456. South America is also affected by illicit consumption of amphetamine-type stimulants. Some of the more recent data that point to continued or emerging abuse of amphetamine-type stimulants in South America relate to Colombia (with the prevalence rate among the general population aged 12-65 in 2013 estimated at 0.19 per cent for past-year abuse of “ecstasy” and 0.09 per cent for lifetime abuse of methamphetamine),49 Ecuador (past-year prevalence of illicit use of “ecstasy” among students in the 12-17 age bracket in 2012 estimated at 0.5 per cent) and the Plurinational State of Bolivia (lifetime prevalence of illicit use of amphetamine or methamphetamine among the student population in the second to fourth year of secondary school in 2012 estimated at 1.7 per cent).50

457. Some countries in South America have also reported notable levels of illicit use of prescription stimulants (such as anorectics), including Brazil (past-year prevalence of 1.7 per cent among students in the last four years of primary school and the first three years of secondary school in the 26 state capitals and the federal district of Brazil, as of 2010) and Argentina (past-year prevalence of 1.4 per cent among students in the 15-16 age bracket as of 2011).

C. Asia

East and South-East Asia

1. Major developments

458. East and South-East Asia have some of the largest and most established illicit markets for amphetamine-type stimulants in the world. Further increases in the trafficking and manufacture of those substances constitute the leading source of drug-related activity in the region. Amphetamine-type stimulants are already ranked as the most commonly abused drugs by a number of countries, and experts in the region have indicated that the demand for them, particularly for methamphetamine, has continued to grow and become more diversified.

459. Sustained increases in illicit opium poppy cultivation and production in South-East Asia point towards another area of concern: since the mid-2000s, the upsurge in illicit cultivation in the region has more than doubled, offsetting the considerable gains made through eradication efforts during the previous decade. In 2013, over 62,000 ha of opium poppy cultivation were recorded, mainly in Myanmar and the Lao People’s Democratic Republic. In 2006, by comparison, an area of 24,000 ha of illicit poppy cultivation had been recorded. With a total reported cultivation of 57,800 ha in 2013 (an increase of over 7,000 ha from the previous year), Myanmar continued to be the second-largest grower of opium poppy in the world after Afghanistan. Concurrently, cultivation in the Lao People’s Democratic Republic was estimated at 3,900 ha.

460. In a region where the huge demand for amphetamine-type stimulants invariably creates sustained demand for precursor chemicals, drug syndicates have attempted to circumvent legislative control measures by replacing traditional precursors with pharmaceutical preparations containing such precursors or other non-scheduled precursors. Given the rather lengthy processes involved in making changes to the scope of control applicable to precursors, closer collaboration between industry and the authorities concerned has become much more important in efforts to curb this regional trend.

2. Regional cooperation

461. In the light of the objective of a drug-free region by 2015, the Association of Southeast Asian Nations (ASEAN) held a number of meetings to exchange information on the current state of affairs, reiterate the Association’s political commitment and call for intensified collaborative efforts. This political determination was evident in the Chair’s statement issued on the occasion of the latest ASEAN Ministerial Meeting on Drug Matters, held in Bandar Seri Begawan in September 2013, and the statement made by the Asian group at the high-level segment of the fifty-seventh session of the Commission on Narcotic Drugs, held in Vienna in March 2014. Also, law enforcement agencies in the region discussed the latest assessment of the national drug situation and national progress in combating drugs during the 11th meeting of the ASEAN Inter-Parliamentary Assembly Fact Finding Committee to Combat the Drug Menace, held in Vientiane in May 2014, the 14th ASEAN Senior Officials Meeting on Transnational Crime, held in Bandar Seri Begawan in June 2014, and the 35th ASEAN Senior Officials Meeting on Drug Matters, held in Makati City, the Philippines, in July 2014.

462. In addition to ASEAN meetings, other regular regional meetings, such as the Asia-Pacific Operational Drug Enforcement Conference and the Anti-Drug Liaison
Officials’ Meeting for International Cooperation, as well as various subregional cooperation platforms, have facilitated the exchange of information and multilateral collaboration. For instance, participants at the latest meeting of senior officials from China and the six countries of the Greater Mekong subregion, which was held in Beijing in May 2014, expressed the need for a more coordinated approach to combating drugs. Challenges posed by the large amount of non-scheduled precursor chemicals and new psychoactive substances in the region were addressed during the International Conference on Precursor Control, jointly organized by INCB and UNODC in Bangkok in December 2013. Similarly, problems posed by synthetic drugs were discussed during the UNODC Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) programme Regional Workshop, held in Yangon, Myanmar, in August 2014.

3. National legislation, policy and action

463. To further the regional goal of a drug-free ASEAN community in 2015, a number of policies and strategies have been launched or extended at the national level. In February 2013, the Government of Cambodia approved a new national strategic plan on drug control for 2013-2015, which outlined the Government’s plan to further implement the country’s drug law. Similarly, in the Lao People’s Democratic Republic, the Government’s guiding drug control strategy document—the national drug control master plan for 2009-2013—was extended until 2015. In Myanmar, as the 15-year drug elimination plan came to an end, a new five-year drug elimination plan (for 2014/15 to 2018/19) was adopted, as were programmes aimed at reducing supply and demand and at promoting law enforcement cooperation, both domestically and in conjunction with international organizations. Meanwhile, the Government of Indonesia declared 2014 the year to save drug abusers, as part of which demand reduction measures were strengthened through the promotion of treatment and rehabilitation.

464. Amendments to existing drug control legislation have been adopted in some countries in the region, although they differ in emphasis and approach. For instance, changes were made in Brunei Darussalam in 2012 with regard to substances. New definitions for “cannabis”, “cannabis mixture” and “cannabis resin” were adopted, and a new drug schedule was included in the 2012 amendment to the country’s Misuse of Drugs Act. The old definition of “cannabis” as “any plant of the genus Cannabis from which the resin has not been extracted”, was replaced by “any plant of the genus Cannabis, or any part of such plant”. In Singapore, the focus of legislative action has been on amending drug-related provisions in the criminal law by introducing stricter punishments for repeat trafficking offenders and those who sell drugs to young or vulnerable persons. A new offence was introduced to criminalize the organization of gatherings where drugs will be abused, and to impose higher penalties on those who involve young or vulnerable persons in such gatherings. The amendments came into effect in May 2013.

465. In the absence of a unified control framework at the international level, attempts were made to impose stricter control on new psychoactive substances at the national level. In Indonesia, a new ministerial regulation (number 13 of 2014) introduced monitoring and control for 18 new psychoactive substances. In late 2013, Thailand included two new psychoactive substances in the list of controlled substances in schedule I of its narcotics act, thereby prohibiting their production, import, export, disposal and possession. Likewise, as of January 2014, China added several new psychoactive substances (including khat) to annex 2 of its list of controlled substances, thereby imposing greater control over the manufacture, usage, storage and transport of these substances. In Singapore, after the introduction in 2013 of a temporary schedule (the fifth schedule) that allowed the authorities to list new psychoactive substances for up to 24 months, the Government decided to place all substances listed under the fifth schedule on the first schedule. As a result, in May 2014, the trafficking, manufacture, sale, possession and consumption of any of these substances became a criminal offence.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

466. Illicit cultivation of opium poppy has increased in the region as a whole, driven by sustained increases in such cultivation in Myanmar since 2006. Despite the eradication of a total of around 13,000 ha reported by the Governments of the Lao People’s Democratic Republic, Myanmar and Thailand in 2013, the illicit cultivation of opium poppy has continued to rise. Cultivation in Myanmar has grown from 21,600 ha in 2006 to 57,800 ha in 2013, while that in the Lao People’s Democratic Republic was estimated at 3,900 ha in 2013. Looking into the near future, the risk of higher illicit cultivation in the Golden Triangle is expected to persist until sustainable solutions can be found to the long-term poverty in Shan State, Myanmar.
in 2013), owing to the absence of large seizures. Hong Kong, China (from 733.6 kg in 2012 to 453.8 kg in 2013), while a significant reduction was reported from Thailand (from 17.9 kg in 2012 to 47.5 kg in 2013) and Thailand (from 45 kg in 2012 to almost 290 kg in 2013). In Singapore, the situation remained stable following a record number of heroin-related arrests (mainly related to drug abuse) in 2012.

By the end of 2013, China had a total of over 1.3 million registered heroin abusers. The aforementioned growth in opium production in the Golden Triangle also meant that the proportion of heroin seized in China that had originated in Myanmar increased again in recent years. As a consequence, the proportion of heroin that had originated in Afghanistan declined from around 30 per cent of the total seized in China in 2009 to around 10 per cent in 2013.

Cannabis has long been reported as one of the major drugs of abuse in Indonesia and the Philippines. Seizures of cannabis herb have now also been reported by Brunei Darussalam, Cambodia, the Lao People’s Democratic Republic, Malaysia and, recently, Thailand. A stable trend was observed in China and Viet Nam, which seized around 4.5 tons and 900 kg of cannabis herb, respectively. Meanwhile, seizures of cannabis resin were reported by Indonesia and Hong Kong, China, with a slight rise in Hong Kong, China, owing to substantial seizures at the airport.

Although Cambodia, China (including Hong Kong, China, and Macau, China), Indonesia, Japan, Malaysia and Thailand were much less affected by cocaine than other regions in the world, these countries did report seizures of cocaine in 2013. Increases were observed in Malaysia (from 7.0 kg in 2012 to 73.9 kg in 2013) and Thailand (from 17.9 kg in 2012 to 47.5 kg in 2013), while a significant reduction was reported from Hong Kong, China (from 733.6 kg in 2012 to 453.8 kg in 2013), owing to the absence of large seizures.

Psychotropic substances

After seizures of methamphetamine in the region reached their peak in 2012, no clear trend emerged in 2013. In Cambodia, Japan, Malaysia, the Philippines and Hong Kong, China, total seizures of methamphetamine went up, while in China they dropped significantly. In the Philippines, a total of 837 kg of methamphetamine were seized in 2013, which stood in sharp contrast to the relatively small amount seized in 2012 (around 113 kg). The amount of methamphetamine seized in Japan (847 kg in 2013) almost doubled compared with the previous year, and the country noted significant rates of methamphetamine-related crime. In Hong Kong, China, the volume of methamphetamine seized also rose sharply, from 50 kg in 2012 to 258 kg in 2013, owing to a higher number of detections and seizures at the airport. After accounting for almost half of total seizures of methamphetamine in the region in 2012, China reported none in 2013 and instead reported significant seizures of amphetamine-type stimulants. Total seizures in China of all amphetamine-type stimulants rose from almost 16.3 tons in 2012 to more than 19.5 tons in 2013.

Most of the methamphetamine abused in East and South-East Asia is manufactured in clandestine laboratories within the region. In addition, various other countries around the world have been identified as sources of the methamphetamine seized in the region. For instance, during the previous five years, much of the methamphetamine seized in Japan, Malaysia, the Philippines and Thailand had originated in West Africa. Meanwhile, information provided by the authorities in Turkey and data on seizures from Indonesia, Malaysia and Thailand confirmed that some methamphetamine smuggled from the Islamic Republic of Iran through Turkey was destined for East and South-East Asia. Experts in Thailand believed that their country was primarily a transit hub for methamphetamine en route from the Islamic Republic of Iran to Thailand’s neighbours. The latest reports from the authorities in Japan suggest an increasing influence of Mexican cartels on its domestic methamphetamine traffic.

A considerable proportion of the amphetamine-type stimulants manufactured in the region was intended for domestic use, as reflected by the higher number of clandestine laboratories that were dismantled. Between 2009 and 2011 in China, an average of 375 manufacturing laboratories were dismantled each year, although no breakdown was available by type of substance manufactured. In 2013, a total of 397 clandestine laboratories manufacturing methamphetamine were dismantled, up from 228 in the previous year. In Thailand, the number of small-scale methamphetamine laboratories detected also rose, to six, compared with an annual average of two during the previous few years. As most of those six
laboratories were located near Bangkok, they seemed to be servicing domestic demand only.

474. Seizure data for MDMA (commonly known as “ecstasy”) over the past few years seem to suggest that it is making a comeback in the region, though its impact seems to be much greater on a few countries in particular. Reaching a total of 5.4 million pills, the number of “ecstasy” tablets seized in East and South-East Asia more than tripled in 2012. This development was predominantly driven by a significant rise in Indonesia (from 1.1 million in 2011 to 4.3 million in 2012). In fact, in 2012 Indonesia for the first time reported the largest “ecstasy” seizures worldwide. Seizures of “ecstasy” also increased in Cambodia, China, Thailand and Viet Nam. Compared with 2012, more seizures of “ecstasy” also continued to be reported by Singapore and Hong Kong, China. At the same time, small quantities of “ecstasy” were also being produced domestically in Viet Nam. Given the relatively high concentration of seizures of “ecstasy” in Indonesia and its popularity as a substance of abuse in that country, close monitoring of the domestic “ecstasy” market in that country is required before any more definite statements can be made about the regional trend.

(c) Precursors

475. The trafficking of precursors used in the manufacture of amphetamine-type stimulants remains one of the biggest challenges in precursor control. In particular, seizures of large quantities of pharmaceutical preparations containing pseudoephedrine continued to be reported by several countries. As the illicit manufacture of amphetamine-type stimulants in the region increased, significant amounts of pharmaceutical preparations containing pseudoephedrine were diverted from domestic distribution channels to supply clandestine laboratories.

476. In order to circumvent national legislative control measures, illicit operations for the manufacture of amphetamine-type stimulants have also made use of other non-scheduled precursor chemicals. While legislative and administrative rules have been tightened by a number of countries, the sharing of pertinent information between the industries and authorities concerned is of paramount importance to preventing the diversion of non-scheduled precursors. Given the rather dynamic and adaptive nature of such diversion attempts, enhanced collaboration between Governments and the private sector, at both the national and regional levels, is required for more effective control.

(d) Substances not under international control

477. Marketed as “bath salts”, “plant food” and incense to circumvent national regulatory and legislative controls, a range of new psychoactive substances (which include piperazines, synthetic cathinones and synthetic cannabinoids) have been reported in the region over the years. The trend of falsely marketing new psychoactive substances as “ecstasy” has gained popularity in Oceania and has also been found in East and South-East Asia, where Indonesia, Singapore and Hong Kong, China, reported seizures of so-called “ecstasy” tablets that in actual fact contained ketamine and other new psychoactive substances. As the abuse of synthetic cathinones and synthetic cannabinoids has become more popular among young people in Singapore, tighter legislative measures have been introduced to restrict the circulation and consumption of such substances.

478. East and South-East Asian countries were responsible for more than half of global seizures of ketamine by volume. However, seizures were concentrated in a limited number of countries, while ketamine abuse has been widespread throughout the region. Between 2008 and 2011, the total amount of ketamine seized in China and Hong Kong, China, made up almost 60 per cent of the global total. In 2013, nearly 9.7 tons were seized in China, almost twice as much as the year before. At the same time, 118 ketamine laboratories were dismantled, while none had been reported dismantled for the previous year. Owing to the lack of cases involving large seizures, the amount of ketamine seized in Hong Kong, China, dropped to less than 300 kg in 2013. In contrast to the geographical concentration of seizures of ketamine, abuse of the substance has been reported in Brunei Darussalam, China, Japan, Myanmar and Singapore, resulting in growing concern and attention among the authorities concerned. Governments in the region strongly supported the adoption of the resolution on ketamine at the fifty-seventh session of the Commission on Narcotic Drugs and sought tighter control measures for ketamine in order to prevent abuse.

479. The seizure of the plant-based psychoactive substances khat and kratom continued to be reported by some countries. Khat largely originated from native plants in the Horn of Africa and the Arabian Peninsula, although its cultivation was also reported by Indonesia. Between 2008 and 2012, China and Hong Kong, China, seized a total of 6.4 tons. In 2013, another 300 kg of khat originating in India and Ethiopia were seized in Hong Kong, China. By contrast, kratom is locally produced in
South-East Asia, notably in Malaysia, Myanmar and Thailand. It is traditionally used by farmers in the region to enhance their productivity, and its continued abuse was reported in Malaysia, Myanmar and Thailand.

5. Abuse and treatment

480. As mentioned in previous reports, the lack of representative surveys on household drug use or regular national assessments concerning the nature and extent of drug abuse has made it difficult to keep track of the latest trends in the region. Production cycles for substances of abuse have become shorter, and the market has become more complex, owing to the increasing variety of illicit drugs on offer. This has made the design and implementation of effective treatment and rehabilitation programmes even more dependent on up-to-date information. Regardless of this, general population surveys and school surveys are still lacking in most East and South-East Asian countries. The Board urges all Governments concerned to establish regular monitoring systems and especially to implement drug use surveys so as to stay informed about the situation on the ground and facilitate the implementation of prevention and treatment programmes.

481. For the majority of countries, the abuse of amphetamine-type stimulants, in particular methamphetamine, remains the biggest concern. In the Greater Mekong sub-region (specifically, the Lao People’s Democratic Republic, Cambodia and Thailand), methamphetamine pills remain the most common drug of abuse. The more potent form of methamphetamine, crystalline methamphetamine, is even more widely abused in some other countries, such as Brunei Darussalam, Japan, the Philippines and the Republic of Korea.

482. Both expert perception and treatment data have pointed towards an increasing abuse of amphetamine-type stimulants in the region, particularly in countries where other drugs had been the primary drugs of abuse. For instance, the abuse of crystalline methamphetamine has recently been reported in Indonesia, where cannabis had long been the major drug of abuse. A similar situation has been reported in China, where opiates nevertheless remain the most commonly abused drugs. According to experts in China, there was a large increase in the abuse of amphetamine-type stimulants, alongside increases in the number of people receiving treatment for such abuse. In 2013, the number of abusers of amphetamine-type stimulants in China continued to increase, and comprised more than 35 per cent of people receiving treatment. In Singapore, abusers of methamphetamine made up the second-largest group receiving drug treatment in 2013.

483. In Indonesia, cannabis continues to be one of the main drugs of abuse, while heroin remains the major drug of abuse in China, Malaysia, Myanmar, Singapore and Viet Nam. In Myanmar, over 98 per cent of those in treatment had abused heroin, and a significant proportion of them had also injected drugs. According to the latest estimates of UNODC and the Joint United Nations Programme on HIV/AIDS, an estimated 3,260,000 people in East and South-East Asia were injecting drugs in 2012. Among those, around 312,000 people were living with AIDS. In view of the higher prevalence of HIV among people who inject drugs, HIV testing and counselling services have been provided and strengthened. Targeted treatment for this particular group has also been enhanced in Cambodia.

484. The abuse of drugs by young people has become a growing concern, with a growing diversity in the types of drugs abused and an increasing abuse of methamphetamine. In Myanmar, inhalant abuse, in particular glue-sniffing, has continued to be observed, especially among street children. Also, a study in Myanmar on the abuse of amphetamine-type stimulants among secondary school students suggested that methamphetamine was the most abused drug, with a lifetime prevalence of 1.5 per cent and an annual prevalence of 0.8 per cent. Similarly, expert perception in Thailand pointed to a rise in the abuse of methamphetamine among secondary school and university students. Increasing abuse of amphetamine-type stimulants was also reported among young people in Cambodia and the Lao People’s Democratic Republic.

485. Community-based treatment approaches have continued to gain popularity. The Government of Cambodia has further strengthened this approach, having provided ongoing drug abuse treatment to around 1,300 individuals in 2012 (87 per cent of whom were abusers of amphetamine-type stimulants). China has promoted community-based treatment approaches by designating 38 national model units and 51 piloting sites, while the Government of the Lao People’s Democratic Republic has extended community-based treatment to include abuse of amphetamine-type stimulants. In 2012, Brunei Darussalam introduced a temporary release scheme for residents of a treatment centre prior to their definitive release; the aim was to facilitate their smoother reintegration into society.
South Asia

1. Major developments

486. Governments in the South Asia subregion continue to make notable efforts in responding to the threat posed by illicit drugs at the national and regional levels. The greatest drug-related challenges facing South Asia in 2013 remained trafficking in Afghan heroin; the rise in manufacturing and trafficking of methamphetamine, in both pill and crystalline forms; the diversion of controlled substances from licit to illicit channels; the abuse of pharmaceutical preparations containing narcotic drugs and psychotropic substances; and the smuggling of such preparations from India to neighbouring countries.

2. Regional cooperation

487. All of the countries in the subregion are members of the Colombo Plan for Cooperative Economic and Social Development in Asia and the Pacific. Through the Colombo Plan, the countries of the subregion have continued their close partnership with one another, and with the other 21 members of the Colombo Plan that are outside of the subregion, on drug abuse prevention and control matters.

488. The Colombo Plan’s Asian Centre for Certification and Education of Addiction Professionals successfully implemented several training events for national trainers on the universal treatment curriculum for substance use disorders in the region. In May 2014, the Centre rolled out the new universal prevention curriculum for substance use. A memorandum of understanding for partnership was signed by the Dangerous Drugs Board of the Philippines; the ASEAN Training Centre for Preventive Drug Education of the College of Education, University of the Philippines; and the Colombo Plan secretariat.

3. National legislation, policy and action

489. In India, out of over 2 million registered cancer patients and an equal number of HIV/AIDS patients as of 2014, about a million people in each of those groups suffer from moderate to severe pain. However, there is a continued low level of availability of and access to opioids for pain relief in the country, despite the fact that India has long been a licit producer and exporter of opiate raw material, namely opium, a source of pain management medication. In March 2014, the Indian Parliament adopted amendments to drug control legislation to enable uniform, simplified rules to be issued by the central Government, leading to the removal of the regulatory barriers that had hindered the availability of such drugs for pain relief.

490. The Government of India issued the Narcotic Drugs and Psychotropic Substances (Regulation of Controlled Substances) Order, 2013, by which it repealed the 1993 Order of the same name. The 2013 Order designates a total of 17 precursor chemicals as controlled substances and has three schedules: A, B and C. Five of those substances are listed in schedule A (the highest classification for controls); persons engaged in their manufacture, distribution, transportation, sale, purchase, storage, consumption and destruction are required to obtain registration certificates from the Narcotics Control Bureau. Schedules B and C include all 17 precursor chemicals and requires those who engage in their export from or import into India to obtain a “no objection” certificate from the Narcotics Commissioner of the Central Bureau of Narcotics. With the 2013 Order, the Government hopes to track controlled substances from source to end user and strike a balance between the legitimate requirements of licit trade and an adequate enforcement regime to prevent the diversion of controlled substances.

491. The Government of India launched a system for online registration and submission of returns by manufacturers and wholesalers of psychotropic substances. The Government initiated the process of amending the rules of the Narcotic Drugs and Psychotropic Substances Act, 1985, to incorporate mandatory provisions for online registration and the submission of online returns by manufacturers and wholesalers of psychotropic substances.

492. The Narcotics Control Bureau organized awareness programmes to reduce the threat of drug abuse in society, especially among young students. The Bureau created awareness of drug abuse directly by addressing the students, while also involving their parents, teachers and counsellors.

493. The Financial Action Task Force recognized that Bangladesh and Nepal had made significant progress in the area of combating money-laundering and financing of terrorism, and as a result removed those States from its regular follow-up process in February and June 2014, respectively.

494. The authorities of Bangladesh continued their efforts to raise awareness of and provide education on the dangers of drug abuse. To that end, in 2013 they distributed some 4,200 posters, 49,310 leaflets and 14,400 stickers, and
organized 5,851 discussion meetings and 268 speeches at schools and colleges. According to figures released in 2014, the number of cases tried in drug courts in Bangladesh rose from 4,800 in 2012 to 5,200 in 2013.

495. The Maldives Customs Service set up an interdiction unit at Ibrahim Nasir International Airport to prevent trafficking of illicit drugs and other prohibited items by monitoring movements of passengers arriving in and departing from Maldives.

496. Enforcement agencies in the region need awareness-raising and training on the issue of trafficking in precursors and pharmaceutical preparations; capacity-building for law enforcement officials in this regard would help those agencies to gain a better understanding of the problem. Such capacity-building needs to be coupled with a strengthening of existing mechanisms for law enforcement coordination at the policy and operational levels.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

497. The South Asia region, owing to its location between the Golden Crescent (Afghanistan and Pakistan) and the Golden Triangle (Lao People’s Democratic Republic, Myanmar and Thailand), continued to be particularly vulnerable to the trafficking of opiates and heroin. In addition, widespread trafficking of cannabis, synthetic drugs and new psychotropic substances persisted in 2013.

498. The trend observed over the past several years, namely the diversion of pharmaceutical preparations containing narcotic drugs and psychotropic substances from the Indian pharmaceutical industry, as well as trafficking, including through illegal Internet pharmacies, of those preparations, continued during the reporting period. The Government of India continued to take substantial measures to address the problem, including through legislative reform and the development of online systems.

499. In 2013, 12,818 cases of seizures of drugs were reported by the Narcotics Control Bureau of India, as compared with 10,796 cases in 2012, representing a significant increase of 18.7 per cent. The quantities of heroin, cocaine and cannabis resin seized in 2013 were the largest in the past five years.

500. The broad trend that emerges from the data reported by the Narcotics Control Bureau indicates that most of the seizures made in India in 2013 pertained to three drugs: heroin (4,609 cases, or 36 per cent), cannabis (4,592 cases, or 36 per cent) and cannabis resin (2,430 cases, or 19 per cent). The seizures of those drugs reflect an upward trend from 2012 to 2013, both in the number of seizures and the quantities seized.

501. The number of heroin seizures in India increased significantly, by 46 per cent, from 3,155 cases reported in 2012 to 4,609 cases in 2013. The quantities of heroin seized in 2013 stood at the highest level in the past five years. In 2013, 1,450 kg of heroin were seized, against 1,033 kg in 2012, an increase of 38 per cent. This could indicate increased levels of heroin of Afghan origin being trafficked into India. Almost 50 per cent was seized in the state of Punjab, which borders Pakistan. The larger consignments of Afghan heroin are first smuggled into India through Pakistan, and then smuggled out in smaller quantities to major drug consumer markets in Australia, Canada and Europe.

502. Cannabis, in terms of quantity, is the major illicit drug seized in India. The number of seizures of cannabis increased marginally (by 2.8 per cent), from 4,468 cases reported in 2012 to 4,592 cases in 2013. Indian agencies seized 91,792 kg of cannabis in 2013, up from 77,149 kg in 2012. However, the quantity of cannabis seized in 2013 remained significantly less than the 173,128 kg seized in 2010. Substantial quantities of cannabis are trafficked into India from Nepal. An associated trend is the trafficking of cannabis from north-eastern states of India to eastern and other states in the country.

503. The number of reported seizures of cannabis resin seizures increased by 19.6 per cent, from 2,013 cases in 2012 to 2,430 cases in 2013. The quantity of cannabis resin seized in 2013 was the largest in five years. In 2013, 4,407 kg of cannabis resin were seized, up from 3,385 kg in 2012. Other than domestic production of cannabis resin, Nepal is a major source for trafficking of this substance into India. The long, open border between India and Nepal is convenient for drug traffickers to exploit. Cannabis resin is also trafficked from India to other destinations in Europe and the Americas by means of courier parcels.

504. In India, 78 seizure cases related to cocaine were reported in 2013, an 8 per cent increase over the 72 cases reported in 2012. The quantity of cocaine seized increased from 44 kg in 2012 to 47 kg in 2013. As was the case for heroin and cannabis resin, the number of cocaine seizures was the highest in the past five years. Usually,
cocaine has been seized in small quantities in South Asia and its trafficking has historically been very limited; however, that may no longer be the case. In 2013, out of all the cocaine seized in India, 89 per cent (41.6 kg) was seized in Maharashtra and Delhi, which may indicate the development of a new domestic market for the drug, which is generally associated with affluent areas.

505. Seizures of opium decreased from 3,625 kg in 2012 to 2,333 kg in 2013, a decrease of 35.6 per cent. It is suspected that the opium seized in India is diverted from licitly cultivated opium poppy, while some may also come from illicitly cultivated opium poppy. Seizures of morphine declined significantly in 2013: only 7 kg of morphine were seized, down from 263 kg seized in 2012. The Narcotics Control Bureau continued to use satellite imagery, field surveys and intelligence-gathering to track and eradicate illicit poppy cultivation. Eradication operations were undertaken by law enforcement authorities. In 2013, approximately 2,139 ha of illicit poppy and 2,524 ha of cannabis were identified and eradicated. Concerted efforts regarding the eradication of illicit poppy have yielded encouraging results, and the area needing to be cleared of illicit poppy cultivation has been declining since 2011.

506. The vulnerability of Bangladesh to drug trafficking continued to be exacerbated by its long and porous borders with India and Myanmar. Illicit cannabis and opium poppy cultivation takes place in areas of Bangladesh bordering those two countries. There are anecdotal reports of illicit poppy cultivation in inaccessible areas of Bandarban district, which borders Myanmar. In 2013, 11.62 kg of opium were seized, compared with 4.84 kg and 8.07 kg in 2012 and 2011, respectively.

507. Trafficking of codeine-based cough syrups (such as phensedyl, Recodex and Corex) from India to Bangladesh continued to be reported. Although the Government of Bangladesh banned phensedyl under the 1982 drug ordinance, its medical use is allowed in India if produced in amounts that are under specific threshold levels. In 2013, close to 1 million bottles of codeine-based preparations were seized in Bangladesh, a decrease from the 1.3 million bottles seized in 2012. The quantities of bulk codeine seized have been decreasing steadily since 2010.

508. Seizures of heroin in 2013 in Bangladesh remained at the same level (124 kg) as in the preceding year. Heroin trafficked into Bangladesh continued to be smuggled from India and, to some extent, from the Golden Triangle countries.

509. Seizures of cannabis, trafficked from India (Tripura, Meghalaya and West Bengal states) to Bangladesh, declined in 2013, amounting to 35 tons, compared with 38 tons in 2012. Neither illicit cultivation nor wild growth of cannabis was to be found in Bangladesh, owing to the nature of the land.

510. Synthetic opiates such as buprenorphine and pethidine in injectable form continue to be trafficked into Bangladesh. The illicit use of those substances is increasing and is seen as an emerging threat in Bangladesh. Seizures of buprenorphine increased from 118,872 ampoules in 2011 to 131,114 ampoules in 2012.

511. Recent trends point to an increase in the trafficking of Afghan heroin in fairly large consignments through Sri Lanka. Average annual seizures, which stood at about 35 kg in 2011 and 2012, increased to 350 kg in 2013. The largest single amount was 260 kg, seized by Sri Lankan customs from a container that had originated in Karachi, Pakistan. In July 2014, the port control unit of the Colombo container control project seized 93.76 kg of heroin from a container that had originated in Pakistan. Almost 82 tons of cannabis from India were seized during the reporting period. The amount of cannabis seized decreased by 9.8 per cent from 2012 to 2013. However, the amount of heroin seized in 2013 increased by 90.5 per cent compared with the previous year.

512. While the first case of cocaine trafficking in Nepal was detected in 2012, in 2014 there were new instances of trafficking of cocaine to the country by carriers from Namibia, Pakistan and Thailand via Brazil and Peru.

(b) Psychotropic substances

513. The South Asia region is increasingly being used for illicit manufacture and use of amphetamine-type stimulants (ATS). Major seizures of ATS were observed in the north-eastern part of India, which borders Myanmar. The powder form of ATS is now increasingly being smuggled and illicitly manufactured in India, which is emerging as the main source of illicit ATS manufactured and trafficked in the region. However, tablets containing ATS that are trafficked in India are mostly smuggled into the country from Myanmar. With the exception of 2011, both the quantities of ATS seized and the number of seizures have been rising in India for the past five years. Although the seizure of 85 kg of ATS in 2013 was more than double the quantity seized in 2012 (41 kg), it remained significantly lower than the 474 kg seized in 2011. It should be noted that in 2011, out of a total of 474 kg of ATS seized, one single seizure accounted for 469 kg. In 2013, 23 seizures of ATS were reported, the highest level during the past five years. In 2013, the
Narcotics Control Bureau of India reported the dismantling of four illicit manufacturing facilities, from which about 28 kg of methamphetamines were seized.

514. Seizures of methaqualone recorded a sharp rise, from 216 kg in 2012 to 3,205 kg in 2013, the largest quantity during the past five years in India. Methaqualone is often trafficked by means of courier parcels to Australia, Canada, Ethiopia, South Africa, the United Kingdom and South-East Asia.

515. In Bangladesh, “yaba” (methamphetamine) continued to be smuggled across the south-eastern border from Myanmar. The quantities seized by Bangladesh law enforcement agencies have been rapidly increasing during the past five years. In 2013, 2.8 million “yaba” tablets were seized, compared with 1.95 million in 2012. Sharp increases in seizures have been recorded since 2011.

516. The Maldives Customs Service seized methamphetamine (3.1 kg) for the first time, at an airport. Maldives being a popular tourist destination, the possibility of growth in the phenomenon of synthetic drugs remains high.

517. Diazepam and buprenorphine ampoules are reported to be smuggled into Nepal from India. In 2013, 43,000 ampoules of diazepam and 31,000 ampoules of buprenorphine were seized in Nepal, which was less than the 72,000 and 58,000 ampoules of those substances, respectively, seized in 2012.

(c) Precursors

518. The number of reported seizures of ephedrine in India rose sharply, from 17 cases in 2012 to 61 in 2013. The quantity of ephedrine seized also rose, from 4,393 kg in 2012 to 6,655 kg in 2013.

519. The diversion of ephedrine from legal production in India to illicit channels remains a major challenge for law enforcement agencies. Seizures of pharmaceutical preparations containing ephedrine and pseudoephedrine that are being trafficked from India to Myanmar, for the extraction of the precursors, are frequently reported by Indian drug law enforcement agencies. Instances of ephedrine and pseudoephedrine trafficking to South-East Asia were also reported in 2013. Drug smugglers in India appear to be gradually shifting to ephedrine trafficking because of its higher profit margins.

520. In India, the number of seizures of acetic anhydride in 2013 went up from three cases in 2012 to eight cases in 2013. However, the quantity of seized acetic anhydride remained very low.

521. Bangladesh has a growing chemical and pharmaceutical industry, and has recently emerged as a source and transit location for methamphetamine precursors such as ephedrine and pseudoephedrine. The drug-related challenges facing Bangladesh authorities in 2013 continued to be the diversion of precursor-based pharmaceutical preparations from the legitimate market and the smuggling of shipments out of the country.

(d) Substances not under international control

522. India continues to be a source country for the trafficking of ketamine to South-East Asia. Ketamine is legally manufactured in India and, since February 2011, is a controlled substance under the Narcotic Drugs and Psychotropic Substances Act, 1985. In 2013, Indian law enforcement agencies seized 1,353 kg of ketamine, a significant increase from the 407 kg seized in 2012. Seizures indicate that ketamine is trafficked out of the country by air, by means of both cargo and passengers. Instances of ketamine being trafficked to Myanmar, the United States and Africa have also been reported. Seizures indicate the possibility of clandestine diversion from pharmaceutical companies.

5. Abuse and treatment

523. The prevalence of drug abuse by injection in South Asia in 2012 among the population aged 15 to 64 was 0.03 per cent, which was very low compared to the global average of 0.27 per cent according to UNODC.31

524. In the absence of any drug survey conducted in Bangladesh, there are no real estimates of the extent of the illicit drug market in the country. In Bangladesh, HIV prevalence was increasing until 2010 but is reported to have subsequently decreased. Department of Narcotics Control officials stated that assessment is based largely on their interaction with non-governmental organizations.

525. In recent years, drug abuse has spread not only within the urban areas but also to the rural areas of Bangladesh. The abuse of cannabis has increased gradually

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among poor, marginalized people such as day labourers and the populations of disadvantaged areas of the country. The abuse of “yaba” (methamphetamine) and codeine-based preparations continues to be widespread and still increasing in Bangladesh. Among street children, the abuse of glue and solvents by sniffing is common. According to a report based on the client monitoring system of Bangladesh, about 31 per cent of those who were admitted for drug-related treatment in 2013 were treated for heroin addiction, 27 per cent for cannabis addiction, 20 per cent for buprenorphine addiction and 1 per cent for sedative, hypnotic or tranquillizer addiction. Four per cent of drug abusers who were admitted for treatment in Bangladesh in 2013 indicated that they abused codeine cough syrup. Women continued to appear to make up a very small proportion of those receiving drug treatment in Bangladesh.

526. To identify the pattern of ATS abuse in India, UNODC conducted a study in the states of Manipur, Mizoram, Punjab, Tamil Nadu and West Bengal. The study evaluated the adverse health consequences related to abuse of ATS. It showed that methamphetamine pills and powder were the most commonly used forms of ATS. Most participants were in their early twenties and about half of them were found to be dependent users. A quarter of the participants reported experiencing psychiatric problems after use of ATS, including paranoia, hallucinations, depression and panic attacks. Eighteen per cent of the participants confirmed that they had been apprehended by the police after abusing ATS, which suggests a link between the use of ATS and crime. Following that study, plans were made to establish, with UNODC assistance, two regional centres, one in Chennai (southern India), in collaboration with Psymed Hospital, and one in Mizoram (north-eastern India), in collaboration with the Presbyterian Hospital, Durtlang. Those centres would aim to develop comprehensive treatment models and standard operating procedures and guidelines for healthcare providers.

527. According to the National AIDS Control Organization of India, in 2013 there were approximately 180,000 people who were injecting drugs in the country. The prevalence of HIV among that group was 7.2 per cent.

528. In 2013, a pilot project was initiated at the National Drug Dependence Treatment Centre of the All India Institute of Medical Sciences to offer methadone maintenance treatment to drug users in India. The aim of the project was to test the effectiveness and feasibility of methadone maintenance treatment in the Indian context and to develop an action plan for rolling out the programme. With a 36 per cent retention rate across all participating centres, the project was well received by drug users and their families as a treatment option.

529. The estimated number of registered drug users in Sri Lanka was 245,000, of which 200,000 used cannabis and 45,000 used opioids. In 2013, a total of 1,364 people received drug treatment in that country. Among them, 1,141 were treated for opioid addiction and 223 for cannabis addiction.

530. The first-ever network of and for women drug users in Nepal, called the Nepal Drug Users Prevention Association, was launched by UNODC in collaboration with Dristi Nepal, a non-governmental organization based in Kathmandu.

### West Asia

1. **Major developments**

531. The political instability caused by situations of armed conflict and political strife in West Asia, particularly in Iraq, Lebanon, the Syrian Arab Republic and the State of Palestine, has continued to weaken governance structures, hamper existing drug control efforts in the region and pose new challenges to those efforts.

532. The deterioration in the capacity of several States in the region to exercise effective control over their borders and territory has been exploited by traffickers seeking to profit from lucrative illicit drug markets in the countries affected. Moreover, the humanitarian situation in the region caused by large numbers of refugees, internally displaced persons and injured civilians has strained the resources of States directly affected by the conflicts, as well as of neighbouring States taking in large numbers of refugees. The crisis situation in the Syrian Arab Republic clearly creates conditions favourable to the illicit manufacture and trafficking of tablets sold as Captagon (often containing amphetamine) destined for regional markets.

533. Afghanistan set a new record for opium poppy cultivation in 2014, reaching 224,000 ha, 7 per cent more than the previous year. Production of opium also increased by 17 per cent over the previous year, to 6,400 tons, as illicit opium poppy cultivation increased in the majority of poppy-cultivating provinces. Production of cannabis resin in Afghanistan was reported to have increased in 2012, despite the fact that cultivation of cannabis plant decreased. The majority of farmers surveyed
in 2013 mentioned the high income derived from the sale of illicit crops as the main reason for the cultivation of illicit opium poppy.

534. The number of seizures of illicit drugs (narcotic drugs and psychotropic substances) in the Middle East subregion increased significantly from 2012 to 2013. Cannabis has always been and continues to be grown and consumed in the subregion, where a growing number of seizures of cannabis resin have been reported.

535. There is evidence that heroin trafficking routes leading out of Afghanistan have diversified, with greater trafficking via Iran (Islamic Republic of), Pakistan, the Middle East and Africa now being reported, as well as increasing trafficking via maritime routes. Additionally, Afghan heroin is increasingly found in new markets as far away as South-East Asia and Oceania; it is possible that it is being sent to those markets to offset declines in heroin consumption in Western and Central European markets.

536. Countries in West Asia, whose geography and extensive coastlines and borders have made them particularly favourable for use as transit areas, have now also become countries of abuse and trafficking. Trafficking and abuse of cocaine and heroin in particular have emerged in some countries in the region.

537. Abuse of stimulants such as amphetamines and cocaine is increasingly problematic in parts of West Asia. Amphetamine dominates the market, and large seizures continue to be reported in the region, with over 12 tons seized in 2012, representing more than half of global seizures. Seizures of methamphetamine have been reported throughout the region, from Afghanistan to Turkey, while abuse has been reported in Iran (Islamic Republic of), Israel and, to a lesser degree, Pakistan. Seizures of cocaine continue to increase, although prevalence of abuse still appears to be relatively low.

538. Growing political instability, civil conflict and insurgency in many countries in the region, as well as the spillover into neighbouring countries, threaten to reverse the region’s limited progress towards achieving the goals set out in the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem.

2. Regional cooperation

539. Regional cooperation is essential in West Asia, as the region lies at a crossroads in the global trafficking of opiates, cannabis and precursor chemicals. Stability remains a primary concern in many countries of the region, as well as a concern of the Security Council, and much of the cooperation is increasingly focused on improving political stability in several countries, particularly in Afghanistan, following the conclusion of the International Security Assistance Force (ISAF) mission.

540. The League of Arab States and the Cooperation Council for the Arab States of the Gulf (GCC) play a fundamental role in enhancing cooperation among countries in the region. Several meetings were held during the past year with a view to facilitating effective cooperation in drug control between Member States.

541. Effective bilateral security coordination, in particular between Bahrain, Saudi Arabia and the GCC Criminal Information Centre to Combat Drugs, led to the prevention of several attempts to smuggle tablets sold as Captagon and to the arrest of drug traffickers in the region.

542. Efforts were undertaken by UNODC to promote linkages and cooperation between similar regional information-sharing groups, such as the GCC Criminal Information Center to Combat Drugs, the Central Asian Regional Information and Coordination Centre, the Joint Planning Cell and the Southeast European Law Enforcement Center, with the aim of more effectively countering international drug trafficking flows. An inter-agency meeting entitled “Networking the networks: an interregional drug control approach to stem drug trafficking” was held in Istanbul, Turkey, in December 2013, to identify priorities and avenues for such enhanced cooperation.

543. In February 2014, the Board participated in the first INTERPOL meeting of heads of drug control units in the Middle East and North Africa, which focused on the most commonly abused drugs, including tramadol, amphetamine-type stimulants and tablets sold as Captagon, and on large-scale interceptions of heroin.

3. National legislation, policy and action

544. In December 2013, Afghanistan adopted the National Drug Demand Reduction Policy for the period 2012-2016. Its main objectives are to prevent vulnerable groups, such as children and adolescents, from becoming drug abusers, to reduce the social and health impact of drug abuse in affected communities, to provide access to high-quality standardized licensed therapeutic and
rehabilitation services for all drug abusers and to establish epidemiological and policy coordination centres to collect, analyse, disseminate and use drug demand data.

545. The Government of Turkey implemented its new national policy and strategy document on drugs for the period 2013-2018, which covers the activities of various ministries, public institutions and organizations regarding supply reduction, demand reduction, international cooperation, data collection, research, evaluation and coordination at the national level. A new approach in demand reduction treats drug addiction as an important public health issue and promotes prevention activities, support for the medical treatment of drug addiction and the prioritization of social reintegration activities. In addition, a large number of non-scheduled new psychoactive substances were placed under national control in Turkey in 2013 and 2014, including synthetic cannabinoids, cathinones and piperazines.

546. A number of other countries have amended legislation in response to the growing threat posed by new psychoactive substances. In 2013, the Government of Israel added emergency scheduling powers to its existing drug control legislation, whereby new psychoactive substances may be expediently added to the urgent declarations of substances prohibited for distribution, bringing such substances temporarily under control for one year while they undergo review for permanent listing under the Dangerous Drug Ordinance. In 2014, numerous additional new psychoactive substances were temporarily brought under control, while those added in 2013 were permanently added to the country’s drug control legislation. The legislative amendments empower Israeli law enforcement authorities to seize and destroy substances considered dangerous, thus making it the responsibility of the possessor to prove the harmlessness of the substances. In December 2013, Georgia’s law on narcotic drugs, psychotropic substances and precursors and narco logical assistance was amended to include several synthetic cannabinoids, with the threshold for the minimum amount of illicit possession set at 0.05 g.

547. The Board notes with concern reports that the Council of State of Oman proposed to make use of the death penalty for offences related to drug trafficking into Oman. The Board wishes to draw attention to its statement of 4 March 2014, in which it encouraged States that retain and continue to impose the death penalty for drug-related offences to consider abolishing the death penalty for such offences.

548. The Government of Kuwait is in the process of incorporating into its national legislation provisions for special investigative techniques, including controlled deliveries, in accordance with the provisions contained in article 1 of the 1988 Convention, in order to enhance cross-border operations.

549. In their efforts to better address growing illicit activities and drug trafficking, a number of laws on drug control, money-laundering and cybercrime have been adopted in the State of Palestine. In addition, a national plan on drug control, crime prevention and criminal justice reform for the 2014-2017 period was developed with the assistance of UNODC.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

550. In 2014, illicit cultivation of opium poppy in Afghanistan set another record, at 224,000 ha, an increase of 7 per cent over the previous year and part of a long, continuing trend of increasing illicit cultivation. More than half of the country’s 34 provinces have opium poppy cultivation in excess of 100 ha, with illicit cultivation involving hundreds of thousands of households.

551. The vast majority (89 per cent) of Afghanistan’s illicit opium poppy cultivation took place in nine provinces in the southern and western areas of the country, which include the country’s least secure provinces. Cultivation of opium poppy in Afghanistan is inversely related to security: as security deteriorates, illicit cultivation increases. As the ISAF mission comes to a close in 2014, the Board is concerned that a deterioration in the security situation could result in yet further increases in illicit crop cultivation.

552. Eradication of opium poppy fields, one of the Afghan Government’s tools to reduce the amount of opium available for heroin manufacture, has yielded little to no tangible effect on opium production. Between 2009 and 2014, less than 4 per cent of the annual area under cultivation in Afghanistan was verifiably eradicated (see figure III below). The total area of opium poppy cultivation eradicated decreased by 63 per cent between 2013 and 2014, to 2,692 ha, or just 1.2 per cent of the total area under cultivation. Further declines in the total area of verified opium poppy eradication seen in 2014 were the result in part of a decreasing security situation in main cultivating provinces, which resulted in unsafe conditions for manual eradication efforts led by provincial governors.
553. Farmers rely on the higher income derived from the sale of illicit crops. Additionally, alternative livelihood assistance is not available to all farmers in all areas of the country cultivating illicit crops. With little chance of illicit crops being eradicated and limited alternatives, the benefits of cultivation of illicit crops far outweigh any risk to the farmers’ investment. The Board strongly urges the Government of Afghanistan, in partnership with the international community, to increase its efforts to reduce opium poppy cultivation.

Figure III. Opium poppy illicitly cultivated and eradicated in Afghanistan, 2009-2014

![Graph showing opium poppy cultivation and eradication](image)

Sources: UNODC and Afghanistan, Ministry of Counter-Narcotics; and UNODC, World Drug Report 2014.

554. Afghanistan accounts for 80 per cent of the estimated global illicit production of opium, according to UNODC 2013 estimates. Production of opium—which results in, among other things, illicit manufacture of morphine and heroin—increased to 6,400 tons in 2014, an increase of 17 per cent over the previous year’s total. Despite some increase, Afghan opium yields in 2014 (29 kg per ha) continued to be somewhat lower than the previous five-year average (31 kg/ha), mainly owing to poor weather conditions in parts of Afghanistan.

555. Although Afghan authorities have over the past decade made an increasing amount of drug seizures, only a small fraction of opium and related opiates (i.e., heroin and morphine) are seized in the country, averaging less than 3 per cent of the estimated annual opium production between 2009 and 2013 (see figure IV below). This means that seizure represents only a small risk to traffickers compared with the illicit income generated by Afghan drug trafficking, which UNODC estimates to be $2.2 billion annually, and the profits from which fuel an entrenched culture of corruption in Afghanistan, as well as in other countries throughout the region.

Figure IV. Opium produced illicitly, 2009-2014, and opiates seized in Afghanistan, 2009-2013

![Graph showing opium production and seizures](image)


*Seizure data for 2014 were not available at the time of publication.

556. The modest seizure rate in Afghanistan shifts the burden to neighbouring countries, particularly as cultivation and production levels increase. For example, the National Drug Control Headquarters of the Islamic Republic of Iran reported a considerable rise in seizures of opium, heroin and morphine in 2013, which increased 14 per cent, 53 per cent and 49 per cent, respectively, from 2012. The increasing flow of opiates out of Afghanistan creates a domino effect further down the supply chain, such as in Armenia, where in January 2014 customs officers discovered 928 kg of heroin hidden in a truck coming from the Islamic Republic of Iran en route to Turkey via Georgia.

557. Maritime routes that depart from ports in Iran (Islamic Republic of) and Pakistan are increasingly being utilized to smuggle Afghan heroin, as the use of physical barriers and monitoring posts along the eastern land border of the Islamic Republic of Iran has made overland trafficking increasingly difficult. Iranian authorities reported seizures of 7.5 tons of narcotic drugs as a result
of sharing intelligence with the country's maritime neighbours in the first 10 months of 2013. Seizures of heroin at seaports by the Pakistani authorities more than doubled over the previous year, approaching 1.2 tons in 2013.

558. The amount of heroin seizures reported by the Jordanian authorities has more than doubled over the past three years, totalling 244 kg in 2013, compared with 92 kg in 2011. Eighty per cent of the heroin seized in Jordan was destined for Israel. In June 2014, 24 kg of pure heroin were seized at the Dubai International Airport by Dubai Customs, the largest smuggling attempt in 10 years.

559. With respect to heroin seizures in Bahrain, following an exceptional level of seizures in 2012 (more than 8 kg), the total quantity seized in 2013 dropped to 1.7 kg.

560. Afghanistan continues to be one of the largest known producers of cannabis resin, with total cannabis plant cultivation estimated to be 10,000 ha in 2012, yielding an estimated 1,400 tons of resin, which is 8 per cent higher than the estimate for the previous year. The price of cannabis resin in Afghanistan declined in 2012, even as seizures in the country rose to nearly triple the amount of the previous year, reaching 160 tons. According to UNODC, no price decreases were reported in neighbouring Kazakhstan, Kyrgyzstan or Pakistan, likely owing to the increased seizures reported in those countries. Pakistan, for example, reported seizing 105 tons of cannabis resin, an 80 per cent increase compared with 2012.

561. In 2013, although the number of seizures of opiates in the Middle East subregion declined from the number in 2012, the quantity seized doubled. Illicit cultivation of cannabis plants continues in some areas of the Middle East, in particular the Bekaa valley in eastern Lebanon, where eradication remains a challenge. Cannabis plants, seeds and oil are frequently seized in the subregion.

562. More than 5 tons of cannabis were seized in Jordan in 2013, a considerable increase compared with the 1.9 tons seized in 2011. According to the data provided to the Board by the Kuwaiti authorities, seizures of cannabis more than doubled during the past three years. In 2013, the total quantity seized amounted to 1.1 tons, compared with less than 500 kg in 2011. In contrast, seizures of narcotic drugs reported by Bahrain showed a significant declining trend.

563. In 2013, seizures of cannabis resin in the Middle East subregion increased considerably. Israel reported seizures of 1,594 kg of cannabis resin. Nearly 500 kg of cannabis resin were seized in Jordan, and total seizures reported by the Syrian Arab Republic amounted to 267 kg, representing more than double the quantity seized in 2012. Furthermore, 12.5 kg were seized in Lebanon, representing an upturn compared with 2011, when 700 g were seized. In contrast, information made available to the Board shows that seizures of cannabis resin in Bahrain dropped from more than 2 kg in 2011 to 5 g in 2013.

564. Cannabis resin seized in Jordan in 2014 originated in Lebanon and Afghanistan. About 10 per cent of it was destined for the domestic illicit market and the rest for Israel and Saudi Arabia.

565. The increased use of alternative trafficking routes, including maritime routes, may be having an impact on opiate and cannabis seizures reported throughout Central Asia. For 2013, notwithstanding individual country differences, seizures of opiate and cannabis substances were largely unchanged from 2012, with a little more than 90 tons reported seized, according to the Central Asian Regional Information and Coordination Centre.

566. As has been noted with concern by the Board in the past two years, there has been an increasing flow of cocaine to West Asia. This is reflected in rising seizures, both in numbers and amounts, throughout West Asia, as trafficking groups possibly identify emerging markets in which to expand, in order to offset the declines seen in large established cocaine markets such as North America and Western Europe.

567. Israel and the United Arab Emirates were among the four Asian countries reporting the largest cocaine seizures in 2012. The United Arab Emirates, a traditional transit country for large numbers of passengers, fuels new markets in Africa and Asia. Likewise, Jordan and the Syrian Arab Republic serve as transit countries, while other countries, including Israel and Lebanon, have emerged as destinations for cocaine. In 2012, 570 kg of cocaine were seized in Saudi Arabia, 204 kg in the United Arab Emirates, 171 kg in Israel and 66 kg in the Syrian Arab Republic.

568. The Israel Anti-Drug Authority estimates that some 3 tons of cocaine are smuggled into that country annually, increasingly in liquid form, often found in wine bottles or absorbed into clothing items. In Turkey, seizures of cocaine have increased fivefold during the past five years, with 450 kg reported seized in 2013, as West African criminal groups increasingly supply cocaine to Turkish markets. Pakistan’s Anti-Narcotics Force also reported seizures of cocaine in 2013 and provided intelligence that assisted in effecting significant seizures of cocaine abroad.
(b) Psychotropic substances

569. Trafficking in amphetamine-type stimulants, such as tableted amphetamine (Captagon) and methamphetamine ("yaba") and methamphetamine in crystalline form, continues to be of concern throughout West Asia. Growing use of synthetic drugs has been reported in a number of countries in the Middle East subregion, including Jordan, Kuwait, Qatar and the United Arab Emirates. Operations conducted by States in the region regularly result in large seizures of amphetamine-type stimulants, including those sold as Captagon. In that context, the Board encourages Governments in the subregion to continue to enhance their efforts to monitor the situation regarding amphetamine-type stimulants, including in cooperation with the SMART programme of UNODC.

570. Trafficking among and abuse of amphetamine in countries in the Middle East continued to be regularly reported. However, although the number of seizures of that substance remained stable, the amounts seized declined noticeably. Amphetamine seized in Saudi Arabia fell to 977 kg in 2013, compared with 5.2 tons the year before.

571. Almost all countries in the Middle East reported seizures of tablets sold as Captagon in 2013, in particular Saudi Arabia, Lebanon, Jordan and Yemen (in order of largest total seizures). Total seizures increased noticeably, both in quantity and in number. Saudi Arabia continues to be the destination country of choice. The World Customs Organization reported that customs authorities in the Middle East seized 11 tons of Captagon in 2013 and that Captagon was smuggled mostly in vehicles or by sea. Saudi Arabia reported seizures of nearly 8 tons of Captagon, followed by Lebanon and by Jordan, where more than 22 million Captagon tablets were seized.

572. Most of the Captagon tablets are smuggled through the unofficial land-border crossings between the Syrian Arab Republic and Jordan, and then transit Jordan, with Saudi Arabia as the main final destination.

573. Turkey reported seizing 105 kg of methamphetamine in 2013, a significant decrease from the more than 500 kg of seizures reported in 2012. Methamphetamine is often trafficked via Turkey to East Asia (Indonesia, Japan, Malaysia, Singapore, Thailand and Viet Nam). Turkey and several other countries in the region continue to identify the Islamic Republic of Iran as the main source of methamphetamine seized. However, stronger interdiction efforts in the Islamic Republic of Iran may be responsible in part for the sharp decrease in seizures reported in Turkey.

574. The number of dismantled illicit methamphetamine laboratories in the Islamic Republic of Iran rose sharply, to 445 in 2013, more than double the number in the previous year. Seizures of methamphetamine in that country were also considerable, among the highest reported total seizures worldwide: 3.7 tons of methamphetamine were reported seized in the country in 2013, 10 per cent more than in 2012 (see figure V below). Additionally, illicit methamphetamine manufacture appears to have spread to neighbouring Afghanistan, with the confirmed dismantling of a clandestine laboratory occurring for the first time in 2013. The laboratory was discovered in the south-western province of Nimroz, which borders the Islamic Republic of Iran.

575. In Israel, the amount of methamphetamine intercepted increased to 88 kg in 2013, more than double the quantity reported in 2012; the number of seizures followed a similar upward trend.

576. Abuse of pharmaceuticals containing psychotropic substances, in particular benzodiazepines, continues to be a serious concern in parts of West Asia. Seizures of diazepam, alprazolam and clonazepam were regularly reported.

577. The ability of many Governments in the region to accurately detect and report on the numerous, often confusing, psychotropic and new psychoactive substances
encountered, such as methylphenidate, amphetamine and methamphetamine, is hampered by the limited technical capacity of their forensic laboratories. The UNODC international collaborative exercises programme allows forensic laboratories to continuously monitor their drug-testing performance on a global scale, an essential element for any laboratory quality management system and, ultimately, laboratory accreditation. Currently, however, only 9 of 24 West Asian countries take part in the programme. The Board encourages all Member States in the region to take part in the international collaborative exercises programme and other UNODC technical assistance programmes intended to strengthen the capacity of forensic laboratories.

(c) Precursors

578. Afghanistan is not a manufacturer of acetic anhydride, a chemical needed for the manufacture of heroin, and this precursor is not legally allowed to enter the country. However, acetic anhydride continues to be smuggled into Afghanistan after domestic diversion in other countries. For example, in June 2013, customs authorities of the Islamic Republic of Iran intercepted approximately 18 tons of acetic anhydride that had been shipped from China and were destined for Afghanistan. That seizure accounted for 54 per cent of the total amount of acetic anhydride seized in the Islamic Republic of Iran in 2013. Intelligence related to this seizure was communicated via PICS. However, not all countries in the region received the PICS automated alerts, as they were not registered with the system. The Board urges the remaining countries of West Asia not registered with PICS, namely Armenia, Kuwait, Oman, Saudi Arabia, the Syrian Arab Republic, Turkmenistan, Uzbekistan and Yemen, to register with the system.

579. The Board noted in its annual report for 2013 that eight countries of West Asia, namely Bahrain, Georgia, Iran (Islamic Republic of), Israel, Kuwait, Turkmenistan, Uzbekistan and Yemen, had not requested to be informed of impending shipments of precursor chemicals prior to their departure from exporting countries, as outlined in article 12, paragraph 10 (a), of the 1988 Convention. Effective May 2014, the Government of Yemen requires pre-export notification for imports of all Table I and II substances. The action by Yemen notwithstanding, lack of action by the other countries in the region puts not only themselves, but also neighbouring countries, at heightened risk of diversion. The Board again urges countries that have not invoked their right to require pre-export notification for all substances included in Tables I and II of the 1988 Convention to do so without further delay.

(d) Substances not under international control

580. Trafficking and abuse of known medicaments and plant-based substances with psychoactive properties, such as khat (Catha edulis), that are not under international control continue to pose a more prominent problem in the region than do synthetic-based new psychoactive substances, but abuse of new psychoactive substances is growing in parts of West Asia. Trafficking and abuse of tramadol, a synthetic opioid, continued to be reported in most countries in the Middle East, and abuse of khat continued to be reported on the Arabian peninsula.

581. The Board notes that tramadol, a synthetic opioid that is not under international control, has been placed under national control in most countries in the Middle East. Tramadol is a prescription-only medication and is already controlled under national legislation on psychotropic substances and/or narcotic drugs in Bahrain, Jordan, Qatar and Saudi Arabia. Abuse of tramadol is reported by many countries in the West Asia subregion.

582. Turkey has reported significant increases in the trafficking of synthetic cannabinoids, referred to locally as “bonsai”, with seizures, effected primarily among street dealers, increasing 22-fold between 2011 and 2013. Synthetic cannabinoids are typically smuggled into Turkey from China, European countries and the United States. However, the Government also reported that in 2013 it had dismantled facilities producing synthetic cannabinoids.

583. It is necessary for concerned Governments to share in a timely manner information on suspicious shipments of and trafficking in new psychoactive substances in order to support investigations into the points of manufacture, production and packaging, export and distribution of such substances. The Board’s international initiative on new psychoactive substances (Project Ion) coordinates practical activities for the gathering and sharing of information as a means to support law enforcement and regulatory agencies, in line with the recommendation of the Commission on Narcotic Drugs in its resolution 57/9. The Board urges the remaining 11 Governments of West Asia that have not yet nominated law enforcement and regulatory focal points under Project Ion to do so without delay.
5. Abuse and treatment

584. Nearly 20 per cent of the world’s opiate abusers reside in West Asia, as increasing production of opium in Afghanistan has resulted in greater abuse of opium and heroin, primarily in that country and in neighbouring countries located along the recently expanding trafficking routes. For example, the annual prevalence of opiate abuse among adult Pakistanis aged 15-64 years has grown from 0.7 per cent in 2006 to 1.0 per cent in 2013, concurrent with increases in trafficking of opiates via Pakistan. In addition to Pakistan, UNODC estimates the current annual prevalence of opiate abuse among adults to be highest in Afghanistan (2.3-3 per cent), Azerbaijan (1.3-1.7 per cent) and the Islamic Republic of Iran (2.3 per cent).

585. Abuse of drugs in Afghanistan, in particular opiates, appears to be increasing. The 2012 Afghanistan National Urban Drug Use Survey found that 1 in 10 urban households had a person who had tested positive for drugs, most commonly for opiates. The study estimated current drug abuse prevalence at 7.5 per cent of the general population aged 16 years and older, a figure notably higher than the previous estimates. As of 2013, 109 drug treatment centres providing pretreatment, treatment, post-treatment and aftercare services were operating throughout the country, and capacity had increased during the past two years, although the centres still had service capacity for less than 6 per cent of the estimated number of opiate-addicted persons.

586. Drug treatment capacity has also notably increased in the Islamic Republic of Iran, where the number of persons receiving treatment in 2013 was 755,394, an 18 per cent increase since 2009. In 2013, 5,223 drug treatment centres were operating in the country, including those providing methadone substitution and buprenorphine substitution therapy to 267,844 and 24,029 persons, respectively.

587. The Board notes that a number of countries in the Middle East are devoting special attention and efforts to the treatment and rehabilitation of drug addiction. In that context, the Board notes that the opioid substitution treatment programme launched in Lebanon in 2012 is now fully operational, and that 949 patients were registered as of December 2013. In a similar effort, in 2013 UNODC provided policy advice and technical assistance in the State of Palestine through the Ministry of Health, for the introduction of opioid substitution therapy.

588. Given the lack of reliable data on the extent of drug abuse in the region in general, governmental and non-governmental entities that specialize in drug addiction treatment in Jordan are working together to create a national database on drug abuse. Establishing an accurate estimate of the extent of the phenomenon of drug abuse will assist in the development of better-suited and tailored strategies.

589. The spread of disease through unsafe injecting practices, such as the sharing of used injecting equipment, continues to be a significant problem in several countries in West Asia. The prevalence rates for opiate abuse by injection among the general population in Afghanistan, Iran (Islamic Republic of) and Pakistan are among the highest in the world, estimated to be 1.5 per cent of the adult population in those three countries. Countries with a high prevalence of opiate abuse tend to have an elevated prevalence of people who inject drugs and are also living with HIV. For example, 28.8 per cent of people who inject drugs in South-West Asia were estimated to be HIV-positive, more than double the global prevalence among people who inject drugs, which was estimated to be 13.1 per cent in 2012. The prevalence rate for South-West Asia largely reflects the high prevalence of HIV-positive people among people who inject drugs in Pakistan, estimated to be 37 per cent.

590. There is still a lack of sufficient and reliable data to assess the levels of HIV infection and transmission in order to be able to assess the extent of emerging HIV epidemics that have been reported among people who inject drugs in most countries in the Middle East. According to the findings of a medical study in Bahrain and Oman, 10-15 per cent of people who inject drugs are HIV-positive. Although the HIV epidemics among people who inject drugs remain in their early phases, it is estimated that there are 626,000 people who inject drugs in the Middle East. In other countries, including Jordan, Lebanon, the Syrian Arab Republic and the State of Palestine, the transmission of HIV among this at-risk population was found to be limited.

D. Europe

1. Major developments

591. Most countries in Western and Central Europe have reported a decline in the prevalence of heroin abuse and in the number of people commencing treatment for heroin abuse for the first time, accompanied by an overall decrease in the quantity of heroin seized. However,