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CAUTION
MESSAGE FROM THE PRESIDENT

The 2016 International Narcotics Control Board (INCB) Annual Report presents an analysis of the global drug control situation and makes recommendations to help States take effective measures to address drug-related challenges. During the thirtieth special session of the General Assembly on the world drug problem in April 2016, Governments reaffirmed their commitment to the goals and principles of the conventions and their determination to fulfil their joint responsibilities to cooperate in all fields of drug policy. Like the Governments that have adopted the outcome document of the special session, INCB believes that the international drug control system, founded upon the conventions, continues to provide a flexible basis to meet the world’s drug control needs.

This year’s thematic chapter is on the topic of women and drugs. It is important that gender aspects be taken into account when examining the world’s drug problem, for example in light of the fact that whereas one third of global drug users are women and girls, only one in five drug treatment recipients is female, and an increasing number of women are being arrested for drug-related crimes. Our report shows that, to implement effective and comprehensive policies, the needs of women must be targeted, and the obstacles preventing them from accessing treatment—such as stigma—must be addressed. This chapter can change perceptions and remind people, particularly policymakers, of the importance of protecting the rights of women who use drugs or who have committed drug-related offences and the rights of their families. The chapter concludes with a set of recommendations to Member States, such as prioritizing accessible health care for drug-dependent women, ensuring better funding and coordination of efforts to prevent and treat drug abuse among women, and addressing the stigma associated with drug dependence, particularly among women.

The fundamental goal of the international drug control system remains the protection of the health and welfare of humanity. The drug control system has to ensure the availability of narcotic drugs and psychotropic substances for medical and scientific purposes while preventing their trafficking, illicit cultivation and production and abuse.

The conventions provide for a certain degree of flexibility for their implementation at the national level, particularly with respect to determining appropriate sanctions, including non-punitive or non-custodial measures for minor offences. No obligation stems from the conventions to imprison people who commit minor drug-related offences; instead the conventions promote alternatives to conviction and punishment, such as treatment, education, aftercare, rehabilitation and social reintegration.

However, flexibility has its limits; it does not extend to the regulation of the non-medical use of drugs. This year’s report again draws attention to the limited number of countries that have adopted policies that go beyond these limits. States parties now have the responsibility to determine how to respond to the developments in those countries which disregard the treaties by permitting and
regulating the non-medical use of drugs. This development is expanded upon in chapter II of this Report, which explores the possible effects of the legalization and regulation of non-medical use of cannabis in several jurisdictions.

The regional chapter highlights developments in a number of countries concerning the establishment and operation of “drug consumption rooms”. The Board reiterates that for such facilities to be consistent with the conventions they must aim at effectively reducing the negative consequences of drug abuse and must ultimately lead to treatment, rehabilitation and reintegration measures. This must be done without condoning or increasing drug abuse or encouraging drug trafficking. The report explains that “drug consumption rooms” must operate within a demand reduction framework and that they cannot be a substitute for prevention and treatment measures.

In its 2016 report on precursors, INCB provides a comprehensive analysis of the global precursor control situation, spanning the continuum from regulatory controls to law enforcement interventions. Focus areas in this year’s report include the role of law enforcement in the prevention of diversion of chemicals and the challenges arising from a lack of integrity of controls in conflict areas.

INCB will continue to acknowledge and support all drug-related policies and programmes that address drug control challenges in a balanced manner in conformity with the treaties and with respect for human rights.

Werner Sipp  
President  
International Narcotics Control Board
PRESS RELEASE

INCB REPORT CALLS FOR DRUG POLICIES THAT TAKE WOMEN INTO ACCOUNT, AS COUNTRIES REGISTER DISPROPORTIONATE RISE IN OVERDOSES AMONG FEMALES

In its 2016 Annual Report, the International Narcotics Control Board (INCB):

• Calls for gender-sensitive drug policies and programmes, better health-care access for drug-dependent women and more funding to prevent and treat drug abuse among women
• Condemns the extrajudicial targeting of people suspected of illicit drug-related activity
• Calls on States to abolish the death penalty for drug-related offences
• Encourages States to consider alternatives to imprisonment for minor drug-related offences
• Reaffirms that legalizing cannabis for non-medical use is incompatible with international legal obligations

At a time when countries are reporting a disproportionate increase in drug overdoses among women, the Vienna-based INCB in its Annual Report for 2016 is calling on Governments to do more to take women into account in their drug policies and programmes.

INCB stresses in its Report, published today, that Governments should give priority to providing health-care access for drug-dependent women and calls for more funding and coordination to prevent and treat drug abuse among women.

INCB President Werner Sipp said: “We want to change perceptions and remind people, particularly policymakers, of the importance of protecting the rights of women who use drugs or who have committed drug-related offences and the rights of their families.”

Women and girls comprise one third of global drug users, with levels of drug use higher among women in high-income countries. However, just one fifth of treatment recipients are women, as significant systemic, structural, social, cultural and personal barriers affect women’s ability to access substance abuse treatment.

Compared to men, women are more likely to be prescribed narcotics and anti-anxiety medication, and are consequently more likely to abuse such medication. For example, Germany and Serbia have reported that fatal overdoses from prescription drugs are more frequent among women. Additionally, countries such as the United Kingdom of Great Britain and Northern Ireland have seen larger increases in overdoses, of all substances, among women than among men.
Number of women arrested for drug-related crimes has increased significantly

Female prisoners and sex workers are at particular risk of drug use. There has been a significant increase in the number of women arrested for drug-related crimes and, once imprisoned, drug use is more prevalent among female prisoners than male prisoners. Also, there is a strong link between sex-work and drug use. Some women turn to sex-work as a means to support a drug-dependent lifestyle, while sex workers may use drugs to cope with the demands and nature of their work.

HIV infections and mental health disorders are more prevalent among women who abuse drugs. For female prisoners in particular, separation from their communities, homes and families has a considerably detrimental impact and increases the risk of depression and anxiety disorders.

The Report also highlights the importance of prevention programmes targeted specifically at prisoners, pregnant women, people living with HIV/AIDS and sex workers. INCB calls on Member States to collect and share data to reach a better understanding of the specific needs of women affected by drug abuse, to improve prevention, treatment and rehabilitation.

Alternatives to imprisonment for drug-related offences remain underutilized

Although the three international drug control treaties are founded upon a balanced approach, the principle of proportionality and respect for human rights, in many States policies to address drug-related offences, including possession for personal use, rely primarily on punitive criminal justice responses, which include prosecution and imprisonment. Alternative measures such as treatment, rehabilitation and social integration remain underutilized.

INCB emphasizes that the drug control treaties do not require for people who use drugs or those who commit minor drug-related offences to be imprisoned.

The Board encourages States that have witnessed high rates of arrest and imprisonment for minor drug-related offences to adopt non-punitive responses rather than permitting the use of cannabis for non-medical purposes, which may prove counterproductive and which is not in conformity with the drug control treaties. INCB welcomes the move by many States to recognize drug use and dependency as a public health concern requiring health-centred responses.

INCB calls on States to abolish the death penalty for drug-related offences

Although it is up to the States to determine sanctions for drug-related offences, the Board continues to encourage States that retain capital punishment to consider the abolition of the death penalty for drug-related offences.
Extrajudicial targeting of people suspected of illicit drug-related activity

The Board reiterates, in the strongest possible terms, its categorical and unequivocal condemnation of the extrajudicial targeting of people suspected of illicit drug-related activity. Such targeting constitutes a clear breach of the three international drug control conventions which require criminal justice responses to drug-related offences and reject extrajudicial sanctions of whatever nature. It also constitutes a serious violation of human rights, including due process norms as contained in the Universal Declaration of Human Rights and the International Covenant on Civil and Political Rights, and is an affront to the most basic standards of human dignity.

The Board calls upon all Governments concerned to put an immediate stop to such actions and to investigate any person who is suspected of having committed, participated in, encouraged or incited any such extrajudicial actions.

Legalizing cannabis for non-medical use is incompatible with international legal obligations

The Board maintains a dialogue with States that have allowed or are considering the non-medical use of cannabis and the creation of a market for cannabis products for non-medical use. INCB reaffirms that such measures are incompatible with the legal obligations as set out in the 1961 Single Convention.

While the conventions provide for some flexibility in their implementation, the INCB President says: “Flexibility has its limits; it does not extend to the regulation of the non-medical use of drugs.” States parties have to determine how to respond to the developments in those countries which disregard the treaties by permitting and regulating the non-medical use of drugs.

Drug consumption rooms

For “drug consumption rooms” to be consistent with the conventions, they must aim at effectively reducing the negative consequences of drug abuse and lead to treatment and rehabilitation, without condoning or encouraging drug abuse and drug trafficking.

INCB calls for sustained support to Afghanistan

Due to the dire security situation in Afghanistan and the related difficulties for the authorities to monitor and control the illicit supply of drugs originating from the country, the Board has called upon partner Governments and the international community to sustain their support for drug control efforts in the country, in the spirit of their common and shared responsibility to address the world drug problem. The Board has emphasized that action against drugs is vital if sustainable development is to be achieved.
INCB PRECURSORS REPORT

Prevention of chemical diversion beyond regulatory controls

In its 2016 report on precursors, INCB outlines how law enforcement authorities can help inform balanced and integrated strategies to prevent chemicals from reaching clandestine laboratories and prevent drugs and new psychoactive substances from reaching consumer markets.

Seizure statistics and case information reveal numerous incidents where critical information goes unnoticed or underutilized

Institutional competition, and lengthy or non-existent international cooperation procedures hamper the resolution of cases. The report stresses that seizures should not be the end result of a law enforcement intervention, but rather the starting-point for identifying and disrupting the sources and criminal groups behind the trafficking of precursor chemicals.

Improvements in regulatory and law enforcement cooperation

INCB notes that improvements in international law enforcement cooperation have denied illicit drug manufacturers significant amounts of precursor chemicals. Successful interventions have prevented attempts to divert acetic anhydride through countries in Africa and chemicals used in the illicit manufacture of tablets containing amphetamine, often referred to as “captagon”, to the Near and Middle East. Significant seizures of ephedrine and pseudoephedrine in South Asia highlight once again the need for better national control and understanding of legitimate manufacturing methods, domestic distribution channels, and the operators and their roles in national markets. The same applies to countries in South America in relation to potassium permanganate and other chemicals used in illicit cocaine manufacture. Countries in Africa also continue to be targeted by criminal organizations for precursor trafficking and illicit methamphetamine manufacture. The latest data indicate that there is now also a transfer of knowledge between illicit operators across continents.

The international precursor control system

The 2016 INCB report on precursors notes the continued increase in the number of countries requesting pre-export notifications by invoking article 12, paragraph 10 (a) of the 1988 Convention, and the expanding use of the Pre-Export Notification Online (PEN Online) system and the INCB Precursors Incident Communication System (PICS). These tools are made available by the Board to support Governments in their efforts against diversion of chemicals. PICS is playing an increasingly important role in alerting law enforcement authorities and facilitating international operations regarding non-scheduled chemicals, including made-to-order “designer” chemicals.

In its 2016 report on precursors, INCB continues to advocate for a balanced application of enforcement and regulatory measures to effectively prevent the diversion of chemicals.
REGIONAL HIGHLIGHTS

AFRICA

Africa not only a trafficking hub: Africa continues to be one of the main drug trafficking transit regions: while the continent is a main transit region for drug trafficking, it is also increasingly becoming a consumer and a destination market for all types of drugs of abuse.

Illicit cultivation, trafficking and abuse of cannabis: cannabis herb is illicitly produced throughout the continent while the illicit production of cannabis resin remains limited to a few countries in North Africa. Cannabis remains the primary drug of abuse in Africa, and the drug for which most drug users seek treatment, with an estimated annual prevalence of cannabis use of 7.6 per cent (twice the global average of 3.8 per cent).

Increasing heroin abuse: heroin abuse is growing in some countries in the region, mainly in East Africa.

Increased involvement of African nationals reported in drug trafficking incidents worldwide: the growing involvement of African nationals has been particularly visible in heroin trafficking along the southern route; a route which goes through either the Islamic Republic of Iran or Pakistan and across the Indian Ocean, and has been gaining importance for the trafficking of opiates from Afghanistan. Additionally, West Africa has been increasingly affected by criminal operations that involve not only trafficking of cocaine from South America to Europe but also distribution for local abuse and illicit manufacture of synthetic drugs destined mainly for markets in Asia.

High levels of opiate abuse: according to the United Nations Office on Drugs and Crime (UNODC), 11 per cent of global opiate users live in Africa and more than half of these live in West and Central Africa. Opiates originating from Afghanistan are increasingly being trafficked to East and West Africa, either for local consumption or onward shipment.

Limited availability of medicines: access to and availability of narcotic drugs and psychotropic substances for medical and scientific purposes remain limited in Africa. The Board urges all Governments to fully implement the operational recommendations of the special session of the General Assembly on improving access to medicines containing controlled substances, while preventing their diversion and abuse, and the recommendations contained in the INCB 2015 Availability Report.

AMERICAS

Central America and the Caribbean

Leaked “Panama Papers” show extent of drug-related criminal activity: the information contained in the so-called “Panama Papers” confirmed the extent of the increase in criminal activities related to drug trafficking in Central American countries, and led to law enforcement operations that exposed the money-laundering practices of drug trafficking networks.
Cocaine trafficking continued cause of concern: in 2014, 87 per cent of the cocaine entering the United States was trafficked through Central America and Mexico, and about 13 per cent was trafficked through the Caribbean. Increased cultivation of coca bush in South America has been linked to a 32 per cent increase in cocaine seizures in Panama.

Detrimental environmental impact of cocaine trafficking: cocaine trafficking has been linked to deforestation in Central America, specifically in Guatemala, Honduras and Nicaragua. Deforestation is reported to have intensified in areas affected by drug trafficking.

Consultations on cannabis legalization in the Caribbean: in June 2016, the Regional Commission on Marijuana established by the secretariat of the Caribbean Community held its first regional consultation on cannabis to explore the implications of cannabis legalization in the region. In this context, the Board notes that the 1961 Convention on Narcotic Drugs limits the use of cannabis to medical and scientific purposes, as a fundamental principle which lies at the heart of the international drug control legal framework and which cannot be derogated from. The Board encourages States to adopt health-oriented drug policies in compliance with the conventions and to provide for non-punitive responses for minor drug-related offences committed by drug users, as an alternative to arrest and imprisonment, as foreseen by the three international drug control conventions.

More broad data on drug abuse required: reported levels of cannabis, cocaine and opioid ( opiates and prescription opiates) abuse in Central America and the Caribbean are all below the regional average for the Americas. These are interesting patterns because countries in Central America and the Caribbean are confronted with considerable volumes of drugs that are trafficked through their territories, and, in the case of cannabis, being produced in the region. More comprehensive national household drug use surveys are needed to determine reliable estimates of the prevalence of drug abuse in the region.

North America

Overdose deaths on the rise: in the United States of America, overdose deaths almost doubled between 2013 and 2014. The growing number of accidental overdose deaths caused by fentanyl-laced drugs represents a major drug-related challenge in Canada and the United States.

Prescription opioid and heroin abuse a continued cause of concern: according to the Centres for Disease Control and Prevention, the number of people reporting heroin use in the United States nearly tripled from 2007 to 2014. Of the more than 47,000 drug overdose deaths in the United States in 2014, opioids, including heroin and prescription painkillers such as oxycodone, killed more than 28,000 people.

Cannabis remains most abused drug: cannabis continues to be the most widely illicitly cultivated, produced, trafficked and consumed drug in the region.

Use of cannabis for medical purposes: In 2016, the states of Arkansas, Florida, North Dakota, Ohio and Pennsylvania authorized the use of cannabis for medical purposes.
Canada’s medical cannabis legal framework declared unconstitutional; new regulations come into force: the Federal Court of Canada declared Canada’s Marijuana for Medical Purposes Regulations, to be unconstitutional. Under the new Access to Cannabis for Medical Purposes Regulations, those who have been authorized by their health-care practitioner to access cannabis for medical purposes will continue to have the option of purchasing quality-controlled cannabis from licensed producers, and will also be able to produce a limited amount of cannabis for their own medical purposes. The Supreme Court of Canada expanded the definition of “medical marijuana”; as a result, those who are authorized to obtain dried cannabis can choose to administer it via an oral or topical treatment and are not limited to dried herb consumed through smoking.

Petitions to reschedule cannabis in the United States denied: following a scientific and medical evaluation conducted by the United States Food and Drug Administration in consultation with the National Institute on Drug Abuse, the former announced on 11 August 2016 that cannabis did not meet the criteria for currently accepted medical use in treatment in the United States, that there was a lack of accepted safety for its use under medical supervision and that cannabis had a high potential for abuse. As a result, cannabis is still prohibited at the federal level as a substance in schedule I of the Controlled Substances Act.

Legalization of cannabis for non-medical purposes: the Government of Canada confirmed its intention to legalize and regulate the non-medical use of cannabis through new legislation to be introduced in 2017. Until then, under the Canadian Controlled Drugs and Substances legislation, growing, possessing, distributing and selling cannabis remains illegal. In the United States, on 8 November 2016, voters in California, Maine, Massachusetts and Nevada approved ballot measures that would legalize and regulate the non-medical use of cannabis. Recent data from the states that have legalized the use of cannabis for non-medical purposes show an increase in cannabis use.

Second “drug injection site” approved in Canada: in January 2016, Canada approved a second supervised “drug injection site” in the city of Vancouver. It is housed in the existing HIV/AIDS treatment clinic and is the first supervised “drug injection site” in North America integrated into an existing health-care centre. Additional applications for exemptions to operate “injection sites” have been received and are undergoing review by Health Canada.

Increase in heroin and cocaine seizures in the United States: between 2009 and 2014 the United States reported the largest cocaine seizures in North America, accounting for 90 per cent of all seizures in the region. Data of the National Seizure System showed an 80 per cent increase in heroin seizures in the past five years, seemingly reflecting the growing availability of heroin in the United States.

New national strategy to increase access to controlled substances in Mexico: the new strategy to increase access to controlled substances for pain treatment and palliative care is aimed at facilitating the dispensing, prescription and administration of pharmaceutical preparations containing opiates. In a report published by the Ministry of Health of Mexico, the range of different prescriptions greatly increased from June 2015 to January 2016. Following the introduction of an electronic platform, the number of registered prescribers also increased. This year’s report encourages Governments to review and improve their action in this field.
South America

Peace agreement reached: a peace agreement between the Government of Colombia and the Revolutionary Armed Forces of Colombia is expected to have a positive effect on the drug control situation in the country.

Legislative amendments adopted: several of the countries in the region have adopted legislative amendments concerning drug policy; however their compliance with the international drug conventions remains to be determined.

Illicit cultivation of coca bush, opium poppy and cannabis plant continues in South America: the global area under coca bush cultivation increased in 2015 as a result of a sharp increase in Colombia. However, according to UNODC, the Plurinational State of Bolivia reduced the area devoted to illicit coca bush cultivation. The manufacture of cocaine occurs mainly in Bolivia (Plurinational State of), Colombia and Peru however clandestine laboratories for processing coca leaf derivatives were also found in other countries in South America. The region continues to account for the majority of global cocaine seizures.

Continued seizures of internationally controlled precursors: Governments in the region continued to report seizures of chemicals under international control; an increasing number of seizures of non-controlled precursor substances was also reported. The largest variety of precursor substances seized worldwide was reported in South America, owing to the extensive list of substances placed under national control by countries of the region.

Rising levels of abuse of synthetic drugs: concern over rising levels of abuse of synthetic drugs among young people in South America continued to grow in 2015. High rates of abuse of amphetamine-type stimulants among young people were reported in the region.

Abuse and treatment: cannabis remains the most widely used drug in the region; however, the rates of cocaine use among secondary school students were higher in South America than in the other parts of the Americas with major differences in the levels of use in the countries for which data was gathered. Drug treatment in South America mainly concerns the abuse of cocaine, which accounts for nearly half of all individuals enrolled in drug treatment programmes in the region. Additionally, the appearance of plant-based and non-controlled psychoactive substances on the drug market in South America raises concerns. Data from the most recent surveys show that young people are abusing such substances.

ASIA

West Asia

Political instability and protracted armed conflicts hamper drug control efforts: the continued armed conflicts in the region are restricting the drug control efforts of authorities, particularly within Iraq, the Syrian Arab Republic and Yemen. Large-scale migration flows as well as increased
drug abuse and trafficking in the region contribute to the challenge, while broader developmental and criminal justice challenges, such as corruption, terrorism and political instability, continue to hinder progress.

**Counterfeit “captagon” tablets (containing amphetamine) continue to be widely available and used in the region:** official reports of large-scale seizures of fake “captagon” tablets in Lebanon and Turkey substantiate media reports in recent years of record volumes of “captagon” flooding the region, especially the Middle East and Gulf subregions. However, reliable information to confirm the source of the chemicals and the synthesizing processes used in manufacturing “captagon” remains scarce.

**Afghanistan illicit opium production once again on the rise:** last year’s significant decline in illicit opium poppy cultivation and opium production in the country has been reversed and figures for 2016 show an increase once again. The total area under illicit opium poppy cultivation in 2016 has increased by 10 per cent compared with 2015. Eradication efforts came to an almost complete halt and security conditions in the country worsened further. The Board is calling upon the international community and partner Governments to sustain their support of counter-narcotics efforts in Afghanistan in the face of these worrisome developments, emphasizing that drug control action is vital if sustainable development is to be achieved.

**Increased reports of methamphetamine production in Afghanistan:** indications of methamphetamine production, rather than trafficking into the country, have increased in 2016. Several raids of clandestine laboratories on Afghan territory showed the presence of precursor chemicals and equipment used in the illicit manufacture of methamphetamine. Although the scope remains unclear, it adds a third “problem substance” to the drug control challenges facing Afghanistan, next to the largest worldwide scale of illicit opium and second largest worldwide scale of illicit cannabis production already occurring in the country.

**Global opiate markets continue to be dominated by West Asian opiate supply:** all three major transregional opiate trade routes originate in West Asia, with Afghanistan being the world’s largest source of illicitly produced opium for more than a decade. In addition to the well-established Balkan route (towards Europe), the southern and northern routes (towards all regions of the world, except Latin America) are gaining in importance in trafficking opiates illicitly produced in Afghanistan.

**Fewer heroin precursors seized overall:** the steady decline over the years in seizures of acetic anhydride, the main precursor chemical associated with heroin manufacture, may be an indication of increased domestic (as opposed to international) diversion from licit trade, or of traffickers resorting to non-scheduled substances to replace key ingredients and evade national and international controls.

**Large-scale prescription drug abuse in the region, mainly tramadol:** tramadol, a synthetic opioid not under international control, has been reported as a substance of abuse by several countries in West Asia, including Armenia, Jordan, Lebanon, Oman, Qatar, Saudi Arabia, Turkey and Turkmenistan.
Most frequently used substances in West Asia: cannabis, opioids and amphetamine-type stimulants were reported among the most frequently used substances in West Asian countries. Drug-related mortality was mostly attributed to opioid (mostly heroin) abuse. The drug abuse rate in Afghanistan was more than double the global drug abuse rate (12.6 per cent of the adult population, compared with just over 5 per cent globally).

South Asia

Opiates and amphetamine-type stimulants main substances of concern in the region: South Asia continues to be particularly vulnerable to trafficking in opiates and heroin as well as cannabis, synthetic drugs and new psychoactive substances. In addition, the region continues to experience increases in the illicit manufacturing and trafficking of methamphetamine, the diversion of controlled substances from licit to illicit channels and the abuse of pharmaceutical preparations containing narcotic drugs and psychotropic substances.

Increases in heroin trafficking: the amount of heroin seized increased in Bangladesh, Nepal and Sri Lanka; there was also a slight increase in India.

Trafficking in “yaba” (methamphetamine) tablets continues: trafficking from Myanmar to Bangladesh has continued. In Bangladesh, “yaba” seizures tripled from 2014 to 2015; a record seizure of 2.8 million methamphetamine tablets was made in January 2016.

East and South-East Asia

Illicit opiate production and trafficking continue to be a major concern for the region: illicit cultivation of opium poppy continues to increase within the region where the total area under illicit cultivation shows no sign of decline.

Methamphetamine manufacturing, trafficking and misuse increase further: an increasing number of source countries, more diversified trafficking routes and greater connectivity within the region continue to challenge supply and demand reduction efforts, heightening the need for effective joint-border collaboration. Abuse of methamphetamine is increasingly problematic and appropriate treatment is still lacking in most countries.

Market for new psychoactive substances continues to expand: there has been a recent trend in the region of mixing new psychoactive substances with amphetamine-type stimulants. This poses serious challenges to health-care providers and drug control authorities, and is fuelling major public health concern in the region.

Extensive regional cooperation: during the Fourth Association of Southeast Asian Nations (ASEAN) Ministerial Meeting on Drug Matters, it was decided to institutionalize the Meeting as a body under the ASEAN Political-Security Community. The ASEAN commitment to a comprehensive and balanced approach towards drug control, and support for the international drug control conventions were reaffirmed.
Illicit drug markets remain one of the main threats to the security of European countries: according to estimates by the European Monitoring Centre for Drugs and Drug Addiction, around one fifth of global crime proceeds are generated by the illicit drug trade. European Union citizens alone spend between 21 to 31 billion euros every year on illicit drugs. Faster changes in illicit drug markets observed in past years can be attributed, in part, to globalization and technological developments.

Balkan route remains main heroin trafficking corridor: the Balkan route (from Turkey to Bulgaria and through countries in the western Balkans to Western and Central Europe, or from Bulgaria through Romania and Hungary to Western and Central Europe) remains the main corridor for trafficking bulk quantities of heroin to the main heroin markets in Europe. There are also increasing concerns about the southern route, along which heroin is trafficked by sea from the Islamic Republic of Iran and Pakistan, initially to the Arabian Peninsula and East Africa, and then onwards to other parts of Africa or to Europe. The container ports of Rotterdam (Netherlands) and Antwerp (Belgium) appear to remain major hubs for heroin and cocaine smuggled into the European Union.

Increase of cocaine in Europe: the cocaine market in the European Union has been fairly stable over recent years, although there are indications of increasing availability of the drug. In 2014, countries in the European Union reported seizures of cocaine totalling 61.6 tons, about the same amount as in 2013 (62.6 tons).

High drug abuse among general population: in the European Union, it is estimated that more than a quarter of those aged 15 to 64 have consumed illicit drugs at least once in their lives.

Cannabis most commonly used drug in the European Union: cannabis is the drug most frequently reported as the principal reason for first entry into drug treatment and it is estimated that 51.5 million adult males and 32.4 million adult females consume cannabis at least once in their lives (24.8 per cent). An estimated one per cent of those aged 15 to 64 in the European Union use cannabis daily or almost daily.

Heroin most commonly abused opioid in the region: in addition to heroin, a range of synthetic opioids such as methadone, buprenorphine and fentanyl have also been misused. In 2016, UNODC reported that opioid abuse remained a major cause of concern, in particular in Eastern and Southern Europe, with more than 70 per cent of all drug treatment centre patients receiving treatment for opiate use disorders.

Europe manufacturing region for synthetic drugs: for a number of years, amphetamine and “ecstasy” have been illicitly manufactured in Belgium and the Netherlands, and methamphetamine in countries in Central Europe, mostly in the Czech Republic. Recent evidence suggests a significant manufacturing capacity of methamphetamine also emerging in the Netherlands and some small-scale manufacturing in countries bordering the Czech Republic.

“Ecstasy” once again widely available: until recently, the prevalence of “ecstasy” abuse had been declining in many European Union member States, from peaks reached in the early to mid-2000s. Recent data indicate that the drug is once again more widely available. Moreover, the potency of “ecstasy” products (tablets, powders and crystals) has increased since 2010 while prices appear to have remained stable. The availability of high-dose “ecstasy” products on the illicit markets constitutes an emerging threat and a challenge for public health and safety.
No slowdown in the emergence and availability of new psychoactive substances: by May 2016, the European Union early warning system, which was established in 2005, had identified more than 560 new psychoactive substances; 100 new psychoactive substances were reported for the first time in 2015. The increased availability of those substances will cause associated health risks.

Seizures of alpha-phenylacetoacetonitrile decrease significantly: seizures of alpha-phenylacetoacetonitrile (APAAN), a substitute chemical that can be used in laboratories illicitly manufacturing amphetamine and methamphetamine, have decreased in the European Union since 2014, when the substance was brought under international control.

OCEANIA

Higher levels of abuse of amphetamines among indigenous communities: in New Zealand, the prevalence of abuse of amphetamines was found to be higher among the Maori population than among the non-Maori population. In Australia the abuse of amphetamines in indigenous communities was estimated at 5 per cent, higher than the national average.

Increase in drug seizures in Australia: the amount of heroin seized at the Australian border increased by 168 per cent, from 2014 to 2015. There was also an increase in the amount of cocaine seized, and a record amount of 12.6 tons of amphetamine-type stimulants was seized in the country. Although the number of cannabis seizures reached a record high, the weight of cannabis seized at the border and within the country decreased; this was also the case for seizures of new psychoactive substances.

Entry into force of Australian legislative framework for medical cannabis: the Narcotic Drugs Amendment Act 2016 entered into force in Australia, providing a legislative framework that enables cannabis cultivation and permits access to cannabis for medical purposes.

Record levels of methamphetamine seized in New Zealand: in New Zealand, the quantity of methamphetamine seized more than tripled from 2014 to 2015. The number of people using methamphetamine in Australia doubled over a six year period; high levels of abuse and trafficking of the substance prompted the establishment of the National Ice Taskforce in April 2015. Seizures in other countries of the region indicate that they are used as trafficking transit points as well as being indicative of local abuse of the substance.

High cannabis use in the region: cannabis remains the most widely trafficked and abused drug throughout Oceania, with estimated annual prevalence levels at about 10 per cent, well above the global estimate of 3.8 per cent.

Lack of data on drug abuse and treatment: noting the lack of recent data from countries in the region other than Australia and New Zealand, the Board calls on Governments to step up their efforts to increase the collection of data on drug abuse and treatment. The Board also invites the international community and regional and bilateral partners to provide support to those countries to that end.

Efforts made to gather and share information: in 2016, the customs authorities of Fiji and Vanuatu became the only two customs administrations in the Pacific region, among only 20 other countries worldwide, to have implemented the World Customs Organization National Customs Enforcement Network system.
INCB ASSISTING GOVERNMENTS IN THE FUNCTIONING OF THE INTERNATIONAL DRUG CONTROL SYSTEM

In addition to its work monitoring and promoting implementation of the three international drug control treaties, INCB is assisting Governments in addressing the illicit manufacturing, trafficking and abuse of drugs and preventing their diversion and abuse, while ensuring availability of controlled medicines.

New tools for old purposes: using modern technology to monitor international trade in scheduled substances

In the last ten years, INCB has launched four tailored online communication systems to support the monitoring of international trade in scheduled substances and cooperation in case of seizures. Each system focuses on a different aspect of drug control and facilitates a quick, secure and direct exchange of information between Governments.

- **PEN Online** (Pre-export Notification Online) is used in the licit precursor trade to send pre-export notifications to chemical-importing countries. PEN Online helps to verify the legitimacy of individual cross-border transactions of precursor chemicals and to identify suspicious shipments before they reach their destination and end up in illicit drug manufacture.

- **PICS** (Precursors Incident Communication System) facilitates the exchange of information on chemical-related incidents (seizures of precursor chemicals, dismantling of clandestine laboratories, etc.) after the fact, providing leads for authorities to initiate investigations into illicit activities within and across borders.

- **IONICS** (Project Ion Incident Communication System) provides a platform for the exchange of operationally relevant information on new psychoactive substances, which, although not under international control, pose a growing public health risk.

- **I2ES** (International Import and Export Authorization System) is the most recently launched INCB tool. It supports the secure exchange of import and export authorizations for the licit international trade in narcotic drugs and psychotropic substances and provides a safeguard against excess imports or exports. I2ES is an essential tool that all Governments should use to improve their treaty compliance efforts and enhance access to and rational use of medicines containing controlled substances.
INCB Learning – building the capacity of competent national authorities to ensure availability of controlled medicines while preventing their diversion and abuse

In early 2016, INCB launched its first activities under INCB Learning, a new project aimed at providing technical assistance to national authorities in complying with the international drug control conventions. The ultimate goal of the project is to ensure the availability of internationally controlled substances for medical and scientific purposes while preventing their abuse and diversion to illicit channels. In 2016, INCB Learning delivered two regional training seminars (in East Africa and South and East Asia and the Pacific) and two national awareness-raising workshops on the availability of narcotic drugs and psychotropic substances for medical and scientific purposes (Kenya and Thailand). Under INCB Learning, e-learning modules are being developed to extend the reach of training. Training and awareness-raising activities are planned for 2017 in other regions of the world. INCB Learning requires further and ongoing support to sustain and expand its activities.

More information about the composition of the Board and its work can be found at www.incb.org.
The International Narcotics Control Board (INCB) is the independent monitoring body for the implementation of the United Nations international drug control conventions. It was established in 1968 in accordance with the Single Convention on Narcotic Drugs, 1961. It had predecessors under the former drug control treaties as far back as the time of the League of Nations.

Based on its activities, INCB publishes an annual report that is submitted to the United Nations Economic and Social Council through the Commission on Narcotic Drugs. The report provides a comprehensive survey of the drug control situation in various parts of the world. As an impartial body, INCB tries to identify and predict dangerous trends and suggests necessary measures to be taken.