

III. Analysis of the world situation

A. Africa

Major developments

222. Cannabis remains the major drug of concern throughout Africa. In addition, trafficking in and abuse of cocaine, heroin and amphetamine-type stimulants are increasing in many countries in the region. The practice of injecting drug use, which is spreading in a number of African countries, could exacerbate by other means the already severe HIV/AIDS crisis in Africa. The abuse of psychotropic substances is facilitated by the absence of adequate licit control measures in most African countries. That inadequate drug control, together with activities involving organized crime, is hindering development efforts in Africa. The Board therefore welcomes the adoption of the United Nations Convention against Transnational Organized Crime (General Assembly resolution 55/25, annex J) and the United Nations Convention against Corruption (Assembly resolution 58/4, annex) and encourages all States to make use of those international instruments in their efforts to counter drug trafficking.

223. The limited institutional and technical capacity of African countries to deal with the drug issue in an effective and comprehensive manner has had a negative impact on national drug control strategies. There are not sufficient mechanisms or skilled human resources to control and prevent drug trafficking in many countries in Africa, and the provision of counselling, treatment and rehabilitation facilities for drug abusers is inadequate. While Governments of African countries are investing increasing resources to deal with those problems, the investment appears to be inadequate and the continent remains a very weak link in international drug control. The Board therefore calls upon the international community to provide appropriate assistance and support to States in the region to enhance their efforts to combat drug trafficking and abuse.

224. In many countries in Africa that are emerging from conflict and civil strife, drug abuse continues, in particular among child soldiers. The Board encourages the Governments concerned to make an assessment of the nature and extent of the drug abuse situation in

their countries and to put in place appropriate mechanisms to deal with the problem.

225. The uncontrolled sale (without appropriate prescription) in licensed pharmacies of prescription drugs containing narcotic drugs and psychotropic substances, the proliferation of illegal retail pharmaceutical outlets and the diversion from licit distribution channels of such products into street markets are all problems that continue to persist in many countries in Africa. The Board calls on the Governments concerned to establish and/or enhance the capacity of their national drug regulatory authorities to enforce the licensing, distribution and inspection of and trade in pharmaceutical products.

226. Most countries in Africa have no adequate legislative framework and lack the necessary administrative mechanisms for the control of precursor chemicals. Such a situation may lead to serious problems in the international monitoring of trade in such chemicals; consequently, African countries are increasingly being targeted by traffickers attempting to obtain the chemicals they need for illicit drug manufacture. The Board therefore urges those Governments to establish, as a matter of urgency, appropriate mechanisms for the monitoring and control of precursor chemicals in order to prevent their diversion.

Treaty adherence

227. The Board welcomes the accession in March 2004 of the Congo to the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. The Board notes that Gabon has approved legislation that will allow the Government to ratify the 1988 Convention and to deposit its instrument of accession with the Secretary-General.

228. Angola and Equatorial Guinea remain the only countries in Africa that are not yet parties to any of the three main international drug control treaties. Chad has not yet acceded to the 1972 Protocol amending the 1961 Convention. Liberia has not yet become party to the 1971 Convention, and the Democratic Republic of

the Congo, Gabon, Liberia, Namibia and Somalia have not yet become parties to the 1988 Convention.

Regional cooperation

229. The Board notes with appreciation the continuing commitment of the African Union to drug control. At its second Ministerial Conference on Drug Control in Africa, to be held in Grande Baie, Mauritius, in December 2004, participants will review the progress made at the national and regional levels in the implementation of the Plan of Action on Drug Control in Africa: 2002-2006. The Board also notes the steps being taken to create a sustainable drug control coordination and advisory capacity within the African Union and a system to review and monitor the progress made in drug control throughout Africa.

230. The Fourteenth Meeting of Heads of National Drug Law Enforcement Agencies, Africa, was held in Cairo from 30 May to 3 June 2004. The Meeting, which was attended by 27 African States,³⁷ made recommendations on the interdiction of drug trafficking in countries emerging from conflict; the development of a common strategy to combat illicit cannabis cultivation, production, trafficking and abuse; and effective control over licit pharmaceutical medicines and precursor chemicals used in the illicit manufacture of amphetamine-type stimulants.

231. The regional training academy for drug control at Jos, Nigeria, held its first international training session in April 2004 for participants from Cape Verde, the Gambia, Ghana, Nigeria and Sierra Leone. The academy is to provide training to drug law enforcement officers from Nigeria and other Western African countries and to promote cooperation among drug law enforcement agencies in the subregion.

232. A training seminar on licit drug control for Eastern African countries was organized jointly by the Board and the United Nations Office on Drugs and Crime in Nairobi in January 2004 to enable the national drug regulatory authorities in Eastern Africa to more effectively monitor and exercise control over the supply and distribution of narcotic drugs and psychotropic substances while ensuring their availability for legitimate medical and scientific purposes.

233. The Board notes the continuing efforts of African countries to enhance regional collaboration in drug control through regular meetings of law enforcement

authorities, such as the fifteenth operational meeting on drugs for Eastern African heads of criminal investigation departments and anti-narcotic units, held in Zanzibar, United Republic of Tanzania, in March 2004 and the sixth Eastern Africa Police Chiefs Cooperation Organization meeting held on Mahé Island, Seychelles, in September 2004. Cooperation among the law enforcement authorities of the countries participating in the West African Joint Operations Initiative led to the seizure of over 140 kg of cocaine in Cotonou, Benin, in April 2004 (see also para. 246 below).

234. The Southern African Development Community (SADC) organized a seminar on the monitoring of precursors for SADC member States in Johannesburg, South Africa, in November 2003. The participants set up a more effective system for controlling the movement of precursors and established information networks to facilitate the seizure of precursors in the illicit traffic in Southern Africa.

235. Activities against money-laundering have also been initiated in some subregions in Africa. Following a preparatory meeting held in Abuja in November 2003, the statutory meeting of the Groupe intergouvernemental d'action contre le blanchiment d'argent en Afrique de l'Ouest (GIABA) was held in Dakar from 22 to 25 June 2004. Mauritania and all member States of the Economic Community of West African States except Liberia, as well as numerous international organizations and financial institutions, were represented at the statutory meeting, which approved the formal establishment of the GIABA secretariat and its work plan for the period 2004-2006. The secretariat of GIABA was subsequently granted observer status with the Financial Action Task Force on Money Laundering (FATF) at a meeting of the Task Force held in Paris in June 2004. The countries in Central Africa officially inaugurated the Action Group against Money-Laundering in Central Africa (GABAC) in Bangui in March 2004. The Eastern and Southern Africa Anti-Money Laundering Group (ESAAMLG)³⁸ held a meeting in Cape Town in May 2004 to assist its member States in the drafting and finalization of national plans to counter money-laundering and the financing of terrorism; the draft plans were discussed during an ESAAMLG meeting held in Grande Baie, Mauritius, in August 2004 and will be finalized in March 2005.

National legislation, policy and action

236. A new penal code passed by the Parliament of Ethiopia increases the severity of the penalties for offences ranging from illicit drug manufacture to trafficking and organized crime to a minimum sentence of 10 years of imprisonment and a maximum sentence of 15 years of imprisonment.

237. In a number of African countries, including Algeria, Cape Verde, Madagascar and Mauritius, steps have been taken to establish and implement national drug control master plans. South Africa is in the process of drafting a new five-year master plan that will take into account experiences gained from the implementation of the master plan for the period 1999-2004.

238. The Board notes the progress made by the Government of the Libyan Arab Jamahiriya in strengthening the national and legal institutional capacities for the control of licit drugs, as well as drug law enforcement.

239. The Government of Morocco has proposed new legislation against money-laundering that conforms with international standards and takes into account the FATF recommendations; the Board calls upon the Government to enact the draft legislation without further delay. The Board notes that, in 2004, the Niger and Senegal adopted national laws modelled after standardized legislation against money-laundering developed by the West African Economic and Monetary Union in 2002. In the remaining member States of the West African Economic and Monetary Union, such legislation is limited or non-existent. Legislation against money-laundering that meets international standards is also in place in Cape Verde, the Gambia, Ghana and Nigeria. In Eastern Africa, Madagascar has adopted a new law against money-laundering. The Board advises States that have not adopted legislation against money-laundering to do so as soon as possible.

240. The Board notes with appreciation that the Government of Zambia has intensified its interdiction efforts. In 2003, 182 tons of cannabis were seized, compared with a total of 30 tons seized in 2001 and 2002.

Cultivation, production, manufacture, trafficking and abuse

Narcotic drugs

241. Africa continues to be a major source of the cannabis found in illicit markets in the region or smuggled out of the region, mainly into Europe. Production of and trafficking in cannabis have been reported in practically all countries in Africa, while the production of cannabis resin is concentrated mainly in Morocco.

242. According to a joint survey carried out by the United Nations Office on Drugs and Crime and the Government of Morocco in 2003, the total area under cannabis cultivation in Morocco was estimated at 134,000 hectares; the survey estimated that 47,000 tons of cannabis plant material was produced, representing approximately 3,000 tons of cannabis resin. In the same survey, it was estimated that Morocco accounted for approximately 40 per cent of global cannabis resin production. About 60 per cent of the cannabis resin seized in the world continues to be of Moroccan origin; most of the Moroccan cannabis is seized in Western Europe. Cannabis resin from Morocco is smuggled into other African subregions for local consumption and for re-routing to illicit markets elsewhere.

243. There is an urgent need in Morocco for new legislation in support of the national drug control strategy and institutions monitoring drugs. The Board therefore urges the Government of Morocco to develop such legislation; the legislation should provide for the use of eradication measures and the sanctions envisaged in the 1988 Convention, permit the use of investigative techniques such as controlled delivery and facilitate the development of effective international cooperation through, for example, extradition, the confiscation of illicit drug consignments in other countries, mutual legal assistance and the interception of illicit drug consignments in transit.

244. Cannabis herb has remained the most abused illicit drug in most African countries. Several African countries are major sources of cannabis. In some of those countries, the cultivation of cannabis for commercial purposes is reportedly increasing as a result of declining prices for other agricultural products. In Eastern Africa, in particular in the Comoros, Ethiopia, Kenya, Madagascar, Uganda and the United Republic of Tanzania, cannabis constitutes a

significant commercial crop. The country in Southern Africa in which cannabis cultivation is most common is South Africa, followed by Malawi. There is evidence to suggest that some of the many civil conflicts in Africa are partly funded by profits from cannabis trafficking.

245. Weak control measures at seaports, airports and land borders, inadequate drug control legislation and an increasing number of important airline hubs continue to contribute to the growing drug trafficking problem in Eastern Africa. Over the years, Western Africa, in particular Nigeria, has become a major transit area for drug trafficking.

246. Cocaine originating in South America continues to enter Southern and Western Africa before continuing on its way to Europe and North America. For 2003, several countries in Africa reported increased seizures of cocaine. While previously the largest cocaine seizures were reported in Nigeria and South Africa, the year 2004 saw some record seizures in the Gulf of Guinea: in January, about 600 kg of cocaine destined for the United Kingdom were seized and an international drugs cartel was dismantled in Ghana; and in July, some 450 kg of cocaine were seized off the coast of Togo in a joint operation conducted by French and Togolese officials acting on intelligence provided by Spain. Also in July 2004, the authorities of Cape Verde seized 200 kg of cocaine and arrested 10 persons in connection with that seizure. Those cases clearly corroborate an increasing trend in drug trafficking by sea, especially in Western Africa. It is believed that drug traffickers have moved their operations to the coast of Western Africa as a result of effective law enforcement measures off the coast of Portugal and Spain. According to information provided by the Sudanese authorities, there has also been a noticeable increase in the smuggling of drugs, in particular cocaine, from West Africa through the Sudan to countries in the area of the Persian Gulf, including Saudi Arabia. There is relatively little abuse of cocaine in Africa; the abuse of that drug in the region seems to be confined mainly to Nigeria, Senegal and South Africa, as well as transit countries, notably Cape Verde.

247. Heroin originating in South-East Asia and South-West Asia continues to be smuggled into countries in Eastern and Western Africa, the ultimate destination being Europe and, to a lesser extent, North America.

While the quantities involved are small compared with heroin trafficking in other regions, there is a clear upward trend in such trafficking. (Africa accounts for only 0.5 per cent of all the heroin seized in the world.) Countries in Western Africa account for most of the seizures. Seizures of heroin continue to be made at the international airport at Nairobi, as well as in Addis Ababa. A number of African countries are reporting growing abuse of heroin, albeit at a low level; those countries include Côte d'Ivoire, Kenya, Mauritius, Morocco, Mozambique, South Africa and the United Republic of Tanzania. While most heroin is smoked, its use by injection is being increasingly reported in countries in Eastern and Southern Africa, a development that will have serious ramifications for the spread of HIV/AIDS. In South Africa, the large increase in demand for treatment for heroin abuse, which had been observed for a few years, appears to have levelled off.

Psychotropic substances

248. The abuse of pharmaceutical products, in particular preparations containing psychotropic substances, that are increasingly being sold over the counter and without medical prescription continues to be a subject of major concern in Africa. Ephedrine and diazepam are often sold by street vendors or in neighbourhood shops in several Western and Central African countries. Particularly worrying is the fact that some young people in Eastern Africa have access to such diverted drugs. In South Africa, the recent rapid increase in the abuse in the Cape Town area of methamphetamine hydrochloride (commonly called "ice"), which apparently is smuggled into the country from China, and the growing availability of methcathinone (commonly called "cat"), which is clandestinely manufactured in the country, have become a cause for concern for the authorities.

249. The abuse of methaqualone continues to be a matter of concern in South Africa, as well as in other countries in Southern Africa. Methaqualone is usually smoked in combination with cannabis (a combination commonly called "white pipe"). Methaqualone continues to enter South Africa from India and China, and some shipments of the substances pass through Mozambique, Swaziland and Zimbabwe and Eastern African ports and airports. Methaqualone has also been manufactured in clandestine laboratories in countries in Southern Africa. The Board notes that the South

African law enforcement authorities have, on several occasions, been very successful in intercepting some of the methaqualone smuggled into their country. In mid-2004, three major seizures of methaqualone powder (totalling 12 tons and apparently originating in China) were made in Southern Africa: two of them in Durban, South Africa, and one in Maputo.

250. The abuse of MDMA (Ecstasy) seems to be largely confined to South Africa. Most of the substance is smuggled into South Africa, but some MDMA is also manufactured locally. The first clandestine laboratory manufacturing MDMA was identified and dismantled in 1996; since then, the police have been making seizures of MDMA on a regular basis.

251. While the illicit manufacture of amphetamine-type stimulants has remained limited to a few cases in Egypt, amphetamine and methamphetamine tablets are smuggled from West Africa, via the Sudan, to Saudi Arabia and other countries in the area of the Persian Gulf.

Others

252. Khat, which is not under international control, continues to be cultivated in Ethiopia and Kenya, as well as in the Comoros, Madagascar and the United Republic of Tanzania. Khat is abused mainly in Djibouti, Ethiopia and Somalia. Though khat consumption is associated with health-risk and detrimental social consequences, it is only prohibited in some countries, such as Eritrea and the United Republic of Tanzania. Khat is currently under critical review by the WHO Expert Committee on Drug Dependence.

Missions

253. The Board reviewed action taken by the Government of Egypt to implement the recommendations made by the Board following its mission to that country in May 2001. Those recommendations included the systematic conducting of studies on the extent of drug abuse in Egypt and the further development of prevention and treatment services; the strengthening of legal provisions against money-laundering; and the implementation of effective measures in Egypt to prevent controlled psychotropic substances from being made available without the required prescription.

254. The Board, while acknowledging some measures taken by the Ministry of Health and Population of Egypt with regard to the control of licit activities related to psychotropic substances and precursors, notes with concern that recommendations covering other issues of drug control either have not been attended to or have not been adequately addressed. The Board urges the Government to take the necessary steps to ensure that other recommendations of the Board are fully implemented in a more effective and coordinated manner without further delay.

255. The Board sent a mission to Madagascar in June 2004. The Board notes with appreciation that the mission was received by government officials at the highest political level, including the Prime Minister and members of the Cabinet, who clearly expressed the firm political will of the Government to fight the drug problem. Madagascar adopted in 1997 legislation that is in line with the international drug control treaties and has recently enacted provisions against money-laundering.

256. The Board notes with appreciation that a comprehensive national master plan for drug control, including measures to deal with licit control, was adopted in 2003 by the Government of Madagascar but regrets that its implementation has been delayed due to financial constraints. As the interministerial commission for drug control coordination plays a relevant role in all drug control activities in Madagascar, the Board encourages the Government to assign sufficient technical and financial resources to the secretariat of the Commission to enable it to implement the plan and perform its functions effectively.

257. The Board is aware that Madagascar, because of its strategic location in the Indian Ocean, is at risk of being targeted by drug traffickers. In Madagascar, the extensive coastline, the development of tourist resorts in the north of the country and on nearby islands and the shortage of financial and technical resources make it difficult to combat drug abuse and trafficking. The Board notes the importance attached by the Government to improving the current network for the collection of data on drug abuse and trafficking, which will be used as a tool to realign government priorities on prevention measures for the general population, in particular the younger members of the population. The Board recommends that donor countries and relevant

international organizations provide technical and financial assistance to the Government in developing drug prevention programmes, intelligence services and modern detection methods, including law enforcement and laboratory detection techniques, that will enhance the capacity of law enforcement authorities to intercept illicit drug consignments.

258. During a joint technical visit by the secretariat of the Board and the United Nations Office on Drugs and Crime to Mauritania in June 2004, the action taken by the Government pursuant to the recommendations made by the Board after its mission to that country in March 1999 was discussed. Consultations with the authorities of Mauritania are continuing with regard to the improvement of the reporting obligations of Mauritania, as required under the international drug control treaties.

259. The Board notes the various difficulties encountered by the Government of Mauritania in complying with its treaty obligations. However, the Board appreciates the efforts of the Government to rectify the situation and notes with satisfaction the measures taken by the authorities to strengthen the current national drug control legislation. The Board looks forward to the development of a comprehensive national drug control system and hopes that the new draft legislation will soon be adopted, thus providing for better control of the distribution of pharmaceutical products, including internationally controlled substances.

260. The Board notes with appreciation that, despite limited technical and human resources, the national office for the fight against the illicit traffic in narcotic drugs and psychotropic substances is regularly making seizures of illicit consignments of cannabis and psychotropic substances in Mauritania. However, the Board notes that better coordination between the different bodies involved in the fight against drug trafficking and abuse is required if sustained drug control is to be achieved in the country. Therefore, the Board strongly encourages the Government of Mauritania to reinforce the interministerial commission for drug control coordination in order to enable it to carry out its functions of coordination and promotion of efficient cooperation and the sharing of information between the various drug control authorities.

261. In June 2004, the Board sent a mission to South Africa to assess the progress made by the Government

in implementing the recommendations made by the Board following its 1993 mission to that country. While the mission did not have the opportunity to make full assessment of the drug control situation in the country, the Board appreciates the commitment of the Government to international drug control. The legal framework for drug control in South Africa is comprehensive and in compliance with the provisions of the 1961 Convention, the 1971 Convention and the 1988 Convention. Sufficient controls are being exercised over licit narcotic drugs, psychotropic substances and precursor chemicals. However, implementation is hampered by lack of coordination.

262. The Board notes that the Government of South Africa is currently in the process of developing a new national drug control master plan, based on an evaluation of the results achieved under the master plan for the period 1999-2004. The Board urges the Government to ensure improved coordination and cooperation among the regulatory and law enforcement institutions and agencies responsible for drug control issues. The Board looks forward to the implementation of the new master plan, including at the local level, particularly in the areas of prevention and treatment of drug abuse. The Board also looks forward to the Government of South Africa providing rural communities with programmes for sustainable development that discourage cannabis cultivation.

263. The Board notes the active role played by the Government of South Africa in fostering cooperation in the field of drug control at the international and regional levels, in particular among the countries in Southern Africa within the framework provided by SADC. The Board also notes the continued support provided by the Government to the three international operations launched by the Board for preventing the diversion of key chemicals used in the illicit manufacture of heroin, cocaine and amphetamine-type stimulants.

B. Americas

264. The Inter-American Drug Abuse Control Commission (CICAD) of the Organization of American States remains the main regional forum for coordinating drug control issues in the Americas. Under its aegis, the third evaluation round of the Multilateral Evaluation Mechanism was launched in