

Annual Report

Press Release No. 3

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EMBARGO:

1 March 2007 0001 hours GMT

REGIONAL HIGHLIGHTS

Africa

A particularly worrisome development in Africa is the large-scale trafficking in cocaine. Both the number of couriers apprehended and the volume of bulk seizures of cocaine in Africa have increased significantly. Taking advantage of the weak interdiction capacities in Africa, drug trafficking networks are using the region as a transit area for smuggling cocaine from South America through Western, Central and Southern Africa. In addition, heroin from West and South-East Asia is smuggled through Eastern Africa, to be shipped to illicit markets in Europe and, to a lesser extent, North America.

Cultivation and production of cannabis, which remains the major drug of abuse in Africa, are on the rise, despite a marked reduction in cannabis production in Morocco, the world's largest producer of cannabis resin, and despite intensive eradication efforts undertaken by the authorities.

Africa's share of global trafficking in cannabis has been increasing continuously, as corroborated by a number of multi-ton seizures of cannabis herb and resin in Africa during the last year. Many African countries face serious difficulties in providing adequate treatment and rehabilitation for persons abusing cannabis, as health-care facilities often lack the necessary resources.

As a spill over effect of the ongoing transit trafficking in heroin in Eastern Africa, the abuse of heroin has become a problem there. In addition, heroin is now also being smuggled by groups from Western Africa to that subregion, in exchange for cocaine that is smuggled into South Asia, where the abuse of cocaine appears to have spread. The trafficking in cocaine in Africa is fuelled by rising demand for, and abuse of, cocaine in Europe.

Misuse and abuse of pharmaceutical preparations containing controlled substances is taking place among persons in all social strata.

Efforts by African Governments to deal with these problems are impeded by a lack of adequate drug control mechanisms and skilled human resources. It is feared that if left unchecked, the problem of drug trafficking in Africa might further exacerbate existing social, economic and political problems.

Americas

Central America and the Caribbean

The region continues to be used as a major trans-shipment area for cocaine from South America destined for North America and Europe. About 90 per cent of the cocaine entering North America every year passes through Central America, while the Caribbean region is situated along one of the main cocaine trafficking routes leading to Europe. The main smuggling routes are the maritime corridor of the Pacific Ocean, and the Caribbean Sea.

Institutional weaknesses and corruption seriously undermine efforts by Governments to combat the drug problem. The link between local drug trafficking and organized crime perpetrated by youth gangs or "maras" in several countries in the region, especially El Salvador, Guatemala and Honduras, continues to be a problem. The smuggling of arms and ammunition in exchange for drugs continues to prevail in the region, as reported in Honduras and Panama.





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Trafficking in amphetamine-type stimulant precursors is increasing. There have been cases where a large amount of pharmaceutical preparations containing controlled precursors like ephedrine and pseudoephedrine has been legally imported into the region and then smuggled into South and North America, to be used in the illicit manufacture of drugs.

The use of money couriers and money transfer services to pay for illegal drug consignments is also on the rise. Money couriers have been detained in Antigua and Barbuda, El Salvador and Honduras.

North America

In the United States, the annual survey "Monitoring the Future" has shown a decline for four consecutive years in the proportion of secondary students using illicit drugs. As a result, the annual prevalence rate for various drugs is currently 10-30 per cent lower than it was 10 years ago. There has been a significant decline in the percentage of students in secondary school who reported lifetime use of cannabis; there have also been declines in their lifetime use of other drugs, such as methamphetamine, MDMA, cocaine and heroin. It appears that such declines are largely related to the rising percentage of adolescents perceiving the abuse of these drugs as high risk.

However, the high and increasing level of abuse of prescription drugs by both adolescents and adults is a serious cause of concern. The gradual increase in the abuse of sedatives (including barbiturates), tranquillizers and narcotic drugs other than heroin by the general population have resulted in prescription drugs becoming the second most abused class of drugs after cannabis. The abuse of prescription drugs such as fentanyl, oxycodone and hydrocodone has lead to a rising number of deaths. Of particular concern to the Board is the noticeable increase in the abuse of fentanyl, a synthetic opioid 80 times as potent as heroin, which is not only diverted from licit distribution channels but also illicitly manufactured in clandestine laboratories.

The spread in the abuse of prescription drugs is also related to the increasing use of the World Wide Web as a global drug market. Illegal Internet pharmacies continue to proliferate, despite international law enforcement efforts.

Methamphetamine abuse has become a serious health, law enforcement and political concern and the fastest-growing drug threat: 58 per cent of counties in the United States ranked it as their biggest drug problem. While United States drug law enforcement agencies have been successful in closing down illicit methamphetamine laboratories, domestic illicit manufacturers of methamphetamine have largely been replaced by transnational drug trafficking organizations, based in Canada and Mexico.

Large-scale manufacturing of methamphetamine in clandestine laboratories, particularly in the western and north-western parts of Mexico are now ensuring the continuing supply to United States markets as confirmed by increasing amounts seized on the border between Mexico and the United States (2 tons in 2004).

Cannabis abuse is rising in Canada from an annual prevalence among persons aged 15 and above of 6.5 per cent in 1989 to 14.1 per cent in 2004. Illicit cannabis plant cultivation has become a thriving illegal industry in Canada, including outdoor cultivation and more sophisticated indoor crop growing used to produce cannabis with high tetrahydrocannabinol (THC) content. The biggest producer of cannabis in the region is, however, Mexico. In addition to cannabis grown in Mexico, Mexican drug trafficking organizations have increased the size and sophistication of their cannabis plant cultivation operations on public and private lands in the United States, producing cannabis with a higher THC content by use of new techniques.

The involvement of organized criminal groups has led to Canada being used as a source country for cannabis, methamphetamine and MDMA for domestic abuse or for the illicit market in the United States. The importance of illicit methamphetamine exports to the United States has declined





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following the introduction of improved precursor controls in Canada in 2003, strengthening import and export licensing procedures. Significant legislative efforts have also been made by Mexico and the United States to counteract the surge of methamphetamine in the region. The United States has enacted new legislation (Patriot Act), restricting the sale of medication containing pseudoephedrine and ephedrine. Limits on imports of pseudoephedrine and ephedrine have also been introduced in Mexico.

Canada's rave scene continues the wide abuse of MDMA, MDA and *gamma*-hydroxybutyric acid (GHB) which has spread to far broader user groups, including youth attending clubs, private parties, secondary schools, colleges and universities.

Mexican drug trafficking organizations and criminal groups control most of the organized wholesale drug trafficking in the United States, in particular trafficking in cocaine, cannabis, methamphetamine and heroin. They are expanding their control of drug trafficking to areas formerly under the influence of Colombian, Dominican and other criminal groups.

South America

The total area under coca bush cultivation in the Andean subregion increased slightly in 2005, but the figure for 2005 still represented a decrease of 28 per cent compared with the figure for 2000. Slight decreases in the total area under coca bush cultivation in Bolivia and Peru were offset by an increase in Colombia despite intensified eradication efforts. The ability of coca bush growers to move their operations from one area to another adversely affected the results of eradication efforts by the Government of Colombia. Potential cocaine manufacture in the Andean subregion decreased by 3 per cent. Cocaine continues to reach the principal markets of the United States and Europe through the main trafficking routes in Central America and the Caribbean, as well as through Africa.

The Board notes with concern that the Government of Bolivia plans to introduce a new drug control policy with a view to using coca leaf for a wide range of products, which may not be in line with the Conventions.

In Peru, coca bush growers are putting pressure on the new Government to stop manual eradication of coca bush. In Argentina, under current legislation, the possession of coca tea or coca leaf in a natural state for chewing purposes is not considered to be possession or personal use of a narcotic drug. Moreover, the Board is concerned that the action in those countries could serve as a precedent and may send the wrong message to the public. The Board reminds Governments that it is the responsibility of the States parties to the international drug control treaties to ensure that the provisions concerning the cultivation of coca bush and the possession and use of coca leaves are adhered to, and the Board is ready to assist Governments in their efforts to fulfill that responsibility.

The implementation of measures aimed at countering drug trafficking, reducing illicit crop cultivation, preventing and fighting corruption related to drug trafficking and extraditing drug traffickers has met with resistance by violent groups in some countries in South America. The Board urges all Governments not to reduce their efforts to enforce their drug control policies, despite difficulties that they may be experiencing in that area.

Large amounts of precursor chemicals required for the illicit manufacture of drugs continue to be seized in most countries in South America, which indicates their availability for illicit purposes. Measures to counter smuggling, including measures used in controlling domestic distribution networks and investigating diversions of precursor chemicals, need to be further strengthened. Pharmaceutical preparations containing narcotic drugs and psychotropic substances are also smuggled into the countries in South America and sold over the counter in non-licensed outlets.





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Cannabis is regarded as the most widely abused drug in South America, although data collected in 2001-2005 indicate significant differences in the annual prevalence of abuse among the general population in the region. Cocaine abuse continues to account for most of the demand for treatment for drug abuse in South America, though the share accounted for by cocaine abuse has declined since the late 1990s. Several countries in the region carried out activities specifically aimed at the establishment of minimum standards of care for the treatment and rehabilitation of drug-dependent persons; the evaluation of the effectiveness of existing programmes for treatment and prevention; and, conducted studies on the prevalence of drug abuse.

ASIA

East and South-East Asia

Illicit opium poppy cultivation continued to decrease in almost all countries in East and South-East Asia, in particular, in Myanmar, the Lao People's Democratic Republic and Viet Nam.

Seizures of opium continued to be reported in countries in East and South East Asia. In 2005, Chinese law enforcement officers seized a total of 2.3 tons of opium. Law enforcement officials in Viet Nam also reported seizures of opium. There has been an increase in seizures of cocaine in the Hong Kong Special Administrative Region (SAR) of China.

Traffickers are attempting to arrange the illicit sale of drugs using the Internet and cellular phones. Attempts to smuggle illicit drugs into Japan through the postal system have increased.

The abuse of Amphetamine Type Stimulants (ATS) has emerged as a serious and fast-growing problem in the Lao People's Democratic Republic. Methamphetamine is the drug of choice among drug abusers in Japan, accounting for 83.5 per cent of the arrests for drug-related offences. It also remains the drug of choice among drug abusers in the Philippines, the Republic of Korea and Thailand. Methamphetamine is also widely abused in Brunei Darussalam, Indonesia, Myanmar and Singapore. Methamphetamine is rapidly gaining in popularity in Malaysia: more than twice as many people abused methamphetamine in that country in 2005 (15 per cent) than in 2004 (7 per cent). Drug abusers in China are also increasingly abusing methamphetamine.

Although the HIV epidemic remains concentrated among high-risk groups in East and South-East Asia, HIV infection continues to be a major problem in countries in the region where heroin is the drug of choice among persons who abuse drugs by injection.

South Asia

The trafficking of heroin from West Asia remains a problem. Though trafficking organizations use South Asia mainly as a transit point for the trafficking of heroin to markets in other regions, this trafficking also stimulates the illicit market in South Asia, leading to more abuse.

Unsafe practices surrounding abuse by injection remain one of the key factors in the spread of HIV/AIDS in the region. Though that is particularly true in India and Nepal, Bangladesh also has the potential for an HIV/AIDS epidemic outside of the subpopulation of those who abuse drugs by injection, and for that reason, governments of countries in the region need to remain vigilant.

Available information suggests an emerging trend of increasing abuse of and trafficking in cocaine in South Asia. In India in particular, there have been increasing seizures of cocaine, as well as evidence that the abuse of that drug is on the rise, particularly among the newly emerging wealthy population. Cannabis is also illicitly cultivated in several countries in South Asia, and is widely abused in the region.





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Long-standing problems with the licit control of pharmaceutical preparations containing controlled substances has led to their widespread abuse among all segments of the population, in particular in Bangladesh, India and Nepal. In India, the main problem drugs include cough syrups containing a high level of codeine and buprenorphine, which is the main drug of injection in most areas. Pharmaceutical preparations continue to be diverted from domestic distribution routes and are sold without prescription in pharmacies and various other retail outlets in the region.

West Asia

In Afghanistan, illicit opium poppy cultivation increased by 59 per cent in 2006 and the level of production increased nearly 50 per cent to a record 6,100 tons. It is estimated that Afghan opiates are trafficked predominantly through Iran (Islamic Republic of), Pakistan and countries in Central Asia. As a consequence of continuing large scale opium poppy production in Afghanistan, those countries are faced with a wide range of problems related to large-scale drug trafficking, such as organized crime, corruption and relatively high illicit demand for opiates. For example, Iran (Islamic Republic of) has the highest rate of opiate abuse in the world.

Illicit cultivation of opium poppy is increasing in Pakistan; one new trend is the smuggling of heroin from Pakistan into China, where information indicates that besides supplying the domestic market, the heroin is further smuggled into Europe via Hong Kong SAR.

In addition, the abuse of amphetamine type stimulants (ATS) is spreading in various countries in West Asia, including Iran (Islamic Republic of), Turkey and several countries on the Arabian peninsula.

Though drug seizures in Central Asia decreased significantly in 2005, it appears that there was no decrease in the amount of drugs trafficked through the region. In 2006, opium production in north-eastern Afghanistan increased, resulting in a rising level of drug trafficking through Central Asia. The abuse of drugs in Central Asia continued to increase, and a rise in drug abuse by injection fuelled the spread of HIV/AIDS.

Armenia, Azerbaijan and Georgia, which are situated in the southern Caucasus, border Iran (Islamic Republic of), Russian Federation and Turkey and have coastlines along the Black Sea and the Caspian Sea, are experiencing an increase in drug trafficking and abuse.

EUROPE

Cannabis continues to be the most commonly abused drug in Europe. According to European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) estimates, about 6 per cent of the adult population in the member States of the European Union and in Iceland, Liechtenstein, Norway and Switzerland have tried cannabis once in their lifetime. The prevalence rate for cannabis abuse has been consistently high among young adults (persons 15-34 years of age) in Europe.

In some countries, new legislation was adopted with the aim of identifying and removing regulatory barriers to the use of narcotic drugs and psychotropic substances for pain management. Other European counties amended their drug laws concerning penalties for possession and trafficking offences. According to EMCDDA, there is a general tendency across Europe to reduce penal sanctions for personal use in favour of administrative sanctions and at the same time, increase custodial penalties for drug trafficking offences.

The Board notes with concern that, despite its ongoing dialogue with the Governments concerned, rooms for abuse of drugs, including by injection, remain in operation in a number of European countries in violation of the international drug control treaties. The Board encourages all Governments to ensure





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that efficient measures are taken to address drug abuse and the spread of HIV/AIDS, in compliance with their obligation under the international drug control treaties. The Board urges the Governments of countries where rooms for the abuse of drugs are in operation to continue their efforts to ensure that adequate services are made available to those in need of treatment, rehabilitation and social integration in conformity with the international drug control treaties, rather than continue operating such rooms.

Europe has become the second largest illicit market for cocaine in the world. The total amount of cocaine seized in Europe and the number of persons who abuse that drug have increased compared with the previous year. Cocaine abusers account for about 10 per cent of drug abusers admitted for treatment in the European Union. The countries in Europe with the highest prevalence rate of cocaine abuse are Spain and the United Kingdom.

Europe continues to be one of the main illicit markets in the world for stimulants. Only cannabis is more commonly abused than MDMA ("ecstasy"). The main source of illicitly manufactured amphetamine-type stimulants in Europe continues to be the Netherlands, followed by Poland, Belgium, Lithuania and Estonia. The illicit manufacture of amphetamines continues to expand throughout Europe.

The abuse of methamphetamine continues to be reported by the authorities in the Czech Republic, Estonia, Latvia and Slovakia. The illicit manufacture of methamphetamine appears to be taking place on a small scale but is growing, the main source countries being the Czech Republic, Lithuania, Republic of Moldova and Slovakia.

Heroin abuse has remained largely stable and even declined in Western and Central Europe, while the level of abuse of opiates has increased in Eastern Europe, particularly in members of the Commonwealth of Independent States (CIS) and countries in South-Eastern Europe along the Balkan trafficking route. Several countries in Eastern Europe also report increasing abuse and trafficking of illicitly manufactured fentanyl and 3-methylfentanyl, two narcotic drugs with a much higher potency than heroin.

OCEANIA

Cannabis continued to be abused in many countries in Oceania, being the drug of choice among drug abusers in Australia, Micronesia (Federated States of), New Zealand, Papua New Guinea, Samoa, Solomon Islands, Tonga and Vanuatu. However, a survey by the Australian Department of Health and Ageing found that fewer secondary school children are abusing cannabis. In 2005, 18 per cent of secondary school students had abused cannabis, compared to 35 per cent in a similar survey conducted in 1996. Micronesia (Federated States of) and Papua New Guinea have the highest prevalence of cannabis abuse in the region. The majority of the cannabis abused in Australia continues to have been produced in that country.

The illicit manufacture of methamphetamine remains a problem in Australia. Most of the pseudo-ephedrine used in illicit methamphetamine manufacture has been extracted from commercially available pharmaceutical preparations. The abuse (including by smoking) of methamphetamine among young drug abusers is increasing in Australia. There are indications that Oceania may be developing into a significant transit area and a potential consumption area for methamphetamine.

There was evidence of large-scale illicit manufacture of MDMA in Australia, particularly during the last quarter of 2005. Oceania continues to be used as a major trans-shipment area for illicit drugs.

