

was reported to have been carried out by authorities in Jordan in 2015. It was one of a series of seizures of counterfeit and trafficked goods that Jordan had undertaken since it joined the World Customs Organization (WCO)-UNODC Container Control Programme in September 2015. In March 2016, according to information available to the Board, 1 million tramadol pills originating in India were seized by customs authorities at Imam Khomeini International Airport, Tehran. The pills had been falsely declared as “advertising and exhibition substances”.

695. In Saudi Arabia, pregabalin, a medicine with anti-convulsant properties used widely to treat epilepsy, neuropathic pain and anxiety, has recently been placed under national control as a result of its abuse by school students. Saudi Arabia, the Syrian Arab Republic and Turkey also reported significant seizures of unspecified diverted prescription drugs.

5. Abuse and treatment

696. Efforts to improve systematic data collection on drug abuse and treatment measures are under way in several countries of the region, yet a realistic assessment of the availability of treatment services compared with the need for such services remains difficult. A comprehensive situation assessment regarding the extent and patterns of drug use in the State of Palestine was envisaged to be completed by the end of 2016 and could provide a valuable update against baseline data last collected there in 2006.

697. Based on available data, cannabis, opioids and amphetamine-type stimulants are among the most frequently used substances in West Asia. Drug abuse in Afghanistan has continued to rise and, according to the latest estimates, now affects some 12.6 per cent of the adult population (or one in three households). That figure is more than double the global drug abuse rate, which is estimated at just over 5 per cent. Opioids remain the most commonly used drug in Afghanistan, with abuse rates estimated at 4.9 per cent among the general population and 8.5 per cent among adults.

698. In 2015, Saudi Arabia reported a new trend in drug use, namely methamphetamine being injected (rather than smoked) by young people. That observation was based on information provided by emergency and outpatient treatment facilities at a hospital in Jeddah (situated in the west of the country). At the same time, data from treatment and other registers of drug users in the country’s eastern provinces show that more than 1,000 problem drug users (defined in Saudi Arabia as persons who inject drugs and people using drugs on a daily basis)

take amphetamine-type stimulants, which is more than double the number of problem drug users reported to be taking opioids (some 450). Persons in treatment for the use of amphetamine-type stimulants also represent the highest number (more than half) of people receiving drug abuse-related treatment in the country. In the same geographical area in 2015, more than 5,200 non-fatal, drug-related emergency-room visits were recorded, with drug-related deaths remaining stable and associated exclusively with the use of opioids.

699. With regard to overdose deaths, the data available for West Asia mirror the global trend, with drug-related mortality mostly being attributed to the abuse of opioids. Most countries in the region that reported on drug-related death cases for 2015 (including Saudi Arabia, the Syrian Arab Republic and the United Arab Emirates) named opioids (predominantly heroin) as the cause of drug-related deaths. In an effort to reduce drug-related mortality, Georgia has removed a significant obstacle for drug users seeking medical assistance, as it no longer requires medical personnel to inform law enforcement authorities of overdose cases.

700. More than 200,000 persons are estimated to be in need of treatment for drug abuse in Turkey. In 2015, Turkey reported an increase in the residential treatment of methamphetamine addicts, while inpatient treatment of users of synthetic cannabinoids remained stable. While no general prevalence data for drug abuse were reported, Turkey observed a slight decrease in the overall number of persons who inject drugs (mainly related to heroin), with some increase in the use of amphetamine-type stimulants, tranquilizers and stimulants, as well as pharmaceutical products containing opioids. The most prevalent disease among persons who inject drugs was hepatitis C (affecting close to 40 per cent of those who received inpatient treatment in Turkey in 2015). Of all cases of drug-related mortality caused by overdose deaths in Turkey, more than half involved poly-drug use, with just as many deaths associated with the use of opioids; close to one third of all cases involved amphetamine-type stimulants and/or cannabis use.

D. Europe

1. Major developments

701. Illicit drug markets remain one of the main threats to the security of European countries. According to estimates by the European Monitoring Centre for Drugs and Drugs Addiction (EMCDDA), around one fifth of global

crime proceeds are generated by the illicit drug trade. European Union citizens alone spend between 21 to 31 billion euros every year on illicit drugs. Accelerated changes in illicit drug markets observed in past years can be attributed, in part, to globalization and technological developments. Current markets are characterized by increasing organizational and technical complexity, interconnectedness and specialization of the criminal groups involved. Those illicit drug markets not only relate to other criminal activities, but also create a strain on government institutions and have a negative impact on legitimate business and on society. Cannabis is the most widely used illicit drug in Europe: it is estimated that about 27 million adults in Europe have used cannabis in the past year.

702. The annual prevalence of cocaine use in Europe in 2014 was estimated at about 0.7 per cent of the population aged 15-64, approximately just over 4 million people. However, that masks significant variance between countries and subregions: in 2014, the annual prevalence rate for Eastern and South-Eastern Europe was about 0.2 per cent for the same population group (approximately half a million people) and 1.1 per cent for Western and Central Europe (about 3.5 million people).

703. Opiates abused in Europe are produced mainly in Afghanistan and trafficked into Europe by two major routes, the Balkan route and the northern route. The Balkan route, through Iran (Islamic Republic of) and Turkey, followed by countries in South-Eastern and Central Europe, continues to be the main trafficking route, particularly for heroin. Opiate trafficking along the northern route, from Afghanistan to States in Central Asia and then to the Russian Federation, has been reported to be increasing over the last few years.

704. An estimated 2.4 million people have used amphetamine or methamphetamine in the whole of Europe in the past year. In countries of the European Union, abuse of the main synthetic stimulants (amphetamine, methamphetamine and MDMA), together, is slightly higher than that of cocaine. There is concern in States members of the European Union about the availability of high-potency “ecstasy” products and the growing use of methamphetamine. New synthetic opioids are also increasingly being misused in the European Union.

705. By May 2016, the European Union early warning system had identified over 560 new psychoactive substances; 100 new psychoactive substances were reported for the first time in 2015. European authorities are concerned that, with the increased availability of those substances, associated health risks and dependency problems will also increase.

706. In August 2016, the European Commission proposed an amendment to the founding regulation of EMCDDA to allow for swifter and more effective action in dealing with new psychoactive substances in the European Union. The proposal aims, in particular, to further strengthen the European Union early warning system and risk assessment for new psychoactive substances by speeding up data collection and assessment procedures. The proposal is part of the agreement between the European Parliament and the Council of the European Union reached in September 2013, which aimed at facilitating the negotiations on proposed legislative amendments for tackling new psychoactive substances.

2. Regional cooperation

707. The European Union continued intensive cooperation among its member States and with third countries and other regions. The Horizontal Working Party on Drugs, a working group of the Council of the European Union, has led the Council’s work on legislative and general policy work on drug supply reduction and drug demand reduction areas. The work focused on cross-cutting themes, namely coordination, international cooperation, and research, monitoring and evaluation. The working party cooperated with European Union agencies such as EMCDDA and Europol, as well as with international organizations and with countries not members of the European Union.

708. In 2016, Monaco became the thirty-eighth member State of the Cooperation Group to Combat Drug Abuse and Illicit Trafficking in Drugs (Pompidou Group) of the Council of Europe. The Board noted that the Pompidou Group supported the publication of the 2015 report of the European School Survey Project on Alcohol and Other Drugs, which was prepared on the basis of information provided by almost 100,000 students from 35 European countries, 24 of which were States members of the European Union. In June 2016, experts from 36 countries and 11 international organizations participated in the annual meeting of the Airports Group organized by the Pompidou Group and discussed practical solutions to challenges in airports, including aviation-related fraud, risk analysis and controlled deliveries.

709. In February 2016, the European Commission presented the outcomes of “Operation Cocair 5”, an international operation to combat drug trafficking that was supported by about 30 countries from Africa, Latin America and the Caribbean. The operation, which resulted in seizures of sizeable amounts of illicit drugs, in particular cocaine, as well as ammunition and currency,

was conducted under the Airport Communication Project (AIRCOP), co-funded under the “Instrument contributing to Stability and Peace”, one of the main tools of the European Commission to address the threat of organized crime in partner countries.

710. Japan and the Russian Federation, in cooperation with UNODC, continued their partnership to provide specialized training courses to counter-narcotic officers from Afghanistan. The trilateral initiative, which marked its fifth anniversary in 2016, has expanded to include provision of training to Central Asian countries, contributing to the strengthening of regional cooperation between Afghanistan and neighbouring countries.

711. In 2016, the Governments of countries in South-Eastern Europe continued implementing drug control activities, in line with the regional programme for South-Eastern Europe 2016-2019, developed by Governments of the subregion with UNODC assistance.

3. National legislation, policy and action

712. In November 2015, the European Commission presented to the European Parliament and the Council of the European Union a report on progress in implementing the European Union Drugs Strategy and 2013-2016 Action Plan on Drugs. The report, among other things, showcased some best practices in European Union member States, including quick access to drug treatment in England, where 98 per cent of people commenced treatment within three weeks of referral; the establishment, within the Federal Criminal Police Office in Germany, of a dedicated working group to address the problems of increased drug trafficking over the Internet; and the representation of non-governmental organizations in the Government Council for Drug Policy of Slovakia, the main coordination body on drug policy in the country.

713. In 2015-2016, several European countries, including Czechia, Finland, Hungary, Lithuania, the Netherlands, Norway, Sweden and the United Kingdom, developed new drug control strategies, policies and/or drug action plans. For example, in November 2015, the Government of the Netherlands formulated a new policy on drug prevention that, among other things, was aimed at changing the prevailing tolerant views of young adults on the use of drugs in nightlife settings.

714. In December 2015, Law No. 318/2015 was adopted by the Parliament of Romania. The law establishes the National Agency for the Management of Seized

Assets, which will report to the Ministry of Justice. The Agency is tasked with facilitating the tracing and identification of assets resulting from the commission of criminal offences that may be subject to a criminal seizure or criminal confiscation, and coordinating, evaluating and monitoring, at the national level, the implementation of criminal asset recovery policies.

715. In the United Kingdom, the Psychoactive Substances Act became law in 2016, criminalizing the production, supply or possession with intent to supply of any psychoactive substance knowing that it is to be used for its psychoactive effects. While simple possession of such substances does not constitute an offence, the possession within a custodial institution does.

716. In the Russian Federation, presidential decree No. 156 was issued on 5 April 2016 with the aim of improving public administration in the sphere of control of trafficking in narcotic drugs, psychotropic substances and their precursors. According to the decree, the Federal Service of the Russian Federation for Drug Control became part of the country’s Ministry of Internal Affairs. The presidential decree establishes that the Ministry of Internal Affairs remains the only federal executive authority responsible for the development and implementation of State policy and normative legal regulation in the sphere of internal affairs, as well as in the control of trafficking in narcotic drugs, psychotropic substances and their precursors. A draft law containing the necessary legal amendments following the transfer of powers to the Ministry of Interior was submitted to the State Duma of the Russian Federation and is expected to be adopted by the end of 2016.

717. On 1 July 2016, the Government of the Russian Federation approved order No. 1403-r, on improving the availability of narcotic drugs and psychotropic substances for medical use. Among the main provisions of the order’s action plan are: enhancement of the range of narcotic preparations used for pain relief, including for children’s treatment; optimization of the process for preparing estimates of the needs for preparations containing narcotic drugs and psychotropic substances; improvement in the availability and quality of pain relief, including through a simplified procedure for prescribing medical preparations; and harmonization of laws and regulations with regard to trafficking in narcotic drugs and psychotropic substances.

718. Supervised “drug consumption facilities”, where drugs can be used for non-medical purposes under the supervision of medically trained staff, have been operating in Western Europe for the last three decades. The primary aim of the facilities is to reduce the acute risks of

disease transmission through unhygienic injecting, prevent drug-related overdose deaths and connect high-risk drug users with addiction treatment and other health and social services. By February 2016, there were a total of 74 official “drug consumption facilities” operating in Denmark, Germany, Luxembourg, the Netherlands, Norway, Spain and Switzerland.

719. In March 2016, the Government of France issued decree 0072, which approved, on a trial basis, the establishment of “drug injection rooms” in the country, for a maximum period of six years. The decree was adopted following a decision by the French Constitutional Council in January 2016 that the proposed establishment of the “drug consumption rooms”, based on the aim of reducing the risks associated with drug use and leading drug users to cease their use of drugs, with limited criminal immunity for drug users and the professional practitioners inside the facility, was in conformity with the Constitution of France.

720. With respect to “drug consumption rooms”, the Board wishes to reiterate its frequently expressed concern that, in order for the operation of such facilities to be consistent with the international drug conventions, certain conditions must be fulfilled. Chief among those conditions is that the ultimate objective of these measures is to reduce the adverse consequences of drug abuse through treatment, rehabilitation and reintegration measures, without condoning or increasing drug abuse or encouraging drug trafficking. “Drug consumption rooms” must be operated within a framework that offers treatment and rehabilitation services as well as social reintegration measures, either directly or by active referral for access, and must not be a substitute for demand reduction programmes, in particular prevention and treatment activities.

4. Cultivation, production, manufacture and trafficking

(a) Narcotic drugs

721. Trafficking in cannabis, both resin and herb, continues at significant levels in Eastern and South-Eastern Europe. Most of the herbal cannabis produced in those subregions originates in Albania, Montenegro, the Republic of Moldova, Serbia, the former Yugoslav Republic of Macedonia and Ukraine. According to UNODC, in 2014, Albania was an important source country for cannabis herb available in countries in Western and Central Europe.

722. Over the last 10 years, countries in Europe have seen an increase in domestic cultivation of cannabis plant, ranging from small-scale cultivation for personal use to major commercial plantations. In many countries, as a result of that increase, locally produced herbal cannabis has been partially displacing imported cannabis resin. Nonetheless, cannabis resin smuggled from other regions worldwide, in particular the resin produced from the high-potency, high-yield hybrid strains of the plant cultivated in Morocco, continues to be a major source of cannabis resin in Europe.

723. In 2015, illicit indoor cannabis cultivation was reported by a number of European countries, including Belgium, Bosnia and Herzegovina, Bulgaria, Czechia, France, Greece, Latvia, Lithuania, Poland, Romania, the Russian Federation and Ukraine.

724. Although the reported average potency of cannabis, in terms of THC content, has significantly increased over the past decade, according to EMCDDA, the reported retail prices for both cannabis herb and cannabis resin have increased only slightly in the European Union over that period. In several European Union countries, the retail (street) prices of cannabis herb and cannabis resin do not differ significantly: for example, in Spain, the retail price of cannabis herb is about 4.6 euros per gram, and the price of cannabis resin 5.6 euros per gram.

725. In 2014, seizures of cannabis resin and cannabis herb in European Union member States amounted to 574 tons and 139 tons, respectively. Spain, a main entry point for cannabis resin originating in Morocco, recently also reported increased amounts of cannabis herb seized: 15.2 tons in 2014 and 15.9 tons in 2015. That increase, according to EMCDDA, could indicate a growth in domestic or regional cannabis production. Some recent interceptions of large consignments of cannabis resin moving eastwards along the North African coast may suggest the emergence of new trafficking routes through countries in Southern Europe and the western Balkans.

726. In 2015, the countries that reported seizing more than 1 ton of cannabis resin were Spain (380.4 tons), France (60.8 tons), the United Kingdom (7.5 tons), Belgium (7 tons), Denmark (3.6 tons), Norway (2 tons) and Sweden (1.1 tons). The bulk of the cannabis resin seized in Spain in 2015 originated in Morocco.

727. Almost all heroin available on the illicit drug markets in Europe originates in Afghanistan. Owing to its geographical location, Turkey continues to be a main corridor for heroin trafficking towards Europe, serving as a starting point on the Balkan route. In 2014, seizures of

heroin and morphine along the Balkan route amounted to 48 tons, an increase compared with the quantity seized in previous years.

728. Despite the diversification of heroin trafficking routes, the Balkan route (from Turkey to Bulgaria and through countries in the western Balkans to Western and Central Europe, or from Bulgaria through Romania and Hungary to Western and Central Europe) remains the main corridor for trafficking bulk quantities of heroin to the main heroin markets in Europe. Reasonably recent variations to the Balkan route involve trafficking through the Islamic Republic of Iran and the Caucasus countries and then across the Black Sea to Romania to follow the traditional Balkan route, or through the Islamic Republic of Iran to Iraq and the Syrian Arab Republic and then to Turkey. There are also increasing concerns about the southern route, along which heroin is trafficked by sea from Iran (Islamic Republic of) and Pakistan, initially to the Arabian Peninsula and East Africa, and then onwards to other parts of Africa or directly to Europe. The container ports of Rotterdam (Netherlands) and Antwerp (Belgium) appear to be major hubs for heroin and cocaine smuggled into the European Union.

729. Until 2013, countries in the European Union had witnessed a long-term decrease in both the number of heroin seizures and the quantity of the drug seized. Since that time, seizures of amounts of heroin larger than 100 kg have been reported more regularly. In 2015, sizeable amounts of heroin were seized in the following countries: the United Kingdom (1,114 kg), France (818 kg), Greece (567 kg), Romania (334 kg), Bulgaria (265 kg), Spain (256 kg), Germany (210 kg) and Belgium (121 kg). The increased availability and purity of heroin on the illicit markets may have also contributed to an increasing number of overdose deaths reported in some countries in 2015, for example in Lithuania, Slovenia and the United Kingdom. Those latest developments raise concerns about a potential resurgence of heroin use in the European Union, following more than a decade-long decrease in demand for the drug.

730. In 2015 in Romania, there was a significant increase (about 55 per cent) in the total quantity of drugs seized compared with 2014. The situation was mainly determined by the increase in seizures of heroin (from 25.7 kg to more than 334 kg), which represented about 28 per cent of the total amount of drugs seized in the country. The quantity of substances seized in 2015 indicates a decrease in the seizures of “ecstasy”, amphetamine-type stimulants, opioids, LSD, piperazines, cathinones, synthetic cannabinoids, tryptamines, cannabis plants, cannabis resin and buprenorphine. During 2015, 64 drug

trafficking groups were dismantled in Romania, a 16.4 per cent increase compared with the previous year, when 55 such groups were dismantled. The total number of persons involved in those groups decreased in 2015 (from 517 persons in 2014 to 425 persons in 2015).

731. The cocaine market in the European Union has been fairly stable over recent years, although there are indications of increasing availability of the drug. In 2014, countries in the European Union reported seizures of cocaine totalling 61.6 tons, about the same amount as in 2013 (62.6 tons). In 2015, seizures of cocaine, in quantities of more than 1 ton, occurred in Spain (21.6 tons), Belgium (17.5 tons), France (10.9 tons), the United Kingdom (3.5 tons) and Germany (3.1 tons). Austria, Czechia, Cyprus, Denmark, Greece, Lithuania, Poland and Sweden reported seizures of cocaine larger than 100 kg. Seizure data for the Netherlands were not available at the time of publication of the present report.

732. According to the European countries that seized the largest amounts of cocaine in 2015, Colombia, Ecuador and Venezuela (Bolivarian Republic of) were among the main countries of departure for the drug trafficked by sea and air to Europe. The Caribbean and West Africa continue to be used by traffickers as important transit areas, and the increasingly important role of Central America as a transit point has also been noted.

733. The concealment methods used by traffickers for smuggling cocaine to Europe continue to evolve. The trafficking in cocaine in maritime containers through major European ports appears to be increasing. In 2013, seizures of cocaine concealed in sea containers accounted for about three quarters of maritime seizures. There are concerns about the continued trafficking in cocaine by melting it into “carrier materials” such as plastics, which requires chemical extraction of cocaine in so-called secondary extraction laboratories that are linked to criminal organizations. The swallowing of latex packages containing liquid cocaine, instead of capsules containing cocaine in powder form, by air couriers (so-called “mules”) has been detected in some airports.

(b) Psychotropic substances

734. For a number of years, the European Union has been a manufacturing region for synthetic drugs: amphetamine and “ecstasy” have been illicitly manufactured in Belgium and the Netherlands, and methamphetamine in countries in Central Europe, mostly in Czechia. Recent evidence suggests a significant manufacturing capacity of methamphetamine also emerging in

the Netherlands and some small-scale manufacturing in countries bordering Czechia.

735. In 2015, Belgium and Poland reported the destruction of eight and five clandestine amphetamine laboratories, respectively. One or two amphetamine laboratories were dismantled in the following countries: Austria, Germany, Latvia, Spain and Sweden. The largest number of dismantled methamphetamine laboratories in the European Union, 263, was reported by Czechia. Those laboratories used pseudoephedrine as a primary precursor for the manufacture of methamphetamine. The dismantling of fewer than 10 methamphetamine laboratories were reported by each of the following countries: Austria, Germany, Lithuania and Poland. Three laboratories manufacturing “ecstasy” were dismantled in Belgium.

736. The regional manufacture of synthetic drugs results not only in significant intra-European trafficking, but also trafficking to other regions, including the Americas and Oceania, particularly Australia. Moreover, the territory of the European Union has been used as a transit corridor for methamphetamine manufactured in the Islamic Republic of Iran and in West Africa that is destined for markets in East Asia. The organized criminal groups involved in the trafficking of synthetic drugs also often smuggle other substances: for example, criminal groups supplying amphetamine and “ecstasy” originating in Belgium and the Netherlands also supply drug markets with cannabis and cocaine. In Czechia, some organized criminal groups have expanded from cannabis plant cultivation to methamphetamine manufacture.

737. Amphetamine is far more commonly mentioned in seizure reports than methamphetamine. In 2014, the States members of the European Union reported seizures of 7.1 tons of amphetamine and 0.5 tons of methamphetamine. Wastewater analysis conducted by laboratories across European cities during the period 2011-2014 as part of the Sewage Analysis CORE Group (supported by the European Union) also confirmed that the use of amphetamine is far more common than the use of methamphetamine in Europe. Out of 59 cities where analysis was done, 47 cities (80 per cent) showed higher residues of amphetamine than of methamphetamine in their wastewater.

738. In 2015, seizures of amphetamine larger than 100 kg were reported by Germany (1.4 tons), Poland (0.7 tons), the United Kingdom (0.6 tons), Sweden (0.5 tons), Norway (0.5 tons), France (0.4 tons) and Finland (0.3 tons). Seizures of methamphetamine larger than 100 kg were carried out in Czechia, France and Norway (in descending) order. Seizures of large amounts

of “ecstasy” in 2015 were reported by France (1.3 million units), the United Kingdom (1.1 million units) and Germany (1.0 million units).

(c) Precursors

739. Challenges in precursor control in the European Union member States mainly relate to the substances listed in Table I of the 1988 Convention; non-scheduled chemicals, in particular those used in the illicit manufacture of amphetamine-type stimulants; and, more recently, the precursors of new psychoactive substances. In particular, seizures of large amounts of non-scheduled chemicals raise concerns about the continued manufacture of synthetic drugs, in particular amphetamines and “ecstasy”.

740. The Netherlands is one of the main countries worldwide communicating seizures of diverse chemical substances through PICS, which is aimed at facilitating and promoting regional operational cooperation. Those seizures included scheduled and non-scheduled substances used in the illicit manufacture of “ecstasy”, such as 3,4-methylenedioxyphenyl-2-propanone (3,4-MDP-2-P) and its internationally non-controlled glycidic acid derivatives, and those used in the illicit manufacture of amphetamines, such as salts of 1-phenyl-2-propanone (P-2-P), methyl glycidic acid and reagents such as methylamine and formic acid. Other countries reporting sizeable seizures of those substances included Belgium and France.

741. Seizures of APAAN, a substitute chemical that can be used in laboratories illicitly manufacturing amphetamine and methamphetamine, have significantly decreased in the European Union since 2014, when the substance was brought under international control. During the period 2015-2016, seizures of the substance were reported by Germany, the Netherlands and Spain.

742. Through PICS, Czechia continued communicating seizures of pharmaceutical preparations containing pseudoephedrine. France, Luxembourg and the Netherlands also used PICS to report seizures of precursors of new psychoactive substances, mainly precursors of synthetic cathinones.

743. A comprehensive review of the situation with respect to the control of precursors and chemicals frequently used in the illicit manufacture of narcotic drugs and psychotropic substances in the region can be found in the report of the Board for 2016 on the implementation of article 12 of the 1988 Convention.

(d) Substances not under international control

744. There is no indication of a slowdown in the development of new psychoactive substances. Manufacturers of such substances are making continued efforts to circumvent legal and regulatory controls imposed by Governments worldwide. The continued growth of the European Union market for new psychoactive substances, which are often sold openly through conventional stores and online shops as “legal” replacements for illicit drugs, is also corroborated by the amounts of the substances seized.

745. In 2014, States members of the European Union, as well as Norway and Turkey, reported almost 50,000 seizures of new psychoactive substances, amounting to almost 4 tons. Seizures of synthetic cannabinoids, often advertised as legal replacements for cannabis, and synthetic cathinones that have been consumed as an alternative to amphetamine, cocaine and “ecstasy”, together accounted for over three quarters of the total number of seizures of new psychoactive substances during 2014.

746. According to EMCDDA, many new psychoactive substances found in Europe have been manufactured by legitimate companies in China, and to a lesser extent in India. Those companies use their websites and online marketplaces to advertise their capacity to supply new psychoactive substances in amounts ranging from a few milligrams to hundreds of kilograms. From the manufacturing countries, large consignments of the substances are shipped to Europe as sea or air cargo; smaller amounts are delivered directly to buyers by express mail and delivery companies.

747. Given the scheduling of 116 new psychoactive substances by the Chinese Food and Drug Administration in October 2015, the manufacture of new psychoactive substances may in future gradually shift to other countries and, as a result, the importance of China as the main source of new psychoactive substances may also decline. In fact, the emergence of clandestine laboratories in Europe may suggest traffickers’ increasing interest in manufacturing a range of new psychoactive substances in Europe. That has been corroborated, for example, by seizures from two mephedrone laboratories in Poland in 2015.

748. During 2015, 14 new psychoactive substances were identified as part of 77 seizure cases in Bulgaria. The total weight of seized new psychoactive substances amounted to 4,074 grams; synthetic cannabinoids amounted to 4,072 grams of the total seized, and

accounted for 71 out of the 77 seizure cases of new psychoactive substances. Use of new psychoactive substances was highest among those aged under 35.

749. In Romania, no drug-producing clandestine laboratories were identified in 2015; however, three laboratories used for mixing and packaging new psychoactive substances, mainly synthetic cannabinoids, were detected and dismantled.

750. In Latvia, according to data from the national early warning system, the number of seizures of new psychoactive substances decreased from 1,387 seizures in 2014 to 735 seizures in 2015. The most seized group of new psychoactive substances remains synthetic cannabinoids (n=402); however, there was a sharp increase in the seizures of so-called “other drugs” (n=228). Those seizures comprised 116 carfentanil seizures (or carfentanil in a mixture with heroin), 92 tramadol seizures and 20 fentanyl and 3-methylfentanyl seizures. In general, there was a reported increase in the seizures of synthetic opioids.

5. Abuse and treatment

751. In the European Union,⁶⁶ it is estimated that over a quarter of those aged 15 to 64 have consumed illicit drugs at least once in their lives. In comparison with the past, drug consumption now encompasses a much wider choice of psychoactive substances. Individual patterns of drug use range from experimental to habitual and dependent use; polydrug use is also common.

752. According to the EMCDDA report on *Comorbidity of Substance Use and Mental Disorders in Europe*,⁶⁷ published in 2015, depression is among the most common psychiatric comorbidity associated with problematic drug use in Europe. Comorbid major depression is more frequent in women with substance use disorders than in men with such disorders. Among that group of women, the prevalence of major depression is two times higher than among women in the general population.

753. The twenty-third European Cities against Drugs Mayors’ Conference was held in Stavanger, Norway, on 9 and 10 May 2016. The goal of the Conference was to

⁶⁶Data on drug abuse and treatment in the European Union are based on information published in EMCDDA, *European Drug Report 2016: Trends and Developments* (Publications Office of the European Union, Luxembourg, 2016), unless otherwise specified. The report encompasses information provided by the European Union member States, the candidate country Turkey, and Norway.

⁶⁷Luxembourg, Publications Office of the European Union.

identify ways to build healthy and safe cities through prevention and treatment. INCB delivered a keynote presentation entitled “Proactivity beats reactivity: examining the evidence for sound drug prevention in our cities”.

754. The prevalence of cannabis use in countries of the European Union varies from country to country. It is estimated that 51.5 million adult males and 32.4 million adult females consume cannabis at least once in their lives (24.8 per cent lifetime prevalence), making cannabis the most commonly used drug in the European Union. In the European Union about 1 per cent of those aged 15 to 64 use cannabis on a daily or almost daily basis.

755. Cannabis is the drug most frequently reported as the principal reason for first entry into drug treatment and the second most frequently mentioned substance among all drug treatment clients. The overall number of first-time treatment admissions for cannabis abuse in the European Union increased from 45,000 in 2006 to 69,000 in 2014, an increase of more than 50 per cent.

756. About 1.1 per cent of the general population aged 15-64 in the European Union (3.6 million people) have used cocaine in the past year. Of those, two thirds (about 2.4 million) are aged 15 to 34, for whom the prevalence rate of last year use was almost double (1.9 per cent). Almost half of the States members of the European Union that provided information on the prevalence of cocaine use in 2015, including Austria, Bulgaria, France, Latvia, Lithuania, Spain and the United Kingdom, reported stable prevalence. In 2015, the prevalence of cocaine use largely decreased in Belgium, but significantly increased in Romania.

757. The most commonly used illicit opioid in the European Union is heroin. In addition to heroin, a range of synthetic opioids such as methadone, buprenorphine and fentanyl have also been misused. About three quarters of the 1.3 million high-risk adult users in the European Union were reported to be in France, Germany, Italy, Spain and the United Kingdom. In 2014, more than 600,000 opioid users in the European Union were receiving substitution treatment.

758. High-risk opioid users in the European Union also misuse benzodiazepines, substances that are often associated with morbidity and mortality in that group of users. In several European countries, small groups of high-risk drug users who previously injected heroin and amphetamines, including those that were on opioid substitution treatment, started experimenting with injecting new psychoactive substances, such as synthetic cathinones. There are also concerns that opioids, such as methadone and

buprenorphine, which are primarily prescribed for the treatment of opioid dependence, are likely to be misused in some European Union member States.

759. The consumer market for opiates in Eastern European countries continued to expand. In 2016, UNODC reported that opioid use remained a major cause of concern, in particular in Eastern and Southern Europe, with more than 70 per cent of all drug treatment patients receiving treatment for opiate use disorders. UNODC estimates that, in 2014, the total number of people in treatment for opioid use in those subregions ranged between 80,000 and 90,000.

760. National general population surveys on drug use in Latvia have been conducted every four years since 2003, and the most recent data are available for 2015, during which 9.9 per cent of respondents (compared with 12.5 per cent in 2011 and 12.1 per cent in 2007) reported having used cannabis at least once during their lifetime. The lifetime prevalence rate was 2.5 per cent for “ecstasy” (compared with 2.7 per cent in 2011 and 4.7 per cent in 2007) and 2.0 per cent for amphetamines (compared with 2.2 per cent in 2011 and 3.3 per cent in 2007). In general, the use of illicit substances has declined and returned to the levels of 2003.

761. Data on substance use among 15- to 16-year-old schoolchildren are available from the regular European School Survey Project on Alcohol and Other Drugs, which has been carried out in Latvia since 1999. According to the data from the 2015 survey, cannabis is the most popular drug among students aged 15-16. Lifetime prevalence of cannabis use was reported by 16.3 per cent of students (compared with 24 per cent in 2011 and 18 per cent in 2007). The lifetime prevalence rate was 3.7 per cent for LSD, 2.9 per cent for amphetamines/methamphetamines and 2.6 per cent for “ecstasy”. In 2015, some 9.5 per cent of 15- to 16-year-old schoolchildren indicated that they had tried new psychoactive substances, such as “Spice” or similar mixtures (compared with 11 per cent in 2011).

762. In Ukraine, according to a report published in 2015 by the Medical Statistics Centre of the Ministry of Health, the number of people in need of treatment for drug abuse was estimated at 60,187.

763. The patterns and prevalence of use of the main synthetic stimulants abused in the European Union, namely amphetamine, “ecstasy” and, to a lesser extent, methamphetamine, differ considerably among States members of the European Union. Notwithstanding their preferred drug of abuse, consumers of those synthetic

stimulants readily switch to other psychoactive substances, subject to their availability, price and perceived quality. EMCDDA, for example, reported links between the cocaine market and the new psychoactive substances market, in particular that of synthetic cathinones.

764. Consumption of amphetamines (amphetamine and methamphetamine) has been stable in most European Union countries since about 2000. In the European Union, it is estimated that 1 per cent of those aged 15-34 (1.3 million people) consumed amphetamines during the past year. Significant consumption of methamphetamine has been reported in Czechia and Slovakia, where the use of the drug has been long established. There are, however, indications that use of methamphetamine has spread further to several other European countries, including Austria, Germany and Poland.

765. Until recently, the prevalence of “ecstasy” abuse had been declining in many European Union member States, from peak levels reached in the early to mid-2000s. Recent data indicate that, after a period of relative shortage, the drug is once again more widely available. Moreover, the potency of “ecstasy” products (tablets, powders and crystals) has increased since 2010, now reaching an all-time high, while prices appear to have remained relatively stable. The availability of high-dose “ecstasy” products on the illicit markets constitutes an emerging threat and a challenge for public health and safety.

766. Surveys conducted in the European Union between 2013 and 2015 further corroborate the suspected overall increase in “ecstasy” use in the subregion. It is estimated that 1.7 per cent of those aged 15-34 (2.1 million people) used “ecstasy” in the past year, with national estimates ranging from 0.3 to 5.5 per cent. Demand for treatment for “ecstasy” abuse is, however, very low in the subregion.

767. Throughout the two-decade-long history of abuse of *gamma*-hydroxybutyric acid (GHB) (including its precursor GBL) and ketamine, national estimates of the prevalence of GHB and ketamine abuse in both adult and school populations, where they existed, remained low in the European Union. Likewise, the prevalence of use of LSD and hallucinogenic mushrooms has also been generally low and stable in the subregion for a number of years.

768. In spite of the considerable significance given by Governments to the problem of new psychoactive substances, estimating the prevalence of abuse of that group of substances continues to be a challenge. The Board

notes that an increasing number of countries now include new psychoactive substances in their drug abuse surveys, although differences in survey methods and questions may limit the comparability of their results. According to EMCDDA, since 2011, 11 European Union member States have reported their national estimates of prevalence of use of those substances.

769. There is a permanent risk that new psychoactive substances with unpredictable toxicological profiles and a potentially unknown detrimental impact on human health, may enter the market. It is therefore essential to regularly update data about the patterns of their consumption and the needs of their users. According to an EMCDDA report on health responses to new psychoactive substances that was published in 2016, in view of the rapid emergence of the group of substances and the complexity of their markets, it is essential to develop and implement effective public health responses to their use.

770. Although progress has been made in recent years, drug use resulting in overdoses or drug-related morbidity, accidents, violence and suicide remain among the major causes of avoidable mortality among young people in the European Union. The European Union estimates that in 2013 alone, at least 5,800 people died from drug overdoses. According to data available to EMCDDA, HIV infections among injecting drug users have decreased, although the infection rates for hepatitis C were still high in many countries in the European Union. Among all HIV cases reported in Europe where the route of transmission is known, the percentage attributable to injecting drug use has remained low and stable for the last decade (less than 8 per cent). Higher rates, however, were reported for Lithuania (32 per cent), Latvia (31 per cent), Estonia (28 per cent) and Romania (25 per cent).

771. The Minister for Health of the Russian Federation outlined the Government’s strategy for combating HIV/AIDS during the three-day United Nations high-level meeting on ending AIDS that was held at United Nations Headquarters from 8 to 10 June 2016. Among the measures proposed were encouraging drug users to abstain from the use of narcotic drugs and providing access to modern rehabilitation centres. Free HIV screening had been made available in the Russian Federation for more than 30 million people, anonymously, if desired. Activities to combat HIV in the Russian Federation were financed from the federal budget, freeing those who had been infected from financial burden.

772. According to UNODC, Eastern and South-Eastern Europe are the subregions with the highest prevalence of injecting drug use, estimated at about 1.27 per cent of the

population in the 15-64 age group. The total number reported from those subregions is estimated to account for 24 per cent of the total number of people who inject drugs worldwide, with the majority of them registered in the Russian Federation and Ukraine. Among people who inject drugs in Eastern and South-Eastern Europe, HIV prevalence is particularly high, estimated at more than 22 per cent.

E. Oceania

1. Major developments

773. The illicit market for amphetamine-type stimulants in Oceania, particularly in Australia and New Zealand, is dominated by methamphetamine, with evidence suggesting a growing prevalence of abuse and an increase in purity and in the affordability and availability of the substance. The high volume of seizures in both countries reflects the situation, with record levels of methamphetamine seized in New Zealand. Methamphetamine seizures in other countries of the region, such as Fiji, indicate that they are used as trafficking transit points but may also indicate local abuse of the substance.

774. The *Drug Harm Index* has been developed in New Zealand to estimate the social costs to community and individuals arising from drug abuse, taking also into account the cost of health, education and law enforcement interventions. The second edition of the *New Zealand Drug Harm Index 2016* was published under the auspices of the Ministry of Health in July 2016. It was estimated that cannabinoids, followed by amphetamine-type stimulants, then opioids and sedatives, were responsible for the greatest proportion of social costs (including intervention costs) associated with drug abuse.

2. Regional cooperation

775. At its eighteenth annual conference, held in Tuvalu in June 2016, the Oceania Customs Organization adopted the Regional Information and Intelligence Sharing Framework and the Regional High-Level Understanding on Information and Intelligence Sharing. The conference endorsed the concept of a joint Pacific law enforcement conference, to be explored with the Pacific Islands Chiefs of Police, the Pacific Islands Forum secretariat and the Pacific Immigration Directors' Conference. Among other things, members of the Organization noted the

importance of potential threats to border security posed by transnational crime and "e-crime", and welcomed further discussions on the regional efforts to develop a common data model to enhance an integrated border approach.

776. The Forum Regional Security Committee of the Pacific Islands Forum met in Suva in June 2016 to discuss human security, threats resulting from natural disasters, and transnational organized crime. In May 2016, the Pacific Islands Forum secretariat, in partnership with the Government of New Zealand and UNODC, held a workshop with policy, law enforcement and legislative drafting experts from the countries of the region to revise the Forum's Model Provisions on Counter-Terrorism and Transnational Organized Crime from 2002. The outcome of the workshop was to be presented to the Forum's Working Group on Counter-Terrorism and Transnational Organized Crime at its meeting held in June 2016.

777. The Pacific Police Dog Programme, which facilitates in-country training of dog handlers from the Cook Islands, Samoa and Tonga, was expanded to include the detector dog project in Fiji, which became operational in 2016. The project is aimed at stemming the flow of drugs trafficked into Fiji and is a joint venture between the Fiji Revenue and Customs Authority, the Fiji Police Force, the New Zealand Customs Service and the New Zealand Police.

778. Cooperation between Australia, Fiji and New Zealand in addressing drug trafficking continues to be strengthened. A joint operation between the Fiji Revenue and Customs Authority, the Fiji Police Force, the New Zealand Customs Service and the Australian Federal Police in July 2015 resulted in a seizure of 80 kg of methamphetamine. In June 2016, the authorities of the three countries participated in the INTERPOL Operation Pangea IX, which targeted the online sale of counterfeit medicines.

3. National legislation, policy and action

779. Oceania remains the region of the world with the highest level of non-adherence to the international drug control treaties. Kiribati and Tuvalu have not adhered to any of the three international drug control conventions, while the Cook Islands, Nauru, Niue, Samoa and Vanuatu are not parties to the 1961 Convention or the 1971 Convention. Solomon Islands is not a party to the 1971 Convention or the 1988 Convention, and Palau and Papua New Guinea are also not yet party to the