

660. With a record number of new psychoactive substances identified in Europe in 2013, concerns remain about this public health challenge. A June 2014 survey of young people aged 15-24 years in the European Union found that the lifetime prevalence of abuse of such substances had increased from 5 per cent in 2011 to 8 per cent in 2014, with the most significant increases, to double-digit levels, seen in Ireland (from 16 per cent to 22 per cent), Spain (from 5 per cent to 13 per cent), Slovenia (from 7 to 13 per cent), France (from 5 to 12 per cent), Slovakia (from 3 to 10 per cent) and the United Kingdom (from 8 to 10 per cent). Deaths have been reported to be linked to the consumption of various new psychoactive substances in Europe, including 4,4'-DMAR (the *para*-methyl derivative of 4-methylaminorex), AH-7921 (a synthetic opioid), MDPV (a synthetic cathinone derivative), MT-45 (an opioid) and methoxetamine (marketed as an alternative to ketamine), which were the subject of recent reports by Europol and EMCDDA. In the United Kingdom, new treatment cases associated with ketamine and mephedrone increased in recent years, representing 10 per cent of treatment cases for young people and 2 per cent for adults.

661. According to a joint estimate made by UNODC, UNAIDS, the World Bank and WHO, based on the most recent available data (2012), the problem of injecting drug abuse is particularly stark in Eastern and South-Eastern Europe, where the prevalence rate (1.26 per cent) is 4.6 times the global average (0.27 per cent). Within these subregions, relatively high rates of injecting drug abuse were observed in the Russian Federation (2.29 per cent), the Republic of Moldova (1.23 per cent), Belarus (1.11 per cent) and Ukraine (0.88-1.22 per cent), all of which stood well above the global average.

662. The number of people who inject drugs who are also living with HIV was particularly high in Eastern and South-Eastern Europe, where it was estimated that the prevalence of HIV among people who inject drugs was 23.0 per cent (compared with a global average of 13.1 per cent) and more than half of the people who inject drugs were estimated to be living with hepatitis C. Within both subregions, a relatively high prevalence of HIV among people who inject drugs was observed in the Russian Federation (range: 18.4-30.7 per cent) and Ukraine (21.5 per cent). Also, the number of people who inject drugs who are newly diagnosed with HIV each year continues to be higher in both countries than in other countries in Eastern and South-Eastern Europe. According to the results of sentinel surveillance conducted in Belarus in 2013, HIV prevalence among people who inject drugs was 14.2 per cent, reaching over 40 per cent in some parts of the country.

663. In the European Union, 38 per cent of people entering treatment for opioid abuse and 23 per cent of people entering treatment for amphetamine abuse reported having injected the substances. Yet, the proportion of new treatment clients reporting that they had injected drugs in the previous month fell between 2006 and 2012. Some countries have reported changing patterns of injecting drug abuse, for example, reflecting a possible move away from injection of heroin towards injection of pharmaceutical or synthetic opioids, amphetamine-type stimulants and new psychoactive substances. While the number of newly reported HIV cases among people who inject drugs in the European Union and Norway decreased during the period from 2006 to 2010, an increase has been seen since 2010, mainly as a result of outbreaks of HIV among people who inject drugs in Greece and Romania. In 2010, Greece and Romania accounted for just over 2 per cent of the total number of newly reported diagnoses of HIV among people who inject drugs in the European Union; by 2012, this figure had increased to 37 per cent. In other countries of the region, the rate of new diagnoses of HIV among people who inject drugs is declining. Abuse of drugs by injection remains the most prevalent vector for transmission of hepatitis C in Europe, yet the rate of infection among those who inject drugs is reported to be declining.

E. Oceania

1. Major developments

664. Seizures and arrests in Oceania are at record highs for many drug types, with an increasing number of people abusing drugs. Compared with other world regions, Oceania provides an expanding market for certain drugs, including cocaine, and levels of abuse among individuals in the region are high for most substances. Increases in drug seizures, particularly in Australia, have been attributed not only to the vigilance of law enforcement, but also to the increased activities of transnational organized criminal groups.

665. As the monetary value of drugs and precursors remains comparatively high throughout Oceania, the region has become susceptible to illicit manufacturing and trafficking. Growing markets for amphetamine-type stimulants and proximity to trafficking routes for different illicit goods have led most countries in Oceania to see higher prevalence rates for the abuse of such drugs. The availability and abuse of new psychoactive substances, which are now widely found in most of Oceania,

has become one of the primary issues of concern for the region. The expanding market for such substances continues to develop rapidly and presents challenges to law enforcement within the region. The increase in demand for these substances in the region has specifically been affected by the inability of existing legislation to ensure that such substances are not available for abuse.

2. Regional cooperation

666. In April 2014 in Suva, the Oceania Customs Organization held its sixteenth annual conference, on the theme of communication and the sharing of information for better cooperation. Delegates from the Organization's member countries discussed the need for strengthened border security. In April 2014, the secretariat of the Organization undertook an assessment visit to assist the Government of Palau on processes and products related to information-sharing and intelligence-sharing. The visit was carried out by the Working Group on Strengthening Information Management.

667. The Regional Security Committee of the Pacific Islands Forum held its annual meeting on 4 and 5 June 2014 in Suva, drawing representatives from States members of the Pacific Islands Forum and from regional law enforcement secretariats, such as the Pacific Immigration Directors' Conference. Discussions at the meeting focused on trends relating to illegal activities and continuing security threats in the region. It was reported that one such continuing threat was the involvement of local citizens in transnational criminal activities.

3. National legislation, policy and action

668. In 2013, New Zealand passed the Psychoactive Substances Act, which granted interim approvals for 47 products containing new psychoactive substances and permitted the marketing of those products by 150 licensed retailers. However, after the National Poisons Centre, emergency rooms and treatment providers reported an increase in problems related to consumption of those substances, and public protests against the interim product approvals gained momentum, the Psychoactive Substances Amendment Act was approved and came into effect on 8 May 2014. The Amendment Act revoked the interim product approvals and the interim retailer and wholesaler licences granted under the 2013 Act. The sale of all psychoactive substances is now prohibited unless approved by the national regulatory authority following clinical trials. To sell products containing such substances,

companies must prove to an expert committee that the product in question poses only a "low risk of harm". Pursuant to the Amendment Act, however, such clinical trials are no longer permitted to use animal testing to demonstrate the low risk of harm.

669. In July 2014, Australia's Intergovernmental Committee on Drugs published the Framework for a National Response to New Psychoactive Substances. The Committee manages the ongoing work of the National Drug Strategy for 2010-2015, and the new framework will assist with information-sharing and communication regarding new psychoactive substances, harm assessment and scheduling provisions. It is also aimed at national consistency and uniform treatment of drug analogues. In 2012 and 2013, various states and territories of Australia passed legislative and regulatory amendments. In 2013, New South Wales passed the New Psychoactive Substances Act, and Queensland amended the Drugs Misuse Act 1986 to create a new offence for trafficking in precursor chemicals used in the production of dangerous drugs.

670. With respect to forensic and data centres, Australian federal police officially launched the National Rapid Lab initiative in 2013 to streamline the prioritization and examination of forensic cases, particularly cases related to illicit drugs entering Australia through the postal system. This programme helps fight drug trafficking by enhancing the national capability to identify the origin of dispatched drug packages, which often contain either methamphetamine or pseudoephedrine.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

671. In terms of abuse and seizures, cannabis remains the most prevalent drug of abuse in Oceania and dominates the illicit drug market. In Australia, there are indications that consumption has generally continued to increase. Consumer access to cannabis is also increasing throughout the region. Australia recorded its highest-ever levels of seizure of cannabis at its border in 2012-2013, typically in the form of seeds, most commonly being transported via the postal system. By weight, seizures of cannabis in 2012-2013 were the second highest reported in Australia in the past decade.

672. In New Zealand, cannabis is also the most widely abused drug, with a generally stable prevalence rate of abuse. Throughout the region, cannabis is produced

predominantly at the local level, and there is a lack of any evidence of its trafficking to other regions. The latest data from New Zealand show two coexisting trends: stability in the prevalence rate and a decrease in the number of seizures of cannabis herb between 2012 and 2013 (from 5,877 seizures in 2012 to 4,872 seizures in 2013). In New Zealand, the National Cannabis and Crime Operation is conducted yearly during the summer harvesting season and accounts for most of the cannabis seized in any given year.

673. Illicit demand in Oceania for cocaine, although marked by annual fluctuations in seizures, appears to have growth potential over the long term. In Australia, illicit demand for and overall abuse of cocaine appears to be expanding; in 2012-2013, the number and weight of domestic seizures increased. Trends in Australia also show an increase in the number of seizures of cocaine at the border, with the postal system accounting for over 94 per cent of such seizures in 2012-2013 and 56 countries identified as embarkation points for trafficking of the drug. Reporting for 2013 by New Zealand also shows a slight increase in seizures of cocaine.

674. Australia saw increased seizures of heroin at the country's points of entry in 2012-2013, particularly via the postal service. The number of embarkation points for trafficked heroin increased from 19 countries in 2011-2012 to 25 countries in 2012-2013. The majority of the heroin reaching Australia appears to be from South-East Asia, while reports continue to show that Afghan heroin is increasingly reaching the Oceania region. It should be noted that Australia did see a decrease in the number of seizures of heroin, but still experienced its third-highest reported number of seizures in the past decade. This resulted in 2013 in Australia no longer being among the top 10 countries for largest quantities of seized heroin, despite ranking eighth in 2012. New Zealand also reported that both heroin and pharmaceutical opioids saw some increase in abuse in 2013.

(b) Psychotropic substances

675. The market for amphetamine-type stimulants in Oceania appears to be growing, with methamphetamine the predominant drug of choice. Australia has reported an increase in the number and weight of seizures of such substances. The weight of seizures, for example, increased by 310.4 per cent between 2011-2012 and 2012-2013. Arrests in Australia for crimes related to amphetamine-type stimulants have also increased 131.3 per cent during the past decade, with 22,189 persons arrested in 2012-2013. Seizures at the Australian border of amphetamine-type

stimulants (excluding "ecstasy") increased in 2012-2013, by 85.6 per cent from the previous reporting year, to reach the highest level on record. The total weight of amphetamine-type stimulants (excluding "ecstasy") seized at the border increased by 515.8 per cent in 2012-2013.

676. Although the methamphetamine market in New Zealand is predominantly supplied by domestic manufacture, reports show that, as in the previous year, more finished methamphetamine is being imported into the country. This may be in response to increased law enforcement pressure on precursor imports, or it may be a result of international criminal groups seeing an opportunity for considerable profit, owing to the very high price that people are willing to pay for methamphetamine in New Zealand. The range and origin of organized criminal groups and offenders involved in the manufacturing of methamphetamine in New Zealand appears to be increasing. "Ecstasy" remains in high demand throughout Oceania, with region-wide prevalence rates nearing 3 per cent.

(c) Precursors

677. With sustained smuggling of ephedrine and pseudoephedrine, considerable illicit manufacture of methamphetamine continues in Oceania. In June 2014, ephedrine made up 74.3 per cent of all border seizures of precursor chemicals in New Zealand. According to New Zealand authorities, there is very little diversion of pseudoephedrine. The Government of that country has also reported that it is working with the Government of China to reduce the supply of methamphetamine and precursors entering New Zealand.

678. In Australia, the number of seizures at the border of amphetamine-type stimulant precursors (excluding "ecstasy") increased by 11.3 per cent, from 937 in 2011-2012 to 1,043 in 2012-2013. That was the highest number of such seizures in the past decade. Almost 100 per cent, by weight, of "ecstasy" precursors seized in 2012-2013 were comprised of safrole. A decrease during the past reporting year in clandestine laboratories was reported by Australia, although the 757 laboratories detected in 2012-2013 still represented the second-highest number reported in the past decade. The majority of these laboratories continued to be located in residential areas. The number of laboratories manufacturing "ecstasy", although small, increased by 250 per cent to 7 laboratories. A total of 53 clandestine laboratories manufacturing methamphetamine were detected by the New Zealand authorities in 2013; three of those facilities were also producing "ecstasy" and *gamma*-butyrolactone. In addition, New Zealand has described how retailers in that country

work with the police to limit sales of toluene, which is commonly used in the manufacturing process.

(d) Substances not under international control

679. New psychoactive substances are found in most of Oceania, but data are available primarily only for New Zealand and Australia. Synthetic cannabinoids are the most common new psychoactive substances in those two countries, but the expanding market for new substances is a primary concern for the Governments of the region. New psychoactive substances are regularly being employed as substitute materials for MDMA in “ecstasy”-type tablets. Forensic analysis continues to identify either little or no MDMA in such tablets, finding that they consist mainly of a blend of other illicit drugs and/or unscheduled substances, including but not limited to piperazines, ketamine, methamphetamine, mephedrone, 4-methylethcathinone (the most common substance found in “ecstasy”-type tablets) and caffeine. Australia has also indicated that the rapid emergence of new psychoactive substances is an increasing challenge for law enforcement and public health. It reported that, while the number of seizures at the border in 2012-2013 of substances containing drug analogues and new psychoactive substances had decreased, the weight of the seizures had more than doubled. New cathinone-type substances accounted for the largest number of seizures. Overall, Australia has indicated that monitoring and reporting on trends relating to new psychoactive substances is limited, owing to the difficulties in accurately recording data about such drugs.

5. Abuse and treatment

680. Cannabis continues to be the most commonly abused drug in the Oceania region, with an annual prevalence rate consistently above 10 per cent. The Board notes that the lack of comprehensive statistics on drug abuse in Pacific island countries does not permit a complete assessment of either the overall drug control situation in Oceania or the capacity of the Governments of the region to address drug abuse as a public health issue and provide the necessary treatment.

681. Australia’s latest National Drug Strategy Household Survey reported overall stable levels during the 2010-2013 period of consumption of cannabis (annual prevalence of 10.2 per cent among those aged 14 years or older) and cocaine (2.1 per cent), but declines in abuse rates for some drugs, including heroin (from 0.2 to 0.1 per cent), “ecstasy” (from 3.0 to 2.5 per cent) and GHB, although

the misuse of pharmaceuticals increased from 4.2 per cent in 2010 to 4.7 per cent in 2013.⁵³ While overall abuse rates for amphetamines (methamphetamine and amphetamine) remained stable (2.1 per cent), the percentage of amphetamine abusers who were abusing powder methamphetamine decreased from 51 per cent to 20 per cent, while the percentage who opted for crystal methamphetamine more than doubled, from 22 per cent in 2010 to 50 per cent in 2013.

682. In Australia, the prevalence rate in 2013 for past-year abuse of new and emerging psychoactive substances by persons aged 14 years or older amounted to 0.4 per cent, while the prevalence rate for past-year abuse of synthetic cannabinoids was 1.2 per cent of the same population. The prevalence rate for past-year abuse of “ecstasy” dropped from 3.0 per cent in 2010 to 2.5 per cent in 2013, while the prevalence rate for abuse of cocaine remained unchanged, at 2.1 per cent, throughout the entire period.

683. In New Zealand, 75 deaths were reported in 2013 as being attributed at least indirectly to the abuse of drugs. Of the 6,597 persons brought into formal contact with the New Zealand police or criminal justice system in connection with personal drug-related offences, 5,525 persons were held in connection with cannabis-related offences. The latest figures from 2012 show that 41,806 persons were receiving treatment for drug abuse, with over 37 per cent of them entering treatment for the first time. According to the Government of New Zealand, there are also approximately 15,000 persons in the country who have a severe problem with opioid abuse.

684. Abuse of amphetamine-related substances has remained a major concern for the Oceania region. In response, New Zealand in 2009 instituted its national action plan on tackling methamphetamine, which was aimed at promoting supply control measures and scheduling the main precursor substances. As a result of the action plan, New Zealand reports that the past-year prevalence rate for the abuse of methamphetamine has dropped from 2.2 per cent of the adult population in 2009 to 0.9 per cent in 2013, with a particular reduction in the number of persons reporting initiation of abuse. Australia regularly provides information about the treatment methods available nationally for amphetamine-related substances, including counselling, therapeutic communities and self-help groups, while surveys have established that there is strong national support for treatment and rehabilitation.

⁵³There is no average age group listed for this statistic, nor is there clarification about whether it means annual or lifetime prevalence, but it is likely to mean the annual rate.