations – internationally, in healthcare, or otherwise – that could change the landscape of drug abuse or help control the problem?

Several programs have been implemented and show promise. Statewide Prescription Monitoring Programs, or "PMPs," are electronic databases that allow prescribers to check a patient's prescription history, thereby precluding "forum shopping" for multiple opioids prescriptions. New approaches to pain management include integrative body therapies including physical therapy, yoga, acupuncture, massage, and nutrition. While they are more time consuming and expensive than opioids in the short term, they pay dividends in the long term. Finally, as I mentioned earlier, multifaceted approaches like DEA 360 and multi-stakeholder task forces involving law enforcement, social services, health care providers and community educators are the most efficient, effective means to address the epidemic.

What is the most important advice you could give to young scholars of international law?

The poet John Masefield wrote that "There are few earthly things more beautiful than a university." He did not refer to Gothic architecture. Rather, he admired the university because it was "a place where those who hate ignorance may strive to know, where those who perceive truth may strive to make others see."

Young scholars of international law should strive to be truth seekers. Never be satisfied by what you can learn on the Internet alone. Primary source research is even more valuable in an era in which secondary sources are so readily available. Never let fear – of a distant land, of a security situation, of a selective publication, of an unanswered question, of a seemingly intractable problem- interfere with your quest for the truth.

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This interview was conducted by Atrin Toussi. Atrin is an Associate Features Editor at E-IR.