AFRICA

Parts of Africa continue to face significant challenges related to tackling the increased abuse and production of major drugs. Persistent threats to peace and security in parts of the continent have also spurred an increase in illicit drug trafficking. Eastern Africa has increasingly become a transit route for heroin bound for markets in South Africa and West Africa. Southern Africa continues to be a hub for the global transit of heroin and cocaine.

New trends of trafficking in amphetamine-type stimulants (ATS) point to growing domestic markets throughout Africa. Africa is also affected by trafficking in precursor chemicals, notably ephedrine and pseudoephedrine. The prevalence of abuse of cannabis remains a major concern for the continent. Despite some eradication efforts, cannabis is illicitly cultivated throughout the continent. North Africa continues to see an increase in seizures of cannabis resin.

The public health problems of drug abuse continue to worsen as parts of Africa see more manufacturing and trafficking of methamphetamine. Although some countries have taken concrete steps to improve national systems for drug dependence treatment, health-care systems are often lacking and do not meet the needs of the populations. Drug abuse and limited treatment and rehabilitation capacity remain acute challenges in the region.

AMERICAS

Central America and the Caribbean

The Central America and the Caribbean region continues to be exploited by local and international organized criminal groups for the transit and trans-shipment of illicit drugs originating in South America and destined for consumer markets in North America and Europe. There is a growing trend towards increased production of illicit drugs in the region and drug abuse also appears to be growing. Cocaine trafficking remains the most lucrative source of income for organized criminal groups in the region and intensified competition in cocaine trafficking has been accompanied by increased levels of violence.

North America

**Drug use in North America:** Despite a decline compared to previous years, North America continues to have the highest drug-related mortality rate of any region in the world (242.1 per million inhabitants aged 15-64 years). In the United States, drug overdose deaths, primarily related to prescription opioids, outnumber homicides and road accident fatalities. Governments in the region have addressed the problem of prescription drug abuse with targeted measures such as the establishment
of prescription monitoring programmes and “take-back initiatives”. Overprescription and overuse of prescription drugs in the United States continue to represent a significant public health challenge and the Board notes the steps taken. The Board also takes note of measures taken in Mexico to tackle the problem of limited access to these drugs for legitimate medical treatment and encourages the authorities to continue to make progress in this regard.

**A resurgence of heroin abuse in North America:** The tightening of regulatory controls for the dispensing of prescription opioids, coupled with efforts to develop tamper-proof presentations of commonly abused drugs, is believed to have contributed to a major resurgence in heroin abuse in North America, following several years of declining prevalence. Opiate-dependent drug users are increasingly turning to heroin, which is typically easier to find and cheaper than prescription opioids. Law enforcement authorities in the region have also identified significant increases in heroin purity. Increased demand for heroin has also been accompanied by the growing availability of the drug in the region, particularly in the United States. Law enforcement efforts targeting heroin traffickers have led to an increase in seizures greater than 320 per cent along the United States-Mexico border between 2008 and 2013.

**Cannabis as a substance of abuse:** Cannabis continues to be the most widely available, abused and trafficked drug in North America. The United States Drug Enforcement Administration reports that more than a million kilograms of cannabis are seized annually along the United States-Mexico border. Also particularly worrying is the use of cannabis by youth. The 2012-2013 Youth Smoking Survey in Canada, which collected data from Canadian students in grades 6 to 12 (aged approximately 11 to 18) about alcohol, tobacco and illicit drug use, lists cannabis as the substance with the highest annual prevalence of use, after alcohol. Approximately 45 per cent of students in grades 7 to 12 (aged approximately 12 to 18) reported that it would be “fairly easy” or “very easy” to obtain cannabis. These developments illustrate the need for Governments in the region to increase investments in prevention measures, particularly those aimed at young people.

**The legalization of cannabis for medical purposes in the United States:** Twenty-three United States states and the District of Columbia have now enacted legislation allowing for the creation of cannabis for medical purposes programmes. As a result, there are vastly divergent regulatory frameworks for the eligibility of patients and health conditions for which the medical use of cannabis is permitted, as well as for prescription and dispensing practices by health-care professionals and commercial production by licensed suppliers. In November 2014, Florida voters rejected a ballot initiative which would have paved the way for a constitutional amendment allowing the creation of a programme for the medical use of cannabis in the State. The Board remains concerned that many of these schemes do not meet the requirements set out in the drug control treaties for the establishment and operation of cannabis for medical purposes programmes.

**The legalization of cannabis for non-medical purposes in the United States:** On 1 January 2014, state-licensed cannabis retailers in the State of Colorado began selling cannabis for non-medical purposes. In July 2014, sales of cannabis for non-medical purposes began in the State of Washington. In November 2014, voters in the States of Oregon and Alaska, as well as in the District of Columbia, approved ballot initiatives on the non-medical use of cannabis in their respective jurisdictions. These developments have occurred despite being in conflict with the Controlled
Substances Act, a federal statute which prohibits cannabis production, trafficking and possession and classifies cannabis as a substance having a high potential for abuse and no scientifically proven medical value, and the provisions of the 1961 Single Convention on Narcotic Drugs, which limit the use of narcotic drugs to medical and scientific purposes.

South America

The global supply of cocaine originating in South America has been curtailed to an extent that has had a perceptible effect on major consumer markets, where its availability remains lower than at the peak reached around 2006. The total area under cultivation for coca bush in Bolivia, Colombia and Peru fell by approximately one third between 2007 and 2013. A special concern in South America is the consumption of smokeable forms of cocaine. In Brazil, the number of “regular” users of “crack” (defined as having used the substance on 25 days or more in the previous six months) or other smokeable forms of cocaine (thus excluding cocaine salts) in the Brazilian state capitals and the federal district alone is estimated at approximately 370,000, or 0.81 per cent of their general population.

Treatment data for 2010-2012 also show that cocaine is by far the most prominent primary drug of abuse among persons treated for drug addiction in South American countries, except Colombia, where treatment data for 2012 indicate a complex drug abuse scenario, with cannabis and cocaine each accounting for approximately one third of treatment demand, followed by amphetamine-type stimulants (10 per cent) and heroin (6.6 per cent).

Recently published studies on drug use in South America, while not necessarily representative of the entire region, point to increased cannabis use in Chile and Colombia. Colombia and Paraguay emerge as the most prominent source countries for cannabis herb trafficked across borders in South America.

ASIA

East and South-East Asia

Continued expansion of amphetamine-type stimulants: Further increases in trafficking and the manufacture of amphetamine-type stimulants constitute the leading sources of drug-related activity in East and South-East Asia, which have some of the world’s largest and most established illicit markets for amphetamine-type stimulants. China is also a source often cited for new psychoactive substances production, and it has taken steps to control these substances and has actively supported multilateral investigative efforts (see factsheet 4).

South Asia

Abuse of pharmaceutical preparations: In South Asia, the rise in the illicit manufacturing, trafficking and abuse of methamphetamine, as well the diversion and abuse of pharmaceutical
preparations containing narcotic drugs and psychotropic substances remain among the major drug-related challenges.

Increase in the trafficking of Afghan heroin: Recent trends point to an increase in the trafficking of Afghan heroin in fairly large consignments through Sri Lanka. In 2011 and 2012, average seizures were about 35 kg; in 2013 they increased to 350 kg.

Availability and access to opioids for pain management: Access to internationally controlled substances for medical purposes (particularly opiates for pain relief) is limited in the region, and the region’s per capita medical consumption is well below the world average. A positive development in the region was the adoption in March 2014 by the Indian Parliament of new legislation enabling the establishment of simplified rules which should result in greater availability of such drugs for pain relief.

West Asia

Political instability and strife in West Asia have led to deterioration in the ability of several States to exercise effective control over their territory and borders, a situation exploited by drug traffickers. Sustained growth in opiate abuse and illicit opium cultivation in Afghanistan, the source of much of the world’s heroin supply, pose major challenges to the region. Annual illicit cultivation of opium poppy in Afghanistan increased 7 per cent to 224,000 hectares, and with no signs of abating, opium production in the country reached 6,400 tons in 2014, an increase of 17 per cent over the previous year. The crisis situation in Syria also creates favourable conditions for the illicit manufacture and trafficking of amphetamine tablets sold as Captagon in the region and the diversion of its key precursor chemical, phenyl-2-propanone, used in its illicit manufacture.

Europe

Replacement of heroin with synthetic opioids: In Western and Central Europe, heroin is being partly replaced as a substance of abuse by synthetic opioids such as fentanyl, buprenorphine and methadone. In some countries of the sub-region, such substances now account for the majority of opioid abuse treatment admissions. Deaths associated with heroin abuse are declining, while deaths linked to synthetic opioids are on the rise. Changing patterns of injecting drug abuse, with a possible trend away from injection of heroin to injection of synthetic opioids, amphetamine-type stimulants or new psychoactive substances, have also been noted in some countries of the sub-region.

Increased HIV prevalence among injecting drug users: Eastern and South-Eastern Europe have a significantly higher prevalence of injecting drug abuse, as well as of HIV among people who inject drugs, than the global average. While the number of newly reported HIV cases among people who inject drugs in the European Union and Norway decreased during the period 2006-2010, an increase has been seen since 2010, mainly as a result of outbreaks of HIV among people who inject drugs in Greece and Romania.
**Revival of the Balkan route:** In 2013, an increased use of the Balkan route for trafficking of illicit drugs could be observed, although the amounts involved were not at the same level as during the peak period of 2007. Seizures of heroin along the Balkan route increased, and heroin continued to be redistributed in the Netherlands and, to a lesser extent, in Belgium for illicit markets in Western Europe.

**Illicit production of cannabis is on the rise:** The illicit cultivation of cannabis in Western and Central Europe, primarily for domestic consumption, continues to spread, with some countries reporting an increasing professionalization and scale of cultivation and others reporting a trend towards smaller-scale production sites, such as residential properties. In addition to domestic production, cannabis continues to be trafficked into Western and Central Europe, including through the transport of cannabis resin by sea or air, mainly from Morocco, and the trafficking of cannabis herb, mainly from Albania. Illicit production and use of cannabis, especially a highly potent form of this substance, remained the main illicit drug challenges in South-Eastern Europe.

**Challenge of new psychoactive substances:** As in other regions, the availability and abuse of new psychoactive substances remains a major public health concern, with new substances identified and an increasing involvement of organized criminal groups in the market. Governments are continuing to take measures to address the problem, both nationally and regionally, including by placing individual substances or groups of substances under national control or by introducing temporary bans on potentially harmful substances.

**Oceania**

In Oceania, concerns persist about the expanding markets for new psychoactive substances and comparatively high rates of drug abuse, though the available information for the region refers primarily to Australia and New Zealand. Seizures and arrests are at record highs for many drug types. The region provides an expanding market for certain drugs, including cocaine, and is susceptible to illicit manufacturing and trafficking due to the comparatively high price of drugs and precursors. Cannabis remains the most prevalent drug of abuse, and dominates the illicit drug market. Cannabis is produced predominantly locally and there are indications that, in some countries of the region, cannabis use has generally continued to increase. The market for amphetamine-type stimulants also appears to be growing, with illicitly manufactured methamphetamine being the predominant synthetic drug of choice in the region. Given a lack of comprehensive statistics on drug abuse for most countries of the region, it is neither possible to fully assess the overall drug control or drug abuse situation nor the response of Governments to addressing drug abuse as a public health concern.