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## REGIONAL HIGHLIGHTS

### AFRICA

**Africa not only a trafficking hub:** Africa continues to be one of the main drug trafficking transit regions: while the continent is a main transit region for drug trafficking, it is also increasingly becoming a consumer and a destination market for all types of drugs of abuse.

**Illicit cultivation, trafficking and abuse of cannabis:** cannabis herb is illicitly produced throughout the continent while the illicit production of cannabis resin remains limited to a few countries in North Africa. Cannabis remains the primary drug of abuse in Africa, and the drug for which most drug users seek treatment, with an estimated annual prevalence of cannabis use of 7.6 per cent (twice the global average of 3.8 per cent).

**Increasing heroin abuse:** heroin abuse is growing in some countries in the region, mainly in East Africa.

**Increased involvement of African nationals reported in drug trafficking incidents worldwide:** the growing involvement of African nationals has been particularly visible in heroin trafficking along the southern route; a route which goes through either the Islamic Republic of Iran or Pakistan and across the Indian Ocean, and has been gaining importance for the trafficking of opiates from Afghanistan. Additionally, West Africa has been increasingly affected by criminal operations that involve not only trafficking of cocaine from South America to Europe but also distribution for local abuse and illicit manufacture of synthetic drugs destined mainly for markets in Asia.

**High levels of opiate abuse:** according to the United Nations Office on Drugs and Crime (UNODC), 11 per cent of global opiate users live in Africa and more than half of these live in West and Central Africa. Opiates originating from Afghanistan are increasingly being trafficked to East and West Africa, either for local consumption or onward shipment.

**Limited availability of medicines:** access to and availability of narcotic drugs and psychotropic substances for medical and scientific purposes remain limited in Africa. The Board urges all Governments to fully implement the operational recommendations of the special session of the General Assembly on improving access to medicines containing controlled substances, while preventing their diversion and abuse, and the recommendations contained in the INCB 2015 Availability Report.

### AMERICAS

#### Central America and the Caribbean

**Leaked “Panama Papers” show extent of drug-related criminal activity:** the information contained in the so-called “Panama Papers” confirmed the extent of the increase in criminal activities related to drug trafficking in Central American countries, and led to law enforcement operations that exposed the money-laundering practices of drug trafficking networks.



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**Cocaine trafficking continued cause of concern:** in 2014, 87 per cent of the cocaine entering the United States was trafficked through Central America and Mexico, and about 13 per cent was trafficked through the Caribbean. Increased cultivation of coca bush in South America has been linked to a 32 per cent increase in cocaine seizures in Panama.

**Detrimental environmental impact of cocaine trafficking:** cocaine trafficking has been linked to deforestation in Central America, specifically in Guatemala, Honduras and Nicaragua. Deforestation is reported to have intensified in areas affected by drug trafficking.

**Consultations on cannabis legalization in the Caribbean:** in June 2016, the Regional Commission on Marijuana established by the secretariat of the Caribbean Community held its first regional consultation on cannabis to explore the implications of cannabis legalization in the region. In this context, the Board notes that the 1961 Convention on Narcotic Drugs limits the use of cannabis to medical and scientific purposes, as a fundamental principle which lies at the heart of the international drug control legal framework and which cannot be derogated from. The Board encourages States to adopt health-oriented drug policies in compliance with the conventions and to provide for non-punitive responses for minor drug-related offences committed by drug users, as an alternative to arrest and imprisonment, as foreseen by the three international drug control conventions.

**More broad data on drug abuse required:** reported levels of cannabis, cocaine and opioid (opiates and prescription opiates) abuse in Central America and the Caribbean are all below the regional average for the Americas. These are interesting patterns because countries in Central America and the Caribbean are confronted with considerable volumes of drugs that are trafficked through their territories, and, in the case of cannabis, being produced in the region. More comprehensive national household drug use surveys are needed to determine reliable estimates of the prevalence of drug abuse in the region.

## North America

**Overdose deaths on the rise:** in the United States of America, overdose deaths almost doubled between 2013 and 2014. The growing number of accidental overdose deaths caused by fentanyl-laced drugs represents a major drug-related challenge in Canada and the United States.

**Prescription opioid and heroin abuse a continued cause of concern:** according to the Centres for Disease Control and Prevention, the number of people reporting heroin use in the United States nearly tripled from 2007 to 2014. Of the more than 47,000 drug overdose deaths in the United States in 2014, opioids, including heroin and prescription painkillers such as oxycodone, killed more than 28,000 people.

**Cannabis remains most abused drug:** cannabis continues to be the most widely illicitly cultivated, produced, trafficked and consumed drug in the region.

**Use of cannabis for medical purposes:** In 2016, the states of Arkansas, Florida, North Dakota, Ohio and Pennsylvania authorized the use of cannabis for medical purposes.



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**Canada's medical cannabis legal framework declared unconstitutional; new regulations come into force:** the Federal Court of Canada declared Canada's Marijuana for Medical Purposes Regulations, to be unconstitutional. Under the new Access to Cannabis for Medical Purposes Regulations, those who have been authorized by their health-care practitioner to access cannabis for medical purposes will continue to have the option of purchasing quality-controlled cannabis from licensed producers, and will also be able to produce a limited amount of cannabis for their own medical purposes. The Supreme Court of Canada expanded the definition of "medical marijuana"; as a result, those who are authorized to obtain dried cannabis can choose to administer it via an oral or topical treatment and are not limited to dried herb consumed through smoking.

**Petitions to reschedule cannabis in the United States denied:** following a scientific and medical evaluation conducted by the United States Food and Drug Administration in consultation with the National Institute on Drug Abuse, the former announced on 11 August 2016 that cannabis did not meet the criteria for currently accepted medical use in treatment in the United States, that there was a lack of accepted safety for its use under medical supervision and that cannabis had a high potential for abuse. As a result, cannabis is still prohibited at the federal level as a substance in schedule I of the Controlled Substances Act.

**Legalization of cannabis for non-medical purposes:** the Government of Canada confirmed its intention to legalize and regulate the non-medical use of cannabis through new legislation to be introduced in 2017. Until then, under the Canadian Controlled Drugs and Substances legislation, growing, possessing, distributing and selling cannabis remains illegal. In the United States, on 8 November 2016, voters in California, Maine, Massachusetts and Nevada approved ballot measures that would legalize and regulate the non-medical use of cannabis. Recent data from the states that have legalized the use of cannabis for non-medical purposes show an increase in cannabis use.

**Second "drug injection site" approved in Canada:** in January 2016, Canada approved a second supervised "drug injection site" in the city of Vancouver. It is housed in the existing HIV/AIDS treatment clinic and is the first supervised "drug injection site" in North America integrated into an existing health-care centre. Additional applications for exemptions to operate "injection sites" have been received and are undergoing review by Health Canada.

**Increase in heroin and cocaine seizures in the United States:** between 2009 and 2014 the United States reported the largest cocaine seizures in North America, accounting for 90 per cent of all seizures in the region. Data of the National Seizure System showed an 80 per cent increase in heroin seizures in the past five years, seemingly reflecting the growing availability of heroin in the United States.

**New national strategy to increase access to controlled substances in Mexico:** the new strategy to increase access to controlled substances for pain treatment and palliative care is aimed at facilitating the dispensing, prescription and administration of pharmaceutical preparations containing opiates. In a report published by the Ministry of Health of Mexico, the range of different prescriptions greatly increased from June 2015 to January 2016. Following the introduction of an electronic platform, the number of registered prescribers also increased. This year's report encourages Governments to review and improve their action in this field.



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## South America

**Peace agreement reached:** a peace agreement between the Government of Colombia and the Revolutionary Armed Forces of Colombia is expected to have a positive effect on the drug control situation in the country.

**Legislative amendments adopted:** several of the countries in the region have adopted legislative amendments concerning drug policy; however their compliance with the international drug conventions remains to be determined.

**Illicit cultivation of coca bush, opium poppy and cannabis plant continues in South America:** the global area under coca bush cultivation increased in 2015 as a result of a sharp increase in Colombia. However, according to UNODC, the Plurinational State of Bolivia reduced the area devoted to illicit coca bush cultivation. The manufacture of cocaine occurs mainly in Bolivia (Plurinational State of), Colombia and Peru however clandestine laboratories for processing coca leaf derivatives were also found in other countries in South America. The region continues to account for the majority of global cocaine seizures.

**Continued seizures of internationally controlled precursors:** Governments in the region continued to report seizures of chemicals under international control; an increasing number of seizures of non-controlled precursor substances was also reported. The largest variety of precursor substances seized worldwide was reported in South America, owing to the extensive list of substances placed under national control by countries of the region.

**Rising levels of abuse of synthetic drugs:** concern over rising levels of abuse of synthetic drugs among young people in South America continued to grow in 2015. High rates of abuse of amphetamine-type stimulants among young people were reported in the region.

**Abuse and treatment:** cannabis remains the most widely used drug in the region; however, the rates of cocaine use among secondary school students were higher in South America than in the other parts of the Americas with major differences in the levels of use in the countries for which data was gathered. Drug treatment in South America mainly concerns the abuse of cocaine, which accounts for nearly half of all individuals enrolled in drug treatment programmes in the region. Additionally, the appearance of plant-based and non-controlled psychoactive substances on the drug market in South America raises concerns. Data from the most recent surveys show that young people are abusing such substances.

## ASIA

### West Asia

**Political instability and protracted armed conflicts hamper drug control efforts:** the continued armed conflicts in the region are restricting the drug control efforts of authorities, particularly within Iraq, the Syrian Arab Republic and Yemen. Large-scale migration flows as well as increased



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drug abuse and trafficking in the region contribute to the challenge, while broader developmental and criminal justice challenges, such as corruption, terrorism and political instability, continue to hinder progress.

**Counterfeit “captagon” tablets (containing amphetamine) continue to be widely available and used in the region:** official reports of large-scale seizures of fake “captagon” tablets in Lebanon and Turkey substantiate media reports in recent years of record volumes of “captagon” flooding the region, especially the Middle East and Gulf subregions. However, reliable information to confirm the source of the chemicals and the synthesizing processes used in manufacturing “captagon” remains scarce.

**Afghanistan illicit opium production once again on the rise:** last year’s significant decline in illicit opium poppy cultivation and opium production in the country has been reversed and figures for 2016 show an increase once again. The total area under illicit opium poppy cultivation in 2016 has increased by 10 per cent compared with 2015. Eradication efforts came to an almost complete halt and security conditions in the country worsened further. The Board is calling upon the international community and partner Governments to sustain their support of counter-narcotics efforts in Afghanistan in the face of these worrisome developments, emphasizing that drug control action is vital if sustainable development is to be achieved.

**Increased reports of methamphetamine production in Afghanistan:** indications of methamphetamine production, rather than trafficking into the country, have increased in 2016. Several raids of clandestine laboratories on Afghan territory showed the presence of precursor chemicals and equipment used in the illicit manufacture of methamphetamine. Although the scope remains unclear, it adds a third “problem substance” to the drug control challenges facing Afghanistan, next to the largest worldwide scale of illicit opium and second largest worldwide scale of illicit cannabis production already occurring in the country.

**Global opiate markets continue to be dominated by West Asian opiate supply:** all three major transregional opiate trade routes originate in West Asia, with Afghanistan being the world’s largest source of illicitly produced opium for more than a decade. In addition to the well-established Balkan route (towards Europe), the southern and northern routes (towards all regions of the world, except Latin America) are gaining in importance in trafficking opiates illicitly produced in Afghanistan.

**Fewer heroin precursors seized overall:** the steady decline over the years in seizures of acetic anhydride, the main precursor chemical associated with heroin manufacture, may be an indication of increased domestic (as opposed to international) diversion from licit trade, or of traffickers resorting to non-scheduled substances to replace key ingredients and evade national and international controls.

**Large-scale prescription drug abuse in the region, mainly tramadol:** tramadol, a synthetic opioid not under international control, has been reported as a substance of abuse by several countries in West Asia, including Armenia, Jordan, Lebanon, Oman, Qatar, Saudi Arabia, Turkey and Turkmenistan.



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**Most frequently used substances in West Asia:** cannabis, opioids and amphetamine-type stimulants were reported among the most frequently used substances in West Asian countries. Drug-related mortality was mostly attributed to opioid (mostly heroin) abuse. The drug abuse rate in Afghanistan was more than double the global drug abuse rate (12.6 per cent of the adult population, compared with just over 5 per cent globally).

## South Asia

**Opiates and amphetamine-type stimulants main substances of concern in the region:** South Asia continues to be particularly vulnerable to trafficking in opiates and heroin as well as cannabis, synthetic drugs and new psychoactive substances. In addition, the region continues to experience increases in the illicit manufacturing and trafficking of methamphetamine, the diversion of controlled substances from licit to illicit channels and the abuse of pharmaceutical preparations containing narcotic drugs and psychotropic substances.

**Increases in heroin trafficking:** the amount of heroin seized increased in Bangladesh, Nepal and Sri Lanka; there was also a slight increase in India.

**Trafficking in “yaba” (methamphetamine) tablets continues:** trafficking from Myanmar to Bangladesh has continued. In Bangladesh, “yaba” seizures tripled from 2014 to 2015; a record seizure of 2.8 million methamphetamine tablets was made in January 2016.

## East and South-East Asia

**Illicit opiate production and trafficking continue to be a major concern for the region:** illicit cultivation of opium poppy continues to increase within the region where the total area under illicit cultivation shows no sign of decline.

**Methamphetamine manufacturing, trafficking and misuse increase further:** an increasing number of source countries, more diversified trafficking routes and greater connectivity within the region continue to challenge supply and demand reduction efforts, heightening the need for effective joint-border collaboration. Abuse of methamphetamine is increasingly problematic and appropriate treatment is still lacking in most countries.

**Market for new psychoactive substances continues to expand:** there has been a recent trend in the region of mixing new psychoactive substances with amphetamine-type stimulants. This poses serious challenges to health-care providers and drug control authorities, and is fuelling major public health concern in the region.

**Extensive regional cooperation:** during the Fourth Association of Southeast Asian Nations (ASEAN) Ministerial Meeting on Drug Matters, it was decided to institutionalize the Meeting as a body under the ASEAN Political-Security Community. The ASEAN commitment to a comprehensive and balanced approach towards drug control, and support for the international drug control conventions were reaffirmed.



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## EUROPE

**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 Drug Addiction, 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. Faster changes in illicit drug markets observed in past years can be attributed, in part, to globalization and technological developments.

**Balkan route remains main heroin trafficking corridor:** 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. There are also increasing concerns about the southern route, along which heroin is trafficked by sea from the Islamic Republic of Iran and Pakistan, initially to the Arabian Peninsula and East Africa, and then onwards to other parts of Africa or to Europe. The container ports of Rotterdam (Netherlands) and Antwerp (Belgium) appear to remain major hubs for heroin and cocaine smuggled into the European Union.

**Increase of cocaine in Europe:** 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).

**High drug abuse among general population:** in the European Union, it is estimated that more than a quarter of those aged 15 to 64 have consumed illicit drugs at least once in their lives.

**Cannabis most commonly used drug in the European Union:** cannabis is the drug most frequently reported as the principal reason for first entry into drug treatment and 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). An estimated one per cent of those aged 15 to 64 in the European Union use cannabis daily or almost daily.

**Heroin most commonly abused opioid in the region:** in addition to heroin, a range of synthetic opioids such as methadone, buprenorphine and fentanyl have also been misused. In 2016, UNODC reported that opioid abuse remained a major cause of concern, in particular in Eastern and Southern Europe, with more than 70 per cent of all drug treatment centre patients receiving treatment for opiate use disorders.

**Europe manufacturing region for synthetic drugs:** for a number of years, amphetamine and “ecstasy” have been illicitly manufactured in Belgium and the Netherlands, and methamphetamine in countries in Central Europe, mostly in the Czech Republic. Recent evidence suggests a significant manufacturing capacity of methamphetamine also emerging in the Netherlands and some small-scale manufacturing in countries bordering the Czech Republic.

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



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**No slowdown in the emergence and availability of new psychoactive substances:** by May 2016, the European Union early warning system, which was established in 2005, had identified more than 560 new psychoactive substances; 100 new psychoactive substances were reported for the first time in 2015. The increased availability of those substances will cause associated health risks.

**Seizures of *alpha*-phenylacetonitrile decrease significantly:** seizures of *alpha*-phenylacetonitrile (APAAN), a substitute chemical that can be used in laboratories illicitly manufacturing amphetamine and methamphetamine, have decreased in the European Union since 2014, when the substance was brought under international control.

## OCEANIA

**Higher levels of abuse of amphetamines among indigenous communities:** in New Zealand, the prevalence of abuse of amphetamines was found to be higher among the Maori population than among the non-Maori population. In Australia the abuse of amphetamines in indigenous communities was estimated at 5 per cent, higher than the national average.

**Increase in drug seizures in Australia:** the amount of heroin seized at the Australian border increased by 168 per cent, from 2014 to 2015. There was also an increase in the amount of cocaine seized, and a record amount of 12.6 tons of amphetamine-type stimulants was seized in the country. Although the number of cannabis seizures reached a record high, the weight of cannabis seized at the border and within the country decreased; this was also the case for seizures of new psychoactive substances.

**Entry into force of Australian legislative framework for medical cannabis:** the Narcotic Drugs Amendment Act 2016 entered into force in Australia, providing a legislative framework that enables cannabis cultivation and permits access to cannabis for medical purposes.

**Record levels of methamphetamine seized in New Zealand:** in New Zealand, the quantity of methamphetamine seized more than tripled from 2014 to 2015. The number of people using methamphetamine in Australia doubled over a six year period; high levels of abuse and trafficking of the substance prompted the establishment of the National Ice Taskforce in April 2015. Seizures in other countries of the region indicate that they are used as trafficking transit points as well as being indicative of local abuse of the substance.

**High cannabis use in the region:** cannabis remains the most widely trafficked and abused drug throughout Oceania, with estimated annual prevalence levels at about 10 per cent, well above the global estimate of 3.8 per cent.

**Lack of data on drug abuse and treatment:** noting the lack of recent data from countries in the region other than Australia and New Zealand, the Board calls on Governments to step up their efforts to increase the collection of data on drug abuse and treatment. The Board also invites the international community and regional and bilateral partners to provide support to those countries to that end.

**Efforts made to gather and share information:** in 2016, the customs authorities of Fiji and Vanuatu became the only two customs administrations in the Pacific region, among only 20 other countries worldwide, to have implemented the World Customs Organization National Customs Enforcement Network system.