We would like to thank the VNOGC for the opportunity to share our opinions with the committee. My name is Lauren Deluca and I am the Founding President and Executive Director of Chronic Illness Advocacy & Awareness Group. A United States based non-profit organization working with the community and lawmakers to educate them on the impact public health changes are having on the healthcare consumer, especially as it relates to individuals in need of palliative care and those who require opioid analgesics.

As such, our Organization has been monitoring the state of the opioid crisis in America, as well as the legislative changes being enacted to mitigate its impact on individuals suffering with addiction.

One main strategy to address the epidemic has been to fund clinical trials to learn about the social and biological factors that contribute to pain in America. Two such initiatives include the National Pain Strategy and the HEAL Initiative. These ambitious programs are unfortunately falling egregiously short of their goals. In fact, we have seen a great exacerbation of both the illicit drug overdoses as well as growing disparities in pain care, including increases in pain related suicides, in America since their implementation.

In particular, those with chronic illnesses, diseases and in need of palliative care, are enduring serious human right abuses under the guidance and funding of these programs. Studies are being conducted to promotes ideals for “pain acceptance” and “self-management” of serious diseases in lieu of proper medical management.

Often these studies lack nuance and appear to engage in cherry picking data sets that are used to support the author's eventual conclusion, which often ends up directly aligned with the goals for outlined in the National Pain Strategy itself, including self-management, alternative therapies and barring access to standard mu agonist analgesics.

The political influence over the state of pain care in America can be seen impacting the decision's surround access and supply chains of opioid analgesics in other countries due to well-planned and well-funded propaganda campaigns and personal or business interests. One such powerful example is the World Health Guidance documents on “Ensuring Balance in National Policies on Controlled Substances and Guidelines on Pharmacological Treatment of Persisting Pain in Children with Mental Illnesses” published in July 2019, which was ultimately withdrawn due to political pressure put on by two members of Congress citing unproven and politically charged allegations.

It is well known approximately 80% of the world lacks meaningful access to necessary opioid medications for their citizens. Additionally, the social and political decisions made by the United States have lasting implications on not just America, but on the global stage. Given the direction of pain care in America it is of vital importance the Member States give close consideration to adopting any recommendations being crafted and recommended by those in the United States.
In order to accomplish the goals set forth by UNGASS, the VNGOC and CND, including a reduction in global disability and healthcare disparities, we must ensure that science-based policy is leading the decision-making process of our elected officials. Not their political pursuits or personal/business self-interests.

And, that those appointed to positions of power and influence in the arena of public health have the best interest of the global citizenry in mind and I believe we, as a body, can accomplish this. I thank you for your time.