

III. Analysis of the world situation

A. Africa

1. Major developments

335. The social and political changes in North Africa that began in Egypt, Libya and Tunisia in 2011 and were still ongoing in 2012 have reportedly caused deficiencies in the drug law enforcement capabilities of these countries.

336. Major political changes also took place in Guinea-Bissau and Mali in early 2012, which may affect the fight against drug trafficking in West Africa and elsewhere. While transitional Governments have now been installed in the two countries, the situation remains unstable, in particular, in the case of Mali. That is of concern as both Guinea-Bissau, a hub for cocaine trafficking in the subregion, and Mali, a transit country for cocaine and cannabis resin, have been targeted by international drug traffickers.

337. In recent years, West Africa has emerged as a transit area for the trafficking of narcotics, especially cocaine, from South America to the lucrative European market. Approximately 30 tons of cocaine were trafficked to West Africa in 2011. Cocaine trafficking in the subregion is estimated to generate \$900 million in profit annually for criminal networks. There are an estimated 1.5 million cocaine abusers in West and Central Africa. Furthermore, trafficking in heroin and methamphetamine has increased in West Africa. Afghan heroin is trafficked through Pakistan and the Middle East into East and West Africa, and methamphetamine is manufactured in growing quantities across West Africa, mainly in Ghana and Nigeria.

338. The Security Council has repeatedly expressed its concern at the illicit drug and crime situation in West Africa and the Sahel. In a presidential statement (S/PRST/2009/32), the Council invited the Secretary-General to consider drug trafficking, as well as other threats, as a factor in conflict prevention strategies and peacebuilding efforts. During its meeting on peace and security in Africa held on 21 February 2012, the Council acknowledged the importance of system-wide action by the United Nations to combat the spread of drug trafficking and illicit weapons in countries struggling to overcome the consequences of armed conflict and instability.

339. East Africa continues to be used as a transit area for the trafficking of heroin. The increase in heroin seizures recently reported in East Africa suggests that illicit heroin trafficking is increasing in that area and, as a spillover

effect of such trafficking, heroin abuse is increasing as well, notably in Kenya, Mauritius, Seychelles and the United Republic of Tanzania. Of particular concern is the increasing abuse of heroin by injection in a subregion that is seriously affected by HIV and AIDS.

340. While cannabis remains the most widely cultivated, trafficked and abused drug in Africa, new threats have emerged, in particular, the illicit manufacture, trafficking and abuse of amphetamine-type stimulants. Until a few years ago, illicit manufacture and abuse of methamphetamine and methcathinone appeared to be largely confined to Southern Africa. Methamphetamine manufacture has now spread to West Africa, as corroborated by the detection of two methamphetamine laboratories in Nigeria, in the period 2011-2012. There is growing evidence to suggest that drug trafficking networks are increasingly exploiting East and West Africa for trafficking amphetamine-type stimulants, particularly methamphetamine, to other parts of the world, primarily East and South-East Asia.

341. There continue to be attempts to divert precursor chemicals in Africa, predominantly precursors used in the illicit manufacture of amphetamine-type stimulants. Recent reports of significant thefts or losses of ephedrine and pseudoephedrine in countries in East Africa might be an indication that precursors of amphetamine-type stimulants are being diverted from licit domestic distribution channels into the illicit manufacture of amphetamine-type stimulants in other parts of Africa.

342. Abuse of tramadol, a synthetic opioid not under international control, has become a serious problem in a number of African countries, notably in North Africa. Trafficking of tramadol to Africa seems to be increasing as well, as corroborated by a series of large seizures of tramadol effected in West Africa in 2012, totalling more than 132 tons, of preparations containing tramadol coming from India that were intercepted in Benin, Ghana, Senegal and Togo during that year.

2. Regional cooperation

343. At the fifth session of the African Union Conference of Ministers for Drug Control and Crime Prevention, held in Addis Ababa in October 2012, participants endorsed the African Union Plan of Action on Drug Control and Crime Prevention (2013-2017). The plan provides a comprehensive approach to the problems of illicit drugs, crime, corruption and terrorism as impediments to development. It is expected that the plan will be presented for adoption at the Assembly of Heads

of State and Government of the African Union to be held in January 2013.

344. The Conference also adopted the African Union Common Position on Controlled Substances and Pain Management. The Common Position, which will be submitted for endorsement at the African Union Conference of Ministers of Health to be held in April 2013, defines a harmonized African policy to improve the availability of and access to narcotic drugs and psychotropic substances for medical needs. The Board welcomes that initiative, which will facilitate wider access to effective medication for pain management in Africa.

345. The Board notes that the Regional Action Plan to Address the Growing Problem of Illicit Trafficking, Organized Crime and Drug Abuse in West Africa of the Economic Community of West African States (ECOWAS) expired in 2011. The plan, adopted in 2008, coordinated the efforts of ECOWAS member States to address the growing problem of drug trafficking, organized crime and drug abuse in West Africa. The Board calls upon the ECOWAS Commission and its member States to renew and extend the regional action plan as soon as possible to ensure a sustained political framework for addressing the world drug problem in the subregion.

346. At a meeting held in Algiers in July 2012, the Ministers for Foreign Affairs of States members of the Arab Maghreb Union (Algeria, Libya, Mauritania, Morocco and Tunisia) agreed on a common strategy to deal with recent developments and security threats in North Africa, notably trafficking in drugs and arms, organized crime, money-laundering and terrorism.

347. The Twenty-second Meeting of Heads of National Drug Law Enforcement Agencies, Africa, was held in Accra in July 2012. The Meeting approved the Accra declaration, for consideration by the Commission on Narcotic Drugs at its fifty-sixth session, in March 2013. The declaration, which sets forth recommendations for improved cooperation among African States in the fight against drug trafficking, contains, inter alia, specific recommendations for improved regulatory controls over narcotic drugs, psychotropic substances and precursors. The Meeting also agreed on actions against illicit cultivation of, and trafficking in, cannabis, the promotion of good practices and strategies in the treatment and rehabilitation of drug abuse and the enhancement of the continent's drug law enforcement capacity.

348. In June 2012, Guinea joined the West Africa Coast Initiative. The initiative addresses the growing problem of illicit drug trafficking and transnational organized crime in West Africa.

349. The INTERPOL-coordinated Operation Atakora, conducted in several countries of West Africa, resulted in the seizure of nearly 8 tons of illicit drugs and the arrest of 74 persons in July 2012. Funded by ECOWAS, the operation was carried out at airports, seaports and land borders across Benin, Ghana and Togo and led to seizures of cannabis, methamphetamine and large amounts of pain medication. The three-day operation was preceded by a joint INTERPOL/Colombian National Police training session held in Lomé.

350. UNODC assists authorities in West African countries to address problems related to drug trafficking and abuse and organized crime through national integrated programmes. In 2012, national integrated programmes against illicit drugs and crime were launched in Burkina Faso and Ghana. Cape Verde updated its national drug control programme in 2012, and Cameroon officially requested assistance for the development of a national drug and crime strategy. In line with Security Council resolution 2039 (2012), the Government of Benin considered measures such as developing a national integrated programme to fight drug trafficking and organized crime, including piracy and armed robbery at sea. However, the implementation of such programmes in Guinea-Bissau and Mali had to be suspended following the coups d'état in those countries in early 2012.

351. The UNODC Airport Communication Project, conducted in cooperation with INTERPOL and the World Customs Organization, is aimed at building drug interdiction capacity at international airports and establishing direct, secure communication lines connecting authorities at airports in West Africa and Central Africa with those at airports in Latin America and the Caribbean along the transatlantic routes used to traffic cocaine. The two-week operation "Operation Cocair 3", led by the World Customs Organization and supported by INTERPOL, the European Commission and UNODC and involving 25 airports across West and Central Africa and in Brazil, conducted in December 2011, resulted in the seizure of more than 500 kilograms (kg) of drugs, including cocaine, heroin, cannabis, methylenedioxymethamphetamine (MDMA, commonly known as "ecstasy"), methamphetamine and amphetamine, as well as cash of a value of 2.5 million euros.

352. The African subregional groups against money-laundering have continued to support the activities of African countries to combat money-laundering. The Middle East and North Africa Financial Action Task Force (MENAFATF), in collaboration with the World Bank, organized a subregional workshop to train bank supervisors on supervision of compliance with

anti-money-laundering regulations, held in Casablanca, Morocco, in May 2012. The Eastern and Southern Africa Anti-Money Laundering Group (ESAAMLG) convened its twelfth Council of Ministers Meeting and its twenty-fourth Task Force of Senior Officials Meeting, held in Maputo in August 2012. The Intergovernmental Action Group against Money Laundering in West Africa (GIABA) organized a number of expert meetings and seminars for its members in Dakar and Lagos, Nigeria, in August 2012.

3. National legislation, policy and action

353. The Government of Burkina Faso finalized in April 2012 its national drug and crime strategy for the period 2013-2017. The strategy has a particular focus on drug trafficking, as well as the prevention of terrorism and trafficking in counterfeit medicine.

354. The Government of Egypt, concerned by the increasing abuse of tramadol, placed the substance, as well as its salts and derivatives and preparations containing tramadol, under national control in 2012. Furthermore, the Government's Fund for Drug Control and Addiction Treatment has developed a national action plan against drug abuse for 2012-2016, for adoption by Parliament.

355. In Ghana, the narcotics law is currently under review. The amendment proposed by the Narcotics Control Board of Ghana foresees placing additional precursor chemicals under national control and introducing higher sanctions for the diversion of precursors into illicit drug manufacture. The Government has also allocated additional resources to the Narcotics Control Board, which will allow it to substantially increase its drug law enforcement workforce.

356. The Government of Kenya established a national technical committee on drug trafficking and abuse in October 2011 to guide the national strategy to reduce illicit drug demand and suppress supply. All relevant ministries and institutions with responsibility for drug control matters in Kenya are represented on the committee.

357. In Libya, the newly established anti-narcotics agency has, in collaboration with UNODC, prepared a new project to develop the agency's intelligence capabilities and to strengthen its regional cooperation capacity.

358. The Government of Nigeria has embarked upon a comprehensive programme covering the areas of countering drug trafficking, demand reduction, criminal justice reform and the fight against organized crime.

359. In South Africa, the Central Drug Authority has drafted a new national master plan for the period 2012-2017 that takes an inter-agency approach to

coordinating drug abuse prevention, treatment and intervention at the provincial and national levels and includes a nationwide database to track drug crimes. The Authority cooperates with the South African Police Service on a comprehensive anti-drug strategy.

360. The Ministry of Health of Tunisia, in cooperation with the Pompidou Group of the Council of Europe and with the support of WHO, organized a seminar for officials from different ministries, doctors and managers in Tunis in May 2012 to discuss issues related to drug abuse and addiction and strategies and policies for the prevention and treatment of drug abuse and rehabilitation.

361. In Uganda, draft legislation on comprehensive national drug control is before the Parliament. If approved, the legislation would increase criminal penalties for drug trafficking, strengthen the Government's authority to confiscate assets, establish special drug courts and a national coordination body to oversee the drug abuse treatment and rehabilitation services and strengthen regional and international counter-narcotics cooperation efforts.

362. The Government of Zimbabwe has established a national drug panel, composed of the Ministry of Health and Child Welfare, Zimbabwe Revenue Authority, the Office of the Attorney General, the Medicines Control Authority and the Police, to spearhead the launching and implementation of the country's master plan to combat drug trafficking. The panel is also responsible for overseeing the proper disposal of seized drugs.

363. A number of African Governments have taken steps to strengthen their legal framework against money-laundering. The Government of Algeria adopted an implementing regulation in February 2012 to strengthen the country's law on the prevention and fight against money-laundering and the financing of terrorism of 2005, and the Government of Djibouti amended its anti-money-laundering act of 2002 to allow for asset confiscation. In the Gambia, a draft law on countering money-laundering and the financing of terrorism was submitted to Parliament in June 2012 to bring current national legislation into conformity with international standards, and in Togo, legislation has been drafted to deal with the forfeiture of assets.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

364. Illicit production of cannabis resin is concentrated in some countries in North Africa. Morocco has

traditionally been the predominant supplier of the cannabis resin abused in Europe, which is the world's largest illicit market for cannabis resin. According to the World Customs Organization, about 72 per cent of the total amount of cannabis resin seized by customs authorities worldwide in 2011 originated in Morocco. However, recent UNODC data indicate that the supply of cannabis resin from other countries, notably Afghanistan, could be increasing.

365. The Government of Morocco reported that the area under illicit cannabis cultivation amounted to 47,400 ha in 2010. No additional land was targeted for crop substitution in 2011. Large shipments of illicit cannabis cultivated in Morocco that are destined for Europe are transported via speedboats and other small non-commercial vessels. Smugglers continue to ship cannabis through the Spanish enclaves of Ceuta and Melilla and the Moroccan port of Tangier. Multi-ton seizures of cannabis continue to be made on a regular basis. In 2011, 138 tons of cannabis resin were seized.

366. Other North African countries have reported large amounts of seized cannabis resin. Algerian authorities seized over 53 tons of cannabis resin transiting national territory in 2011 and 26 tons in the first half of 2012. The Government of Egypt reported that in 2011 it had seized more than 18 tons of cannabis resin, most of which had originated further west within Africa, with smaller amounts coming from Pakistan and Afghanistan. According to Egyptian authorities, no cannabis resin is produced in the country, although illicit cannabis plant cultivation is widespread, notably in the Sinai peninsula.

367. Cannabis herb production and trafficking are reported in practically all African countries. Cannabis herb is abused locally or smuggled within the region. Africa is also one of the main sources of the cannabis herb seized in Europe. The largest producers of cannabis herb in Africa are countries in West and Central Africa (the Democratic Republic of the Congo, Ghana, Nigeria, Senegal and Togo), North Africa (Egypt and Morocco), East Africa (Ethiopia, Kenya and the United Republic of Tanzania) and Southern Africa (Malawi, South Africa, Swaziland and Zambia).

368. In 2011, the National Drug Law Enforcement Agency (NDLEA) of Nigeria seized a total of 192 tons of cannabis herb, which represents a 10-per-cent increase over the total in 2010. Also in 2011, Nigerian authorities eradicated a total of 918 ha of cannabis plant cultivation, compared with 593 ha in 2010. According to the Agency, that amount of cultivation is equivalent to a yield of 1,836 tons of cannabis herb. Other countries reporting seizures of cannabis herb in 2011 were

Morocco (129 tons), Egypt (73 tons), Burkina Faso (33 tons), Sierra Leone (3 tons) and Cape Verde (2.6 tons). Compressed cannabis is smuggled from South Africa to Europe by parcel post and in air and sea containers.

369. In the past decade, West Africa emerged as a new hub for the smuggling of cocaine from South America to Europe. However, cocaine trafficking routes leading to West Africa seem to have lost some of their attraction in the past several years. Since 2007, drug traffickers seem to have turned to using containerized shipping to smuggle cocaine into West Africa. Nine of the 14 large seizures effected in 2011 were made in Benin, Cameroon, Ghana, Nigeria, Sierra Leone and Togo. Almost half of all maritime seizures of cocaine concealed in containers had departed from Brazil. The Plurinational State of Bolivia was the second most important country of departure for cocaine destined for West Africa. The main destinations of cocaine consignments coming through Ecuador were Benin and Côte d'Ivoire. In November 2011, 530 kg of cocaine were seized from a sea freight container in Brazil destined for Europe via Benin. In October 2011, a record seizure of 1.5 tons of cocaine was made in Cape Verde. Furthermore, 480 kg of cocaine destined for Nigeria were seized in Brazil in October 2011, and 145 kg were intercepted in Cameroon on a ship coming from Brazil. In July 2012, Argentine customs officials at the Buenos Aires international airport seized more than half a ton of cocaine destined for Nigeria.

370. In addition, traffickers use commercial aircraft and carriers to transport cocaine shipments to West Africa. In 2011, Lagos airport was the main hub of cocaine smuggled to Europe by air. That year, over half of the air couriers coming from West and Central Africa that were arrested in European airports had departed from Nigeria; 26 per cent had departed from Cameroon, and 18 per cent had departed from Benin. Cocaine is also smuggled in air freight. In 2011, a consignment of 113 kg of cocaine was intercepted at the airport of Miami, United States; it had been sent from the Plurinational State of Bolivia and was destined for Benin.

371. Significant amounts of cocaine are smuggled directly from South America to the illicit markets of South Africa. Some cocaine is trafficked from West Africa to South Africa, either directly or via Angola and Namibia. Cocaine is regularly intercepted in Ethiopia, Kenya, Uganda and the United Republic of Tanzania. In 2011, Tanzanian customs authorities intercepted 86 kg of cocaine coming mostly from Brazil, and authorities in Mozambique intercepted at Maputo international airport 12 cocaine shipments, totalling 65 kg, on a route from India through Ethiopia to Mozambique.

372. Reports indicate that cocaine traffickers are increasingly attempting to smuggle cocaine to Europe through Morocco, with cocaine being shipped from South America to sub-Saharan Africa and the Sahel region and on to Morocco.

373. Illicit opium poppy cultivation is confined to the Sinai peninsula in Egypt and is thought to be limited in scale. The opium produced there is abused locally, and there is no evidence of it being used for the manufacture of heroin. In Egypt, opium ranks fourth among the drugs of abuse. As a result of intensified drug control efforts over the past years, opium poppy cultivation has decreased. Opium is also smuggled to Egypt from South-East and South-West Asia. In 2011, about 11 kg of opium were seized in Egypt.

374. Heroin is trafficked to Africa from South-East and South-West Asia. Africa has now emerged as a trafficking hub for heroin for abuse within Africa as well as for onward shipping to Europe and elsewhere. Most heroin enters Africa through the countries located along the East African coastline (Ethiopia, Kenya, Mozambique, Somalia and the United Republic of Tanzania), and consignments of Afghan heroin in amounts of up to several hundred kilograms enter East Africa after crossing the Indian Ocean from the Islamic Republic of Iran and Pakistan. Airports are used to move smaller quantities of heroin, making use of both air freight and air couriers. Some of the heroin smuggled to East Africa is then smuggled to West Africa and onward to Europe, while smaller quantities are smuggled into North America and some parts of Asia, and some of the heroin is smuggled from East Africa to Southern Africa. Major transit hubs for heroin trafficking in Africa include Nigeria and South Africa.

375. Total heroin seizures in Africa rose from 311 kg in 2008 to 695 kg (amounting to 7 per cent of global heroin seizures) in 2010, the latest year for which aggregate UNODC data are available. East Africa had the largest amount of heroin seizures in Africa in 2010 (245 kg), followed by North Africa (239 kg) and West and Central Africa (201 kg), suggesting that illicit heroin markets are expanding in all three subregions. That upward trend in African heroin seizures seems to have continued in 2011 according to the World Customs Organization, which recorded an increase in the volume of heroin intercepted by African customs authorities, from 266 kg in 2010 to 302 kg in 2011.

376. East Africa's unprotected coastline, major seaports and airports and porous land borders provide traffickers with a multitude of entry and exit points. Moreover, a lack of capacity to control borders and ports of entry,

inadequate cross-border cooperation and weak criminal justice systems make East Africa attractive to international drug trafficking syndicates. Large seizures of heroin arriving in East Africa using maritime routes were first reported in 2011: 179 kg of heroin were intercepted in Dar es Salaam, United Republic of Tanzania, in February 2011, and 102 kg of heroin were intercepted in Mombasa, Kenya, in March 2011. In January 2012, the largest such seizure ever reported in East Africa, 211 kg of heroin, was effected in Dar es Salaam. Thus, in less than two years, almost 750 kg of heroin were seized on the coast of East Africa. Furthermore, naval vessels effected two large seizures of heroin being transported on dhows in the Indian Ocean, south-east of Oman, in February and April 2012, in which 240 kg and 180 kg of heroin, respectively, were seized.

377. Afghan heroin smuggled into West and Central Africa is destined mainly for the illicit markets of Europe. Recently, however, there has been a significant increase in heroin trafficking in those subregions, which could result in the spillover effect of increased heroin abuse. While in the past heroin has been smuggled through West Africa in smaller quantities and not in bulk in sea freight containers, in recent years there have been a number of cases of heroin smuggled into West Africa in containerized vessels; since 2010, several large consignments of heroin have been intercepted in West Africa or en route to that subregion, including a consignment of 200 kg of heroin coming from Pakistan that was seized in Benin in April 2011. Altogether, almost 400 kg of heroin were seized in West Africa in 2011. A seizure of 113 kg of heroin was effected at the seaport of Lagos in June 2012. Since January 2012, there have also been several heroin seizures at the international airport of Abidjan, Côte d'Ivoire. Most of the heroin seized in or bound for West Africa was destined for Benin, Côte d'Ivoire and Nigeria.

378. In North Africa, heroin is smuggled into Egypt across the Gulf of Aqaba and through the eastern borders of the country, mainly from Afghanistan.

(b) Psychotropic substances

379. Trafficking of amphetamine-type stimulants from West Africa to other regions and subregions has emerged as a new threat. Since 2008, there have been reports of methamphetamine being trafficked from countries of West Africa such as Benin, Cameroon, Côte d'Ivoire, Ghana, Guinea, Nigeria, Senegal and Togo to East Asia, predominantly Japan and the Republic of Korea. Seizures of methamphetamine from West Africa have been increasing since 2009. Currently, the most common destinations for methamphetamine trafficked through

Africa appear to be Japan, Malaysia, the Republic of Korea, Singapore and Thailand. The drugs are usually trafficked by air in quantities between 1 and 2 kg.

380. Methamphetamine has been illicitly manufactured in Southern Africa and North Africa for some time. In West Africa, a clandestine methamphetamine laboratory was dismantled for the first time, in Lagos in July 2011. The laboratory had an estimated manufacturing capacity of 20-50 kg per production cycle. In February 2012, a similar laboratory was dismantled in Lagos, and about 5 kg of finished methamphetamine were seized.

381. So far, there have been no reports of illicit methamphetamine manufacture in East Africa. However, methamphetamine transits East Africa on a route from West Africa, notably on air routes to major consumer markets, passing through key transport hubs such as Addis Ababa and Nairobi. Methamphetamine was seized for the first time at the airport of Entebbe, Uganda, in 2011, when 3 kg of methamphetamine were seized from an air courier from West Africa en route to India. Total seizures of methamphetamine in Uganda amounted to 10 kg in 2011 and to 5 kg in the first three months of 2012.

382. According to the World Customs Organization, 14 African countries emerged as source countries or transit countries for shipments of methamphetamine bound for the Asia-Pacific region in 2011. Those countries were Benin, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, the Gambia, Ghana, Kenya, Mali, Mozambique, Nigeria, Senegal, South Africa and Togo, from which amounts up to 20 kg were trafficked. Nigeria is most frequently cited as the origin of trafficked amphetamine-type stimulants, largely methamphetamine. In 2010, Nigerian authorities reported total seizures of 75 kg of amphetamines at the international airport in Lagos, compared with the 45 kg of amphetamines seized at that airport in 2011. Methamphetamine and amphetamine from West Africa are also smuggled to South Africa, the largest illicit market of amphetamine-type stimulants on the continent. In 2011, Libya emerged as the source country of two major amphetamine seizures, of over 2.1 million tablets (about 720 kg) and of 2 million amphetamine tablets (about 666 kg) effected by customs authorities in Saudi Arabia in July 2011 on the land border with Jordan.

383. Illicit manufacture of methamphetamine, methcathinone and methaqualone continues to take place in South Africa. The substances are destined for domestic abuse as well as for trafficking to countries in Southern Africa. Methaqualone (Mandrax), a sedative banned in 1977, is smuggled into South Africa from Asia but is also

manufactured locally. In June 2012, authorities seized 860,000 tablets (approximately 350 kg) of methaqualone being transported by road from Botswana and the United Republic of Tanzania and destined for Western Cape province, South Africa. In July 2012, South African police dismantled two methaqualone laboratories in Johannesburg and seized about 300,000 tablets (approximately 120 kg) of methaqualone.

384. Another serious problem faced by many African countries is the availability of prescription drugs on unregulated markets. Often those drugs have been diverted or are counterfeit, and they contain controlled substances, possibly amphetamine-type stimulants, as well as sedatives and tranquillizers. In some African countries, there was an increase in the total amount of such substances seized: for instance, 2,985 kg of non-specified psychotropic substances were seized in Nigeria in 2011, as compared with 712 kg in 2009.

385. In Mauritius, psychotropic substances such as diazepam (Valium) and clonazepam (Rivotril) are abused by drug-dependent persons who are supplied by dealers. Buprenorphine, a substance controlled under Schedule III of the 1971 Convention, is trafficked, mainly from France, in the form of Subutex tablets. After the implementation of stricter control measures, the availability of the drug on the local illicit market has decreased. In the first half of 2012, there have been only three significant seizures, totalling 9,353 Subutex tablets, in Mauritius. In contrast, diversion of sedatives and tranquillizers from local distribution channels has increased, mainly through purchases without medical prescription from rogue pharmacies.

(c) Precursors

386. Kenyan authorities have been reporting significant thefts and/or losses of ephedrine and pseudoephedrine since 2009, and in 2010, Tanzanian authorities started to report thefts of pseudoephedrine. Between September 2009 and December 2011, the thefts of ephedrine and pseudoephedrine in Kenya and the United Republic of Tanzania combined totalled over 3.2 tons (2,062 kg of pseudoephedrine and 1,183 kg of ephedrine). Furthermore, stopped shipments of large amounts of ephedrine destined for Uganda (100 kg) and the Sudan (300 kg) were reported in 2011. The ultimate destination of those diversions and attempted diversions is unclear.

387. Illicit manufacture of methamphetamine and methcathinone in Southern Africa takes place mainly in South Africa, where licitly imported ephedrine and pseudoephedrine are diverted from domestic distribution channels. Other countries in Southern Africa reporting

seizures or stopped shipments of ephedrine include Mozambique, Zambia and Zimbabwe. According to the authorities of Mozambique, ephedrine is smuggled by air from India to Maputo via Addis Ababa, for smuggling onward to clandestine laboratories in the subregion. In 2011, 41 kg of ephedrine were seized in Mozambique, and in 2012, a shipment of 1,970 kg of 1-phenyl-2-propanone (P-2-P) from India to Mozambique was suspended after it was confirmed by authorities that the importing company had no import authorization. In 2011, a suspected shipment of 500 kg of P-2-P intended for Mozambique was suspended by authorities of the exporting country, India.

388. The reported seizures described above show that many subregions of Africa are actively being targeted by traffickers for use as both transit areas and destinations for precursors. At the same time, monitoring and control mechanisms over precursor chemicals are still weak in many African countries, and exact data on legitimate trade in, and annual licit requirements for, precursor chemicals continue to be scarce. To assist the Governments of African countries in preventing the diversion of precursor chemicals into illicit drug manufacture, INCB has launched a three-month international operation in June 2012, Operation Ephedrine and Pseudoephedrine Intelligence Gaps in Africa (Operation EPIG), focusing on shipments of ephedrine and pseudoephedrine, including pharmaceutical preparations containing those substances, destined for or transiting through Africa.

(d) Substances not under international control

389. Khat (*Catha edulis*), a substance that is widely consumed in countries in East Africa and parts of the Middle East for its stimulating effects, is cultivated mainly in Ethiopia and Kenya. Most khat is grown for export to Somalia and Yemen and for consumption by expatriate communities. Owing to the health risks associated with khat consumption, khat is prohibited in several countries in East Africa, as well as in the United States, Canada and a number of countries in Europe. In June 2012, the Government of the Netherlands banned khat. The United Kingdom thus remains the only major European country allowing the import of that substance.

390. Abuse of tramadol is a serious problem in a number of African countries, including Egypt, Libya and Mauritius. In 2011 and 2012, Egypt witnessed an upsurge in trafficking in tramadol. While in 2011, total seizures of tramadol preparations amounted to 120 million tablets, about 320 million tramadol tablets were seized in the seaports of Alexandria, Damietta and Port Said in the first quarter of 2012. The preparations are smuggled to Egypt

mainly from China and India. The Libyan anti-narcotics agency reported that Libya is facing large-scale trafficking and abuse of tramadol; however, exact statistics are not available due to the current restructuring of the country's law enforcement institutions. Abuse of tramadol preparations is also reported by Mauritius and Togo.

391. Under the UNODC/World Customs Organization Container Control Programme, a total of 24 containers with a total of more than 132 tons of tramadol preparations were seized between February and October 2012. All containers originated in India and were seized in West Africa. Of those, 16 containers were intercepted in Lomé, 7 containers in Cotonou, Benin, and 1 container in Dakar. A further container is being held in Tema, Ghana. Nineteen of those intercepted containers were ultimately destined for the Niger. Because part of the seized preparations might be counterfeit, forensic examinations will be conducted to determine whether the seized preparations actually contain tramadol.

(e) Abuse and treatment

392. Lack of capacity for the collection and analysis of drug-related data, in particular drug abuse epidemiological data by the national authorities, remains a serious challenge in many African countries. Such information is urgently required for policy formulation and to tailor demand reduction interventions to meet local needs. The Board reiterates the importance of States in the region taking concrete steps to improve frameworks for the collection and analysis of drug-related data, and encourages greater international cooperation to that end.

393. Abuse of cannabis herb, the most widely abused illicit substance in Africa, is reported in all subregions of Africa, while abuse of cannabis resin occurs mainly in countries of North Africa. The annual prevalence rate of cannabis abuse among the African population aged 15-64 is estimated to be 7.8 per cent (range: 3.8-10.4 per cent), which is higher than the global average of 3.8 per cent (range: 2.8-4.5 per cent). West and Central Africa are the subregions with the highest prevalence rates, estimated at 12.4 per cent (range: 5.2-13.5 per cent). Within that subregion, the highest national annual prevalence rate for cannabis abuse is that of Nigeria: 14.3 per cent of the population aged 15-64. In South Africa, cannabis was the most common primary substance of abuse in 2011 for patients in treatment under the age of 20.

394. According to UNODC estimates, there could now be some 1.5 million cocaine drug abusers (range: 0.5 million-2.3 million) in West and Central Africa, which corresponds to an annual prevalence rate

ranging between 0.3 per cent and 1.1 per cent of the population aged 15-64. Nigeria and South Africa are the countries with the highest annual prevalence rates, estimated at 0.8 and 0.7 per cent, respectively, of the population aged 15-64. In South Africa, cocaine is commonly a secondary substance of abuse. In contrast, cocaine abuse in North Africa and East Africa is considered to be low.

395. In Africa, heroin abuse is perceived to be increasing and is mainly concentrated in East and West Africa, reflecting the fact that East Africa is Africa's main area of entry for Afghan heroin and West Africa is an important area of exit. The prevalence of heroin abuse, including abuse by injection, is higher in East Africa than in any other subregion, particularly in Kenya, Mauritius, Seychelles and the United Republic of Tanzania.

396. Mauritius, Kenya, Nigeria and South Africa, in that order, are reported to have the highest annual prevalence rates of heroin abuse in Africa (1.3 per cent, 0.7 per cent, 0.7 per cent and 0.5 per cent, respectively). Abuse of heroin mixed with cocaine and various additives, known locally as "sugars" or "niaope", is also reported. According to estimates of Kenya's National Authority for the Campaign against Alcohol and Drug Abuse (NACADA), there are over 200,000 heroin addicts in Kenya. The number of injecting drug abusers in Coast Province alone is estimated at between 40,000 and 60,000, and the average age at which people begin to abuse drugs is decreasing. In North Africa, heroin abuse is also reported by Egypt.

397. The annual prevalence of amphetamine-type stimulants in Africa is estimated at between 0.2 per cent and 1.4 per cent of the population aged 15-64. This wide range reflects the fact that there is either limited or no recent or reliable data available for most parts of Africa. Nigeria, South Africa and Egypt, in that order, seem to have the highest annual prevalence rates of abuse of such stimulants (1.4 per cent, 1 per cent and 0.5 per cent of the population aged 15-64, respectively). Burkina Faso, Cape Verde, Côte d'Ivoire, Egypt, Ghana, Kenya, Senegal and Sierra Leone and several other African countries have reported abuse of amphetamine-type stimulants in recent years. In South Africa, methcathinone, crystal methamphetamine and MDMA ("ecstasy") remain the most abused amphetamine-type stimulants. Methamphetamine is abused mainly in Western Cape province, especially in Cape Town, while methcathinone abuse continues to be limited to Gauteng province. According to the South African Community Epidemiology Network on Drug Use (SACENDU), the proportion of patients that reported methamphetamine as

their primary substance of abuse remained stable in Western Cape province, at 35 per cent, in 2011.

398. South Africa is possibly the world's largest illicit market for methaqualone (Mandrax), a sedative-hypnotic, which is often abused in combination with cannabis. Although in many communities Mandrax is now considered old-fashioned, methaqualone is still relatively common as a secondary substance of abuse in Western Cape province. Abuse of methaqualone also occurs in other countries in East and Southern Africa, notably Kenya and Mozambique.

399. The abuse of over-the-counter and prescription medicines, such as slimming tablets containing controlled substances, analgesics and benzodiazepines (including diazepam and flunitrazepam), continues to be a problem in many African countries. In West African countries, including Burkina Faso, Mali, the Niger and Senegal, abuse of amphetamine is common among labourers doing heavy physical work. In those countries, psychotropic substances such as pemoline, secobarbital, diazepam (Valium), flunitrazepam (Rohypnol) and pentazocine are sold on the illicit market, as well as counterfeit substances often sold as those substances, and are subject to widespread abuse. The abuse of buprenorphine (Subutex) and sedatives is a serious problem in Mauritius. In Egypt, prescription drugs, notably trihexyphenidyl (Parkinol) and carisoprodol (Somadril), are now the second most abused group of substances, after cannabis. Most of those substances are manufactured locally for medical purposes and are diverted from domestic distribution channels. High levels of non-medical use of prescription drugs (mainly benzodiazepines, analgesics, codeine preparations and sedative-hypnotics) are reported in South Africa.

400. The increasing levels of drug abuse reported by many African countries will translate into a greater demand for treatment and rehabilitation. Yet the national health-care systems of many countries in Africa are not able to adequately meet such demand. Treatment is usually offered — mostly in the form of detoxification — in State mental health hospitals and/or psychiatric institutions. The number of trained personnel is insufficient, and there is a lack of access to and availability of drug dependence treatment and rehabilitation facilities for people in need. The Board therefore calls upon the Governments of African countries to improve the treatment available to drug-dependent persons and to facilitate their access to quality and affordable treatment services by providing support for the development and strengthening of such services and capacity-building for the entities that provide such services.

401. Under the joint UNODC/WHO project entitled “Treating drug dependence and its health consequences” (Treatnet II), assistance is provided to participating States to increase their technical competence in providing effective treatment and rehabilitation of drug-dependent persons tailored to the needs of different geographical regions. In Africa, the project is being implemented in Côte d’Ivoire, Egypt, Kenya, Morocco, Mozambique, Nigeria, Sierra Leone, the United Republic of Tanzania and Zambia. In Kenya, over 700 health workers were trained in drug dependence treatment. A regional training-of-trainers seminar held in Nairobi in September 2012 trained 54 health professionals from 11 countries in Africa.

402. In Algeria, a multi-year project has been put in place aimed at setting up a network of over 50 drug addiction treatment centres. So far, seven addiction care centres are already operational, in addition to existing facilities.

403. In Kenya, the National Authority for the Campaign against Alcohol and Drug Abuse has started to develop an opiate substitution therapy programme and a syringe exchange programme.

404. The commitment of the Government of Morocco to prevention, treatment and rehabilitation of drug-dependent persons is reflected in its national programme launched in 1999, which provides for the establishment of treatment centres for young people with addictive behaviours and offers awareness-raising, diagnosis, prevention and social reintegration to patients. Since 2010, Morocco has also had a methadone substitution programme in place.

405. In the United Republic of Tanzania, where a methadone maintenance programme was launched in 2011 for persons who abuse drugs by injection, one further opioid treatment centre was opened in 2012. It is expected that the programme will be able to serve up to 1,500 injecting drug abusers.

B. Americas

Central America and the Caribbean

1. Major developments

406. The region of Central America and the Caribbean continues to be used as a major transit area for South American cocaine heading northwards to the North American market. In general, the region experienced a decline in seizures of cocaine in 2010, possibly as a result of declining demand in North America. That

notwithstanding, the increasing power of drug gangs has helped to raise corruption and homicide rates in the region, especially in Belize, El Salvador, Guatemala and Honduras, the “Northern Quadrangle”, which are particularly affected by significant levels of drug-related violence. Areas exposed to intense drug trafficking in Central America show higher homicide rates. Drug trafficking has corrupted some State institutions, which in a number of cases have been overwhelmed by the resources deployed by trafficking organizations.

407. UNODC estimates that about 280 tons of South American cocaine (purity-adjusted) are destined for North America. Much of it travels by way of Central America and the Caribbean, where cocaine use is also increasing. Recently, cocaine shipments destined for countries in Central America, with further deliveries for Mexico and the United States of America, have increased. Cocaine prevalence rates in Central America and in the Caribbean have been estimated by UNODC at 0.5 per cent and 0.7 per cent (2010), respectively.

408. In 2011 and 2012, there was increased trafficking in precursor chemicals in countries in Central America, in particular non-scheduled chemicals used in the illicit manufacture of methamphetamine. El Salvador, Guatemala and Nicaragua reported incidents in 2011 and 2012 involving significant seizures of esters of phenylacetic acid and methylamine. Illicit laboratories have also been reported in the region. Similarly, seizures of chemical precursors, raw material (coca paste) and laboratories in Guatemala and Honduras indicate the likely existence of both cocaine- and heroin-refining facilities. Large seizures of chemicals effected over a short period present a challenge to the local authorities in terms of safe handling and environmentally friendly disposal. Furthermore, the abuse of MDMA (“ecstasy”), generally imported from Europe, has been spreading in Central America and the Caribbean since the period 2010-2011.

409. The destabilizing effects of drug trafficking and their impact on regional security have increased and the region has been affected by links between drug trafficking and increased levels of violence. The links between drug trafficking, trafficking in weapons and the related higher levels of violence that characterized drug-related crime in a number of countries of the region over the past year continue to exist, including an increased homicide rate. According to the latest data of UNODC, Honduras and El Salvador are the most violent countries in the world, with homicide rates of 92 and 69 per 100,000 population, respectively, and Central America is the most violent region, with a rate of 41 per 100,000 population — one third higher than Southern Africa and twice the rate of