

**INTERNATIONAL NARCOTICS CONTROL BOARD**

**Geneva**

**Report of the International Narcotics  
Control Board**

for 1976



**UNITED NATIONS**

## THE INTERNATIONAL NARCOTICS CONTROL BOARD

The International Narcotics Control Board is the successor both of the Permanent Central Board, whose origin dates back to the 1925 Convention, and of the Drug Supervisory Body established under the 1931 Convention. It was created by the 1961 Convention to promote compliance by Governments with the various drug control treaties. Thus it acts on behalf of all the Parties to these treaties, performing its functions within the framework of the United Nations. Members of the Board are elected under the terms of the treaties by the United Nations Economic and Social Council not as representatives of their Governments but in their personal capacity.

Article 9 of the Single Convention on Narcotic Drugs, 1961, as amended by the 1972 Protocol, defines the composition and functions of the Board as follows:

### *Composition and Functions of the Board*

1. *The Board shall consist of thirteen members\* to be elected by the Council as follows:*

*(a) three members with medical, pharmacological or pharmaceutical experience from a list of at least five persons nominated by the World Health Organization; and*

*(b) ten members from a list of persons nominated by the Members of the United Nations and by Parties which are not Members of the United Nations.*

2. *Members of the Board shall be persons who, by their competence, impartiality and disinterestedness, will command general confidence. During their term of office they shall not hold any position or engage in any activity which would be liable to impair their impartiality in the exercise of their functions. The Council shall, in consultation with the Board, make all arrangements necessary to ensure the full technical independence of the Board in carrying out its functions.*

3. *The Council, with due regard to the principle of equitable geographic representation, shall give consideration to the importance of including on the Board, in equitable proportion, persons possessing a knowledge of the drug situation in the producing, manufacturing, and consuming countries, and connected with such countries.*

4. *The Board, in co-operation with Governments, and subject to the terms of this Convention, shall endeavour to limit the cultivation, production, manufacture and use of drugs to an adequate amount required for medical and scientific purposes, to ensure their availability for such purposes and to prevent illicit cultivation, production and manufacture of, and illicit trafficking in and use of, drugs.*

5. *All measures taken by the Board under this Convention shall be those most consistent with the intent to further the co-operation of Governments with the Board and to provide the mechanism for a continuing dialogue between Governments and the Board which will lend assistance to and facilitate effective national action to attain the aims of this Convention.*

*(continued on page iii of cover)*

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\* At present, the Board is composed of eleven members. Following elections that took place during the sixtieth session of the Economic and Social Council, thirteen members were elected and their terms of office will begin on 2 March 1977.

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## Summary

### DEVELOPMENT OF INTERNATIONAL DRUG CONTROL SINCE 1968

This is the last report of the Board as presently composed and therefore it reviews briefly the development of international drug control since 1968 when the INCB succeeded the Permanent Central Board and the Drug Supervisory Body.

During that period, many Governments became more conscious of the extent of the dangers posed by drug abuse. Action was taken at the national level, but it was also clear that there was a growing need for international co-operation. Two new treaties were therefore drafted and both came into force recently, namely the 1971 Convention on Psychotropic Substances and the 1972 Protocol amending the 1961 Single Convention on Narcotic Drugs.

In addition, realizing the necessity of providing technical and financial assistance to countries which endeavoured to meet their treaty obligations but lacked adequate resources to do so, in 1971 the General Assembly set up the United Nations Fund for Drug Abuse Control. Many projects have already been implemented with the assistance of the Fund, and it is to be hoped that voluntary contributions will continue to increase in order to meet the substantial needs which exist.

Regional and inter-regional co-operation has also intensified and the Board hopes that this will continue to develop.

### OPERATION OF THE INTERNATIONAL DRUG CONTROL SYSTEM

The reports supplementing the present document \*/ show the information communicated by Governments to the Board in application of the systems of estimates of legitimate needs and of statistics on the movement of narcotic drugs.

With the coming into force of the 1971 Convention on Psychotropic Substances, it is hoped that national control measures taken by Governments will reduce the possibility of obtaining these drugs for non-medical purposes.

### SUPPLY OF RAW MATERIALS FOR THE LICIT MANUFACTURE OF OPIATES

Since 1973 the Board has annually published a brief analysis of the supply of raw materials for the licit manufacture of opiates. After a series of poor harvests, it appears that the production potential is now much greater than in the past. It will clearly take time to replenish stocks of opiates to an appropriate level. However the situation should be followed closely and steps taken to avoid an excessive accumulation of drugs in the future.

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\*/ Estimated World Requirements of Narcotic Drugs and Estimates of World Production of Opium in 1977 (E/INCB/34); Statistics on Narcotic Drugs for 1975 (E/INCB/35); Comparative Statement of Estimates and Statistics for 1975 (E/INCB/36).

## ANALYSIS OF THE WORLD SITUATION

While keeping under constant review the drug control situation in all countries the Board gives special attention in this report to more than 15 countries where control problems associated with drug abuse, illicit traffic, or the uncontrolled or illicit production of narcotic raw materials are the most serious.

## CONCLUSION

Progress has been achieved during the last few years, through both the drafting and entry into force of two new treaties having world-wide application and the development of bilateral relations between States on matters relating to drug abuse control. Regional co-operation has also been enhanced and technical and financial assistance has been extended to an increasing number of countries in order to assist them in meeting their treaty obligations. In this connexion the Board appeals to all countries to increase their contributions to the Fund.

There are three aspects to the drug problem: illicit supply, illicit demand and the traffic which links this supply with demand. As regards supply, sources of supply have shifted rather than diminished. Moreover, demand is far from having decreased and it continues to raise numerous and complex problems. The Board therefore appeals to Governments not to relax their efforts and to continue to give priority to the prevention of abuse and to treatment programmes, while at the same time continuing to curb illicit traffic. Otherwise there is a danger that the situation may further deteriorate and require not only more intensive but also more expensive counter-measures.

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## INTERNATIONAL DRUG CONTROL AGREEMENTS

International Opium Convention signed at The Hague on 23 January 1912.

Agreement concerning the Manufacture of, Internal Trade in and Use of Prepared Opium, signed at Geneva on 11 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

International Opium Convention signed at Geneva on 19 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Convention for limiting the manufacture and regulating the distribution of narcotic drugs, signed at Geneva on 13 July 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Agreement for the Control of Opium Smoking in the Far East, signed at Bangkok on 27 November 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Convention for the suppression of the illicit traffic in dangerous drugs, signed at Geneva on 26 June 1936, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Protocol amending the Agreements, Conventions and Protocols on Narcotic Drugs concluded at The Hague on 23 January 1912, at Geneva on 11 February 1925 and 19 February 1925 and 13 July 1931, at Bangkok on 27 November 1931 and at Geneva on 26 June 1936, signed at Lake Success, New York, on 11 December 1946.

Protocol signed at Paris on 19 November 1948 bringing under international control drugs outside the scope of the Convention of 13 July 1931 for limiting the manufacture and regulating the distribution of narcotic drugs, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Protocol for limiting and regulating the cultivation of the poppy plant, the production of, international and wholesale trade in, and use of opium, signed at New York on 23 June 1953.

Single Convention on Narcotic Drugs, signed at New York on 30 March 1961.

Convention on Psychotropic Substances, signed at Vienna on 21 February 1971.

Protocol amending the Single Convention on Narcotic Drugs, 1961, signed at Geneva on 25 March 1972.

## ABBREVIATIONS

The following abbreviations are used, except where the context otherwise requires:

<u>ABBREVIATION</u>	<u>FULL TITLE</u>
Board (or INCB)	International Narcotics Control Board
Commission on Narcotic Drugs (or Commission)	Commission on Narcotic Drugs of the Economic and Social Council
Council	Economic and Social Council
1925 Convention	International Opium Convention, signed at Geneva on 19 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946
1931 Convention	Convention for limiting the manufacture and regulating the distribution of narcotic drugs, signed at Geneva on 13 July 1931, as amended by the Protocol, signed at Lake Success, New York, on 11 December 1946
1961 Convention	Single Convention on Narcotic Drugs, signed at New York on 30 March 1961
1971 Convention	Convention on Psychotropic Substances, signed at Vienna on 21 February 1971
Division of Narcotic Drugs (or Division)	Division of Narcotic Drugs of the United Nations Secretariat
Fund	United Nations Fund for Drug Abuse Control
General Assembly	General Assembly of the United Nations
1953 Protocol	Protocol for limiting and regulating the cultivation of the poppy plant, the production of, international and wholesale trade in, and use of opium, signed at New York on 23 June 1953
1972 Protocol	Protocol amending the Single Convention on Narcotic Drugs, 1961, signed at Geneva on 25 March 1972
Secretary-General	Secretary-General of the United Nations
WHO	World Health Organization

## FOREWORD

Annual reports on the work of the International Narcotics Control Board are prepared in conformity with the 1961 Convention and earlier treaties on narcotic drugs. Article 15 of the 1961 Convention provides that the "Board shall prepare an annual report on its work and such additional reports as it considers necessary".

This is the third and last report submitted by the Board with its present membership; the terms of office of its members expire in 1977.

### Membership of the Board

Article 10 of the 1961 Convention provides that the members of the Board shall be elected by the Council for a term of three years. At its resumed fifty-fourth session (May-June 1973), the Council elected the following members who entered on their current term of office on 2 March 1974:

Mr. D.P. ANAND

Former Chairman, Tariff Commission (India); Chairman, Central Board of Excise and Customs and Head of Narcotics Department, Government of India; head of Indian delegations to the United Nations Commission on Narcotic Drugs, 1968, 1969, 1970 (second Vice-President), 1971 (first Vice-President), the United Nations Conference for the Adoption of a Protocol on Psychotropic Substances (Vienna 1971), the United Nations Conference to Consider Amendments to the Single Convention on Narcotic Drugs 1961 (Geneva, 1972); member of the Board since 1974 and Vice-President in 1976.

Professor Michel A. ATTISSO

Professor at the Faculty of Pharmacy of Montpellier and lecturer at the School of Medicine of the University of Lomé; Chief Pharmacist at the University Hospital Centre of Montpellier; member of the Academy of Pharmacy and of the Overseas Academy of Sciences; expert of the World Health Organization; member and Honorary President of the Scientific Council of the Organization of African Unity; member of the Board since 1968; Vice-President of the Board from 1971 to 1974.

Dr. Nikolai K. BARKOV

Chief, Laboratory for the Pharmacology of Narcotic Drugs, Serbsky Institute of Forensic Psychiatry, Moscow; member of the Presidium of the Pharmacology Committee of the Ministry of Public Health of the USSR; member of the World Health Organization Expert Advisory Panel on Drug Dependence; member of the Board since 1971.

Dr. Ross A. CHAPMAN

Formerly Assistant Deputy Minister, Food and Drugs, Ottawa, Canada; head, Canadian delegations to the United Nations Commission on Narcotic Drugs, 1970-1973; head, Canadian delegations to the United Nations Conference for the Adoption of a Protocol on Psychotropic substances (Vienna, 1971) and the United Nations Conference to consider Amendments to the Single Convention on Narcotic Drugs, 1961 (Geneva, 1972); member of the Board since 1974, and Vice-President in 1974.

Professor Ramón de la FUENTE-MUÑIZ

Professor and Head of the Department of Medical Psychology, Psychiatry and Mental Health, Faculty of Medicine of the National University of Mexico; Vice-President of the World Psychiatric Association (1971-1976); former President of the Medical Association of Psychiatry and the National Academy of Medicine of Mexico; former member of the General Health Council of the Mexican Republic; member of the Board since 1974.

Professor Sükrü KAYMAKÇALAN

Chairman of the Department of Pharmacology, Medical Faculty of Ankara University; member of the World Health Organization Expert Advisory Panel on Drug Dependence; member of the Board since 1968 and Vice-President since 1975.

Sr. Frederick MASON, K.C.V.O., C.M.G.

Ambassador to Chile (1966-1970); Permanent Representative of the United Kingdom to the Office of the United Nations and other International Organizations in Geneva (1971-73); member of the Board since 1974.

Professor Victorio V. OLGUIN

Professor in the Faculty of Medical Sciences, University of Buenos Aires; Brigadier (Medical Corps) in the Argentine Air Force; Director of International Health Relations in the Ministry of Social Welfare and Public Health; representative of the Argentine Government at the World Health Organization and the Pan-American Health Organization; President of the XVIIIth World Health Assembly; expert of the World Health Organization; representative of the Argentine Government at the United Nations Conference for the Adoption of a Protocol on Psychotropic Substances and at the United Nations Conference to Consider Amendments to the Single Convention on Narcotic Drugs, 1961; member of the Board since 1974 and Vice-President in 1975.

Mr. Martin R. POLINER

Attorney, private practice, New York City; former Director, Office of Law Enforcement and Deputy Assistant Secretary, United States Treasury Department (Washington, D.C.); former member, United States delegation to Interpol General Assemblies and to the United Nations Commission on Narcotic Drugs; member of the Board since 1974.

Professor Paul REUTER

Professor in the Faculty of Law and Economics, Paris; member of the Permanent Court of Arbitration, The Hague; member of the United Nations International Law Commission; member of the Permanent Central Narcotics Board from 1948 to 1968 and its Vice-President from 1953 to 1968; member of the Board since 1968, its Vice-President in 1973 and its President since 1974.

Dr. Tsutomu SHIMOMURA

Director, National Institute of Hygienic Sciences; former Counsellor, Pharmaceutical Affairs Bureau, Ministry of Health and Welfare; member of Central Pharmaceutical Affairs Council; representative of Japan in the United Nations Commission on Narcotic Drugs from 1967 to 1973; speciality, Pharmacognosy. Member of the Board since 1974.

Full curricula vitae of the members of the Board are reproduced in the report for 1974 (E/INCB/25, pp. 2 to 6).

At its eighteenth session, the Board elected Professor P. Reuter President, and Mr. D.P. Anand and Professor S. Kaymakçalan Vice-Presidents. Their terms of office will come to an end the day before the opening of the first session of the Board in 1977.

### Sessions in 1976

The Board held its eighteenth session from 17-28 May and its nineteenth session from 14 October to 5 November 1976. The Secretary-General of the United Nations was represented at the eighteenth session by Mr. J.G. de Beus, Executive Director of the United Nations Fund for Drug Abuse Control, and Dr. G. Ling, Director of the Division of Narcotic Drugs and, at the nineteenth session, by Mr. V. Winspeare Guicciardi, Director-General of the United Nations Office at Geneva accompanied by Dr. G. Ling. The World Health Organization was represented at the eighteenth and nineteenth sessions by Dr. V. Fattorusso, Director of the Division of Prophylactic, Diagnostic and Therapeutic Substances, and Dr. I. Khan and Dr. P. Hughes of the Office of Mental Health.

### Representation at international conferences or meetings

The Board was represented at the following international conferences or meetings :

1. United Nations: Economic and Social Council (sixtieth session, New York, April-May 1976 and sixty-first session, Geneva, July-August 1976); Committee for Programme and Co-ordination (sixteenth session, New York, May-June 1976). Commission on Narcotic Drugs (fourth special session, Geneva, February 1976); Inter-Agency Advisory Committee on Drug Abuse Control (fourth session, Geneva, September 1976); Study Tour of the Sub-Commission on the Illicit Traffic and Related Matters in the Near and Middle East (October 1976); Study Group on Measures to reduce illicit Demand for Drugs (Geneva, November 1976); Third Meeting of Operational Heads of Narcotic Law Enforcement Agencies, Far East Region (Manila, November 1976).
2. World Health Organization: twenty-ninth World Health Assembly (Geneva, May 1976); fifty-seventh and fifty-eighth sessions of the Executive Board (Geneva, January and May 1976); Meeting on Research and Reporting Programme on the Epidemiology of Drug Dependence (Geneva, September 1976); Meeting on encouraging comparability in drug use surveys of young people (Geneva, September 1976); Meeting of WHO Advisors on the Implementation of the 1971 Convention on Psychotropic Substances (Geneva, October 1976); Meeting on Research on the Dependence Liability of Thebaine and its Derivatives (Geneva, October 1976).

3. United Nations Educational, Scientific and Cultural Organization (UNESCO):  
Regional Meeting on Drug Abuse Education (Lima, January 1976).
4. Intergovernmental and non-governmental organizations: The Board, having been invited, was represented at some meetings and conferences on narcotic drugs organized in 1976 by the Customs Co-operation Council, the Council of Europe, the International Council on Alcohol and Addictions and the International Criminal Police Organization (Interpol).

#### Composition and constitution of the Board pursuant to the 1972 Protocol amending the 1961 Convention

Article 9 of the 1961 Convention as amended by the 1972 Protocol provides that the Board shall henceforth consist of 13 members. Although the amended article 10 of the Convention states that members of the Board shall be elected for five years, transitional provisions are set forth in article 20 of the 1972 Protocol for members elected at the first election. Article 20, paragraph 3, provides that the terms of office of six members shall expire at the end of three years and the terms of office of the other seven members at the end of five years. At its sixtieth session, the Economic and Social Council elected the members of the Board. In accordance with article 20, paragraph 4, of the 1972 Protocol, lots were drawn after the election to determine when the terms of office of the new members would expire. The outcome was as follows:

#### Members whose term of office will expire in 1980:

Professor R. de la Fuente-Mufiz, Dr. H.E. Ehrhardt, Dr. D. Garces-Giraldo, Dr. M. Kchouk, Dr. A.W. Sadek and Dr. T. Shimomura.

#### Members whose term of office will expire in 1982:

Dr. N. Barkov, Professor D. Bovet, Dr. T.L. Chrusciel, Miss B. Gough, Professor S. Kaymakçalan, Professor P. Reuter and Dr. J.S. Saleh.

#### Nomenclature of countries and territories

In referring to political entities, the Board is guided by the rules governing the practice of the United Nations. The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever on the part of the Board concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

#### Personnel

In accordance with the provisions of article 16 of the 1961 Convention, as amended by the 1972 Protocol, the Secretary-General has appointed Mr. S. Stepczyński Secretary of the Board, after consultation with the Board which put forward a unanimous recommendation. The appointment will take effect on 1 February 1977. Mr. S. Stepczyński will succeed Mr. J. Dittert who is retiring on 31 January 1977.

At this time, the Board wishes to pay tribute to Mr. J. Dittert for the outstanding work he has accomplished in its service over 40 years, during the last 10 of which he served as head of the Board's secretariat. His complete knowledge of the international control system coupled with his understanding of the spirit behind this control have been vital during this latter period when two important international treaties have been drafted and put into force. In all circumstances his advice has greatly assisted the Board in enabling it to carry out its responsibilities effectively and the members of the Board are deeply grateful to him.

## DEVELOPMENT OF INTERNATIONAL DRUG CONTROL SINCE 1968

1. Following the decision of the Economic and Social Council, the Board, as constituted in accordance with the amendments contained in the 1972 Protocol, will take up its duties in March 1977. The Protocol modifies the structure of the present Board since it increases the number of its members from eleven to thirteen and extends their terms of office from three to five years; moreover, it increases the functions of the Board. 1/ This is a new development and the Board considers it appropriate to review briefly the development of international drug control since 1968 when the INCB succeeded both the Permanent Central Board and the Drug Supervisory Body. 2/

### Increased Government awareness of the size of the drug abuse problem

2. Towards the middle of the 1960s, many Governments became more aware of the extent of the danger of drug abuse. Previously, the use of certain psychotropic substances, such as LSD, amphetamines or barbiturates, had caused only isolated concern. In parallel with the rapid increase in the abuse of psychotropic substances, many countries began to admit openly that the abuse of narcotic drugs was becoming widespread, particularly among some young people.

3. The magnitude of the problem led to action at the national level. Several countries set up commissions to study the nature and extent of the problem and possible means of dealing with it. More national resources were earmarked for measures to reduce the illicit demand for drugs and enforcement efforts were intensified. At the same time public opinion changed and increasingly drug addiction was considered a sickness requiring treatment rather than a criminal act.

4. Action taken at the national level was a decisive first step but it was also evident that there was a growing need for international co-operation.

### New treaties

5. In 1956 the Commission on Narcotic Drugs 3/ called the attention of the international community to the dangers inherent in the abuse of amphetamines and recommended that Governments bring them under control. The World Health Organization 4/ gave a similar warning regarding the misuse of sedatives which it observed was approaching epidemic growth among young people in certain countries. The Board itself stressed in its annual reports for 1963 and 1965 5/ that addicts

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1/ See documents E/INCB/25, paras. 185-193, and E/INCB/29, paras. 11-15.

2/ For an analysis of the results obtained under the administrative international drug control system from the time of its inception to 1966, see document E/OB/22, paras. 26-45.

3/ Document E/2891 - E/CN.7/315, para. 328.

4/ Eighteenth World Health Assembly, May 1965, Resolution 47.

5/ E/OB/19, para. 34 and E/OB/21, para. 164, respectively.

deprived of narcotic drugs might turn to those substances not yet under international control. Some of the countries more directly affected had at the time enacted legislation along the lines recommended by the Commission and the WHO. However the measures imposed by these laws proved inadequate. In 1966 the Commission on Narcotic Drugs unanimously recommended that an international agreement be adopted on the subject of control of psychotropic substances. <sup>6/</sup> This recommendation, which naturally had the full support of the Board, was implemented in 1971 by the adoption in Vienna of the Convention on Psychotropic Substances. Resolution I of the Vienna Conference and Resolution 1576 (L) of the Economic and Social Council requested Governments to apply provisionally to the extent that they were able to do so, the measures of control provided in the Convention pending its entry into force, and a questionnaire was sent to Governments by the Board as from 1971; this elicited a wide response. This provisional application has given the Board an opportunity to gain some experience in the working of this treaty prior to its entry into force in August 1976. <sup>7/</sup> The continuing joint efforts of Governments and international organizations concerned should now result in reducing the availability of these drugs for non-medical purposes.

6. Towards the end of the 1960s and in the early 1970s, heroin addiction increased considerably in many parts of the world. It now affects hundreds of thousands of people in Western Europe, in certain Asian countries and in North America. The need to combat this scourge by more stringent measures against production of and traffic in illicit opium and opiates was one of the factors leading to the drafting of the 1972 Protocol amending the Single Convention on Narcotic Drugs, 1961, which entered into force in 1975. This treaty confers additional responsibilities on international organizations, and in particular on the Board, in order to permit them to endeavour, in co-operation with Governments, to contain the illicit traffic.

7. By drawing up and then ratifying these two treaties Governments have indicated their willingness to assume further obligations, to exchange information, and to entrust international drug control bodies with wider-ranging responsibilities. The international nature of the drug problem is now much more widely recognized and this is bound to make the continuing campaign against drug abuse much more effective.

#### Technical and financial assistance

8. When the International Narcotics Control Board met for the first time eight years ago, virtually no funds were available from international sources for technical and financial assistance to countries which lacked adequate resources for the full application of the provisions of the treaties. Many countries were unable to embark upon replacement of illicit crops or on enforcement, prevention or treatment programmes as they lacked both the qualified staff and the financial means required.

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<sup>6/</sup> E/4294 - E/CN.7/501, para. 298

<sup>7/</sup> See paragraphs 23 to 30 below.

9. A number of industrialized countries provided and have continued to provide bilateral assistance to countries where raw materials are illicitly produced for the illegal manufacture of drugs. Such assistance aims at curtailing production and traffic, thus reducing the volume of drugs available.

10. In 1971, the General Assembly set up the United Nations Fund for Drug Abuse Control. The finances thus currently available to the international community for drug abuse control, although still inadequate, are nevertheless much greater than they were five years ago. Since the Fund's creation, 65 countries have voluntarily contributed a total of US \$ 23 million; however, the amounts contributed vary greatly from one country to another.

11. This has enabled the Fund to finance various projects concerned with: crop replacement, research into income substitutes as alternatives to poppy cultivation, the treatment and rehabilitation of addicts, the training of enforcement personnel and of laboratory staff, scientific research, the promotion of regional co-operation, and direct assistance to improve the functioning of national control agencies.

12. The reduction of illicit cultivation of narcotic raw materials is one of the primary objectives of the Fund when assisting Governments in implementing these projects. It is also clear that such projects have a beneficial effect on the general health and socio-economic welfare of the population concerned. Therefore affected countries should, within the framework of their economic development plan, allocate more of the assistance given to them, particularly by the United Nations Development Programme and the International Bank for Reconstruction and Development, to those areas where illicit or uncontrolled narcotic cultivation exists.

13. It is nevertheless of vital importance that the Fund should continue to have adequate resources at its disposal. The Board therefore wishes to express its appreciation for the generous contributions already made by some Governments and its hope that the number of donors, as well as the amounts contributed, will increase.

14. The 1972 Protocol specifically assigns to the Board the responsibility of recommending to the competent bodies of the United Nations and the specialized agencies that assistance should be given to countries endeavouring to improve their drug control systems. As in the past, the Board will co-operate fully with Governments and international organizations and agencies to this end.

#### Regional and inter-regional co-operation

15. Experience of the past eight years has also demonstrated a growing awareness on the part of Governments of the need to co-ordinate their drug control efforts at the regional level. The problems raised by illicit traffic or by drug addiction are often similar, or at least related, in countries adjacent to each other.

16. Awareness of the need to deal with such problems at the regional level prompted the Commission on Narcotic Drugs to set up a Sub-Commission on Illicit Traffic and Related Matters in the Near and Middle East in order to further the co-operation between the Afghan, the Iranian, the Pakistani and the Turkish Governments through regular meetings. The Commission also set up an Ad Hoc

Committee on Illicit Traffic in the Far East Region. The latter recommended inter alia that meetings should be held for the heads of drug enforcement agencies in the Far East Region. At the meetings, organized by the Division of Narcotic Drugs, participants can discuss the problems which they face, meet their counterparts, and work out joint regional solutions. In December 1976, the Division will also organize a meeting of a Consultative Group on Illicit Traffic in Eastern and Central Europe. The Board participates in these valuable meetings in the capacity of an observer.

17. Several intergovernmental regional organizations, with which the Board maintains relations, have also set up programmes to enable members to co-ordinate their drug control campaigns. These organizations include the International Arab Narcotics Bureau of the League of Arab States, the Council of Europe, the European Economic Community, the Colombo Plan, and the States of South America parties to the treaty on narcotic drugs and psychotropic substances which came into force in 1976. 8/ The Association of South East Asian Nations, consisting of Indonesia, Malaysia, the Philippines, Singapore and Thailand, is also concerned with the drug threat and, in July 1976, published a declaration setting forth the principles of a campaign against drug abuse.

18. The International Criminal Police Organization/Interpol took an important step when it organized the Ad Hoc South-East Asian-Western European Meeting for Heads of Drug Enforcement Agencies at Chiang Mai, Thailand, from 12 to 16 July 1976. This inter-regional conference, at which the Board was represented by an observer, enabled officials responsible for the campaign against illicit traffic in South-East Asia and in Western Europe to become acquainted and to attempt to work out joint solutions to the problems connected with the campaign against illicit heroin traffic.

19. All these activities provide the necessary support for the international community's campaign against narcotic drug abuse. They should therefore be continued and, if possible, intensified.

#### OPERATION OF THE INTERNATIONAL DRUG CONTROL SYSTEM

##### Narcotic drugs

20. The Board maintains a continuing dialogue with Governments in the discharge of the responsibilities assigned to it under the international treaties on the control of narcotic drugs. The information Governments provide enables the Board to study the licit movement of such drugs thereby ensuring that all Governments are taking the measures prescribed under the treaties to limit the manufacture and importation of narcotic drugs to the quantities required for medical and scientific purposes, and that precautions are taken to prevent their diversion to the illicit traffic. These contacts with Governments, which are usually by exchange of correspondence and discussions with Governmental Representatives in Geneva, also take place when fact-finding missions visit a country and consultations are held directly with the competent national authorities, when national drug control officials visit Geneva,

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8/ See the report of the Board for 1975, E/INCB/29, paras. 93-98.

or at seminars organized by the Board's secretariat with the financial assistance of the Fund. Such seminars were held in 1974 at Geneva for French-speaking officials and in 1975 at Cairo (Arab Republic of Egypt) for English-speaking officials. A seminar will be held for Spanish-speaking officials at Santa Cruz (Bolivia) in December 1976.

21. Each year, the Board publishes three reports which supplement this document and contain information communicated to it by Governments in accordance with the international treaties. These three reports provide estimated world requirements of narcotic drugs and estimates of world production of opium, 9/ statistics on narcotic drugs accompanied by an analysis of the major trends in the licit movement of narcotic drugs, 10/ and a comparative statement of estimates and statistics on narcotic drugs, 11/ which permits the verification of whether Governments have adequately applied the treaty provisions.

22. Even in the case of States which possess an excellent internal control system, it is necessary, in order that the aims of the international conventions should be fully achieved that all should participate in the international control system. Where there is no formal adhesion to the treaties, this participation can be brought about through a voluntary and spontaneous initiative on the part of those countries which consider that they are not yet in a position to adhere to the treaties. The Board therefore hopes that de facto co-operation will soon re-enforce existing friendly relations with the People's Republic of China and which it is endeavouring to establish with the Socialist Republic of Viet Nam and with the Democratic People's Republic of Korea.

Psychotropic substances: Entry into force of the 1971 Convention

23. The 1971 Convention on Psychotropic Substances entered into force in August 1976, that is, twenty years after the Commission on Narcotic Drugs first took note of the dangers arising from the abuse of amphetamines and recommended that Governments should provide adequate measures of control. 12/

24. During these twenty years a steadily increasing number of Governments has become aware of the problems presented by the abuse of these drugs, as well as of hallucinogens, barbiturates and tranquillizers. Barbiturates can create physical dependence, as can tranquillizers to a lesser degree and the withdrawal process is in many respects more difficult than in the case of heroin addiction. It has also been shown that there is a correlation between the abuse of amphetamines and the commission of violent crimes.

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9/ E/INCB/34.

10/ E/INCB/35.

11/ E/INCB/36.

12/ E/2891, para. 328, see also para. 5 above.

25. The adoption of stricter legislation and the establishment of more effective national control agencies have not yet proved successful in preventing the spread of the abuse of psychotropic substances. Increasing quantities of these drugs have appeared on the illicit market on every continent.

26. With the exception of hallucinogens, a large portion of psychotropic substances which are abused come from licit sources. The situation is rather similar to that which existed regarding opiates in the 1920s and 1930s. At that time, a considerable proportion of the heroin and morphine used for non-medical purposes was produced legitimately. This was one of the main reasons why the 1925 and 1931 Conventions were adopted. The Conventions required Governments to inform the Board of the movement of narcotic drugs throughout the world, and this information enabled the Board to detect diversions to the illicit traffic and to inform the Governments concerned. This system is effective and may be advocated unreservedly since only a very small proportion of the opiates abused at the present time come from licit sources.

27. In view of the effectiveness of the system and of the experience gained in the course of its application, the authors of the 1971 Convention naturally based their text on the treaties on narcotic drugs. For this reason, this Convention, like those which preceded it, specifies amongst other provisions, that the manufacture of, trade in, and distribution of psychotropic substances must be under licence and that premises must be inspected periodically. The drugs may be obtained only on medical prescription. Import and/or export authorizations are required for substances in Schedules I and II, such as hallucinogens and amphetamines, and reports must also be submitted to the Board to the Commission and to the Secretary-General.

28. The Convention also calls for the adoption of measures for the treatment and rehabilitation of persons who abuse psychotropic substances, as well as for preventive and educational measures. It stresses the need for co-ordinated action against illicit traffic, and contains provisions concerning serious punishable offences and extradition.

29. The Board and the Commission assume, with regard to psychotropic substances, responsibilities similar to those conferred on them by treaties on narcotic drugs.

30. There are some differences between this Convention and that of 1961, particularly regarding information to be furnished by States. For example, the Board will receive only one report from Governments each year; no provision has been made for a system of estimates of medical needs; import certificates and export authorizations are not required for substances in Schedules III and IV, in which there is extensive trade. In general, the 1971 Convention places fewer obligations on Governments than the treaties on narcotic drugs. For this reason, application of this Convention, although a necessary first step, will nevertheless not be sufficient to overcome all the problems presented by psychotropic substances. Thus Governments should themselves determine their real medical and scientific needs, manufacturers should avoid over-production and exporters should not ship psychotropic substances which are not authorized by the competent authorities of

the importing country. <sup>13/</sup> As with narcotic drugs, retailers should beware of dubious prescriptions and doctors should exercise great caution in prescribing these drugs. The 1971 Convention alone clearly cannot solve all these problems; it does, however, provide general guidelines for Governments to follow when adopting appropriate measures in co-operation with the international community and the competent international bodies. The fact that some major manufacturing countries are already Parties to the 1971 Convention is welcome and it is hoped that others will soon join them.

#### SUPPLY OF RAW MATERIALS FOR THE LICIT MANUFACTURE OF OPIATES

31. The question of the licit supply of opiates continues to be of concern to Governments; indeed, difficulties in procuring raw materials for the licit manufacture of codeine had hardly passed, when certain Governments, especially through their representatives at the Commission on Narcotic Drugs, were warning against possible overproduction. This is the reason why the Board continues to publish in its reports some statistical information which may be considered an additional element in assessing the situation and therefore possibly in aiding Governments to determine their position.

32. The table on page 10 shows the quantities of opium and poppy straw available for the extraction of alkaloids expressed in tons of morphine, as well as the consumption of codeine. These figures, which are given in the last two columns of the table, reflect opposing trends between 1971 and 1975, for whereas codeine consumption rose until 1973 and then declined, the amount of raw materials available for the extraction of alkaloids did exactly the opposite. This apparent paradox reflects a lag between the time the raw material is produced and the time the finished product is ready to enter retail trade channels. In the long run both variables will obviously follow the same trend, one lagging behind the other. At the time this report was prepared only some of the statistics relating to 1976 were known. However, taking into account the availability of raw materials, codeine consumption, which in 1975 reached its lowest level since 1970, might by 1976 recover to its long-term level of approximately 173 tons (see graph on page (iii) of the annex to the report of INCB for 1975, document E/INCB/29). In view of the limitations of projection methods, this report will simply present medium-term estimates of the variables in question. With regard to codeine consumption, the graph mentioned above suggests that it will amount to approximately 190 tons in 1979-1980.

33. In 1976, for the second consecutive year, India had a good opium crop. The 1,180 tons produced this year will undoubtedly have enabled countries which traditionally manufacture morphine from opium to meet most of their requirements. However, as demand is increasing steadily, some of these countries will probably have to supplement their supplies by importing poppy straw concentrate. In the near future, Indian opium production will probably vary, depending on the weather, between 1,000 and 1,200 tons (with a moisture content of 10 per cent), which is equivalent to 100-120 tons of morphine.

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<sup>13/</sup> If, by virtue of article 23 of the 1971 Convention on psychotropic substances, a country takes stricter measures than those imposed by that Convention, it should, in conformity with the spirit of the treaty, inform the Secretary-General accordingly and the latter, as foreseen in article 13, would bring these measures to the knowledge of all States.

34. In countries of Eastern Europe, the amount of morphine manufactured from locally produced poppy straw showed a downward trend in 1974 and 1975. This decline is undoubtedly owing in part to weather conditions, but in spite of its increased value, poppy straw in these countries is still often a by-product of seed production. Nevertheless, the amount of poppy straw used in the manufacture of morphine should gradually increase in the countries concerned as a result of the scientific research being carried out to achieve better productivity and through increased mechanization. For the purposes of this study, it may be assumed that the morphine value of processed poppy straw from domestic sources (excluding imported straw) may amount to 30 tons in 1976 (1973-75 average) and 35 tons three or four years later.

35. Australia processed poppy straw for the first time in 1971 and immediately obtained a record 0.42 per cent yield which has improved steadily ever since, reaching 0.56 per cent in 1975. However, the amount of poppy straw processed was well under 1,000 tons, and morphine production was just enough to meet the country's domestic requirements. The establishment, at the end of 1976, of a second alkaloid extraction unit ought to raise morphine production from 4 tons in 1975 to 10 tons in 1976. Over the medium term - if competition from other agricultural crops allows a sufficiently large area to be set aside for this purpose - production could reach and even exceed 20 tons.

36. In France, production of opiates from green straw (produced locally) rose in 1974 and 1975, and in the latter year this raw material accounted for over one-half of manufactured morphine produced, mainly as a result of improved industrial efficiency. However, France will no doubt continue to rely on foreign supplies for a large part of its requirements, assuming that the amount of morphine obtained by the "green process" will, in the near future, remain in the neighbourhood of the 9 tons manufactured in 1975.

37. In Turkey, the 5,800 tons of unincised poppy straw harvested in 1975 were not exported until the first two quarters of 1976. The quantities of opiates extracted from this straw will depend not only on its relative alkaloid content but also on other factors, including the industrial extraction processes used in the importing countries. It is assumed here, by way of a first approximation, that the average morphine yield of this straw will be 0.35 per cent; on this basis, the morphine value of the 1975 Turkish poppy straw crop is estimated at 20.3 tons. The 1976 crop, which was larger (14,000 tons), is expected to produce 49 tons of morphine. As regards the medium term, the Turkish authorities are known to have set their production goal at 20,000 tons, (which is equivalent to 70 tons of morphine) which is needed to operate the alkaloid extraction plant now under construction at full capacity.

38. When opium production was stopped in Turkey, first India and then Iran began to export incised poppy straw in rapidly increasing amounts; in 1975 the volume they imported was equivalent to 14.2 and 2.5 tons of morphine respectively. It is difficult to tell whether these amounts will increase or decline in the immediate future, and it is therefore assumed that they will remain unchanged.

39. In the medium-term it will be necessary to take into account the research on Papaver bracteatum being conducted in several countries, as well as the international co-operation that has been taking place since 1972 under the auspices of the United Nations Narcotics Laboratory with the support of the United Nations Fund for Drug Abuse Control. This research has made rapid headway, and in 1975 for the

first time a country declared to the Board that it had extracted 66.2 kg of thebaine from 3 tons of Papaver bracteatum (2.2 per cent yield). This result was achieved during the course of research carried out in Israel with a view to determining the possibility of extracting thebaine on a commercial scale. Moreover, if it could be demonstrated that the seeds of Papaver bracteatum can be easily substituted for those of Papaver somniferum in their various uses, the replacement of one species by the other would, for the same area, lead to a considerable increase in the manufacture of alkaloids. It would, of course, be unwise to predict a date for the conclusion of this research and even more to attempt to estimate its implications; nevertheless, the emergence of Papaver bracteatum as an important source of codeine should be regarded as a real possibility in the not too distant future.

40. To revert to traditional resources, columns II and III of the table indicate that potential morphine production from opium, and especially from poppy straw, will be much greater than before. If necessary, production could easily be raised to and even exceed 250 tons of morphine annually. Yet, however rapid the increase in demand, it will have to expand a great deal before reaching, in the medium term, the level of potential supply. In a situation of abundance, demand might well increase at a faster rate than expected, and it may take time to replenish stocks of opiates to an appropriate level. However, the situation should be followed closely to avoid an excessive accumulation of drugs in the future while at the same time ensuring regular supplies for health services and scientific research purposes.

#### ILLICIT OR UNCONTROLLED CULTIVATION OF THE OPIUM POPPY

41. In a number of countries where uncontrolled opium production exists, and whether it is formally illicit or not, either because Governments are not in a position to exercise their full authority in the areas of cultivation or because the sale of illicit opium is the only source of cash income for cultivators, the largest part of production has for years been supplying the international illicit traffic. Under these circumstances, should any part of this original illicit production be made licit through a simple legal declaration, or, again, should consideration be given to embarking on new licit production of opium or poppy straw, compliance with the treaties would not be ensured because of lack of effective control and the absence of the agreement of the Board. Moreover, the additional quantity of opiates available on the licit market as a result of this new production would quickly lead to overproduction in the world as a whole, with serious consequences, particularly at the economic level, and would increase the risk of diversion to the illicit traffic.

#### ANALYSIS OF THE WORLD SITUATION

42. The Board keeps under constant review the drug control situation in all countries and, at the same time, pays special attention to the situation in those countries where problems connected with drug abuse or the uncontrolled or illicit production of raw materials used in the manufacture of drugs, or the illicit traffic are the most serious.

RAW MATERIALS FOR LICIT REQUIREMENTS

(tons of morphine)

Year	OPIUM				I	POPPY STRAW						II	III	IV
	1	2	3	4		5	6	7	8	9	10			
	Production in India	Production in USSR, Turkey and Yugoslavia	Amount released from special stocks by the United States	Seizures released for licit requirements	1 to 4 Total	Local production of socialist countries of Eastern Europe	Production in Australia	Production in France	Exports from or production in Turkey	Exports from India	Exports from Iran	5 to 10 Total	I + II Total	Codeine consumption **/
1971	88.3	26.8	-	1.1	116.2	33.5	-	1	32	-	-	65.5	181.7	150
1972	99.1	18.1	-	2.4	119.6	38.6	3	2.5	9	1.2	-	54.3	173.9	156
1973	86.1	9.3	-	2	97.4	36.5	4.2	1.4	-	6.5	0.5	49.1	146.5	163
1974	88.7	-	16.1	2.8	104.8	27	3	6.5	-	13.5	1.9	51.9	156.6	154
1975	103.3	-	6.3	-	109.6	26.1	4	9	20.5*/	14.2	2.5	76.1	185.7	148
1976	118	-	-	?	118	30*/	10*/	9*/	49*/	14.2*/	2.5*/	114.7*/	232.7*/	173*/
1979-1980	100*/-120*/	-	-	?	100*/-120*/	35*/	20*/	9*/	70*/	14.2*/	2.5*/	150.7*/	250.7*/-270.7*/	190*/

\*/ Approximate estimate.

\*\*/ Between 1971 and 1975, it took 0.891 kg of morphine to manufacture 1 kg of codeine. On the other hand consumption of opiates other than codeine represented approximately 25 tons of morphine per year. Taking account of these two factors total consumption of all opiates, expressed in morphine equivalent, would be around 180 tons in 1976 and 195 tons in 1979-1980.

## NEAR AND MIDDLE EAST

### Afghanistan

43. As in most countries where opium and cannabis are produced illicitly, it is very difficult to assess, even approximately, the total illicit production of these two substances in Afghanistan. It may have declined since 1973, but is still considerable.

44. Because of the lack of medical services and medicaments in the remote province of Badakhshan, in the north-eastern part of the country, the quasi-medical use of illicitly-produced opium has long been current practice. This has inevitably led to some abuse among the population. With advice from WHO and the assistance of the Fund, the Government is at present examining the province's needs for medical services in order to eliminate this opium-related problem.

45. In addition to illicit opium harvested locally, some of the opium produced illegally in Pakistan also passes through Afghanistan. Iran seems to be the main market for these two illicit sources of opium. On the other hand, most of the cannabis from Afghanistan apparently flows eastward in illicit traffic passing through Pakistan.

46. Since 1973, the Fund has provided Afghanistan with assistance aimed at strengthening its law enforcement capability against the illicit traffic and approximately 25 tons of opium have been seized during this period.

47. There could be even more seizures if the equipment and the effectiveness of the staff of the national law enforcement services were improved. This is particularly true with regard to the western frontier police. This was the subject of a recent study financed by the Fund.

48. The Government believes - and the Board is of the same opinion - that only by taking general measures of a social and economic character would it be possible permanently to reduce the illicit production of opium; this would require considerable international financial assistance, for Afghanistan is a country with limited resources. This possibility is at present being examined by the Government and the international agencies concerned.

### Iran

49. Opium addiction is very widespread in Iran and heroin addiction is also prevalent. The number of registered opium addicts is gradually increasing and amounted to approximately 177,000 in 1975; according to the Government, however, this figure is far from reflecting the real number of opium users. All the opium produced licitly is intended for consumption by registered opium addicts. Depending on the adequacy of stocks, the Government adjusts each year the size of the area authorized for cultivation.

50. Certain problems were encountered in attempts made prior to 1976 to remedy the drug situation. Thus, controls over the opium maintenance programme intended for registered addicts were not always adequately applied and some diversion to the illicit traffic occurred. On the other hand, there remains a large number of opium addicts who are not registered, either because they do not fulfill the necessary conditions or because they do not wish to be so enrolled. Unregistered

addicts have however been able to obtain their supplies illicitly and have not therefore needed to make use of treatment facilities provided for them at some large centres. Furthermore, despite the severity of the measures taken against drug traffickers, opium continued to enter Iran.

51. In April 1976, the Government launched a new and vigorous policy. At the present time greater attention is attached, particularly in urban areas, to the treatment of addicts at small out-patient centres rather than at a few large and costly treatment centres which are often situated too far from drug abusers. This effort is to be complemented by greater participation of psychiatrists, social workers and the community as a whole. Increasing use will also be made of mass media to warn the public of the dangers of drug abuse. The merger of the Ministry of Health and the Ministry of Social Welfare, and the use of their joint facilities, will result at the national level in more effective treatment and rehabilitation measures.

52. The licit distribution of opium will be supervised more closely as a means of exercising greater control over the drug supply. The number of centres issuing authorizations for the purchase of licit opium will be reduced so as to achieve stricter control. These authorizations will not be issued to persons under 60 years of age and each year this limit will be raised by one year. In addition, the daily quantity that is generally sold to registered addicts will be reduced from the present three grams to two and one-half grams. The Government thus hopes that, within a period of 10 years, the use of opium and the need for regular production will have been ended.

#### Pakistan

53. The main problems of narcotic drugs control in Pakistan are connected with the illicit production of opium and cannabis traffic in these substances and the non-medical use of opium, principally in urban areas. As regards licit production of opium, measures taken to prevent diversions to the illicit market have not yet proved satisfactory. Recently, laboratories engaged in the clandestine manufacture of morphine base were discovered and dismantled following vigorous enforcement measures. In addition, morphine licitly imported into Pakistan has been found in international illicit channels.

54. In order to prevent further diversion from the licit trade to the illicit market and as of May 1976, only Provincial Government medical stores have been authorized to import drugs and the import of certain substances has been prohibited. Furthermore, the Government has prepared new legislation intended to further strengthen drug control and the Board hopes that it will hasten its entry into force.

55. The Government is actively seeking alternatives to the present system whereby opium for quasi-medical purposes is distributed through "vends"; it is apparent that the system is not very satisfactory, particularly as part of the illicit harvest is almost certainly marketed through it. The Government also plans to register opium addicts with a view to determining the extent of the problem.

56. With the assistance of the Fund, a project has been launched in the Buner area to determine the best crop substitution techniques and the development of alternative sources of income. The project, which forms part of a comprehensive

programme, should induce the farmers of the area to abandon opium production. In addition, a small treatment and rehabilitation centre for a limited number of confirmed opium addicts is to be set up. For these measures to be effective, control must be strengthened simultaneously throughout this area.

57. A Board mission recently visited Pakistan to discuss the question of drug control with the authorities. The Pakistan Narcotics Control Board has already taken a number of steps and is considering others which should progressively improve the situation. This remains difficult and the drug control authorities may need further support.

#### Turkey

58. The Turkish Government has introduced measures to prevent opium production on its territory and is continuing to strengthen them. According to information available to the Board, the prohibition of opium production is strictly respected and no Government has reported seizures of opium of Turkish origin in the illicit traffic. This is a remarkable achievement.

59. At the invitation of the Government, the President of the Board, accompanied by the Executive Director of the Fund and the Director of the Division of Narcotic Drugs, visited Turkey in July to have a concrete view of all the measures taken by the Government.

60. It appears that the control exercised over the second harvest of non-incised poppy which took place in 1976 was as good as that for 1975. The Fund has provided assistance, particularly in respect of telecommunications and means of transport for the control services, and intends to furnish aerial detection and surveillance equipment.

#### EAST AND SOUTH-EAST ASIA

#### Burma

61. In Burma, drug addiction is widespread both in urban centres and in rural areas. As the Board has already noted in previous reports, the illicit and uncontrolled production of opium, which comes mainly from the Shan State, continues at a very high level and the situation remains therefore one of great concern. Nevertheless, the Government has further intensified the measures it is already taking against traffickers and has pursued the eradication of illicit cultivation; work will soon be started on a multi-sectoral programme, which has been undertaken by the Division of Narcotic Drugs with the Fund's assistance.

62. As a substantial part of the opium produced illicitly throughout the region comes from Burma, the international community is obviously following these efforts with great interest. It is desirable that co-operation with neighbouring countries should be strengthened, since, as the Board has frequently stated, given both the regional and international dimensions of the problem, any improvement achieved by isolated national action, however rigorous, would not be sufficient.

## The Lao People's Democratic Republic

63. Nomadic or semi-nomadic hill tribes have cultivated the poppy on patches of burnt land for generations. The opium thus produced illicitly is mainly consumed locally by members of the tribes themselves.

64. In February 1975, however, the Government concluded an agreement with the United Nations, as a result of which a UN/Lao Programme for Drug Abuse Control was drawn up by the Division of Narcotic Drugs with the assistance of the Fund. Under this Programme an office has been opened at Vientiane which provides inter alia a permanent liaison between the Lao authorities on the one hand and the Division of Narcotic Drugs, the Fund and the Board's secretariat on the other. During the course of an official visit to South-East Asia, the Board, in agreement with the Lao authorities, sent a mission to the Lao People's Democratic Republic; its work was greatly facilitated by the Programme's staff.

65. The mission, which was prepared at Geneva in close collaboration with the Fund and the Division of Narcotic Drugs, took place in June 1976. During their discussions with the authorities, members of the mission noted that the Government was determined to put a gradual end to poppy cultivation. To this end the Government has devised a plan of action which includes a crop substitution programme and which may perhaps entail some resettlement. Vigorous action is being taken against traffickers. According to provisional figures of the Ministry of the Interior, drug addicts number more than 50,000. Some are already being cared for in a first treatment and rehabilitation centre which has been set up. The Lao authorities have announced that they plan to establish four other such centres.

66. The authorities realize that their work will run into many difficulties which only time will solve. For instance, the gradual abolition of poppy cultivation will not fail to give rise to numerous problems. Manifestly, such a radical change in the way of life of the peoples concerned cannot be achieved without a considerable effort on the part of the Government. The latter is determined to make this effort.

67. In view of the Government's determination to abolish illicit opium production on its territory and the action it has itself already undertaken to this end, it would be desirable that the international community should consider furnishing it with technical and financial assistance. Consideration is being given, on the recommendation of the Board, to assistance from the Fund.

## Thailand

68. Since the publication of the Board's last report, the situation in Thailand has remained virtually unchanged. The main narcotic control problems are: illicit poppy cultivation by hill tribes in the northern part of the country; steadily increasing drug addiction, principally in urban centres (the authorities estimate the number of addicts at between 300,000 and 500,000 including approximately 50,000 heroin addicts); transit through Thai territory of opium and opiates from abroad and intended for the illicit traffic in both the region itself and in Western Europe; the clandestine manufacture of heroin, and, lastly, the use of Bangkok by traffickers as a transit point.

69. The Board's mission was able to discuss these problems with the Thai authorities when it visited Bangkok during its assignment in South-East Asia.

70. The Board does not underestimate the difficulties which the Government certainly faces. It is clearly not an easy matter to find means of putting an end rapidly to poppy cultivation in more than 1,000 villages at once. Any attempt by the authorities to do so would encounter stiff resistance on the part of the people concerned and would certainly give rise to economic difficulties because the population would lose its source of cash income without adequate compensatory measures.

71. Nevertheless, the pilot crop substitution project undertaken jointly by the Government and the Division of Narcotic Drugs, with the assistance of the Fund, has shown that poppy growers are willing to raise different crops if the income they obtain from them is sufficient. Perseverance is therefore necessary. It might be appropriate to expand, gradually but firmly, the scope of the crop substitution project which so far covers only some 30 villages, or 3 per cent of those in which opium is said to be produced. At the same time, it is still necessary to take strong measures against traffickers and their accomplices.

72. It is not easy to control the very long frontiers over which considerable quantities of opium and opiates enter Thailand from abroad. This is why, although it is gratifying to note the development of regional and inter-regional co-operation 14/ in the search for solutions to the problems which arise "downstream", as it were, of Thailand, it is nevertheless certain that co-operation with neighbouring countries which are at the source of its problems "upstream" is also essential.

### Malaysia

73. Drug abuse has increased rapidly in Malaysia in the past five years. Although opium had been used for some time in the country, it was previously smoked by only a very small number of people, mostly elderly. In recent years, however, the nature and extent of drug abuse have changed greatly and it must now be regarded as a much graver danger, both nationally and internationally. Since 1971 increasing numbers of young persons in Malaysia have been affected by the misuse of cannabis, morphine, heroin and psychotropic substances. Over the last two years, Malaysia has been mentioned in many reports as being a transit country for heroin coming from South-East Asia to Western Europe.

74. The Government is to be commended on the attitude it has adopted to this new situation. Recent legislation provides for severe penalties. Enforcement agencies in the countries concerned have instituted close collaboration and as a result a number of traffickers transporting drugs from Malaysia have been arrested. In addition, centres for the treatment, detoxification and rehabilitation of addicts have been established. Despite these developments the dangers of a rapid increase in drug abuse cannot be overemphasized and, unless rigorous measures are

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14/ See para. 18 above.

applied with even greater severity, the country may soon be faced with a long-term problem which would seriously threaten it from both the humanitarian and material points of view. The international community attaches particular importance to the effective suppression of illicit distribution and of any illegal production centres in Malaysia. Moreover, it must be hoped that this country will be better able to prevent traffickers from using it as a transit route.

#### Territory of Hong Kong

75. There are very many addicts in the territory of Hong Kong, and the treatment and rehabilitation services have much to do. Twelve new evening detoxification centres were recently opened; over 1,500 addicts have already been registered at these centres and methadone is administered to them in decreasing quantities under medical supervision. Social rehabilitation is also emphasized but in this densely-populated city the task is difficult.

76. The supply to Hong Kong of morphine base and opium, brought by Thai trawlers which offload their illicit cargo near the territory, seems to have greatly diminished since the beginning of 1975 as a result of the energetic measures taken jointly by the authorities of Thailand and Hong Kong. However, after experiencing a period of shortage, the local illicit market has again been supplied with opiates, although the purity of the heroin has declined considerably and prices have risen. This is a good illustration of the efficiency of the enforcement services which have made substantial seizures and neutralized several criminal organizations. Traffickers have now modified their supply strategy and are attempting to introduce the finished product, i.e. "No. 3" heroin, into the country. This traffic appears to be conducted with the help of large numbers of couriers, travelling mostly by air and transporting small quantities of heroin in their luggage. The vast network of air and maritime services linking the territory to the rest of the world adds to the difficulty of controlling this illicit traffic. Drug abuse control will, therefore, continue to call for close and unceasing vigilance.

#### Nepal

77. Nepal has to cope with three major drug problems, namely, the uncontrolled production of cannabis, which reportedly grows wild, chiefly in the western part of the country; the growth of drug abuse among young Nepalese, and inadequate control over the licit movement of drugs. The country is not yet a Party to any international treaty on narcotics.

78. The Board regularly requests Nepal for information on the licit movement of drugs but replies are received only sporadically. However, after a senior Nepalese official had, on his initiative, paid a visit to the secretariat at the beginning of the year, the Board was invited to send a mission to Nepal to discuss with the authorities the problems presented by drug control in the country. It was possible to arrange such a mission in July 1976.

79. According to the information provided by the Nepalese authorities to members of this mission in Kathmandu, the administrative decision of July 1973 prohibiting the cultivation of cannabis has been followed in the plains (the Tarai). The farmers in the region have been able to switch to the cultivation of tobacco and sugar cane without experiencing undue economic hardship. On the other hand, the

problem remains unsolved in the vast, desolate, mountainous and sparsely populated region in the west of the country, where cannabis reportedly grows wild in large quantities, but is also cultivated in certain areas. It continues to be part of the daily life of the inhabitants who use the fibre to weave cloth and to make ropes, and crush the seeds to extract oil which is used both for food and for lighting. Above all, however, the harmful parts of the plant are harvested and give rise to a major traffic.

80. The solution of this problem here, as in many other countries, is to be found basically in the social and economic development of a part of the country. As is the case elsewhere, the financial resources that have to be devoted to this developmental effort are well beyond the Government's capacity, and multilateral and bilateral assistance will have to be sought. This also presupposes that the Government will agree to give increased priority to drug abuse control and will take energetic measures against traffickers.

81. The Board takes note of the promulgation in September, by the Rastriya Panchayat (National Assembly), of legislation on narcotics which had been announced a long time ago. The adoption of the new law shows the determination of the Assembly and is therefore a step in the right direction. On the recommendation of the Board, the Fund is studying the possibility of assistance. It would seem that Nepal has now taken a course which should normally result in its becoming a Party to international treaties on drug control.

#### EASTERN EUROPE

82. The problem of drug addiction is relatively minor in the countries of Eastern Europe. It is apparently limited to chronically ill persons and, in isolated instances, to medical personnel.

83. Hoping to pass unnoticed among road transporters and tourists, international traffickers also attempt to travel in transit through these countries in the hope that their route will place them above suspicion on arrival at their final destination. The size of this transit traffic and the vigilance exercised by the authorities concerned in Eastern European countries is shown by the number of seizures which are regularly made.

#### WESTERN EUROPE

84. The expansion in illicit traffic and drug abuse in several countries of Western Europe is a cause of great concern. The traffic in cannabis is still very considerable and that in cocaine continues to rise. In respect of psychotropic substances it seems also that abuse is expanding, particularly in multiple combination.

85. The most important trend, and also the one causing most concern, is the continually increasing appearance of heroin on the illicit market and its eventual effect on illicit demand. Seizures, which had already doubled in volume in 1975 as compared with 1974, have again risen considerably during the course of 1976. Most of this heroin comes from Burma and Thailand and much is routed through the Malaysian peninsula. This drug is apparently destined in the first place for the Netherlands, where Amsterdam is still the main distribution centre in Western Europe, and appears to be transiting mainly through France and the Federal Republic of Germany but also through other European countries. It is not

possible at least for the moment, to ascertain whether a proportion of the heroin this introduced into Western Europe is subsequently moved in significant quantities to any other region. However law enforcement services in Western Europe are greatly concerned by this influx of heroin and, on the initiative of the General Secretariat of ICPO/Interpol, the heads of drug enforcement agencies in a number of the countries concerned in Western Europe and South-East Asia recently met in Thailand to seek means of dealing with this situation. <sup>15/</sup> The increase in the number of seizures could lead to the conclusion that this was attributable to greater activity by the enforcement services. Another possible interpretation is that this increase in seizures is mainly caused by an increase in illicit demand. Although full information on illicit consumption is not available, certain indicators, for example the number of heroin overdose deaths, point to a very serious increase in misuse of this drug affecting the Federal Republic of Germany and, apparently to a lesser degree but nonetheless significantly, other countries including Belgium, France, Italy, the Netherlands, Sweden and Switzerland.

### Netherlands

86. Taking into account the gravity of the situation the Government of the Netherlands has taken steps against the illicit traffic. In the spring of 1976, a National Drug Unit was formed within the Ministry of Justice, particularly to co-ordinate information on this traffic throughout the country. The bill to which the Board referred in its last report was submitted to Parliament in 1976. Under this new legislation, the penalties than can be imposed on persons using drugs will be reduced while those relating to traffic, particularly that in drugs "involving unacceptable risks" - such as opiates and amphetamines - will be more severe.

87. It is to be hoped that these steps will help to improve a situation which remains serious, not only for the Netherlands but also for all its neighbours.

### NORTH AMERICA

#### Mexico

88. In Mexico illicit consumption of heroin is still relatively limited and confined for the most part to towns along the border between Mexico and the United States of America. There has, however, been a rise in the extent of this demand and heroin addicts may now be numbered in hundreds. Coca leaf is not, of course, produced in Mexico although the Mexican authorities are concerned with cocaine traffic across the country from South America to the United States. The abuse of cannabis is comparatively widespread among urban youth. It is difficult to counter this particular abuse because of the ready availability of cannabis. The Government is at present concerned at the widespread sniffing of solvents including glue, particularly among very young persons and this can eventually cause serious physical damage. The ready availability of many substances of this kind constitutes a substantial problem.

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<sup>15/</sup> See para. 18 above.

89. The illicit cultivation of the opium poppy and of cannabis occurs over a vast area in places which are generally remote and difficult to reach. Unlike many other countries where the illicit cultivation of the opium poppy is traditional, this development is of relatively recent origin in Mexico. It seems that organized crime syndicates have deliberately encouraged farmers to undertake this additional illegal activity. The authorities are therefore resolutely pursuing their efforts to stamp out opium poppy and cannabis cultivation and traffic using all resources at their disposal including the use of selected herbicides.

90. As a considerable proportion of the opiates and cannabis produced in Mexico is intended for illicit traffic to the United States, the Governments of the two countries have recognized the need to intensify their co-operation and to work together closely on drug-related matters. Co-operation at a high level, particularly on enforcement and on treatment programmes, has recently been institutionalized.

#### United States of America

91. The authorities of the United States report that the availability of heroin on the illicit market increased during the last year. Similarly it should be noted that considerable abuse of cannabis still takes place and that the abuse of cocaine clearly continues to increase. In addition, certain psychotropic substances have given rise to a problem of abuse, often in multiple combination, and are the subject of a substantial traffic.

92. The authorities have for many years implemented the most energetic measures against all aspects of drug abuse. During the course of 1976 they have further intensified their law enforcement activities and increased measures of prevention and treatment.

93. Two new cabinet committees were set up this year by the President of the United States to deal, at the national level, with questions of enforcement as well as with drug abuse prevention and the treatment and rehabilitation of addicts. With regard to legislation on narcotics, the President has recommended that the United States Congress should enact laws prescribing mandatory sentences for persons guilty under Federal law of offences relating to the sale of heroin and other drugs.

94. The United States Government has always been one of the strongest supporters of international co-operation to combat drug abuse and illicit traffic. On drug control matters, it collaborates closely with most of the Governments of those countries which are, or could become, sources of supply for drugs for the United States, often granting them bilateral assistance. In addition, its continuing assistance to the competent international drug abuse control organizations has permitted to a large extent the realization of multilateral assistance projects aimed at putting an end to drug production, traffic and abuse.

#### SOUTH AMERICA

95. In spite of measures to improve co-operation among many South American countries and increased enforcement activity by some Governments, there has been no apparent decrease in the volume of cocaine and cannabis of South American origin available in the international illicit market.

96. Most countries of this region are affected by drug abuse and by trafficking. Illicit cultivation of cannabis is considerable. The abuse of this substance is widespread and that of psychotropic substances, which is apparently increasing, has caused concern to several Governments. Over-production of coca leaves continues in Bolivia and Peru.

#### Colombia

97. Owing to its geographical position, Colombia is an important transit country for drugs being smuggled from South America to North America. After being smuggled into Colombia from neighbouring countries, coca paste is then converted into cocaine hydrochloride. The size of this problem and the positive response of the Government may be judged by the fact that the Colombian authorities discovered and closed twelve laboratories for the manufacture of cocaine in the centre and north of the country in 1975. Furthermore, cocaine seizures amounted to 674 kg. in 1975, the highest total of seizures reported by any single country during that year. Virtually all means of transport by land, by sea and by air are used to move the processed material, mainly to North America. Major quantities of cannabis are also illicitly produced in Colombia although the enforcement agencies destroyed 1500 tons of cannabis plants in 1975 in major operations which included the burning of illicit plantations in the northern and eastern parts of the country and the closing of installations which were being used to process the drug.

#### Bolivia and Peru

98. Coca leaf production probably remains the most difficult drug control problem in South America. The chewing of coca leaf, mainly in Bolivia and Peru, but also - although to a lesser degree - in Argentina, Brazil, Colombia, Ecuador and Venezuela, accounts for a substantial proportion of the material produced. However, it appears from information communicated to the Board by both Bolivia and Peru that an equally large, if not larger, proportion is destined for the illicit manufacture of cocaine. Estimates by the Peruvian authorities suggest that the amount of cocaine manufactured in this way might be of the order of 20 tons. It may be assumed that a similar amount is available from Bolivia. For several years there has been a steady increase in seizures of this substance, particularly in North America and Western Europe. World seizure figures were approximately one and a half tons in 1974 and almost two and a half tons in 1975. Even if errors have been made in the estimates of the quantity of leaves used for such manufacture and of the amount of cocaine obtained, the volume of the drug available on the illicit market is nevertheless considerable. The question therefore arises whether illicit world demand for this substance is not in fact much greater than has been previously thought. In these circumstances, the Board naturally appeals to Governments to exercise even greater vigilance because, sooner or later, this latent abuse may well assume epidemic proportions and would then be difficult to eradicate.

99. In Bolivia, as in Peru, the authorities are engaged in making better estimates of the production of coca leaves and the use made of them. Although the initial results are still very approximate and certain assumptions made in the calculations have yet to be checked, these estimates should contribute to a better assessment of the problem. It is also to be hoped that a real policy of control over the production of coca leaves will be effectively established and practical measures implemented without delay. It is clear that the gradual replacement of the coca bush by other cash crops will take a considerable time. This is also a very costly

proposition, as it requires social and economic development over vast areas. It is therefore important that the Governments concerned should give greater priority to this question and devote more of their budgetary resources to it, at the same time seeking multilateral participation in the financing of such development, because such considerable resources are needed. The Bolivian Government is directing its efforts along these lines.

100. The Board understands that large scale bilateral assistance has been given to Bolivia. The Fund for its part has been approached and has granted assistance to both Bolivia and Peru to enable those countries to study more closely means of controlling coca leaf production, of developing substitute crops and of controlling the illicit traffic in cocaine.

#### AFRICA

101. Most African countries have so far been fortunate in that they have not experienced any serious problem of opiate traffic or abuse. Almost all the Governments of these countries have however reported the abuse of cannabis and more recently psychotropic substances, particularly amphetamines, have appeared on the illicit market in increasing quantities.

102. The Board is particularly concerned at the fact that diversion of psychotropic substances to the illicit market have occurred. In the absence of effective controls, this problem could rapidly become more serious in African countries. The Board is of the opinion that those African countries which have not yet adopted legislation relating to the import, distribution and use of psychotropic substances should do so quickly in line with the provisions of the 1971 Convention. Since the 1971 Convention does not provide for a system of estimates for medical needs, it is essential that African Governments, like those of other countries in the world, should themselves make a systematic estimate of their needs for psychotropic substances and limit the importation of those substances to the amounts which are actually necessary.

103. The Board is particularly gratified that an African country, Togo, was the fortieth State to ratify the 1971 Convention on Psychotropic Substances, thus enabling the treaty to be brought into force. It is now to be hoped that other States will soon follow the example set by Togo.

104. Participants at the fifth African Regional Conference of ICPO/Interpol were of the opinion that the drug problem was becoming more serious in Africa and that it was necessary to take new measures to put an end to the illicit production of, and traffic in, cannabis and furthermore, agreed that Governments should be called upon to exercise strict control over the licit movement of drugs. The Conference drew attention to the advantages of the creation of special squads of enforcement personnel and of regional co-operation, and it appealed to those Governments which had not yet done so to accede to, or to ratify, the treaties on drug control.

105. The Board, which was represented at that Conference, fully supports the conclusions reached by the participants. In the course of a mission to several countries on the African continent, the Board's representative was able to note the devotion and competence of the police and health service officials responsible for drug abuse control. Great efforts have been made to put an end to the illicit cultivation of, and traffic in, cannabis and to control the licit movement of drugs. It has been generally recognized, however, that these measures are still inadequate.

106. Assistance - both bilateral and multilateral - might therefore be provided to these countries to help them in their efforts to protect not only their own citizens, but also those of neighbouring countries, from the dangers of drug abuse.

#### CONCLUSION

107. Progress has been achieved in the field of international drug control since the Board's first session in 1968. As was noted in more detail at the beginning of this report, this period has been most fruitful: two new treaties having world-wide application have been drafted and have come into force; bilateral relations between States on matters of drug control have been extended; regional co-operation has been increased; technical and financial assistance has been furnished to a growing number of countries.

108. There are three aspects to the drug problem: illicit supply, illicit demand and the traffic which links this supply with the demand. So far as supply is concerned, this has not changed greatly, except that the sources of supply have shifted without any diminution in volume, although progress may still be hoped for, particularly in the most affected regions. Illicit demand, however, is far from having diminished and continues to raise numerous and complex problems. Its causes are particularly difficult to identify and entirely satisfactory remedies have yet to be found.

109. The need has been recognized to provide technical and financial assistance to Governments which are endeavouring to meet their treaty obligations fully but which have not yet succeeded. Bilateral action will probably be continued and perhaps even extended, and this is certainly gratifying. There is however a grave danger that multilateral assistance will be curtailed if international bodies, and in particular the United Nations Fund for Drug Abuse Control, fail to obtain essential resources from a growing number of donors; this would be a severe blow to international narcotics control. The Board therefore appeals to all Governments to contribute generously to the Fund, so that current projects can be completed and others which are necessary can be embarked upon.

110. While in general Governments are still playing an active part in controlling drug abuse, some slackening in the efforts aimed at its elimination is apparent from time to time because the task is difficult, lengthy and very demanding. The Board hopes therefore that Governments will continue to give the requisite priority to the prevention of abuse and to treatment programmes while at the same time continuing to curb illicit production and traffic. If this is not done there is a danger that the situation may further deteriorate and require not only more intensive but also more expensive counter-measures.

(Signed) P. Reuter  
President

Geneva, 5 November 1976

## THE ROLE OF THE INTERNATIONAL NARCOTICS CONTROL BOARD

The responsibilities of the Board under the drug control treaties are to endeavour, in co-operation with Governments, to limit the cultivation, production, manufacture and utilization of narcotic drugs to the amounts necessary for medical and scientific purposes, to ensure that the quantities of these substances necessary for legitimate purposes are available, and to prevent the illicit cultivation, production, manufacture of, trafficking in and use of these substances. Since the entry into force of the 1971 Convention on Psychotropic Substances, the functions of the Board include also the international control of these drugs.

The Board is required, in the exercise of these responsibilities, to investigate all stages in the licit trade in narcotic drugs; to ensure that Governments take all the requisite measures to limit the manufacture and import of drugs to the quantities necessary for medical and scientific purposes; to see that precautions are taken to prevent the diversion of these substances into the illicit traffic; to determine whether there is a risk that a country may become a major centre of the illicit traffic; to ask for explanations in the event of apparent violations of the treaties; to propose appropriate remedial measures to Governments which are not fully applying the provisions of the treaties or are encountering difficulties in applying them and, where necessary, to assist Governments in overcoming such difficulties. The Board has therefore frequently recommended, and will recommend even more often under the 1972 Protocol, that multilateral or bilateral assistance, either technical or financial or both, should be accorded to a country experiencing such difficulties. However, if the Board notes that the measures necessary to remedy a serious situation have not been taken, it may call the attention of the Parties, the Commission on Narcotic Drugs and the Economic and Social Council to the matter, in cases where it believes that this would be the most effective way to facilitate co-operation and improve the situation. Finally, as a last resort, the treaties empower the Board to recommend to Parties that they stop the import of drugs, the export of drugs, or both, from or to the defaulting country. Naturally, the Board does not confine itself to taking action only when serious problems have been discovered; it seeks, on the contrary, to prevent major difficulties before they arise. In all cases the Board acts in close co-operation with Governments.

If the Board is to be able to perform its task, it must have the relevant information on the world drug situation, as regards both the licit trade and the illicit traffic. Consequently, the treaties stipulate that Governments shall regularly provide the Board with such information; almost all Governments, Parties and non-Parties alike, are conforming to this practice. Accordingly, in co-operation with Governments, the Board administers the systems of estimated world requirements of narcotic drugs and of statistics on narcotic drugs. The first of these systems enables it, by analyzing future licit requirements, to verify in advance whether these requirements are reasonable; and the second enables it to exercise an *ex post facto* control. Finally, the information on illicit traffic which is communicated to it either directly by Governments or through the competent organs of the United Nations enables it to determine whether the aims of the 1961 Convention are being seriously endangered by any country and, if necessary, to apply the measures described in the preceding paragraph.

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