illicit trafficking in narcotic drugs and psychotropic substances and encourages the Government to strengthen the mechanisms for coordination among drug law enforcement agencies. The licit trade in and distribution of narcotic drugs, psychotropic substances and precursors in the country has been found to be well regulated. While in Kazakhstan, as in other countries in Central Asia, drug abuse has increased, the Government of Kazakhstan has taken significant measures to upgrade drug abuse treatment and rehabilitation services in the country.

472. Due to the geographical position of Kazakhstan (on one of the key routes for smuggling opiates from Afghanistan into Europe) and because of the fact that Kazakhstan is a manufacturer of acetic anhydride (the key chemical used in the illicit manufacture of heroin), the Board invites the Government to consider participating in Operation Topaz, in order to tighten further the control over that substance.

473. In January 2002, the Board sent a mission to Tajikistan. The Board notes with satisfaction the commitment of the authorities to meeting their obligations under the international drug control treaties and undertaking a comprehensive set of measures to counter drug trafficking. The Board appreciates the fact that the authorities of Tajikistan have been cooperating closely with the authorities of the Russian Federation in the area of border control, particularly in dealing with the problem of trafficking in opiates from Afghanistan. Considering the increasing amount of illicit drugs being smuggled through Tajikistan and the increasing number of nationals of Tajikistan involved in those drug trafficking operations, the country may well become a target for money-laundering. The Board encourages the Government to enact legislation against money-laundering as soon as possible. As the share of heroin seizures in total volume of drugs seized is reported to be increasing, the Board welcomes the draft regulation on precursor control prepared by the Government and urges the Government to adopt the regulation, to tighten controls over chemicals used for illicit heroin manufacture and to participate in Operation Topaz with a view to enhancing control of the movement of acetic anhydride in West Asia.

474. In January 2002, the Board sent a mission to Turkmenistan to evaluate the progress made in the country in developing effective drug control strategies since its previous mission in 1997. While measures to prevent the diversion of narcotic drugs and psychotropic substances seem to be in place in Turkmenistan, the Board calls on the Government to improve its data collection and reporting mechanisms and to share its data with international organizations and other Governments. The Board notes with concern that the authorities have not reported any seizures of opiates and chemicals since 2000, although significant quantities had been seized in previous years.

475. Current legislation in Turkmenistan, which dates from the time of the former Union of Soviet Socialist Republics, imposes many restrictions on the health sector. The Board notes that the existing procedures for importing medicines are unnecessarily complex and stresses the importance of ensuring adequate availability of essential drugs, especially in the context of the State Health Programme of the President of Turkmenistan.

476. The Board encourages the Government of Turkmenistan to expedite the finalization of the law on narcotic drugs and psychotropic substances and the health law. Furthermore, given the fact that it is becoming increasingly integrated into the international economy, Turkmenistan is vulnerable to money-laundering activities. The Board urges the Government to enact legislation against money-laundering as soon as possible. Legislation on precursors has not yet been enacted in Turkmenistan. In view of its proximity to Afghanistan and the risk of diversion of acetic anhydride, the Board urges the Government of Turkmenistan to formally tighten the controls over precursor chemicals, adopt relevant legislation without further delay and participate in Operation Topaz.

D. Europe

Major developments

477. In Europe, there continues to be considerable illicit manufacture of synthetic drugs, particularly MDMA (Ecstasy), which are then smuggled not only within the region, but also into other regions throughout the world, predominantly North America and Oceania and, to a lesser extent, Africa and parts of Asia. Although there is no estimate of the volume of illicit manufacture of synthetic drugs, large seizures of such drugs indicate that there is a constant supply and high availability. The Board believes that further
international cooperation between law enforcement authorities is necessary to target large-scale trafficking in MDMA (Ecstasy) worldwide. At the same time, Governments should enhance their drug abuse prevention activities and provide potential abusers of synthetic drugs with carefully selected information on the harmful pharmacological effects of such drugs; for example, recent research indicates that the abuse of MDMA (Ecstasy) may cause irreversible brain damage.

478. In Europe, the problem of drug abuse appears to show no sign of abating. However, because comparable national surveys have been carried out regularly in only a few countries in Europe, it is difficult to monitor regional developments in drug abuse over time. Noting with appreciation the work in that area by the European Monitoring Centre for Drugs and Drug Addiction, the Board invites all Governments to carry out more regularly comparable surveys in line with those carried out by the European Monitoring Centre, with a view to enabling them to ascertain whether their policies are having the desired impact.

479. The increase in illicit opium poppy cultivation and heroin manufacture in Afghanistan is likely to have an adverse effect on Europe, which is one of the main destinations for heroin from South-West Asia. The Board therefore calls on the Governments of European countries to continue to support the authorities in Afghanistan in their efforts to deal with that problem.

480. During the 1990s, the south-eastern part of Europe was mainly used as a transit area for illicit consignments of opiates; however, there are indications that illicit drugs are increasingly being manufactured in that part of Europe, as evidenced by the detection of clandestine heroin laboratories and cases involving the diversion of acetic anhydride. There has also been growing abuse of opiates.

481. In the Russian Federation, major illicit markets for opiates and cannabis from Afghanistan and countries in Central Asia have developed; in addition, the country appears to have become part of an alternative trafficking route leading to Central Europe. In addition, the drug control authorities of the Russian Federation are confronted with small-scale illicit manufacture of narcotic drugs, mainly injectable opiates, which is widespread in the country. The number of detected laboratories for the illicit manufacture of such drugs, however, has been on the decline in recent years, falling from 816 in 2000 to 740 in 2001. The accompanying increased incidence of drug abuse suggests that drug abusers may be turning to opiates from Afghanistan and countries in Central Asia.

482. The Balkan route, which is used for smuggling drugs through Bulgaria, is supplemented by a route going to and through the Russian Federation, as evidenced by the sharp increase in seizures of illicit drugs in the Russian Federation: Russian law enforcement agencies confiscated over 75 tons of narcotic drugs, including 3.5 tons of heroin, in 2001. On several occasions, the Bulgarian police have succeeded in disrupting operations involving trafficking in not only heroin but also cocaine and amphetamine-type stimulants. Albania and some countries that were formerly republics of Yugoslavia will remain vulnerable to transit trafficking, particularly as infrastructure such as road networks develops.

**Treaty adherence**

483. Of the 44 States in Europe, 43 are parties to the 1961 Convention, 42 are parties to the 1971 Convention and 41 States and the European Community are parties to the 1988 Convention. With the exception of Albania, which has not yet acceded to the 1971 Convention, all of the States in Eastern Europe and the CIS member States are parties to all of the international drug control treaties.

484. Andorra is the only State in Europe that is not a party to the 1961 Convention or to the 1971 Convention.

485. The Board encourages the Holy See, Liechtenstein and Switzerland to become parties to the 1988 Convention, which is the basis for effectively addressing illicit trafficking in narcotic drugs and psychotropic substances and other activities related to illicit drugs.

**Regional cooperation**

486. In February 2002, the Council of the European Union adopted decision 2002/188/JHA, in which it requested States members of the European Union to submit paramethoxymethylamphetamine (PMMA) to the same control measures and criminal penalties as those applied to the psychotropic substances listed in Schedule I and Schedule II of the 1971 Convention.
Since that substance poses a health risk and has already been associated with some deaths in the European Union, the Board encourages any member State of the European Union that holds the Presidency of the European Council, as a State party to the 1971 Convention, to notify the Secretary-General in accordance with article 2 of that convention. The Board would also encourage the sending, by the State holding the Presidency of the European Council, of such notifications on all future scheduling decisions of the Council of the European Union.

487. Countries in Europe continue to cooperate with each other on issues related to drug control within the framework of the Pompidou Group of the Council of Europe. The Board notes that, in January 2002, the Parliamentary Assembly of the Council of Europe rejected a report that suggested that Governments of European countries should adopt policies that might not be in line with the international drug control treaties.

488. The Board and the Pompidou Group jointly organized the Conference on Control of Narcotic Drugs and Psychotropic Substances in Europe in Strasbourg, France, in October 2002. The Conference requested all Governments to promptly report important seizures of diverted pharmaceutical products containing substances under international control, as well as new trends in the abuse of such products, to the competent international bodies and, if appropriate, to the other Governments concerned. The Conference requested the Pompidou Group to convene a meeting of experts on the monitoring of licit use of narcotic drugs and psychotropic substances and the detection of their diversion or inappropriate use. To deal with the problem posed by new synthetic drugs, the Conference stressed the value of an early warning system and invited Governments to examine emergency scheduling mechanisms and/or generic scheduling mechanisms as possible ways of strengthening present control systems. The Conference noted the importance of setting minimal standards, in the form of guidelines, for substitution treatment for patients addicted to opiates. With respect to the availability of controlled substances for the treatment of pain, the Conference recommended that authorities of countries with low levels of licit opioid consumption review their opioid control regulations. The Conference also recommended that Governments examine their medical care reimbursement systems to ensure that those systems are not indirectly restricting patients access to pain treatment.

489. In March 2002, several Western European States, as well as Australia, Canada and the United States, completed an international operation against trafficking in MDMA (Ecstasy). The operation, which focused on trafficking by air travel passengers, resulted in the seizure of 335,000 tablets of MDMA (Ecstasy). There is a need for Governments in Europe and in other regions to cooperate more closely in their efforts to counter trafficking in synthetic drugs.

490. The drug control authorities of the Czech Republic, Hungary, Poland, Slovakia and Slovenia continued their cooperation within the framework of a 1995 memorandum of understanding, proposing projects in the areas of harm reduction and enhancement of the analysis of criminal intelligence. In 2001, special attention was given to the development of organizational and operational capacities of drug law enforcement at the subregional level.

491. The Board welcomes the agreement signed in July 2002 between the Office for Drug Control and Crime Prevention of the Secretariat and the European Monitoring Centre for Drugs and Drug Addiction. Under the agreement, their cooperation in monitoring international drug trends would be expanded and there would be increased sharing of information on best practices and most effective strategies and increased use of laboratory results to support early warning systems monitoring the emergence and spread of the abuse of new drugs.

492. Because of an increase in trafficking, through the Baltic States, in precursor chemicals, including acetic anhydride and ephedrine, a new Phare project is being developed to harmonize the legislation of European Union member States and Baltic States on the control of precursors. Cooperation, information exchange and legal aspects of effective precursor control are being addressed as part of that multinational project, which was initiated by the European Commission and Eurocustoms.

493. In June and July 2002, 13 countries participated in Operation Containment, which was coordinated by the Southeast European Cooperative Initiative (SECI) regional centre in Bucharest; the operation was aimed at reducing the availability of heroin along the Balkan route. As a result of intelligence-sharing and joint
interdiction efforts at land, sea and air border checkpoints, substantial quantities of narcotic drugs, psychotropic substances and precursor chemicals were seized. The Board encourages the Governments of those countries to continue to enhance cooperation with each other, focusing on heroin trafficking along the Balkan route, and urges them to improve existing mechanisms, such as the ones employed by SECI, for monitoring and coordinating bilateral and multilateral technical assistance activities.

494. The Board notes that representatives of Governments or local authorities of countries throughout Western Europe have been meeting in conferences to discuss their policy approaches towards trafficking in and possession and abuse of cannabis, with a view to harmonizing policies. The Board trusts that States will continue to meet their obligations under the international drug control treaties.

National legislation, policy and action

495. In June 2002, the Government of Germany laid the cornerstone for a new action plan on drugs and addiction. The Board welcomes the fact that more attention will be devoted to the estimated 1.5 million abusers of prescription drugs in Germany, two thirds of whom are women. The Board encourages other Governments to also deal with that issue in their countries.

496. A report on the comparative merits of treating addicts with heroin and/or methadone was published in the Netherlands in May 2002. The Board notes the evaluation of the heroin maintenance programme undertaken by the Government of the Netherlands, which highlights both advantages and disadvantages of such programmes. The Board wishes to reiterate its reservations concerning the medical prescription of heroin.

497. In January 2002, the Government of the Netherlands decided to make cannabis herb available in pharmacies as a prescription drug in the form of “magistral” preparations (made by the pharmacists themselves) and “extemporaneous” preparations (made by the pharmacist for each individual patient). The Board is concerned about the use of cannabis in such forms being authorized before research into the medical properties of that drug is finalized.

498. The Board, noting the response of the Government of the United Kingdom in July 2002 to the publication of the report of a parliamentary enquiry on drug policy, welcomes the fact that the Government, in line with its obligations under the international drug control treaties, has categorically ruled out legalizing or regulating the non-medical use of any internationally controlled drugs.

499. The Board notes the announcement by the Government of the United Kingdom that cannabis would be placed in a different schedule, requiring less severe controls, and the worldwide repercussions caused by that announcement (see paragraph 220 above), including confusion and widespread misunderstanding. A survey undertaken in the United Kingdom found that as many as 94 per cent of children believed that cannabis was a legal substance or even some type of medicine. The survey also discovered that nearly 80 per cent of teachers in the United Kingdom believed that the recent reclassification of cannabis would make educating pupils about the dangers of drug abuse more challenging and difficult. Several opinion polls taken in July and August 2002 found that the majority of the population did not support that reclassification.

500. The recent discovery of attempts to divert through Albania large quantities of 1-phenyl-2-propanone and ephedrine indicate that Albanian territory is used for smuggling precursors, in addition to heroin and cocaine, along the Balkan route. The Board notes that, in March 2002, the parliament of Albania passed a law on the control of precursor chemicals. The Board urges the Government of Albania to enhance the capacity of its drug control agencies to identify the persons involved in smuggling drugs and precursors and to disrupt their operational networks.

501. In Bosnia and Herzegovina and in the former Yugoslav Republic of Macedonia, the passing into law of existing drafts of comprehensive drug control legislation would provide the legal basis for the establishment of relevant drug control institutions at the national level and for more appropriate drug control in line with the requirements of the international drug control treaties.

502. In November 2001, the Governments of Hungary and Romania introduced measures against money-laundering, making anonymous bank accounts illegal and improving the maintenance of records on bank
customers, exchange offices and other financial institutions. In 2001, the Russian Federation became a party to the Council of Europe Convention on Laundering, Search, Seizure and Confiscation of the Proceeds from Crime, and the President of the Russian Federation signed a comprehensive federal law on countering the legalization of criminal proceeds, which established a financial intelligence unit within the Ministry of Finance. The Board notes that Ukraine, because of the “serious deficiencies in its anti-money-laundering regime”, remained on the list of countries and territories considered by the Financial Action Task Force on Money Laundering to be uncooperative in efforts to counter money-laundering.

503. According to the European Monitoring Centre for Drugs and Drug Addiction, in member States of the European Union, there are between 500,000 and 1 million drug injectors, excluding occasional and former drug injectors. While that figure represents less than 0.4 per cent of the population aged 15-64, drug injection is concentrated in communities with high levels of social deprivation and the individuals involved have multiple problems relating to physical and mental health and social and personal behaviour. Drug injection is associated with most cases of HIV, hepatitis and death by overdose among drug abusers in Europe. The Board urges Governments to pursue policies that will reduce the incidence of drug injection. Establishing drug injection rooms, where drug abusers can inject drugs that they have acquired from illicit sources, is contrary to the international drug control treaties.

504. In Zurich, Switzerland, a drug inhalation room for abusers who administer drugs through inhalation was opened in April 2002, since inhaling drug abusers are banned from using facilities that primarily cater to injecting drug abusers. While the establishment of drug injection rooms was claimed to be necessary to reduce risks to the general public and to illicit drug abusers by the act of drug injection, similar reasons have not been advanced for the establishment of drug inhalation rooms. The Board wishes to reiterate that drug injection rooms (or any other similar outlets established in some developed countries) might even facilitate drug abuse, are contrary to the international drug control treaties and interfere with obligations of law enforcement authorities. The Board therefore encourages Governments to provide a wider range of facilities for the treatment of drug abuse that are in line with sound medical practice and the international drug control treaties, instead of aiding and abetting drug abuse (and possibly illicit drug trafficking), through drug injection rooms and similar outlets.

505. Countries in Central Europe and Eastern Europe are stepping up measures aimed at reducing both the supply of and demand for illicit drugs. Considering the significant increases in the abuse of opiates in recent years in the Baltic States, the Board appreciates that a master plan for drug abuse prevention was reviewed and adopted in Lithuania in 2001 and that similar plans in the two other Baltic States (Estonia and Latvia) are under review. The Czech Parliament adopted several new laws to strengthen its policy of combating drug abuse within the framework of the National Drug Policy Strategy 2001-2004; the new laws will address issues such as the reduction of illicit drug demand and the punishment and repression of drug-related crime. In the Russian Federation, an action plan for drug control for the period 2002-2004 was adopted; to ensure its implementation, a state drug control committee was established in the Ministry of the Interior in September 2002.

506. Hungary is in the process of amending its national drug legislation to suspend the sentences of drug abusers willing to undergo treatment. In September 2002, needle-exchange programmes and counselling programmes for drug abusers were introduced in Budapest.

507. Countries in Central Europe and Eastern Europe are experiencing a sharp increase in the number of persons infected with HIV. That worrying development has been mainly attributed to the widespread availability of heroin, the increase in drug abuse by injection among young people and the absence of effective treatment facilities for drug abusers, as well as increased HIV infection among injecting drug abusers. In the Russian Federation alone, there were more than 80,000 new cases of HIV infection in 2001. In Ukraine, 1 per cent of the population is already infected with HIV and that figure is expected to double by 2010. In Estonia, in over 1,500 cases, HIV infection was linked to injecting drug abuse.
Cultivation, production, trafficking and abuse

Narcotic drugs

508. There continues to be significant illicit cultivation of cannabis throughout Europe. There appears to have been a notable increase in cannabis cultivation in member States of the European Union, which may be linked to policies in some of those States that are more lenient towards the possession of cannabis. Authorities in Switzerland seized in November 2001 51 tons of cannabis that had been illicitly produced in that country. Illicit cannabis cultivation continues on a large scale in the south of Albania. In Western Europe, the bulk of the cannabis resin seized continues to originate in Morocco, while the seized cannabis herb originates, to a large extent, in countries in Europe, in addition to countries outside of Europe, mainly Colombia, Jamaica, Nigeria and South Africa. In 2002, as in previous years, cannabis remained the most widely abused drug in Europe.

509. The main country through which cocaine enters Europe is Spain, followed by the Netherlands, Italy and Belgium. Cocaine abuse appears to be on the increase in some member States of the European Union. In some cities in Italy, cocaine abuse is more prevalent than the abuse of synthetic drugs. There has been an increase in lifetime prevalence of cocaine abuse among young adults aged 16-29 in the United Kingdom. The spreading abuse of crack cocaine has been reported in several countries in the region; the drug is often smoked together with tobacco.

510. Europe continues to be one of the main destinations for heroin, which is smuggled into the region mainly out of South-West Asia; heroin from South-East Asia continues to account for a smaller share of the heroin available in Europe. There appears to have been a shift in drug trafficking patterns: drug trafficking along the traditional Balkan route has continued while drug trafficking along the Central Asian route has been growing rapidly, although the amount of drugs being trafficked along the Central Asian route is still smaller. Heroin seizures have significantly increased in Bulgaria, which is on the Balkan route. In 2000 the amount of heroin seized by the authorities of Bulgaria increased from 280 kg in 1999 to 2 tons in 2000; 1.5 tons of heroin were seized in that country in 2001. Heroin abuse in Europe as a whole exceeds the level reported by the United States. The abuse of heroin (by smoking or injecting) has become more common in Eastern Europe than in Western Europe. In Croatia, Latvia, Lithuania, Romania and the Russian Federation, heroin is the most widely abused drug among young persons aged 15-16.

511. The number of registered drug abusers in the Russian Federation reached 496,000 in July 2002, up from 156,000 in 1995. The total number of drug abusers is estimated by Russian authorities to be between 3 million and 4 million.

Psychotropic substances

512. The Netherlands, particularly the areas of that country bordering Belgium and Germany, continues to be one of the main sources of illicitly manufactured MDMA (Ecstasy), which is abused in countries throughout the world. While seizures of MDMA (Ecstasy) in the Netherlands decreased in 2001, seizures in other countries of MDMA (Ecstasy) that could be traced to the Netherlands continued to increase in volume. In the Netherlands, synthetic drugs are increasingly being manufactured in residential areas, increasing the risk that residents may be exposed to toxic chemicals or become victims of an explosion. In addition, the dumping of chemicals from illicit drug manufacture may result in significant environmental hazards.

513. The chemicals necessary for the illicit manufacture of MDMA (Ecstasy) are not freely available in Europe but are, to a large extent, smuggled into the region out of China. The Board therefore encourages the Governments affected by that problem to increase their cooperation in preventing the diversion of chemicals used for the illicit manufacture of MDMA (Ecstasy). The seizure of more than 10,000 litres of 3,4-methylenedioxyphenyl-2-propanone and 1-phenyl-2-propanone, two of the main chemicals used in illicit drug manufacture, in the Netherlands in 2001 indicates that supplies of those chemicals are plentiful.

514. It is estimated that Europe accounts for some 60 per cent of the total amount of MDMA (Ecstasy) abused in the world. A survey of secondary schools throughout Europe revealed that, among the member States of the European Union, the lifetime prevalence rate for the abuse of MDMA (Ecstasy) was highest in Ireland, the Netherlands and the United Kingdom. Experimental and habitual abuse of MDMA (Ecstasy)
had increased in Spain. The abuse of MDMA (Ecstasy) was increasingly spreading in Eastern Europe. The survey also found that the lifetime prevalence rate for the abuse of MDMA (Ecstasy) was highest in Latvia.

515. Seizures of methamphetamine and amphetamine in Europe have declined in recent years. The European country that seized the largest quantity of those substances was the United Kingdom, followed by France, Germany and the Netherlands. One of the largest laboratories for the illicit manufacture of amphetamine in the United Kingdom, capable of manufacturing an estimated 20 kg of amphetamine per day, was uncovered in July 2002. Although most of the amphetamine seized is manufactured in member States of the European Union, Poland has been an important source of the substance in Europe: about 60 per cent of the amphetamines seized in Scandinavian countries originated in Poland. Methamphetamine continues to be illicitly manufactured on a small scale in the Czech Republic, primarily to be abused in the Czech Republic itself or in parts of Germany, its neighbouring country. While the level of abuse of amphetamine continues to be stable in most of Western Europe, the abuse of that substance is reported to have increased in countries in Central Europe and Eastern Europe.

Missions

516. The Board sent a mission to Albania in September 2002. In spite of the encouraging results achieved through law enforcement action in the country, Albania continues to be used as a major transit area for illicit consignments of narcotic drugs. In addition, attempts to divert precursors in Albania have recently been discovered (see paragraph 500 above).

517. Following the enactment of new drug legislation in March 2001, Albania acceded to the 1961 Convention and the 1988 Convention in August 2001; however, it has not yet acceded to the 1971 Convention. The Board notes that, as the necessary legislation and practical control measures that conform with the provisions of the 1971 Convention have been put in place, Albania could accede to the Convention without further delay.

518. The Board urges the Government of Albania to activate the inter-ministerial drug control committee as soon as possible and to finalize the development of a coordinated national strategy on drug control with the participation of all relevant authorities. The Board appreciates the initiatives to enhance the judiciary and encourages the Government to ensure better accountability of judges and the court system, in particular, by preventing corruption, so that arrested drug traffickers can be effectively dealt with through court proceedings. Drug addiction is spreading and more effort needs to be made in drug abuse prevention and the treatment of drug abusers.

519. The Board has reviewed action taken by the Government of France pursuant to recommendations made by the Board after its mission in April 1999. The monitoring of licit manufacture and distribution of and trade in narcotic drugs and psychotropic substances is carried out in a well-established and well-functioning system, and information on such activities has been comprehensive and precise. The competent authorities have adapted regulations and procedures related to the prescription system for pain management in order to enhance efforts to prevent overprescription and the falsification of prescriptions.

520. The Board appreciates the close monitoring of the abuse of pharmaceutical products containing narcotic drugs and psychotropic substances, which has enabled the Government of France to deal with any new developments in drug abuse.

521. The Board welcomes the fact that the Government has, in recent years, adopted additional legislative and
regulatory provisions to bring its national legislation in line with the international drug control treaties and legislative standards of the European Union. At the same time, the Board urges the competent authorities of Romania to strengthen the administrative structure for drug control in order to apply those provisions effectively. The Board expects the Government to ensure that the national drug control coordinating committee will soon become fully operational and to adopt a national drug control master plan as soon as possible.

525. Romania is increasingly being used by international drug traffickers both as a transit country and as a country of destination for illicit drug consignments. The Board is concerned about the relatively low level of heroin seizures in that country in recent years. The Board is also concerned about the number of cases involving the attempted diversion of chemical precursors that could not be properly investigated and prosecuted because of a lack of relevant legislation. The Board urges the Government of Romania to take all measures necessary to prevent the diversion of precursors and to improve the interdiction of heroin consignments in border areas. There have been few improvements in drug abuse prevention and in the treatment and rehabilitation of drug abusers since the 1997 mission of the Board. The Board encourages the authorities of Romania to carry out an assessment of the drug abuse situation in that country and to devise appropriate intervention strategies for the reduction of illicit drug demand and the rehabilitation of drug addicts.

526. In June 2002, the Board sent a mission to Slovenia. During the last few years, drug abuse has increased in Slovenia, partly because of the resurgence of drug trafficking along the Balkan route after the end of the recent armed conflict in Yugoslavia but also because of the increased purchasing power and mobility of the population and other major developments that have taken place in Slovenia since it gained its independence. Drug abuse patterns in Slovenia appear to be similar to those in other Central European countries.

527. The Board appreciates the strong stance that the authorities of Slovenia have taken against drug abuse and the effective measures that they have taken in all areas of drug control. The Board appreciates the increased law enforcement activities carried out in the port of Koper with regard to ferries from Albania and container traffic.

528. In Slovenia, the legal framework on drug control is comprehensive, taking into account all provisions of the three international drug control treaties. Cooperation between Slovenian authorities and the Board with regard to the implementation of the provisions of the three treaties is functioning well. The administrative structure concerning drug control matters in Slovenia is highly developed. The relevant government bodies and the non-governmental organizations concerned with such matters take into account all aspects of drug control. However, the Board wishes to draw to the attention of the Slovenian authorities the fact that, in order to maintain the effectiveness of the increasing number of offices and bodies concerned with drug control matters, the national coordinating body, the Office for Drugs of Slovenia, needs to be strengthened.

529. In June 2002, a mission of the Board visited the former Yugoslav Republic of Macedonia. The Board welcomes a number of efforts of the Government to deal with drug abuse and trafficking, in particular the adoption of a plan of action against synthetic drugs and the measures taken by the Ministry of Health to implement the provisions of the international drug control treaties. The Board, however, is concerned that, since its last mission to that country in 1996, no legislation has been enacted to bring the national legislation in line with the international drug control treaties. The Board, however, is concerned that, since its last mission to that country in 1996, no legislation has been enacted to bring the national legislation in line with the international drug control treaties, despite the fact that such draft legislation has been under consideration for several years. In view of the increasing incidence of drug abuse in the country, the Board is also concerned that facilities for the treatment of drug addiction are still very limited.

530. The Board recommends that the State Commission on Narcotic Drugs and Psychotropic Substances of the former Yugoslav Republic of Macedonia, which has been largely inactive for a number of years, be revitalized as a fully functional, multidisciplinary body for coordinating drug control matters. Customs and police authorities are encouraged to work more closely with the Ministry of Health, especially in border areas, to ensure legitimate trade in pharmaceuticals and chemicals is not hindered and to prevent the smuggling and diversions of narcotic drugs, psychotropic substances and precursors.
The Board sent a mission to Kosovo, Yugoslavia, in September 2002. The Board notes the establishment of the Kosovo Drug Regulatory Authority, the efforts of the United Nations Interim Administration in Kosovo to ensure the application of practical measures for drug control in the province and the support being provided by the European Agency for Reconstruction to the provincial authorities.

While the Board appreciates the efforts being made by the provincial authorities, Kosovo needs a more comprehensive legislative, regulatory and strategic framework for the control of drugs and chemicals, in line with international conventions and the laws of European countries.

Heroin abuse appears to have spread rapidly in Kosovo in recent years, and a growing number of young heroin addicts are beginning to inject the drug, thus increasing their chances of becoming infected with HIV through needle-sharing. The international community is therefore invited to give more attention to the health-related aspects of the drug problem in their programmes providing assistance to Kosovo.

E. Oceania

Major developments

Australia and New Zealand continue to account for the majority of drug seizures in Oceania. Australia, in particular, remains one of the main destinations for shipments of heroin and amphetamine-type stimulants from South-East Asia. In addition, numerous clandestine laboratories in the two countries manufacture amphetamine-type stimulants for the local markets. The number of such laboratories dismantled by the police in New Zealand grew from 6 in 1999 and 9 in 2000 to 41 in the first half of 2002.

The Board maintains its opposition, expressed in its report for 2001, on the establishment in Australia of a drug injection room in the state of New South Wales, and regrets that the project has been extended.

Transnational criminal groups active in the region are constantly reassessing their strategies in an attempt to avoid detection. There is growing evidence that they have been increasingly targeting the Pacific islands for smuggling drugs and for money-laundering. The Board is particularly concerned about the drug control situation in Papua New Guinea, where serious drug-related crime is linked to general political instability.

There is evidence that drug traffickers have targeted offshore financial centres in the region for the laundering of illicit profits. The Board therefore urges the Governments of the countries concerned to intensify their efforts to counter money-laundering activities.

Treaty adherence

The Board notes that of the 15 States in Oceania, only Australia, Fiji, New Zealand and Tonga are parties to all three international drug control treaties. Those States are also the only ones in the region that are parties to the 1988 Convention. Several Pacific island States, namely Kiribati, Nauru, Samoa, Tuvalu and Vanuatu, are not parties to any of the three treaties. The Board calls on the States concerned to accede to the international drug control treaties without delay. The Board also invites relevant regional organizations, such as the Pacific Islands Forum, to advise and assist Governments of countries in the region in that respect.

Regional cooperation

The Board encourages the Pacific Islands Forum to continue to play an active role in coordinating drug control. The Board notes that the Oceania Customs Organisation has succeeded in establishing a secure, Internet-based communications system, the Asia Pacific Enforcement Report System, that makes possible the exchange of information to help prevent transnational crime, including drug trafficking. The Board appreciates that Australia and New Zealand continue to play an important role in supporting the Pacific islands with technical assistance, particularly in the area of drug law enforcement.

The Board welcomes regional and bilateral agreements on fighting money-laundering, such as the memorandum of understanding signed in March 2002 by Australia and Vanuatu for cooperation in the exchange of financial intelligence. This memorandum of understanding is part of the establishment of an international network in Oceania to facilitate the prevention and detection of money-laundering.

In view of the recent trends in the smuggling of heroin and methamphetamine into and through Oceania, cooperation between Governments of