IV. Recommendations to Governments, the United Nations and other relevant international and regional organizations

643. The Board examines, on an ongoing basis, the functioning of the international drug control regime, identifies shortcomings in the implementation, by Governments, of the three main international drug control treaties, and formulates recommendations for further action addressed to national drug control agencies and relevant international and regional organizations. Those recommendations, which are aimed at assisting Governments in fully complying with their treaty obligations and at further developing the international drug control regime, are included every year in the annual report of the Board, for dissemination to all Governments.

644. For its report for 2005, the Board has decided to select some of the key recommendations and proposals for further action and to highlight them in the present new chapter. The Board believes that this will assist Governments, relevant United Nations organizations and other international and regional organizations responsible for drug control issues in focusing their attention on the main recommendations and, at the same time, facilitating the implementation of the recommendations by all those concerned.

A. Recommendations to Governments

645. The recommendations to Governments are grouped according to the following subject areas: treaty adherence; treaty implementation and control measures; prevention of diversion and abuse; availability and rational use of narcotic drugs and psychotropic substances for medical treatment; and the Internet and smuggling by mail.

Treaty adherence

646. The 1961 Convention as amended by the 1972 Protocol, the 1971 Convention and the 1988 Convention form the basis of the international drug control system. The accession of all States to those treaties is a fundamental prerequisite for effective drug control worldwide.

Recommendation 1: The Board urges States that are not yet parties to any of the international drug control treaties to take prompt action to accede to them without further delay.

Treaty implementation and control measures

647. Universal treaty adherence will, however, not be sufficient without effective and universal implementation of all the provisions of the three main international drug control treaties and the application of the necessary control measures by all Governments.

Recommendation 2: Provision of mandatory information to the Board is one of the key elements of the international drug control mechanism. The Board urges all Governments to furnish in a timely manner all statistical reports required under the three international drug control treaties.

Recommendation 3: The system of control measures laid down in the 1961 Convention provides effective protection against attempts at the diversion of narcotic drugs from international trade into illicit channels. The Board requests all Governments to implement fully the system of estimates and export authorizations and to ensure that no exports of narcotic drugs are authorized from their countries in excess of the corresponding total of the estimates of the respective importing country.

Recommendation 4: Strict restrictions are in place for the trade in and use of psychotropic substances in Schedule I of the 1971 Convention. The Board reminds all Governments of those restrictions and requests them to remain vigilant and ensure that those restrictions are observed by industry and authorized traders.

Recommendation 5: The Board wishes to emphasize the importance of ensuring the availability of essential narcotic drugs, including opioid analgesics, and psychotropic substances in emergency situations, such as natural disasters and other types of emergencies. The Board
requests Governments to apply, if appropriate, the simplified export-import control procedures to ensure the proper provision of essential narcotic drugs and psychotropic substances in disaster-stricken areas, in accordance with the model guidelines for the international provision of controlled medicines for emergency medical care, developed jointly by WHO and the Board for such emergency situations.

**Recommendation 6:** As an increasing number of countries and territories are already in a position to provide information on imports, exports and licit uses of precursors of amphetamine-type stimulants, in particular ephedrine and pseudoephedrine, the Board encourages Governments to monitor and report on trade in precursors of amphetamine-type stimulants.

**Prevention of diversion and abuse**

648. One of the fundamental objectives of the international drug control treaties is to limit the use of controlled substances to legitimate purposes and to prevent their diversion into illicit channels and abuse.

**Recommendation 7:** As attempts to divert, by using falsified import authorizations, substances in Schedules III and IV of the 1971 Convention from international trade have continued, the Board requests all Governments to be vigilant with respect to orders for psychotropic substances and, if necessary, to confirm with the Governments of importing countries the legitimacy of such orders prior to approving the export of such substances.

**Recommendation 8:** The diversion of pharmaceutical preparations containing narcotic drugs and psychotropic substances from domestic distribution channels and their abuse represent problems in many countries. The Board urges Governments to collect on a regular basis information on the extent of the diversion and abuse of pharmaceutical preparations containing controlled substances, with a view to developing countermeasures, where appropriate.

**Recommendation 9:** For some narcotic drugs and psychotropic substances, the risk of diversion may be increased when they become available in large single dosages, for example, in controlled-release preparations. The Board recommends that Governments, in cooperation with the pharmaceutical industry and health professionals, should monitor carefully cases involving the diversion and abuse of controlled substances available in controlled-release preparations and to take action against such diversion and abuse.

**Recommendation 10:** Cases involving the diversion and abuse of opioids, such as methadone and buprenorphine, when prescribed for substitution treatment, have been identified in many countries. The Board requests the Governments of countries where opioids are used for substitution treatment to take measures to prevent their diversion into illicit channels, such as supervised consumption, short dispensing intervals and central registration of all opioids prescribed for medical use.

**Recommendation 11:** Noting information from some countries on the increasing trafficking in and abuse of GHB, a sedative-hypnotic added to Schedule IV of the 1971 Convention in 2001, the Board calls upon the Governments of all countries concerned to increase their vigilance as regards the diversion, illicit manufacture and abuse of and trafficking in GHB and to inform the Board of developments in that area. The Board strongly encourages Governments to consider developing appropriate drug abuse prevention programmes that provide information on the consequences of GHB abuse.

**Recommendation 12:** To prevent traffickers from obtaining the precursor chemicals required for the illicit manufacture of amphetamine-type stimulants, the Board encourages Governments to estimate their licit requirements for the relevant precursors and to submit those data to the Board.

**Recommendation 13:** Furthermore, to prevent the diversion of precursors required for the illicit manufacture of amphetamine-type stimulants, the Board reiterates its recommendation to Governments:

(a) To control pharmaceutical preparations containing scheduled substances in
the same way as the scheduled substances they contain;

(b) To provide pre-export notifications for exports of ephedrine and pseudoephedrine, including the pharmaceutical preparations containing those substances, to the authorities of importing countries;

(c) To take measures, as appropriate, to regulate the availability of ephedrine and pseudoephedrine for medical purposes by improving the monitoring and control of domestic distribution channels, where necessary.

Recommendation 14: The system of assessment of annual requirements for psychotropic substances is essential for the identification of diversion attempts. The Board reiterates its request to all Governments that have not yet done so to establish a mechanism to ensure that their assessments are in line with their actual legitimate needs and that no imports exceeding the assessments are authorized.

Recommendation 15: The introduction by the majority of countries of the system of import and export authorizations for substances in Schedules III and IV of the 1971 Convention has significantly reduced the diversion of those substances from international trade. The Board requests the Governments of all countries that do not yet control the import and export of all psychotropic substances by the system of import and export authorizations to introduce such controls.

Availability and rational use of narcotic drugs and psychotropic substances for medical treatment

649. Another objective of the international drug control treaties is to ensure the availability of narcotic drugs and psychotropic substances for medical treatment and to promote the rational use of controlled drugs.

Recommendation 16: To ensure appropriate medical use and availability of controlled substances, the Board requests all Governments to promote the rational use of narcotic drugs and psychotropic substances for medical treatment, including the use of opioids for the treatment of pain, in accordance with the pertinent recommendations of WHO. The Governments should include the topic of rational use of narcotic drugs and psychotropic substances, including substance misuse and abuse, in the curricula of the relevant faculties of health-care professions, such as doctors, pharmacists and nurses, and, as appropriate, in the curricula of the faculties of law and social and behavioural sciences.

Recommendation 17: Illicit demand for pharmaceuticals containing psychotropic substances, particularly amphetamine-type stimulants and benzodiazepines, is growing. The Board calls on Governments to monitor consumption levels of prescription drugs containing psychotropic substances and to raise awareness about the consequences of the abuse of such drugs.

Recommendation 18: The Board calls to the attention of Governments the problem of inappropriate promotion of medicines containing controlled substances, in particular through Internet pharmacies, and requests Governments to ensure that these medicines are prescribed and dispensed in accordance with sound medical practice.

Recommendation 19: The availability of controlled substances in unregulated markets, particularly in Africa, and the circulation of counterfeit medicines in many countries create a number of problems, including the abuse and inappropriate use of drugs, and undermine public confidence in health services and in drug control and law enforcement regimes. The Board calls upon all the Governments concerned to take remedial action by strengthening mechanisms for the monitoring and control of licit narcotic drugs and psychotropic substances, including licensing systems, record-keeping, inspections and sanctions.

Recommendation 20: The Board also urges the Governments concerned to assess their real needs for controlled drugs, as well as constraints that contribute to those drugs not being available in sufficient quantities for medical purposes. WHO and international and bilateral donors would then be in a better position to assist the
countries concerned in implementing their strategies for the rational use of controlled substances.

The Internet and smuggling by mail

650. The Board notes that internationally controlled substances, including the most strictly controlled substances, are increasingly being illegally sold by Internet pharmacies. Furthermore, the smuggling of drugs by mail has become a major problem for drug law enforcement agencies. Appropriate action is therefore required to counteract such activities.

Recommendation 21: Smuggling of drugs by mail has become an important means of supplying illicit markets. The Board requests all Governments that have not yet done so to take the necessary measures to ensure that regular and thorough searches of the mail for illicit drug consignments become a routine law enforcement procedure on their territory.

Recommendation 22: The Board encourages Governments to enact legislation that allows the control and screening of all routes of international mail into and out of the country, including the private premises of international mail courier companies. Such control measures could include:

(a) Cooperative arrangements between the various national authorities responsible for the processing and screening of international mail and privately owned companies;

(b) Limiting the number of entry points for parcels;

(c) Provision of adequate training for staff;

(d) Provision of the required technical aids for drug identification;

(e) Development of intelligence or information centres by the law enforcement services to support their front-line drug law enforcement operations.

Recommendation 23: The Board notes the initiatives undertaken by the authorities of several countries against the illicit sale of internationally controlled substances by illegally operating Internet pharmacies, such as cooperation with international organizations, authorities of other countries, Internet service providers and service industries. The Board encourages the countries and relevant international organizations concerned to actively participate in such activities or to initiate such joint efforts, if required.

Recommendation 24: Noting that the authorities of some countries have issued or are in the process of issuing guidelines and legislation on prescription practices of Internet pharmacies, the Board requests the Governments of countries that have adopted such guidelines and/or legislation to provide the Board with the relevant information.

Recommendation 25: As authorities often encounter difficulties in finding partners in other countries with whom to cooperate in ongoing investigations of illegally operating Internet pharmacies, the Board appeals to the Governments of all countries to provide all necessary cooperation and support to investigative efforts and to initiate criminal procedures against offenders.

Recommendation 26: In an attempt to strengthen international cooperation to counteract illegally operating Internet pharmacies, the Board requested all Governments to identify focal points for all activities related to such Internet pharmacies and to provide to it details of legislation and regulations related to Internet services and sites. The Board calls on those Governments which have not yet provided that information to do so without delay, so that requests for support can be appropriately dealt with and international collaborative efforts will not be hindered.

Recommendation 27: The Board calls on Governments to introduce further measures to counteract illegally operating Internet pharmacies including:

(a) To undertake efforts to increase the awareness of law enforcement, regulatory and drug control authorities regarding the need to counteract the activities of illegally operating Internet pharmacies;
b) To undertake awareness-raising campaigns to alert the public to the potential dangers of such pharmacies;

c) To ensure that legislation, as well as the application of laws and sanctioning by courts, deals adequately with the diversion of pharmaceuticals in general and the illegal operations of Internet pharmacies in particular.

Recommendation 28: In view of recent cases of importation of narcotic drugs and psychotropic substances by using couriers and through the mail without the required authorization documents, the Board requests Governments to be aware that such practices may also occur on their territory and to take measures against such importations.

B. Recommendations to the United Nations Office on Drugs and Crime

651. In the implementation of their treaty-based obligations, States may require operational support from the United Nations and other relevant organizations. Therefore, as UNODC is the primary United Nations entity responsible for the provision of technical assistance in drug control issues, as well as coordination of such assistance provided by Governments and other organizations, the recommendations below are addressed to UNODC for appropriate action.

Recommendation 29: In view of the low level of accession to the international drug control treaties by States in Oceania and the problems those States have in reporting to the Board and UNODC, the Board reiterates its requests to UNODC to stimulate the accession of those States to the international drug control treaties and to assist them in establishing the necessary capacity to fulfil their reporting obligations, as required by the treaties.

Recommendation 30: Noting the persistent need for training of national drug control administrators in the administration of narcotic drugs, psychotropic substances and precursor chemicals in many countries, the Board wishes to draw the attention of UNODC to these needs and requests it to look into ways to facilitate such training activities on an ongoing basis, for instance, by establishing a specific training unit within UNODC.

Recommendation 31: Noting in Afghanistan the increasing problem of the abuse of drugs including not only opiates but also prescription drugs smuggled into the country in the absence of adequate control mechanisms, the Board urges UNODC to continue providing assistance to the Government in that area, in order to ensure the full compliance of Afghanistan with the international drug control treaties.

Recommendation 32: The Board urges UNODC to allocate the necessary funds to ensure speedy implementation of the overall training programme for Afghanistan on licit activities related to narcotic drugs, psychotropic substances and precursors, which was developed by the Board in cooperation with UNODC, to increase the Government’s capacity to implement the provisions of the international drug control treaties.

Recommendation 33: Welcoming the commitment of the Government of Iraq to fight illicit drug trafficking and other criminal activities and noting the efforts of the Iraqi authorities to develop a national drug control plan, the Board requests UNODC to provide assistance to the Government in that area.

Recommendation 34: Concerned about the continuing diversion of pharmaceutical preparations containing internationally controlled substances, the Board encourages UNODC to assist the Governments concerned in monitoring trends and preventing the diversion and abuse of such preparations.

Recommendation 35: In order to allow proper identification of trends in the diversion and abuse of psychotropic substances, the Board recommends that UNODC should use a more specific classification system for collecting reports on seizures of psychotropic substances. The Board is ready to provide support in the identification of an appropriate classification system.

Recommendation 36: Noting information on the increasing trafficking in and abuse of
GHB, a sedative-hypnotic added to Schedule IV of the 1971 Convention in 2001, the Board requests UNODC to include, in its drug abuse prevention programmes, the prevention of GHB abuse. (The same request is addressed to WHO in recommendation 50 below.)

**Recommendation 37:** The Board believes that measures to alleviate poverty, accompanied by sustained law enforcement efforts to prevent the re-emergence of illicit crop cultivation, are essential to the achievement of a lasting reduction in the production of narcotic drugs and recommends that UNODC should guide Governments on adopting a balanced approach in this regard.

**Recommendation 38:** In several countries, the levels of consumption of opioid analgesics are low. The Board requests UNODC to facilitate the preparation by WHO of a technical study to assess the medical needs of populations for opioids.

**Recommendation 39:** The Board believes that the UNODC African project to counter the smuggling of drugs by mail has been a good initiative. The Board recommends that UNODC should resume the project targeting African countries and extend the project to other regions and share its experiences with interested parties.

**Recommendation 40:** Noting that the southern Caucasus is emerging as an important transit area for drug trafficking and in view of a significant increase in drug abuse in that subregion, the Board wishes to draw the attention of UNODC to those negative developments and urges it to take active measures to assist the Governments of countries in that subregion in improving their national drug control systems, subregional cooperation and border control.

**Recommendation 41:** Misuse of the mail or illegal use of the Internet have become important means of obtaining drugs to supply illicit markets. The Board calls on UNODC to address the problems of illegally operating Internet pharmacies and the smuggling of controlled drugs by mail and to share its experiences with the Board.

**Recommendation 42:** In many countries in Africa, there is a lack of adequate precursor control legislation and monitoring, and mechanisms for the control of precursor chemicals are insufficient. As a consequence, drug traffickers are increasingly targeting countries in Africa in an attempt to divert the chemicals they require for illicit drug manufacture. The Board calls upon UNODC to offer technical assistance, including training, to the African countries at risk of such diversion.

**C. Recommendations to the World Health Organization**

652. The treaty-based function of WHO in the international drug control system is to provide recommendations, based on scientific assessments, regarding changes in the scope of control of narcotic drugs under the 1961 Convention and the scope of control of psychotropic substances under the 1971 Convention. Furthermore, WHO plays a key role in supporting the rational use of narcotic drugs and psychotropic substances worldwide and in giving guidance on the provision of adequate treatment for drug addicts.

**Recommendation 43:** Buprenorphine, a potent opioid included in Schedule III of the 1971 Convention, continues to be diverted from domestic distribution channels in several countries. The Board reiterates its request to WHO to examine information on the misuse and diversion of buprenorphine when reviewing the control status of the substance and to consider reviewing the control status of other mixed agonist-antagonist opioid analogs.

**Recommendation 44:** Noting the widespread abuse of ketamine in many countries, the Board urges WHO to expedite the review of this substance to determine whether it should be recommended to be placed under international control.

**Recommendation 45:** The Board notes with concern the abuse of khat (*Catha edulis*), which is currently not under international control, in countries in Eastern Africa and elsewhere. The Board calls upon WHO to expedite the review of this substance to determine whether it should be
recommended to be placed under international control.

Recommendation 46: In view of difficulties experienced by several Governments in assessing their medical needs of populations for opioids, the Board calls upon WHO to prepare a technical study on the medical needs for opioids in order to facilitate the identification by Governments of appropriate quantities of opioids required for medical purposes.

Recommendation 47: With respect to the availability and use of narcotic drugs for the treatment of pain, the Board recommends that WHO systematically collect and analyse information on the different treatment methods used in countries worldwide.

Recommendation 48: Pursuant to Economic and Social Council resolution 2005/25 and the World Health Assembly resolution WHA 58.22, the Board calls upon WHO to examine the feasibility of a possible assistance mechanism that would facilitate the adequate treatment of pain using opioid analgesics. The Board stands ready to support WHO in responding to this request.

Recommendation 49: The Board requests WHO to continue to draw the attention of Governments to the risks of abuse or misuse of particular groups of psychotropic substances, such as benzodiazepines and stimulants used as anorectics, and to provide practical guidelines to States on the rational use of those substances.

Recommendation 50: Noting information on the increasing trafficking in and abuse of GHB, a sedative-hypnotic added to Schedule IV of the 1971 Convention in 2001, the Board requests WHO to include, in its drug abuse prevention programmes, the prevention of GHB abuse. (The same request is addressed to UNODC in recommendation 36 above.)

D. Recommendations to other relevant international and regional organizations

653. In cases where States require additional operational support in specific areas, such as drug law enforcement, the Board addresses relevant recommendations pertaining to the specific spheres of competence of the relevant international and regional organizations, including Interpol, UNDP, UPU, the World Customs Organization and the European Commission.

Recommendation 51: The Board welcomes the participation of Interpol, the World Customs Organization and the European Commission as members of the task force of the newly established Project Cohesion (Operation Purple and Operation Topaz combined) and recommends that those organizations continue to actively support activities under that important initiative.

Recommendation 52: Noting operational activities undertaken by Interpol and the World Customs Organization, such as Project Novak and Operation Tamerlane, respectively, which target heroin trafficking from South-West Asia and Central Asia, the Board recommends that those organizations, in their function as task force members of Project Cohesion and Project Prism, consider including activities against precursor trafficking in those and similar projects.

Recommendation 53: In view of the increasing use of the mail for smuggling controlled substances, the Board recommends that Interpol and the World Customs Organization develop standard procedures for conducting investigations into seizures of controlled substances smuggled by mail, including the collection of information required for further investigation and analysis. The African mail project, initiated by the UPU and UNODC with the support of Interpol and the World Customs
Organization, provides examples of best practices in the area and demonstrates how such activities can be carried out in a coordinated manner. The Board encourages the international organizations concerned to continue developing and participating in similar projects in the future.

**Recommendation 54**: In order to obtain a more comprehensive picture of the situation regarding seizures of psychotropic substances, the World Customs Organization, in its annual report entitled *Customs and Drugs*, should specify in a more detailed manner what kind of psychotropic substances are reported as seized. The Board is ready to provide its support in identifying the appropriate classification for reporting.

**Recommendation 55**: The Board urges international organizations, in particular UPU, Interpol and the World Customs Organization, to address the problems of illegally operating Internet pharmacies and the smuggling of controlled drugs by mail in their respective fields of responsibility and to share their experiences with the Board. (The same request is addressed to UNODC in recommendation 41 above.)

**Recommendation 56**: The Board notes with appreciation the cooperation and support it has regularly received from UNDP and recommends that that organization continue to actively cooperate with and support the Board in the following areas:

(a) Provision of support and assistance in arranging country missions of the Board, including the provision of substantive briefing to members of the mission;

(b) Provision of assistance in the launching of annual reports of the Board;

(c) Provision of assistance in the dissemination of findings of the Board;

(d) Inclusion of issues dealt with by the Board (for example, the relation between illicit drugs and economic development; the complex relationship between drug abuse, crime and violence at the community level; and the availability and rational use of controlled substances for medical purposes) in the future development programmes of UNDP.

(Signed)    (Signed)
Hamid Ghodse Robert Jean Joseph Chrétien Lousberg
President    Rapporteur

(Signed)    (Signed)
Koli Kouame
Secretary

Vienna, 18 November 2005
Notes

1 In the Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development contained in General Assembly resolution S-20/4 E of 10 June 1998, the Assembly defined alternative development as a process to prevent and eliminate the illicit cultivation of plants containing narcotic drugs and psychotropic substances through specifically designed rural development measures in the context of sustained national economic growth and sustainable development efforts in countries taking action against drugs, recognizing the particular sociocultural characteristics of the target communities and groups, within the framework of a comprehensive and permanent solution to the problem of illicit drugs.


4 In 2001, Afghanistan experienced a temporary but drastic decline in opium poppy cultivation in areas under the control of the Taliban; however, that decline was attributable not to alternative development efforts but to a strictly enforced ban on such cultivation, accompanied by credible threats of violence against any persons who violated the ban.


7 This does not mean that Governments have not made any alternative development efforts of their own in areas affected by cannabis plant cultivation. The Government of Ghana, for example, has been carrying out a project in support of alternative livelihoods for cannabis plant growers in a small area of the country.

8 In Commission on Narcotic Drugs resolution 45/14, it is stated that alternative development constitutes a medium- and long-term process.

9 “Report of the Secretary-General on the implementation of the outcome of the twentieth special session of the General Assembly devoted to countering the world drug problem together” (A/56/157), para. 37.

10 In its resolution 45/14, the Commission on Narcotic Drugs urged Member States to facilitate a rigorous and comprehensive thematic evaluation for determining best practices in alternative development by assessing the impact of alternative development on both human development indicators and drug control objectives and by addressing the key development issues of poverty reduction, gender, environmental sustainability and conflict resolution.

11 In its resolution 45/14, the Commission on Narcotic Drugs recognized that, in cases where illicit crop growers had low incomes, alternative development was more sustainable and socially and economically more appropriate than forced eradication of illicit crops.

12 Pursuant to Commission on Narcotic Drugs resolution 48/9, para. 1.


15 Ibid., para. 339.

16 See, for example, General Assembly resolution 57/174, section II, paragraph 12; see also Assembly resolution 58/141, section II, paragraph 11 (d), in which the Assembly calls upon States to provide, in accordance with the principle of shared responsibility, greater access to their markets for products of alternative development programmes, which are necessary for the creation of employment and the eradication of poverty.

17 According to UNODC, only 5 per cent of families in the Lao People’s Democratic Republic, Myanmar and Viet Nam and 23 per cent of families in Bolivia, Colombia and Peru have had access to alternative livelihood schemes.


21 In its resolution 45/14, the Commission on Narcotic Drugs recognized that the world supply of and demand for illicit drugs had remained at almost the same levels.

23 Other countries affected by illicit drug cultivation either do not have poverty reduction strategy papers (for example, Afghanistan, Colombia, Myanmar and Peru) or do not consider the problem of illicit drug cultivation in connection with poverty (for example, Pakistan and Viet Nam).


25 Ibid., vol. 976, No. 14152.

26 Ibid., vol. 976, No. 14151.

27 For the 2005 technical report on narcotic drugs, see Narcotic Drugs: Estimated Requirements for 2006; Statistics for 2004 (United Nations publication, Sales No. E.06.XI.3).


29 See, for example, Report of the International Narcotics Control Board for 2004 ..., para. 166.


32 Operation Purple and Operation Topaz are voluntary international tracking programmes for potassium permanganate and acetic anhydride, respectively, whereas Project Prism is an international initiative focusing on precursors of amphetamine-type stimulants.


35 Ibid.

36 The Project Prism Task Force is composed of members representing the major geographical regions, namely Australia, China, the Netherlands, South Africa and the United States, as well as the European Commission, Interpol and the World Customs Organization as competent international bodies. The Board, through its secretariat, guides the task force within the scope of its treaty mandates.

37 A “body packer” is a person who takes into his or her body, orally or otherwise, small packets of illicit drugs in order to smuggle them across international borders.


39 The GIABA secretariat was formally established in Dakar in 2005 and is fully operational. GIABA member States have approved its budget and plan of action. GIABA currently has a pool of 49 trained evaluators to conduct evaluations of money-laundering situations among ECOWAS member States.


43 In South America opium is not abused; it is produced illicitly for use in the illicit manufacture of heroin in the region.


46 The Paris Pact initiative emerged from the Paris Statement (S/2003/641, annex), which had been issued at the end of the Conference on Drug Routes from Central Asia to Europe, held in Paris on 21 and 22 May 2003.

47 A “drug swallower” (also called a “body packer”) is a person who ingests packets of illicit drugs in order to smuggle them across international borders.

48 Ireland, Department of Health and Children, The Health of Irish Students (Dublin, 2005).


50 Ireland, Department of Health and Children, The Health of Irish Students (Dublin, 2005).