

III. Analysis of the world situation

A. Africa

Major developments

197. Illicit cannabis cultivation continues to be widespread in many countries in Africa, partly as a result of the low prices offered for traditional African agricultural products. Increasing cannabis cultivation has been reported in countries or areas affected by civil war or armed conflict. Law enforcement authorities have expressed concern that the trends in Europe and North America towards liberalizing or even legalizing the non-medical use of cannabis may lead to further increases in cannabis cultivation in Africa. The abuse of psychotropic substances continues to be a matter of serious concern across Africa, especially in the central, southern and western parts of the region. There is concern that the abuse of heroin and opiates may increase in East Africa since it is a major transit area. In the southern part of Africa, where the abuse of and trafficking in methaqualone have remained widespread, heroin abuse and trafficking have become more significant. In many countries in North Africa, there have been reports of the abuse of stimulants, as well as heroin and cocaine, albeit at low levels.

198. There is concern that drug abuse in Africa will increase further because of the prevailing socio-economic conditions: in many parts of the region, the effects of poverty, conflict and migration have been exacerbated by HIV/AIDS and the high proportion of children and adolescents in the population, many of whom have no families to protect them and no access to education or employment.

199. In the light of the threat that the drug problem poses to Africa's development, the Board encourages Governments of countries in the region to strive to improve the link between drug control policies and strategies and regional and national development programmes, notably in the New Partnership for Africa's Development (NEPAD)⁴⁴ and the International Partnership against AIDS in Africa (IPAA).

200. On 9 July 2002, the Organization of African Unity (OAU) was officially transformed into the African Union, with the aim of promoting sustainable development, reducing poverty and resolving conflicts and political instability and establishing Africa-wide

political and economic infrastructure. It is hoped that that development may herald a new era for Africa.

Treaty adherence

201. In January 2002, Eritrea acceded to the 1961 Convention as amended by the 1972 Protocol, to the 1971 Convention and to the 1988 Convention. In April 2002, Morocco ratified the 1972 Protocol amending the 1961 Convention. In addition, Rwanda acceded to the 1988 Convention in May 2002.

202. Angola, the Congo and Equatorial Guinea are not yet parties to any of the three main international drug control treaties. In addition, Algeria and Chad have not yet acceded to the 1972 Protocol amending the 1961 Convention. Liberia is not yet a party to the 1971 Convention, and the Democratic Republic of the Congo, Gabon, Liberia, Namibia and Somalia are not yet parties to the 1988 Convention.

203. The Board hopes that Angola, which enacted two drug control laws in 1999 to allow it to ratify the three international drug control treaties, will soon deposit its instruments of accession with the Secretary-General.

Regional cooperation

204. The government ministers attending the first OAU ministerial meeting on drug control, held in Yamoussoukro, Côte d'Ivoire, in May 2002, reviewed the implementation of the Declaration and Plan of Action on Drug Abuse and Illicit Trafficking Control in Africa, covering the period 1997-2001, which had been adopted in Yaoundé, Cameroon, in 1996. Subsequently, the ministers adopted a new OAU plan of action for drug control, covering the period 2002-2006. The plan of action highlights the need to integrate drug control elements into poverty alleviation, alternative development and other social and health programmes. By integrating and mainstreaming drug and crime control elements into the renewed African development process, the new plan of action will tie in with other recent major initiatives aimed at poverty reduction and sustainable development in Africa, in particular NEPAD and IPAA.

205. The Council of Ministers of the Eastern and Southern Africa Anti-Money Laundering Group (ESAAMLG),⁴⁵ at its second meeting held in Mbabane, Swaziland, in August 2002, decided, inter alia, to consolidate the national laws against money-laundering of the ESAAMLG member States into a comprehensive subregional legal regime.

206. The East African Community protocol on combating illicit drug trafficking in East Africa has contributed to enhanced cooperation in criminal and intelligence matters among the drug control units of Kenya, Uganda and the United Republic of Tanzania.

207. At the second meeting of the heads of national drug regulatory authorities from countries in East Africa, held in Nairobi, Kenya, in June 2002, effective policies for the control of licit drugs were reviewed. The Board notes the progress made in regulatory control in some countries in East Africa and calls on Governments of countries in other subregions of Africa to consider similar initiatives. Progress was also made in the development of the East Africa Drug Information System, to be used for collecting reliable and comparable drug abuse data and assessing the magnitude and patterns of drug abuse throughout East Africa, with a view to developing demand reduction programmes in the subregion.

208. In August 2002, a Regional Strategic Framework Conference was held in Pretoria, South Africa, for the purpose of helping to establish priorities in drug and crime control for the member States of the Southern African Development Community (SADC) and to link them with the goals of the major donors for that subregion.

209. The Board notes with appreciation that the drug issue continues to receive the highest political support from the Economic Community of West African States. The Board also notes that steps against corruption, money-laundering and organized crime were taken by the Authority of Heads of State and Government of the Economic Community of West African States at its twenty-fifth session, held in Dakar, Senegal, in December 2001.

210. The West African Joint Operations initiative, launched by the National Drug Law Enforcement Agency (NDLEA) of Nigeria in 2000, continues to promote closer cooperation between law enforcement authorities of West African countries through

networking, with a view to conducting joint operations against drug traffickers and other criminals.

211. The Board appreciates the steps being taken by the Government of Nigeria to upgrade the NDLEA training academy in Jos to a regional institute that will offer training in advanced international law enforcement methods and techniques.

212. In view of the increasing diversion of chemicals in Africa,⁴⁶ the Board, in cooperation with the Office for Drug Control and Crime Prevention⁴⁷ of the Secretariat, convened in Pretoria, South Africa, in July 2002 the first technical round-table meeting on prevention of the diversion of chemicals. Representatives of the regulatory and law enforcement authorities of African countries being targeted by traffickers for the diversion of chemicals, as well as the major source countries of chemicals, participated in the meeting. The meeting resulted in the establishment of a network for sharing, among the African countries concerned, the relevant source countries and the Board, information on seizures and stopped shipments of chemicals.

213. The Governments of several countries in Africa have concluded bilateral cooperation agreements with countries in the region and elsewhere. The Board notes that the Government of South Africa is currently negotiating extradition and/or mutual legal assistance treaties with Algeria, France, Nigeria, the United Arab Emirates and several countries in Latin America.

National legislation, policy and action

214. The Board has noted with appreciation that in Egypt, the parliament approved legislation against money-laundering in May 2002. The Board also notes that a national conference on demand reduction held in Cairo in April 2002 launched the planning and preparation process for a demand reduction plan for Egypt by 2003, pursuant to the recommendations of the twentieth special session of the General Assembly, devoted to countering the world drug problem together. Furthermore, in view of the increasing drug abuse, especially among marginalized young people, the Government of Egypt has initiated a number of important steps to strengthen treatment services for drug abusers.

215. In Mauritius, the Dangerous Drugs Act, incorporating comprehensive measures for precursor

control into existing national drug control legislation, was adopted in December 2001.

216. In December 2001, a new law against money-laundering entered into force in South Africa. The law provides for the establishment of a financial intelligence centre to coordinate policy and efforts to counter money-laundering activities and to act as a repository of information. The Board notes with appreciation that the fight against corruption is a top priority of the Government of South Africa. Furthermore, in June 2002, the Government of South Africa launched a pilot campaign to increase awareness, especially among youth at risk and their parents or guardians, of the dangers of drug abuse. The pilot campaign, if successful, will be extended throughout the country and may also be used as a model for similar programmes in other African countries.

217. The Government of the United Republic of Tanzania approved the national drug control master plan in March 2002. The Board hopes that the international community will assist the authorities in that country in implementing the master plan.

218. In Uganda, new drug control legislation has been approved by the cabinet and will be presented to the parliament in 2002. The new legislation is aimed at harmonizing national laws with the provisions of the three main international drug control treaties, in addition to targeting other drug-related problems such as crime and money-laundering.

219. In Zambia, a new law against money-laundering was passed by the parliament in November 2001. Responsibility for implementing the law is vested in the Drug Enforcement Commission of Zambia.

Cultivation, production, manufacture, trafficking and abuse

Narcotic drugs

220. In the view of law enforcement authorities in Africa, the abuse of and trafficking in cannabis are the main drug problems African countries are faced with. At the Twelfth Meeting of Heads of National Drug Law Enforcement Agencies, Africa, held in Nairobi in September 2002, representatives emphasized the threat posed by the abuse of and trafficking in cannabis to security, health and socio-economic development in African countries, noting that the

tetrahydrocannabinol (THC) content of cannabis seized in the region had increased significantly, from 2-3 per cent in the 1960s to over 17 per cent. It was stated that the reclassification of cannabis by the Government of the United Kingdom would undermine the efforts of Governments of African countries to counter illicit cannabis cultivation, trafficking and abuse. That action, it was held, had sent the wrong message and could lead to increased cultivation of cannabis destined for the United Kingdom and other European countries.

221. Africa continues to be a major source of the cannabis found on illicit markets in the region or smuggled out of the region, mainly into Europe. In many African countries, cannabis cultivation is increasing, as cannabis is often substituted for licit agricultural products. Approximately one fourth of the seizures of cannabis herb and resin that take place in the world occur in Africa. Almost one fourth of the cannabis herb seized worldwide was seized in the southern part of Africa, mainly in South Africa. Large-scale illicit cultivation of cannabis in Morocco remains a prime concern. Morocco continues to be the source of 60-70 per cent of the cannabis resin seized in Europe. Cannabis cultivation is also spreading to the western and southern parts of Morocco. The routes used for smuggling Moroccan cannabis lead mainly through Spain (and, to a lesser degree, through Portugal and France) to various other European countries. There are also reports of illicit consignments of cannabis being transported through and to Algeria and Tunisia. Cannabis herb is also grown in Egypt, mainly on the Sinai peninsula. Seizures of cannabis herb in Egypt rose from 7 tons in 1996 to over 50 tons in 2001. In several countries in sub-Saharan Africa, seizures of cannabis have increased significantly in recent years and law enforcement operations have often resulted in the destruction of large cannabis cultivation sites.

222. The southern and western parts of Africa are used as landing zones for cocaine consignments transported from South America, mainly through Brazil and Venezuela. Cape Verde and Senegal, because of their geographical locations and their air and sea links with Brazil, are used to trans-ship cocaine consignments to Europe and North America. Other routes used lead through Nigeria and South Africa. In almost all countries in the southern and western parts of Africa, in particular in Nigeria and South Africa, cocaine abuse is on the rise. The latest available seizure reports show that over 20 per cent of all cocaine seizures in

Africa took place in South Africa and 12 per cent took place in Nigeria. Cocaine trafficking in Africa has shifted from Nigeria to South Africa, possibly as a result of the migration of West African criminal organizations to South Africa in the mid-1990s. Those organizations currently appear to control about 80 per cent of the illicit trade in cocaine in South Africa. There has also been a shift in South Africa from dealing in cocaine to dealing in crack, which has become particularly popular among marginalized and vulnerable segments of society.

223. There are no indications that opium poppy is cultivated in any part of Africa except Egypt, where limited illicit opium poppy cultivation continues on the Sinai peninsula. While the total amount of heroin seized in the region has remained small, African countries, in particular Nigeria and South Africa, continue to be used as transit areas for heroin trafficking. Criminal networks from West Africa continue to control the heroin traffic in that subregion and beyond. Heroin from South-East Asia and South-West Asia is smuggled by couriers on commercial flights, who take routes that pass through African countries and lead to Europe and North America. Postal and express courier services are also used. In Africa, the abuse of heroin is still limited mainly to large urban areas. Increasing heroin abuse has been reported in Egypt and in most countries in the eastern and southern parts of Africa bordering the Indian Ocean. Increases in heroin abuse have also been reported in several countries in the western part of Africa. South Africa has seen a significant increase in heroin abuse and trafficking in the past decade, even though the quantities involved are still relatively small. The spread of intravenous drug abuse is a matter of concern, especially considering the high prevalence of HIV/AIDS in many countries.

Psychotropic substances

224. In Central and West Africa, trafficking in and abuse of ephedrine, amphetamines and benzodiazepines (mainly diazepam) are widespread. Information on the origin of the substances being trafficked continues to be scarce. There is evidence that depressants are increasingly being diverted from licit pharmaceutical distribution channels in West Africa. Illicit pharmaceutical distribution channels in urban and rural areas, inadequate health-care facilities and low income, together with the fact that self-medication

is practised by a large portion of the population in Central Africa and West Africa, all exacerbate the situation with regard to illicit trafficking in pharmaceuticals. In North Africa, there have been only a few cases involving illicit manufacture of synthetic drugs, all of those cases being in Egypt, where clandestine laboratories continue to manufacture amphetamine-type stimulants (Maxiton Forte) for domestic abuse, albeit on a small scale. In the Libyan Arab Jamahiriya, the abuse of benzodiazepines (flunitrazepam) diverted from licit trade and smuggled out of Malta has been reported by government agencies to be a growing problem. There are concerns that trafficking in amphetamines that have been illicitly manufactured, mainly in Eastern Europe, and the diversion of such substances from licit distribution channels may soon be complemented by the illicit manufacture of those substances in North Africa. Amphetamine and methamphetamine tablets are smuggled out of West Africa, via the Sudan, and into Saudi Arabia and other Arab countries in the Persian Gulf area. Several countries throughout Africa have reported increasing abuse of amphetamines.

225. Methaqualone (Mandrax) is the second most commonly abused illicit drug in South Africa; it is frequently smoked together with cannabis. The bulk of the methaqualone continues to be smuggled into that country out of China and India. In addition, methaqualone has been clandestinely manufactured in South Africa for more than a decade. The number of clandestine laboratories seized by law enforcement authorities in the country has been increasing. In two of the biggest chemical seizures ever, authorities in South Africa seized in July 2002 manufacturing equipment and more than 100 tons of chemicals (mainly anthranilic acid and acetic anhydride) hidden in several warehouses near Johannesburg. The chemicals, which had been smuggled into South Africa out of India, would have been enough to manufacture 90 million tablets of methaqualone. Those seizures enabled the authorities in South Africa to dismantle a major methaqualone manufacturing laboratory before it could start operating. Methaqualone remains the only substance reported to be illicitly manufactured in a few countries in East Africa. In Kenya, Mozambique and the United Republic of Tanzania, a number of laboratories engaged in the illicit manufacture of methaqualone have been dismantled in recent years; however, those laboratories were being used only to

make tablets of the substance from the raw material, which originated in India.

226. In South Africa, the range of detected illegal laboratories has broadened in recent years to include facilities for manufacturing methamphetamine, crack cocaine and amphetamine-type stimulants, including MDMA (Ecstasy).

227. The abuse of MDMA (Ecstasy) is spreading in the southern part of Africa. That is particularly true for South Africa, where the abuse of that substance has increased significantly in the white community within the last few years. While the MDMA (Ecstasy) found in South Africa is predominantly smuggled out of European countries, mainly the Netherlands and the United Kingdom, to satisfy the demand for that substance in the club scene, there is also evidence that the substance is illicitly manufactured locally. The role of South Africa as a trans-shipment point was confirmed in May 2002, when 36,000 tablets of MDMA (Ecstasy) were seized in a shipment from that country en route to New Zealand.

Other issues

228. In countries in the central and southern parts of Africa, one development has been a cause of concern: the abuse of cannabis herb mixed with *Datura stramonium*. The leaves and seeds of *Datura stramonium* contain the alkaloids scopolamine and hyoscyamine, substances not under international control that complement the effect of cannabis. The abuse of datura is allegedly spreading fast throughout Central Africa, having started in Chad and the Congo, as well as in the Democratic Republic of the Congo, where it grows wild and has recently been cultivated in an organized manner.

Missions

229. The Board has reviewed action taken by the Government of Cameroon pursuant to recommendations made by the Board after its mission to that country in April 1999. The Government has improved its cooperation with the Board, and higher priority is now being accorded to drug control activities, as demonstrated by increased funding of the inter-ministerial drug control committee and operational activities, as well as initiatives to prevent the illicit cultivation of cannabis.

230. While the authorities of Cameroon have resumed the submission of some reports to the Board, no annual report on narcotic drugs has been received since the mission of the Board visited Cameroon. The reports submitted were delayed and did not contain all of the required information.

231. The Board also continues to be concerned that, in Cameroon, pharmaceutical products containing internationally controlled substances are still being distributed through illicit drug distribution channels such as street markets. The Board therefore welcomes the initiative of the Government in adopting a national plan of action to stop illicit trade in psychotropic substances. The Board looks forward to the effective implementation of the plan of action. The Board further underlines the importance of identifying the origin of those substances so that effective countermeasures can be developed to prevent their diversion.

232. In July 2002, the Board sent a mission to Kenya to assess the progress made by the Government in implementing the recommendations made by the Board pursuant to its 1999 mission to that country. The Board found that, while certain authorities had taken steps to implement its recommendations, more decisive action was required by the Government to meet its national and international obligations.

233. In Kenya, the police, customs authorities and Attorney-General's office are working together effectively to combat drug trafficking, having made significant seizures of smuggled narcotic drugs at the country's ports of entry. The National Agency for the Campaign against Drug Abuse and the Ministry of Education have introduced important initiatives throughout Kenya to prevent drug abuse in the general population and to raise awareness, especially among students, of the dangers posed by drug abuse.

234. The Board regrets, however, that, three years after having been drafted, the national drug control master plan, which provides for better coordination of national drug control efforts, has still not been approved by the parliament of Kenya. Furthermore, regulations to enhance certain provisions of the drug law have yet to be made. That is particularly important with regard to the control of licit activities related to narcotic drugs, psychotropic substances and chemicals, to which the Government should accord higher priority, because the

lack of such control also affects neighbouring countries.

235. The Government of Namibia invited the Board to send a mission to that country in July 2002. The Board appreciates the commitment of the Government to international drug control. Since 1990, when it gained independence, Namibia has acceded to the 1961 Convention and the 1971 Convention. The Board urges Namibia to become a party to the 1988 Convention as soon as possible. The Board also urges the Government to pass the Medicines and Related Substances Control Bill and the Drug Control Bill without further delay so that a number of psychotropic substances and chemicals that are currently not controlled in Namibia can be controlled in conformity with the international drug control treaties.

236. No illicit manufacture of narcotic drugs and psychotropic substances takes place in Namibia and the climatic conditions are not favourable for growing cannabis. Illicit drugs seized in Namibia were found to have been smuggled into the country, mostly out of South Africa. While cannabis and methaqualone (Mandrax) continue to be the main drugs of abuse in Namibia, a small illicit market for cocaine and heroin has developed in that country in recent years, primarily as a result of spillover from transit trafficking, as consignments of those substances are transported from Angola through Namibia to South Africa.

237. Cooperation among the different authorities responsible for drug control and the treatment and rehabilitation of drug abusers in Namibia has markedly improved, as reflected in the progress made in the formulation of the national drug control master plan for the period 2002-2006, which is being developed along the lines of the SADC Protocol on Combating Illicit Drugs; the master plan is expected to be finalized by the end of 2002.

238. In June 2002, the Board sent a mission to Tunisia. The Board was informed that drug abuse was not considered to be a problem in Tunisia. Drug seizures only involve cannabis and almost all of the drug consignments seized involved insignificant amounts and were being sent from Morocco and Algeria to the Libyan Arab Jamahiriya and, to a small extent, countries in Europe. No illicit drug production or manufacture has ever been reported in Tunisia.

239. The Government of Tunisia has combined drug abuse prevention and treatment activities with rigorous supply reduction measures and has been successful in combating drug trafficking, which was deemed to have become prevalent in the 1980s. Law enforcement in the country is very strict and is based on the principle of zero tolerance with regard to drug trafficking and abuse.

240. The legal framework for drug control in Tunisia is comprehensive and in compliance with the provisions of the 1961 Convention and the 1971 Convention. Also, the authorities of Tunisia have been cooperating with the Board with regard to the implementation of the provisions of those conventions. Tunisia has only one authorized importer of narcotic drugs and psychotropic substances, which makes it easier for the competent authorities to control trade in those substances. The Board notes with appreciation the role played by Tunisia in training health inspectors in Africa. The Board also notes that the authorities of Tunisia have already identified free trade zones as a potential problem in the control of chemicals and are working on preventive measures.

241. A mission of the Board visited Zimbabwe in December 2001. The Board notes the clear commitment of the Government to drug control, reflected in its adoption of the national drug control master plan shortly before the mission was undertaken. The Board trusts that immediate actions are being taken to implement the master plan, including the establishment of institutionalized coordination mechanisms and a nationwide rapid assessment of the drug abuse situation, with a view to introducing appropriate countermeasures.

242. The drug laws that currently exist in Zimbabwe are adequate for applying controls in line with the international drug control treaties. Sufficient controls are being exercised over licit narcotic drugs and psychotropic substances while appropriate controls have to be extended to chemicals in order to prevent them from being diverted for use in illicit drug manufacture.

243. The Board hopes that the authorities of Zimbabwe will facilitate the availability of drugs for medical purposes, particularly for pain treatment. The Board calls on the appropriate authorities to raise the awareness of medical practitioners with regard to that requirement.