

## B. Americas

### Central America and the Caribbean

#### 1. Major developments

411. Central America and the Caribbean continue to be used by transnational organized criminal organizations for the trans-shipment of drugs from South America to the main drug markets in the United States and Europe. Cocaine and cannabis are the drugs most frequently trafficked in large quantities through the region, and the most abused as well. Similar trends have been reported with regard to cannabis herb and cocaine seizures in some countries, which may reflect the utilization of cannabis herb as partial payment for cocaine traffickers along the trafficking chain.

412. Central America accounted for 11 per cent of the cocaine seized worldwide in 2016, most of which was seized in Panama.

413. Overall, the quantities of cocaine seized in Central America increased in 2017 compared with 2016 and 2015. This is likely to be related to the sharp increases in the levels of illicit coca bush cultivation and cocaine production in Colombia, and the demand for cocaine in Europe and North America.

#### 2. Regional cooperation

414. In August 2018, the Regional Commission on Marijuana of CARICOM issued a report entitled *Waiting to Exhale: Safeguarding our Future through Responsible Social-Legal Policy on Marijuana*. The Commission was established in 2014 by Heads of Government in the region in response to their concerns about rates of incarceration of young people for cannabis use and growing public

interest in the use of cannabis for medicinal purposes. The report contains reference to experiences with the establishment of regulated regimes for the medical and non-medical use of cannabis in neighbouring countries and states of the United States. In the report, the Commission recommended that the end goal of CARICOM should be to establish a regulated framework for cannabis, similar to that for alcohol and tobacco. It also recommended that CARICOM member States should not consider themselves bound by the international drug control conventions in making decisions on the way forward regarding cannabis legislation reform and that CARICOM member States should work together to formulate a formal, regional position on the need to amend the existing United Nations treaties governing the use and production of cannabis. **The Board reiterates that the 1961 Convention limits the use of cannabis exclusively to medical and scientific purposes, as a fundamental principle that lies at the heart of the international drug control legal framework and that cannot be derogated from. States parties to the Convention have the obligation to carry out the provisions of the Convention within their own territory. The Board encourages States to adopt proportionate responses for minor drug-related offences committed by drug users, including, where appropriate, alternatives to arrest and incarceration, and points out that such responses are provided for in the international drug control conventions.**

415. In December 2017, 24 officials from Guatemala and Honduras participated in a seminar organized by the Board under its INCB Learning project. The seminar took place in Guatemala City and was hosted by the Ministry of Foreign Affairs of Guatemala. Representatives of WHO and the UNODC-WCO Container Control Programme also contributed to the meeting. INCB Learning is the Board's global initiative to strengthen Governments' capacity in the regulatory control and monitoring of the licit trade in narcotic drugs, psychotropic substances and precursor chemicals (see section F of chapter II above for more details).

416. Countries in Central America and the Caribbean have been collaborating in countering organized crime and drug trafficking and in promoting an effective drug demand reduction approach, with the support of UNODC, through a number of strategic initiatives. Such initiatives include the Container Control Programme, AIRCOP, the Network of Prosecutors against Organized Crime, the UNODC project on strengthening criminal investigation and criminal justice cooperation along the cocaine route in Latin America, the Caribbean and West Africa, and the Office's drug demand reduction-oriented strong families and parenting skills programmes.

417. In December 2017, the secretariat of the Central American Integration System and the European Union signed an agreement in support of the region's efforts to combat transnational organized crime. The European Union has pledged 20 million euros to the project, entitled "Cooperation on criminal investigation in Central America to fight transnational crime and drug trafficking" (ICRIME). The initiative will be part of the broader framework of the Central American Security Strategy and will also receive contributions from Spain and the Central American Integration System secretariat.

418. In January and February 2018, the Financial Action Task Force published mutual evaluation reports for Panama and Barbados, respectively. The reports include analysis and recommendations related to the countries' progress in implementing measures to combat money-laundering, terrorist financing and other related threats, including drug trafficking. In July 2018, Panama hosted the thirty-seventh meeting of the Financial Action Task Force of Latin America.

### 3. National legislation, policy and action

419. In Costa Rica, an Organized Crime Section was established by the Judicial Investigative Police in 2017. Furthermore, the National Forensics Laboratory has collaborated with the United States to strengthen its investigatory capacity, and in 2017 received accreditation under the International Standards Organization standards 17020 and 17025 for chemical analysis, toxicology and biochemistry.

420. Honduras created the Sanitary Regulation Agency through Executive Decree PMC-032-2017, published in the official gazette in May 2017. The Agency is technically, financially and administratively independent from the Secretary of Health and is hosted at the Sectorial Cabinet for Development and Social Inclusion. The creation of the Agency is aimed at decentralizing and strengthening sanitary regulation activities. It will support the monitoring and control of movements of scheduled substances in the country, and act as the new competent national authority in Honduras for the international drug control conventions.

421. In 2017, the Ministry of National Security of Trinidad and Tobago established the Organized Crime Intelligence Unit within the Trinidad and Tobago Police Service. The Unit absorbed the Service's Organized Crime, Narcotics and Firearms Bureau and the Criminal Gang and Intelligence Unit. The objective of the reform is to

improve information-sharing and operational collaboration between national institutions.

## 4. Cultivation, production, manufacture and trafficking

### (a) Narcotic drugs

422. Sharing a border with Colombia and being located on the route used to traffic cannabis, cocaine and “crack” cocaine northwards from the Andean region to North America and Europe, Panama has been seizing the largest amounts of cocaine in the region for several years. Panama reported to INCB that, in 2017, 66.9 tons of cocaine had been seized, an increase of 12.7 per cent over the amount reported for 2016 (59.3 tons), and 35.9 per cent more than that reported for 2015 (49.2 tons). That increase is likely to be related to the sharp increases in the levels of illicit coca cultivation and cocaine production in Colombia in 2016 and 2017 that have led to increased amounts of cocaine being trafficked through most countries in Central America and the Caribbean.

423. A similar trend was observed in Costa Rica, which is also located on the northwards trafficking route. In 2017, the country reported seizing the second-highest amount of cocaine in the region, which was about half of the amount seized in neighbouring Panama. Cocaine originating in Colombia and destined for Mexico and the United States and Europe reaches Costa Rica through Panama. Costa Rica reported seizing 20.1 per cent more cocaine in 2017 (27.9 tons in total) than in 2016 (23.2 tons), and 63.9 per cent more than in 2015 (17 tons).

424. In Guatemala, the number of opium poppy and cannabis plants eradicated increased in 2017. The Government of Guatemala eradicated 417,004,278 opium poppy plants, most of it in the Department of San Marcos, and 6,033,345 cannabis plants, mainly in the Departments of Totonicapan and Petén. Cocaine seizures also continued to increase in the country, reaching 13.6 tons in 2017, a 6.5 per cent increase over 2016 (12.8 tons) and 121 per cent more than in 2015 (6.2 tons). The organized criminal groups involved in drug trafficking are composed of families that are mostly of Guatemalan origin. Nationals of Colombia, Ecuador and Mexico are also involved.

425. Among countries in Central America and the Caribbean reporting seizure data to the Board and UNODC, the Dominican Republic and Guatemala reported seizing the highest amounts of heroin, with similar trends over the period 2016–2018. Guatemala reported seizing

83.40 kg of heroin in 2015, 143.43 kg in 2016 and 47.94 kg in 2017, while the Dominican Republic seized 51.20 kg in 2015, 68.49 kg in 2016 and 27.57 kg in 2017. In 2017, the Dominican Republic reported dismantling a clandestine fentanyl laboratory in the city of Santiago.

426. In Honduras, 2017 marked the reversal of a declining trend in the amount of cocaine seized, which reached a low of 735 kg in 2016, but increased to 2.1 tons the following year, slightly above the 2015 level, but below the level in 2014, when 11.7 tons were seized. In a similar trend, cannabis herb seizures also increased sharply in 2017, to 5 tons, much higher than the low point in 2016 (155 kg), but lower than the total seized in 2014 (29.8 tons). On the other hand, seizures of “crack” cocaine have been on the rise since 2015.

427. Similar to most of its neighbours in Central America, Nicaragua reported to INCB that it had seized higher levels of cocaine in 2017 (5.5 tons) than in 2016 (4.5 tons) and 2015 (4.5 tons). Seizures of cannabis herb, however, were the lowest in 2017 since 2013, at 1.7 tons.

428. In September 2018, the United Nations Development Programme published a Human Development Report for El Salvador entitled *I'm young! Now what? (¿Soy joven! ¿Y ahora qué?)*. The report highlights the challenges faced by those aged between 15 and 29 years in the country in terms of education, the labour market, public participation and social integration. The impact of violence, which is considered the main challenge for the country's society, on young people is also analysed, including in terms of their resilience and the cultural stigma they face owing to the association between young people and violent gangs, which affects their employment and education opportunities. The report presents the effects of the presence of drugs in young people's communities, schools and families. Of the main threats to young people in their communities, mugging (42.6 per cent) and the sale of and trafficking in drugs (39.5 per cent) were mentioned the most often by young people surveyed for the report. The report identifies five priority groups that should receive special support through public policies: young people outside of the education system and at risk of dropping out; young people transitioning into the labour market; young women not in education who provide care in their families; young people in rural areas; and young people at risk.

429. According to the Attorney General's office of El Salvador, between January and September 2018, the country recorded 1,360 deaths related to youth gang violence and 2,667 people were imprisoned for drug trafficking.

430. Unlike its neighbouring countries in Central America, Belize usually reports seizing larger amounts of cannabis than cocaine, a trend also observed in some islands of the Caribbean, including Saint Lucia. In 2018, Belize reported to INCB that 64.5 kg of cocaine had been seized in 2017, which was 347 per cent higher than the amount seized in 2016 (14.4 kg). The amount of cannabis seized in 2017 (958.2 kg) in the country was 6.2 per cent higher than that seized in 2016 (901.9 kg).

431. Colombia and Jamaica were the countries most frequently mentioned as a source of the cannabis herb seized by countries in Central America and the Caribbean. Other sources reported by countries in the region included Bolivia (Plurinational State of), Costa Rica, El Salvador, Guatemala and Peru.

432. In a working paper submitted to the third United Nations Conference to Review Progress Made in the Implementation of the Programme of Action to Prevent, Combat and Eradicate the Illicit Trade in Small Arms and Light Weapons in All Its Aspects, in June 2018, the impact of the proliferation of small arms in Jamaica was highlighted. Drugs are smuggled from Jamaica to Canada, the United Kingdom and the United States, and arms are smuggled into the country, mostly from Haiti and the United States. In the paper, it was estimated that approximately 274 active gangs, many transnational in scope, are responsible for about 80 per cent of major crimes in Jamaica. According to statistics from the Jamaica Constabulary Force, in 2017, 81.4 per cent of murders were committed using a gun, and the majority of the perpetrators and victims of violent crimes were young men.

433. Trafficking in firearms is also of increasing concern in the Eastern Caribbean region, namely Antigua and Barbuda, Barbados, Dominica, Grenada, Saint Kitts and Nevis, Saint Lucia, and Saint Vincent and the Grenadines. Guns are reportedly entering countries in the subregion from the United States, Trinidad and Tobago, and Venezuela (Bolivarian Republic of). In 2017, homicide rates and drug-related violent and non-violent crimes increased; most homicides are believed to be the outcome of disputes for territory between organized criminal organizations involved in drug trafficking.

## (b) Psychotropic substances

434. While Central America and the Caribbean is less affected by the manufacture of and trafficking in amphetamine-type stimulants than other regions, in the past five years, some countries have regularly reported seizing such substances, as well as LSD. Countries of

origin mentioned by reporting countries include Colombia, the Dominican Republic, Guatemala and the Netherlands, as well as Curaçao.

435. In 2017, authorities in the Dominican Republic dismantled a clandestine laboratory producing “ecstasy” and ketamine in the city of Puerto Plata.

436. Also in 2017, Costa Rica reported the seizure of a total of 53,991 “doses” of “ecstasy”. That was the largest amount of “ecstasy” reported seized by the country during the period 2010–2017.

## (c) Precursors

437. 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 2018 on the implementation of article 12 of the 1988 Convention.

## (d) Substances not under international control

438. In August 2017, the Sanitary Regulation Agency of Honduras published an updated list of substances under national control. The list includes, for the first time, 11 substances not under international control, including tramadol.

439. Panama reported seizures of ketamine in both 2017 and 2016.

## 5. Abuse and treatment

440. In June 2017, the Dominican Republic started an opioid substitution treatment programme in partnership with UNODC. As of September 2018, 45 heroin users were benefiting from the programme.

441. In August 2017, the Government of the Bahamas published the results of its national household drug prevalence survey. The survey contained data from individuals aged between 12 and 65 on their abuse of licit and controlled substances. The results showed a lifetime prevalence of cannabis herb use of 20 per cent for men and 7 per cent for women, compared with 14 per cent and 13 per cent, respectively, in 1991. The reported average age of first cannabis herb use was 17. Lifetime prevalence of cocaine use was 2 per cent for men and 0.4 per cent for

women, down from 6 per cent and 1 per cent, respectively, in 1991. The average age of first use of cocaine was 25 years.

442. According to the 2017 annual report of the National Drugs Observatory of the Executive Secretariat of the Commission against Addiction and Illicit Drug Trafficking (SECCATID) of Guatemala, the main drug for which 24.2 per cent of people sought treatment in 2017 was cannabis herb. Alcohol was the main substance for 29.3 per cent of those seeking treatment, inhalants for 2.5 per cent, cocaine and “crack” cocaine for 1.6 per cent each, and psychotropic substances for 0.96 per cent.

443. According to the *World Drug Report 2018*,<sup>73</sup> the highest annual prevalence of drug use in Central America and in the Caribbean in 2016 was for cannabis, with 2.8 per cent and 2.2 per cent, respectively. After cannabis, the highest prevalence in Central America was cocaine (0.7 per cent), amphetamines and prescription stimulants (0.2 per cent) and “ecstasy” (0.1 per cent). In the Caribbean, cannabis was followed by amphetamines and prescription stimulants (0.9 per cent), cocaine (0.6 per cent) and “ecstasy” (0.1 per cent).

## North America

### 1. Major developments

444. Legislation and policy pertaining to cannabis continued to shift throughout North America in 2018. In Canada, Bill C-45, on providing legal access to cannabis and on controlling and regulating its production, distribution, sale and possession, came into effect in October 2018. Under the law, and subject to provincial or territorial restrictions, persons aged 18 or older are legally allowed to possess up to 30 g of cannabis, buy dried or fresh cannabis from a provincially or federally licensed retailer, grow up to four cannabis plants per residence for personal use and make cannabis products.

445. Also in October 2018, the Supreme Court of Mexico ruled that a prohibition of the use of cannabis for non-medical purposes was unconstitutional on the basis that adults had a “fundamental right to the free

development of the personality” without interference from the State.

446. In the United States, the States of California and Vermont legalized the use of cannabis for non-medical purposes, and legislative developments also took place in the States of Maine and Massachusetts in that regard. In November 2018, during the United States congressional elections, voters in the States of Missouri and Utah approved ballot initiatives for the establishment of medical cannabis programmes. A proposal to legalize the possession and personal cultivation of cannabis by persons aged 21 or older and to license the commercial production and retail sale of the drug was adopted by voters in Michigan. In North Dakota, a ballot proposal aimed at legalizing the non-medical use of cannabis was rejected by the state’s electorate.

447. In December 2017, the Ministry of Health of Mexico issued guidelines on the medical use of cannabis, whereby preparations containing a concentration of less than 1 per cent THC are considered as having broad therapeutic uses and as presenting a limited risk of abuse and dependence and of public health problems.

448. Given the need to coordinate, integrate and follow up on the objectives, strategies and lines of action to address the world drug problem, the Criminal Investigation Agency of Mexico proposed the creation of a national office on drug policies. The office would be attached to the Attorney General’s Office, which is in charge of coordinating drug policy in the country.

449. Meanwhile, the opioid overdose epidemic continued to worsen in the United States, with provisional data showing that over 70,000 drug overdose deaths had been reported in the country in 2017. In 2016, 63,632 people died from drug overdoses, a 21.4 per cent increase compared with 2015. According to the Centers for Disease Control and Prevention, opioids accounted for 66.4 per cent (42,249) of those deaths, with increases across all age groups, racial and ethnic groups and urbanization levels and in many states. The largest increases occurred among deaths involving cocaine (52.4 per cent) and synthetic opioids (100 per cent), likely driven by illicitly manufactured fentanyl and its analogues.

450. Overdose deaths involving opioids contributed to a loss of 0.21 years in life expectancy for the entire population of the United States between 2000 and 2015. In addition, life expectancy declined from 78.7 in 2015 to 78.6 in 2016, owing in part to the increased number of deaths among younger people and deaths from unintentional injuries, including drug overdose. Similarly, during

<sup>73</sup>*Global Overview of Drug Demand and Supply Latest Trends, Cross-Cutting Issues* (United Nations publication, Sales No. E.18.XI.9 (Booklet 2)).

the period 2014–2016, life expectancy at birth in British Columbia, Canada, declined by a total of 0.38 years: drug overdose contributed a loss of 0.12 years to that decline.

451. In 2017, homicide rates in Mexico increased markedly. According to the National Institute of Statistics and Geography of Mexico, the average number of homicides between 2012 and 2016 was about 22,000 per year; in 2017, however, over 31,000 deaths were attributed to homicide in the country. The states with the highest number of homicides were Baja California, Chihuahua, Guanajuato, Guerrero and the State of Mexico. The highest rates of violence were also reported in those states and are attributed partly to the presence and operations of criminal organizations involved in drug production or trafficking or other drug-related activities.

## 2. Regional cooperation

452. Effective cooperation in law enforcement matters and in combating illicit drug manufacture and trafficking continued to be promoted through various regional mechanisms. In December 2017, representatives from Canada, Mexico and the United States met in Mexico City for the second meeting of the North American Drug Dialogue. Delegates from the three countries reviewed the progress made since the previous meeting in October 2016 on opioid policies and actions affecting the region. They also discussed the increase in synthetic drugs, diversion of chemical precursors from licit to illicit use and ongoing activities to reduce the demand for drugs and reaffirmed their commitment to achieving effective solutions to the challenges posed by the production and consumption of and trafficking in drugs in North America. To further broaden cooperation, in 2017, Mexico and the United States held two cabinet-level meetings of the Strategic Dialogue on Disrupting Transnational Criminal Organizations.

453. Regional cooperation between the three countries of the region includes initiatives and joint operations in the areas of law enforcement, intelligence-sharing and border control, as well as land and maritime activities.

## 3. National legislation, policy and action

454. In the United States, the 2018 Consolidated Appropriations Act, which came into force in March 2018, provided nearly \$4 billion for the fiscal year 2018 to address the opioid crisis, including through funding for drug courts, treatment for prisoners, monitoring of

prescription drugs and scheduled chemical products, the provision of resources for law enforcement agencies in states with high rates of primary treatment admissions for the use of heroin and other opioids, overdose prevention programmes and various research activities.

455. Also in March 2018, the President of the United States launched an initiative entitled “Stop opioid abuse and reduce drug supply and demand”. One of the key pillars of the initiative is aimed at reducing drug demand through education, increased awareness and preventing over-prescription, supporting research and implementing a safer prescribing plan. The initiative is to focus on combating the flow of illegal drugs into the country and illicit online sales of opioids, securing borders and detecting high-risk shipments, and strengthening criminal penalties for trafficking in opioids. Furthermore, under the initiative, emphasis is placed on expanding access to overdose-reversing drugs, such as naloxone, evidence-based treatment and addiction recovery services.

456. The United States Department of Justice announced a series of measures in January 2018, including the establishment of a joint criminal opioid darknet enforcement team as a Federal Bureau of Investigation-led initiative aimed at targeting drug trafficking, in particular fentanyl and other opioids, on the darknet. The team is to coordinate efforts across the Bureau’s offices around the world, bringing together Drug Enforcement Administration drug trafficking task forces and other assets to counter online drug trafficking. Also in January 2018, the Attorney General of the United States announced a 45-day Drug Enforcement Administration surge to focus on pharmacies and prescribers dispensing unusual or disproportionate amounts of drugs and to investigate and prosecute drug traffickers. One month later, the Department of Justice Prescription Interdiction and Litigation Task Force was formed to tackle the prescription opioid crisis at various levels of the distribution system. At the manufacturer level, the Task Force is to use all criminal and civil remedies available under federal law to hold opioid manufacturers accountable for unlawful practices. The Task Force is also to build on and strengthen existing Department of Justice initiatives to ensure that opioid manufacturers market their products truthfully and in accordance with the rules of the Food and Drug Administration.

457. In addition, a number of state attorneys general initiated legal action against manufacturers and distributors of medicinal opioids for fuelling the opioid epidemic and launching marketing campaigns with deceptive content regarding the effectiveness and low risk of addiction of their medicinal products containing opioids. Relief

sought in those lawsuits by the various states included damages, restitution, injunctive relief and civil penalties. In response, one company, Purdue Pharma, undertook a large-scale public relations campaign, involving full-page newspaper advertisements, expressing its concern about the overdose death epidemic that its products had contributed to.

458. In February 2018, the Drug Enforcement Administration placed all fentanyl analogues into schedule I of the Controlled Substance Act on a temporary basis (until February 2020), with the possibility of a one-year extension.

459. In addition, the Drug Enforcement Administration issued a final rule, effective as of 15 August 2018, on regulations to strengthen the process to prevent the diversion of controlled substances and making other improvements to the quota management regulatory system for the production, manufacturing and procurement of controlled substances in schedules I and II. If the Administration believes that a particular opioid or a particular company's opioids are being diverted for misuse, it is allowed to reduce the amount that can be produced in a given year. Those revised limits are to encourage vigilance on the part of opioid manufacturers and help the Administration respond to the changing drug threat environment, while ensuring the availability of those substances for medical, scientific, research and industrial needs.

460. In October 2018, the President of the United States signed the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act, or the SUPPORT for Patients and Communities Act. Pursuant to the Act, the Department of Health and Human Services will oversee a grant programme to expand the use of "comprehensive recovery centres", which provide job training, mental health services and housing alongside addiction treatment. In addition, the Act is aimed at improving coordination between Customs and Border Protection, the United States Postal Service and other entities to stop illicit shipments of drugs from entering the country. The Act also fast-tracks research projects undertaken by the National Institutes of Health related to the use of non-addictive drugs for the treatment of pain. Finally, the Act expands Medicare coverage for opioid treatment and increases screening for opioid use disorder. Under the Act, a state Medicaid programme would be required to suspend, rather than terminate, a minor's medical coverage upon incarceration.

461. According to government figures released in September 2018, there were nearly 4,000 apparent

opioid-related deaths in 2017 in Canada, corresponding to an increase of 33 per cent compared with the number in 2016 (3,005). From January to March 2018, there were at least 1,000 apparent opioid-related deaths, 94 per cent of which were accidental (unintentional); 73 per cent of those accidental deaths involved fentanyl or fentanyl analogues. British Columbia remained the province hardest hit by the opioid crisis, with 1,399 deaths in 2017, an increase from the 974 recorded in 2016.

462. In response to the opioid crisis, the Minister of Health of Canada announced a series of measures to address the pharmaceutical industry's opioid marketing practices, including severely restricting most forms of prescription opioid marketing. Until new regulations are formally in place, the Minister called on opioid manufacturers and distributors to immediately cease marketing activities associated with opioids in Canada, on a voluntary basis. The Minister also announced the creation of a dedicated marketing compliance and enforcement team within Health Canada, supported by approximately \$4 million in operational resources over five years. The team is to proactively monitor opioid marketing to enforce rules around improper advertising and to take action, including recommending criminal charges where appropriate. The Government has also been exploring the development of new enforcement tools, including administrative fines that could be levied rapidly in the case of less serious violations. At the same time, legal action against pharmaceutical companies manufacturing opioids has been launched by some provinces in Canada.

463. In November 2017, the National Commission against Addictions (CONADIC) of Mexico announced that it would begin research on the consumption of new psychoactive substances. A first workshop was held to identify strategies to strengthen the identification of the profiles and chemical composition of narcotics and new psychoactive substances, in order to implement an early warning system in the country. Furthermore, in June 2018, CONADIC signed an agreement to collaborate with the National Polytechnic Institute, as part of prevention efforts targeted at young people.

464. Under the Cannabis Act, which came into effect in Canada in October 2018, and subject to provincial or territorial restrictions, persons aged 18 or older are legally allowed to possess and share with other adults up to 30 g of cannabis, buy dried or fresh cannabis and cannabis oil from a provincially or federally licensed retailer, grow up to four cannabis plants per residence for personal use and make cannabis products, such as foods and drinks, at home. The federal Government is responsible for establishing the requirements for producers and industry-wide

rules and standards. The provinces and territories are responsible for developing, implementing, maintaining and enforcing systems to oversee distribution and sale. They are also able to add their own safety measures, such as increasing the minimum age, lowering the personal possession limit or placing restrictions on where adults can consume cannabis. The Cannabis Act further foresees several measures aimed at preventing young people from accessing cannabis, including restrictions on packaging or labelling, on promoting cannabis and on selling it through self-service displays or vending machines. The Act creates two new criminal offences for giving or selling cannabis to young people and for using a youth to commit a cannabis-related offence; both carry maximum penalties of 14 years in prison. On 21 June 2018, Bill C-46, which amended provisions of the Criminal Code dealing with offences and procedures related to drug-impaired driving, received royal assent.

465. A number of companies have been investing in research on the production of cannabis-infused non-alcoholic beverages and beer in Canada. While there seem to be a lack of scientific studies on the effects of such beverages on health, it is expected that these products will become available in the country once the relevant regulations take effect.

466. Following the adoption of the Cannabis Act, the Government of Canada approved the provision of approximately \$700,000 over three years to the Centre for Addiction and Mental Health to study drug-impaired driving. The study is to explore how increased levels of THC in blood and oral fluids could impact a driver, including his or her ability to anticipate hazards; levels of risk-taking behaviour; reaction times; position and speed on the roads; and differences that may exist between drivers, depending on age, gender, THC levels and driving impairment. The study is to be completed by June 2020.

467. Health Canada announced an investment of approximately \$170,000 for three organizations – the Centre for Addiction and Mental Health, the University of Western Ontario and Health Nexus – to support front-line workers in informing the public about health and safety-related issues pertaining to cannabis. Those organizations are to develop public education tools and resources for public health professionals, education sector stakeholders (such as educators, school counsellors, school and school board administrators) and community service providers. In the federal budget for 2018, approximately \$48 million were committed over five years to support community-based and indigenous organizations in educating their communities about the risks associated with cannabis use. That was in addition to a previously

announced investment of \$35 million over five years to support public education, awareness and monitoring activities.

468. Following the amendment to its General Health Law in June 2017, by which Mexico legalized the use of cannabinoids for medical purposes, the Ministry of Health was tasked with designing and implementing public policies regulating the medicinal use of cannabis and research and national production. In December 2017, the Government announced guidelines permitting the import of pharmacological derivatives of cannabis, oils, pills and foods with less than 1 per cent THC, with higher potencies requiring special government approval for individual patients.

469. In January 2018, the Attorney General of the United States issued a memorandum to all district-level United States Attorneys on the enforcement of cannabis-related legislation. The memorandum stated that previous nationwide guidance on the issue had been rescinded, and the Attorneys were instructed to use previously established principles that governed all federal prosecutions. When deciding which cases to prosecute, the seriousness of the crime, the deterrent effect of criminal prosecution and the cumulative impact of particular crimes on the community were to be taken into account. Also in the memorandum, the Attorney General recalled federal law and Congress' determination that cannabis was a dangerous drug and that related activities were serious crimes.

470. California became the eighth state in the United States (after Alaska, Colorado, Maine, Massachusetts, Nevada, Oregon and Washington)<sup>74</sup> to legalize and regulate the sale of cannabis for non-medical purposes. According to the regulatory scheme established in California, adults over the age of 21 may possess up to 28 g of cannabis and can grow up to six plants at home. Cannabis may also be sold in retail outlets licensed by the California Bureau of Cannabis Control. As at 1 July 2018, cannabis goods must meet a number of statutory and regulatory requirements, including as regards laboratory testing, packaging and labelling, established by the Bureau. According to the California Department of Tax and Fee Administration report of 11 May 2018, the tax revenue from the cannabis industry in the first quarter of 2018 totalled \$60.9 million, which included state cultivation, excise and sales taxes. It did not include local tax revenue collected by cities or counties.

<sup>74</sup>The use of cannabis for non-medical purposes has been legalized in the District of Columbia, but commercial sales of cannabis are not regulated and remain illegal.



471. Vermont became the first state to legalize the use of cannabis for non-medical purposes through an act of the state legislature, without the issues first being approved by popular vote. Since July 2018, persons aged 21 and older are allowed to possess up to 1 ounce of cannabis (28.3 g) and two mature and four immature plants. However, the legislation does not create a framework for the production, distribution and sale of the drug. The Governor's Marijuana Advisory Commission was directed to prepare a study on the implementation of a legal market in which cannabis is taxed and regulated, which is to be presented in December 2018.

472. In May 2018, the Legislature of the State of Maine overrode the Governor's veto of April 2018 on the Act to Implement a Regulatory Structure for Adult-Use Marijuana. The Act facilitates the development and administration of a regulated market in Maine and the regulation of personal use and home cultivation for non-medical purposes. While possession for personal use of 2.5 ounces (71 g) of cannabis and growing three mature plants became legal in January 2017 in Maine, there was a moratorium in effect on the implementation of parts of the state law related to retail sales and taxation.

473. Following a vote in November 2016 to legalize the non-medical use of cannabis, the State of Massachusetts established the Cannabis Control Commission, mandated to draft related regulations. The approved Adult-Use Cannabis Regulations entered into force in March 2018. The final regulations include nine licence categories for cannabis establishments: cultivator, craft marijuana cooperative, microbusiness, product manufacturer, independent testing laboratory, storefront retailer, third-party transporter, existing licensee transporter, and research facility.

474. In February 2018, the New Hampshire House of Representatives voted in favour of Bill 656, on legalizing and regulating the use of cannabis for non-medical purposes; however, the Bill was referred for interim study on the potential impact of the legislation in the State.

475. **The Board wishes to reiterate that article 4 (c) of the 1961 Convention restricts the use of controlled narcotic drugs to medical and scientific purposes and that measures providing for non-medical use are in contravention of that Convention.**

476. Statistics Canada conducted a survey of the country's licensed cannabis producers under the Access to Cannabis for Medical Purposes Regulations in the fourth quarter of 2017 and in early 2018. Revenue from the sale of cannabis products was approximately \$190 million in

2016 and expenses were approximately \$230 million. The 55 producers licensed at the time of the study reported that 8.7 ha of cultivation area were in active use in 2016 and about 10 times that amount (85.7 ha) were available for future production. Those producers were intending to invest approximately \$600 million in new structures, land, equipment and inventories in 2017, roughly doubling their stock of capital compared with the end of 2016. As of July 2018, 114 producers had been licensed by Health Canada to produce and sell dried cannabis, fresh cannabis and cannabis oil to the public or starting materials to eligible persons.

477. According to Statistics Canada, cannabis prices remained unchanged in the first two quarters of 2018. The average price in the second quarter was \$5.18 per gram, down slightly from the first quarter (\$5.21 per gram). In 2018, the average price for cannabis was \$5.20 per gram, down 25 per cent from 2012, when it was \$6.98 per gram. The highest prices for cannabis in the first six months of 2018 were in the three territories (Northwest Territories, Yukon and Nunavut) and in Ontario.

478. On 25 June 2018, the Food and Drug Administration of the United States approved a CBD oral solution for the treatment of seizures associated with two rare and severe forms of epilepsy, Lennox-Gastaut and Dravet syndromes, in patients aged 2 years and older. This is the first drug approved by the Administration that contains a purified drug substance derived from cannabis.

## 4. Cultivation, production, manufacture and trafficking

### (a) Narcotic drugs

479. In the fiscal year 2017/18, the Canadian Border Services Agency seized a total of almost 500 kg of cannabis, 3 tons of cocaine, 190 kg of heroin and 15 kg of fentanyl. During the same period, the United States Customs and Border Control agency seized more than 970 tons of narcotics, including over 680 kg of fentanyl.

480. In 2017, Mexico reported seizures of 400 tons of cannabis herb, 34,600 cannabis plants, 321 kg of heroin and almost 12 tons of cocaine. Seizures of cocaine and cannabis represented a decrease of 8 per cent and 56 per cent, respectively, compared with the quantities seized in 2016.

481. In Mexico, 28,830 ha of opium poppy were eradicated in 2017, an increase of 28 per cent over 2016

(22,437 ha). With regard to cannabis, 4,193.34 ha were eradicated in 2017, which was 23 per cent less than in 2016 (5,477 ha). The United States reported the eradication of 4,940,569 cannabis plants at 5,513 sites in 2016. While the United States continued to report the largest quantity of cannabis herb seized worldwide in 2016, followed by Mexico, seizures were at their lowest level since 2000 and 1995, respectively.

### (b) Psychotropic substances

482. Methamphetamine is reportedly manufactured in Mexico in clandestine laboratories, with chemical precursors trafficked mostly by sea. The Government of Mexico reported the discovery of 92 such laboratories and the seizure of nearly 1.2 kg of amphetamine and over 10 tons of methamphetamine in 2017. In August 2018, the Secretariat of the Navy (SEMAR) dismantled a number of clandestine laboratories and underground warehouses in various parts of Mexico, having seized methamphetamine and precursor chemicals weighing approximately 76 tons.

483. In 2016, over 87 tons of methamphetamine were seized in North America overall. According to the *World Drug Report 2018*, availability of methamphetamine in the region was reported to have increased between 2013 and 2016; in 2016, the drug was reported to be the second greatest drug threat in the United States after heroin.<sup>75</sup>

### (c) Precursors

484. Reports of seizures of precursors from countries in the region came mainly from Mexico. Canada and the United States reported seizures of low amounts, the majority involving substances listed in Table II of the 1988 Convention. An increasing number of non-scheduled chemicals are being reported, providing further evidence that access to internationally controlled precursors for the illicit manufacture of drugs has become more difficult, leading traffickers to source alternative or substitute chemicals to replace them.

485. A detailed analysis 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 2018 on the implementation of article 12 of the 1988 Convention.

<sup>75</sup> *World Drug Report 2018: Analysis of Drug Markets. Opiates, Cocaine, Cannabis, Synthetic Drugs* (United Nations publication, Sales No. E.18.XI.9 (Booklet 3), pp. 9 and 55.

### (d) Substances not under international control

486. In June 2018, Health Canada issued a notice on its proposal to add tramadol and its salts, isomers and derivatives to schedule I of the Controlled Drugs and Substances Act and the schedule of the Narcotic Control Regulations. Tramadol, an opioid analgesic used to treat moderate to moderately severe pain, has been marketed in Canada since 2005, and is available on prescription. In its notice, Health Canada stated that placing tramadol under national control would help to prevent its diversion and protect the population from the health risks associated with unauthorized use, while maintaining its availability for legitimate medical and scientific use. Pharmacists would continue to be authorized to dispense tramadol to patients with a written prescription.

487. According to the *World Drug Report 2018*, some opioid users in the United States have reported using kratom (*Mitragyna speciosa*) products for the self-management of withdrawal symptoms. Some 500 tons of kratom were seized during 2016, triple the amount of the previous year, suggesting an increase in use. In May 2018, the Food and Drug Administration of the United States issued warning letters to three marketers and distributors for illegally selling unapproved drug products containing kratom and making claims about their ability to help in the treatment of opioid addiction and withdrawal.

## 5. Abuse and treatment

488. Following the adoption of the Cannabis Act in Canada, the Government announced a series of measures to monitor cannabis consumption before and after the legislative change to legalize and regulate cannabis use for non-medical purposes. To that end, Statistics Canada launched the National Cannabis Survey, to be undertaken quarterly throughout 2018. Based on data collected during the second quarter of 2018, about 16 per cent of those aged 15 years and older (4.6 million people) reported some use of cannabis products for medical or non-medical use in the previous three months. The proportion was similar to that reported in the first quarter. About 14 per cent of cannabis users with a driver's licence reported driving within two hours of using cannabis.

489. During an address to the sixty-third regular session of CICAD, a representative of CONADIC Mexico stressed the harmful effects that the legalization of cannabis for non-medical purposes could have on individuals and on society as a whole. Negative effects related to mental and physical health, threats to public health and impact

on care service capacity were presented. Illicit drug use by persons aged 12 to 65 has significantly increased in Mexico, from 1.5 per cent in 2011 to 2.7 per cent in 2016. Illicit drug use by women aged 12 to 17 increased by 175 per cent. According to the Ministry of Health, cannabis was the most used drug in that period, followed by cocaine. Consumption of amphetamine-type stimulants remained stable, as did lifetime use of heroin.

490. In comparison, according to the results from the 2016 National Survey on Drug Use and Health in the United States, approximately 28.6 million people aged 12 and above (10.6 per cent of that population group) were current drug users in 2016. Overall, the percentage was higher in 2016 than the percentages from 2002 to 2015. With regard to specific substances, cannabis was the drug that was most commonly illicitly used, followed by misused prescription opioids. Although cannabis use increased among persons aged 18 and above, use among adolescents aged 12 to 17 was lower in 2016 than in most years from 2009 to 2014, and similar to that in 2015. In contrast, the percentages of people aged 12 and above have shown little change since 2007 for current use of cocaine and since 2014 for heroin.

491. In November 2017, the Council of Economic Advisers, an agency within the Executive Office of the President of the United States, published a report on the underestimated cost of the opioid crisis in the country. The Council estimated that, in 2015, the economic cost of the opioid crisis had been \$504 billion, or 2.8 per cent of gross domestic product that year. The estimation included economic evaluations related to fatalities and the non-fatal costs of misuse, as well as underreported overdose fatalities, and took into account prescription opioids and illicitly produced opioids, including heroin. It was the first such report issued by the Council and it was aimed at providing policymakers with economic analysis to review and assess potential policy options.

492. The Centres for Disease Control and Prevention reported that, between July 2016 and September 2017, visits to the emergency department in hospitals by those aged 11 and above as a result of opioid overdoses increased 29.7 per cent overall, and 34.5 per cent in 16 states with a high prevalence of overdose mortality. Significant increases were found in the States of Wisconsin (109 per cent), Delaware (105 per cent) and North Carolina (31 per cent). A decrease of 15 per cent was noted in Kentucky. Substantial increases were seen among men and women and in all age groups.

493. There are currently three approved medication-assisted treatments for opioid use disorders in the United

States, namely, methadone, buprenorphine and naltrexone. To encourage and support the development of treatment options for people with opioid use disorder, the Food and Drugs Administration released draft guidance in April 2018 focusing on ways that drug companies could more efficiently explore innovations in buprenorphine products.

494. The Drug Enforcement Administration amended its regulations to incorporate statutory and regulatory changes regarding the categories of practitioners who may, under certain conditions and on a temporary basis, dispense a narcotic drug in schedule III, IV, or V of the Controlled Substances Act for the purpose of maintenance or detoxification treatment. Those changes entered into force in January 2018. Nurse practitioners and physician assistants can now become qualifying practitioners, which gives them the authority to prescribe and dispense buprenorphine from their offices. Prior to the enactment of the Drug Abuse Treatment Act of 2000, only physicians could treat people with opioid dependence and had to register with the Administration as both physicians and operators of narcotic treatment programmes. Waiving that second registration prompted more physicians to offer treatment services.

495. Similarly, the Government of Canada amended the Narcotic Control Regulations and the New Classes of Practitioners Regulations to remove restrictions on the prescription of diacetylmorphine (prescription-grade heroin) to allow doctors to prescribe and administer and nurse practitioners to administer the drug for opioid-substitution purposes outside hospital settings under the special access programme of Health Canada. The amendment also removed the obligation for practitioners to obtain an exemption from Health Canada before they could prescribe, sell, provide or administer methadone. The regulatory changes came into effect in May 2018.

496. In Quebec, naloxone is available free of charge and without prescription at pharmacies and in some health-care settings. Similarly, free naloxone kits have been available in pharmacies in almost 15 cities in Ontario since March 2018. Furthermore, to address a lack of youth-focused treatment programmes, the British Columbia Centre on Substance Use developed new guidelines aimed at improving treatment for young people with opioid dependence.

497. The Canadian Centre on Substance Use and Addiction and the Canadian Institute for Substance Use Research at the University of Victoria estimated that the overall cost of opioid use in Canada had been approximately \$2.6 billion in 2014. In its 2018 budget, the Government of Canada committed more than

\$175 million over five years to address the opioid crisis. That funding included \$110 million for a cost-shared Emergency Treatment Fund. On 28 June 2018, the Government of Canada and the government of Newfoundland and Labrador signed a bilateral agreement under the Emergency Treatment Fund to improve access to opioid dependence treatment in the Province. Newfoundland and Labrador is the first province to sign a bilateral agreement under the Fund.

498. Public health officials in the Provinces of Alberta and Manitoba have raised concerns about the significant rise in amphetamine and methamphetamine use. The number of people reporting crystalline methamphetamine use nearly tripled between 2014 and 2018 in Alberta, and the number of confirmed deaths resulting from fentanyl that had methamphetamine listed as an additional substance doubled in 2017 compared with 2015. Reported past-year usage of amphetamine increased by 48 per cent among young people and 104 per cent among adults between the periods 2014–2015 and 2016–2017. The number of monthly emergency room visits for which amphetamine and methamphetamine were reported as the cause of admission also increased in the province, from 10 visits in January 2013 to 180 visits in December 2017, representing an increase of 1,700 per cent.

499. Following an amendment to the Canadian Controlled Drugs and Substances Act in May 2017, the number of conditions that applications for supervised “drug consumption rooms” must meet decreased from 26 to 5, and the number of such rooms in the country expanded. In 2018 alone, 18 additional rooms were approved and went into operation in Alberta, British Columbia, Ontario and Quebec. On 2 April 2018, Royal Alexandra hospital in Edmonton, Alberta, opened the first hospital-based supervised “drug consumption room” in North America.

500. Pilot study results from on-site testing conducted in November 2017 at two supervised “drug consumption rooms” in Vancouver found that only 19 per cent of substances purchased as opioids contained the expected substance and that 88 per cent contained fentanyl. The Minister of Health announced that Health Canada would authorize additional drug-checking services at such rooms. New programmes would use on-site technologies, and partnerships would be developed between front-line agencies and laboratories for off-site analysis.

501. As part of its overdose prevention strategy, implemented by the Mayor’s task force, in January 2018, the city of Philadelphia announced its intent to open one or more comprehensive user engagement sites, also known

as supervised “drug consumption rooms”. The facilities would be funded, built and run by Philadelphia community-based organizations. The Mayor of Philadelphia recalled that the city’s fatal overdose rate was the worst among large cities in the United States and that the comprehensive user engagement sites were part of a broader strategy to address the opioid crisis and a recommended action from the Mayor’s Task Force to Combat the Opioid Epidemic in Philadelphia. Other major cities in the United States, including Denver, New York, San Francisco and Seattle, are reported to also be considering opening such sites.

502. **The Board wishes to remind Governments that, in order for the operation of supervised injection sites to be consistent with the international drug control conventions, certain objectives must be advanced. The objective of such sites should be to reduce the adverse consequences of drug abuse through the provision of or active referral to treatment and rehabilitation services and social reintegration measures. Supervised injection sites should not replace demand reduction programmes, particularly prevention and treatment activities. While recognizing that such sites may reduce the adverse consequences of drug abuse through treatment, rehabilitation and reintegration, due consideration must be given to preventing inadvertent encouragement of drug abuse and to preventing drug trafficking in and around the sites.**

503. The Government of Mexico has been promoting a series of measures to expedite and ensure the availability of controlled substances for pain management. As part of the National Strategy for Pain Control and Palliative Care, a rapid action group was created, which facilitates the issuance of special prescriptions that guarantee patients the availability of controlled medicines. Furthermore, the Federal Ministry of Health of Mexico, together with the Federal Commission for Protection against Health Risks (COFEPRIS), the Mexico Foundation for Health (FUNSALUD) and the Secretary of Health of Mexico launched a project on access to controlled substances for medical purposes, in cooperation with UNODC. The aim of the project is to contribute to the design of an evidence-based plan to strengthen national and state-level efforts to improve the availability of pain medication through collecting information from each of the pain clinics, palliative care units and in-hospital and private pharmacies in Mexico City.

504. The Food and Drug Administration of the United States established a new drug shortages task force to implement long-term solutions to prevent shortages of opioids and other required medication in hospitals in the

United States. According to the 2017 annual report to Congress on drug shortages, the drugs in question included injectable opioid analgesics (pain medications), hydromorphone, morphine and fentanyl.

505. In January 2018, the Food and Drug Administration finalized and published a draft opioid analgesic risk evaluation and mitigation strategy education blueprint for health-care providers involved in the treatment and monitoring of patients with pain. It modified the 2012 strategy and included all immediate-release opioids used in outpatient settings. The blueprint is aimed at educating health-care providers on safe opioid practices, as well as on current federal and state regulations, national guidelines and professional organization and medical society guidelines on treating pain and prescribing opioids.

506. In addition to the measures described above, public health and law enforcement authorities continued their efforts to dispose of prescription drugs that are no longer needed in order to prevent their diversion and illicit use. During its sixteenth National Prescription Drug Take Back Day, on 27 October 2018, nearly 460 tons of potentially dangerous expired, unused and unwanted prescription drugs were collected by the Drug Enforcement Administration at almost 6,000 sites across the United States that had been set up together with a record-setting amount of local, state and federal partners. The largest quantities were collected in California, Texas and Wisconsin. Similar initiatives are also organized in Canada.

## South America

### 1. Major developments

507. In South America, illicit cocaine manufacture increased, impacting the European market, where evidence of increased availability and use is a cause for concern. In Colombia, both illicit coca bush cultivation and cocaine manufacture increased in 2017, by 17 per cent and 31 per cent, respectively, reaching an all-time high. In the Plurinational State of Bolivia, the area under coca cultivation increased by 6 per cent in 2017, compared with 2016, according to the UNODC/Government of Bolivia coca cultivation survey for 2017.

508. Most cocaine continued to be trafficked from the Andean countries, in particular from Colombia, to the main consumer markets in North America and Europe,

according to seizure data. Cocaine shipments intercepted in South America were mainly destined for the United States.

509. In order to address this development, in March 2018, the Governments of Colombia and the United States agreed to formulate a five-year plan to reduce illicit crop cultivation by 50 per cent by 2023 in relation to the level of illicit coca bush cultivation in 2018. In that connection, on 14 June 2018, the Minister of Defence of Colombia presented a white paper on the eradication of illicit crops in Colombia, which contained a five-year plan for the period 2018–2023; the main objective of the plan is to reverse the trend of the increase in crops since 2013. In addition, the plan is intended to ensure the continuity of current efforts aimed at eradication and interdiction and strengthening cooperation with the United States.

510. On 4 May 2018, the Minister of Government of the Plurinational State of Bolivia inaugurated the Regional Anti-Narcotics Intelligence Centre (CERIAN), which is intended to coordinate actions against drug trafficking among its five bordering countries, Argentina, Brazil, Chile, Paraguay and Peru. The Centre is expected to enable countries of the region to process information on the modus operandi, composition and operation of criminal organizations in port, airport and land movements, and implement joint coordinated efforts.

511. In 2018, Paraguay and Peru took steps towards legalizing the use of cannabis and its derivatives for medical purposes.

### 2. Regional cooperation

512. In 2017, countries in South America strengthened their cooperation efforts at the bilateral, regional and interregional levels to better address the challenges posed by illicit drugs. Countries in the region continued to exchange information and experiences on technological and operational aspects and to engage in policy dialogue. Discussions in the region addressed trends in relation to new psychoactive substances, women and drug policy, new legislative approaches and alternative development, among others. With regard to capacity-building, government officials attended specialized training events and workshops on the topics of precursor chemicals, new psychoactive substances and early warning systems, property confiscation and financial crimes. In addition, Governments worked to coordinate action along common borders, including by creating the above-mentioned Regional Anti-Narcotics Intelligence Centre in the Plurinational State of Bolivia.

513. Under the auspices of the second phase of the Cooperation Programme between Latin America, the Caribbean and the European Union on Drugs Policies II (COPOLAD II), the second Annual Meeting of National Drugs Observatories was held in Lisbon from 13 to 17 November 2017, with the participation of representatives of national drug observatories from 32 countries in the Latin American and Caribbean region. COPOLAD, a cooperation programme implemented jointly by CELAC and the European Union, pursues its objectives through four components: (a) consolidation of national drug observatories through the provision of technical assistance; (b) strengthening capacities in demand reduction; (c) strengthening capacities in supply reduction; and (d) supporting the policy dialogue and consolidation of the European Union-CELAC Coordination and Cooperation Mechanism on Drugs. The meeting was attended by representatives of authorities from 18 countries in Latin America, 14 countries in the Caribbean and 6 European Union member States, with the objectives of analysing the role of the national drugs observatories in shaping public policy and improving the dissemination of good practices. The meeting included training on early warning systems and the production of national reports on drugs.

514. Within the framework of efforts to strengthen international cooperation in the fight against drug trafficking, the fifth meeting of the Argentina-Paraguay Joint Commission on the Prevention of the Illegal Use of and Illicit Trafficking in Narcotic Drugs and Psychotropic Substances was held in Buenos Aires from 31 October to 1 November 2017. The meeting agenda was focused on the control of precursor chemicals, strategies for reducing the supply of narcotic drugs and combating organized crime involving drug trafficking and related crimes in the border areas. The promotion of joint training and operations and the exchange of information were among the issues discussed.

515. The Peruvian National Commission for Development and Life without Drugs (DEVIDA) and the German Agency for International Cooperation (GIZ) organized the third Forum for Intra-regional Dialogue on Alternative Development, held in Lima from 27 February to 1 March 2018. At the Forum, national authorities from seven countries of Latin America and the Caribbean and representatives from CICAD and UNODC exchanged experiences and lessons learned in implementing their respective alternative development programmes, with a focus on value chains and the marketing of products.

516. In March 2018, Colombian experts in the areas of property confiscation, money-laundering and financial crimes delivered a specialized workshop in the

Plurinational State of Bolivia. Aimed at supporting and enhancing the implementation of confiscation of assets seized in drug trafficking cases, the workshop bolstered effective regional cooperation. The workshop was attended by officials from the Ministry of the Interior, including its Directorate of Social Defence, Directorate of Controlled Substances and Directorate for the Registry, Control and Administration of Seized Assets, the judiciary, the Office of the Attorney General, the Special Force to Combat Drug Trafficking (FELCN) and the Financial Investigations Unit, as well as by officials from INTERPOL and police attachés from Brazil, Colombia and Peru.

517. On 11 June 2018, the National Health Surveillance Agency of Brazil (ANVISA) hosted the second regional meeting on new psychoactive substances in the western hemisphere, which was attended by experts in the fields of forensic science, public health and law enforcement from more than 20 countries. The participants, from regional and international organizations, including EMCDDA, INTERPOL, WHO, CICAD, WCO and the WCO Regional Intelligence Liaison Office for Asia and the Pacific, addressed, among other topics, trends in relation to new psychoactive substances, the detection and identification of substances, new legislative approaches and early warning systems.

518. From 13 to 15 June 2018, a workshop on regional coordination of land borders was held in the Plurinational State of Bolivia. Officials from Argentina, Brazil, Chile and Paraguay also took part. The workshop, developed within the framework of cooperation with the European Union and in support of the Bolivian strategy to counter drug trafficking, was aimed at strengthening the work of the National Border Directorate of the Plurinational State of Bolivia (Dinafron), the agency responsible for responding to cross-border crimes and drug trafficking. The outcomes of the workshop included proposals to collaborate on a system of regional operational cooperation, improve border information exchanges and facilitate joint actions in border control. In addition, the Government of the Plurinational State of Bolivia expressed its intention to strengthen the organizational and structural aspects of the work of Dinafron. Dinafron was established on 20 June 2017 and started operating on 4 October 2017.

519. At the third Annual Conference of COPOLAD II, held in Sofia, policymakers from the European Union and CELAC working in the area of drugs held a discussion on the theme of the conference, namely, “Women and drugs policy: progress and challenges in the implementation of the gender approach and the empowerment of women as a cross-cutting matter”. At the conference, which was held on 19 and 20 June 2018, participants

explored the inclusion of the gender perspective and the empowerment of women as indispensable elements in the design and implementation of public policies, an effort that continues to pose challenges in the field of drugs. The conference, organized by the International and Ibero-American Foundation for Administration and Public Policy (FIIAPP), along with the Government Delegation for the National Plan on Drugs of Spain, served as a biregional cooperation framework for discussing the need to include the gender perspective in drug policies and to agree on cooperative action.

520. At the sixth meeting of the Bolivia (Plurinational State of)-Peru Joint Commission on Drug Control, held in Lima on 26 and 27 June 2018, the two Governments agreed to strengthen joint actions to combat drug trafficking along their common border and intensify the exchange of information on criminal organizations involved in drug trafficking, with a focus on actions addressing air traffic.

### 3. National legislation, policy and action

521. In recent years, several countries in the region have taken steps towards the legalization of cannabis for medical purposes. During the period under review, the Governments of Paraguay and Peru adopted legislation permitting the medical use of cannabis; the Governments of Argentina, Brazil, Chile, Colombia and Uruguay had already permitted the medical use of cannabis through legislation or juridical decisions.

522. Through its Ministerial Resolution No. 435-2018/MINSA of 14 May 2018, the Ministry of Health of Peru published draft regulations aimed at implementing Law No. 30681, which regulates the medical and therapeutic use of cannabis and its derivatives. The draft regulations were opened for public consultation for a period of 90 days. They contain provisions on regulating aspects of the research, production, import and sale of cannabis and its derivatives intended solely for medical and therapeutic purposes, in accordance with the provisions of Law No. 30681. They set out provisions on competent control authorities; types of licences, including those for scientific research, production, import and/or trading; medical prescription; and purchase, warehousing, custody, distribution, and control of derivatives and end products of cannabis. They also call for the creation of a national registry of patients who use cannabis and its derivatives for medical or therapeutic purposes, as well as national registries of natural and legal entities in relation to import and/or trade, institutions authorized to

conduct research on cannabis and derivatives, and public entities and laboratories registered and certified for production. Furthermore, the draft regulations contain a series of measures to be undertaken by the authorities to monitor activities and aspects relating to the cultivation of cannabis plants and parts thereof, including seeds, for medical and therapeutic purposes. Those measures cover planting, handling, harvesting, post-harvest processes, extracting derivatives, manufacturing, packaging and the final products, among others. As of September 2018, the process of gathering opinions and contributions with a view to adopting a consolidated regulation was still ongoing.

523. On 9 January 2018, the President of Paraguay enacted a law to regulate the legal framework governing the production and use of cannabis and its derivatives for medical and scientific purposes. The law establishes the National Programme for Medical and Scientific Research on the Medical Use of the Cannabis Plant and Its Derivatives (PROINCUMEC) and provides for the promotion of medical and scientific research on the medical and therapeutic use of cannabis for the treatment of human diseases and conditions. Under the law, the National Anti-Drug Secretariat of Paraguay (SENAD) is responsible for overseeing all cultivation and production of cannabis, as well as imports of cannabis plants and seeds, and the National Plant and Seed Quality and Health Service (SENAVE) is responsible for authorizing the trade in cannabis products and determining which seeds are appropriate for cultivating medical cannabis crops. Decree No. 9303 of 6 August 2018 establishes the National Agency for the Monitoring of Health (DNVS), under the Ministry of Health, as the authority responsible for the administration and implementation of PROINCUMEC, including the granting of a maximum of five licences for the production and industrialization of cannabis, in line with the law, to national private laboratories, the establishment of medical conditions approved for the purposes of implementing the law, and the establishment of the geographical zones within the Central Department in which licences for production and industrialization may be authorized. In addition, the Decree establishes the requirements for the registration in the national register of users of products derived from cannabis, restricting it to patients in treatment, including those participating in a research protocol.

524. In Colombia, the legal framework provides for the issuance of four types of licences for medical cannabis and its derivatives, depending on the kind of activity involving cannabis. As at 19 July 2018, the Government of Colombia had issued a total of 162 licences. Of those, the Ministry of Justice had issued 9 licences for the use

of cannabis seeds for planting, 45 licences for the cultivation of psychoactive cannabis plants and 60 licences for the cultivation of non-psychoactive cannabis plants, and the Ministry of Health had issued 48 licences for the manufacture of cannabis derivatives.

525. In Uruguay, in accordance with Law No. 19172, the planting, growing, harvesting and marketing of cannabis in the country must be authorized by the Institute for the Regulation and Control of Cannabis (IRCCA), which is also the authority responsible for issuing licences for the production, processing, collection, distribution and sale of industrial and psychoactive cannabis. Furthermore, under Decree No. 120/014, there are three mutually exclusive methods for obtaining psychoactive cannabis for non-medical use: purchase in pharmacies; home cultivation; and membership of clubs. In accordance with the regulations, it is only possible to use one of these three methods, and the limit for personal use is set at a maximum of 40 g per month. Thus, adults may purchase up to 10 g per week at pharmacies upon confirmation of their identity, or they may grow up to six flowering female cannabis plants per household for their own consumption, provided that they register the plants with the authorities in advance and the total annual production does not exceed 480 g. Alternatively, adults may join so-called “cannabis clubs”. The clubs, which must be registered with IRCCA, may plant up to 99 plants per club and have between 15 and 45 members. The clubs are allowed to collectivize the cultivation, production and use of cannabis among their members, but cannot dispense more than 480 g of the drug per member per year. As regards the varieties of cannabis products and content limits, Uruguayan law allows citizens and permanent residents of Uruguay to purchase cannabis products with a THC content of up to 9 per cent and a minimum CBD content of 3 per cent. As at 4 October 2018, 28,470 persons had registered as purchasers at pharmacies, 6,819 persons had registered as home-growers and 107 clubs were operating.

526. On 26 June 2018, the Government of Paraguay presented its National Policy on Drugs for the period 2017–2022. It contains policy and strategic guidelines and an action plan for the reduction of demand and supply. It was approved by Decree No. 7979 of 30 October 2017.

527. On 24 May 2018, the National Secretariat for the Administration of Seized and Commissioned Property (SENABICO) and the Supreme Court of Paraguay signed a cooperation agreement to establish the procedures for the reception, identification, valuation, inventory, registration, maintenance, preservation and disposal of seized goods. On 28 May 2018, SENABICO held a training

course jointly with UNODC on seizure and confiscation at the Office of the Public Prosecutor. The course was aimed at improving the results obtained in efforts to seize goods derived from organized crime.

528. As a key element in support of the implementation of the final agreement on the termination of the conflict and the building of a stable and durable peace in the country, in February 2018, the Government of Colombia acted to regulate its crop substitution programme through Decree No. 362, thus enabling the consolidation of actions by the National Comprehensive Programme for the Voluntary Substitution of Illicit Crops. The Programme was established through Decree No. 896 of 2017, which provides the legal basis for the reduction in illicit crops, facilitates inter-institutional coordination and provides for financial and technical support for small-scale farmers. According to the authorities, 54,027 families had been enrolled in the Programme in 2017. By June 2018, the number of families enrolled had increased to 77,659.

529. In July 2018, the Government of Argentina adopted Decree No. 683/2018, which enables the armed forces to participate in and support strategic activities, such as those carried out in close proximity to international borders, including in relation to strategic objectives of national defence. In particular, the Decree enables the armed forces to provide support to drug control operations and other security interests within the national territory from which they were previously precluded.

530. On 19 June 2018, the Government of Peru adopted Law No. 30796, amending Legislative Decree No. 1241. The Law is aimed at strengthening efforts to counter drug trafficking, and in particular enables the country’s armed forces, in compliance with their constitutionally established function of guaranteeing the independence, sovereignty and territorial integrity of Peru, to carry out terrestrial, aquatic and aerial interdiction actions against drug traffickers in areas declared to be in a state of emergency. The Law states that the army is to collaborate with the national police during the execution of police interdiction operations involving drug trafficking, at the request of the police and when the circumstances exceed the operational capacity of the police.

531. Through its Executive Decree No. 376 of 23 April 2018, Ecuador dissolved the Technical Secretariat for Comprehensive Drug Prevention (SETED), transferring responsibility for regulating, coordinating, articulating, facilitating and monitoring the implementation of cross-sectoral processes to prevent drug trafficking and consumption to the Ministry of Health and the Ministry of Interior.



532. The Government of Guyana, supported by the Inter-American Development Bank, initiated a project to support its criminal justice system. The project is intended to reduce the number of pretrial detentions of prisoners accused of minor, non-violent offences by promoting the use of restorative justice and alternative sentencing.

## 4. Cultivation, production, manufacture and trafficking

### (a) Narcotic drugs

533. The Government of Argentina reported the seizure of 174.95 tons of cannabis herb and 22,330 cannabis plants in 2017. The authorities reported the seizure of almost 9 kg of heroin and 15.79 tons of cocaine (salts and base paste) in the same year.

534. As stated in the coca survey for the Plurinational State of Bolivia for 2017, published by the Government of the Plurinational State of Bolivia and UNODC in August 2018, the area under coca bush cultivation in the country increased from 23,100 ha in 2016 to 24,500 ha in 2017, representing an increase of 1,400 ha, or 6 per cent. According to the survey, the regions of Yungas de La Paz, Trópico de Cochabamba and the north of the Department of La Paz represented 65, 34 and 1 per cent, respectively, of the area under cultivation in the country in 2017. In comparison with 2016, the first two regions reported an increase of 200 ha and 1,200 ha, respectively, while the third region reported a decrease of 20 ha.

535. In the estimates submitted to the Board by the Government of the Plurinational State of Bolivia, it was projected that, in 2018, an area of 17,160 ha would be cultivated with coca bush destined for use under the provisions of the reservation entered in respect of the 1961 Convention. The General Law on Coca (Law No. 906) established that an area of up to 22,000 ha may be devoted to the cultivation of coca bush destined for the purposes envisaged in that reservation. The Board reiterates the concern expressed in its annual report for 2017<sup>76</sup> about the decision of the Government of the Plurinational State of Bolivia to nearly double, in relation to the 12,000 ha that had been set under Law No. 1008, the area permitted for cultivating coca leaf for the purposes set out in the reservation.

536. In January 2018, the Government of the Plurinational State of Bolivia reported 533 acts of

incineration or destruction of illegal drugs seized during 2017 by FELCN and the Public Prosecution Service. In 2017, a total of 36,321 kg of drugs were seized jointly by FELCN and the Public Prosecution Service, as follows: 13,745 kg of cocaine base paste, 3,884 kg of cocaine hydrochloride and 18,692 kg of cannabis. On 23 July 2018, the report for the first half of 2018 on the destruction or incineration of seized illegal drugs in the Plurinational State of Bolivia was presented by UNODC. According to the report, FELCN and the Public Prosecution Service carried out 287 acts of incineration or destruction of controlled substances from January to June 2018, representing an increase of 8 per cent compared with the same period in 2017, when 266 such acts were carried out.

537. The Government of the Plurinational State of Bolivia also reported that seizures of coca leaf had increased by 5 per cent, from 353 tons in 2016 to 370 tons in 2017. The department where most coca leaf had been seized was La Paz, with 67 per cent of total seizures, followed by Cochabamba, with 20 per cent.

538. On 23 March 2018, the Government of Brazil reported the seizure in the Port of Santos of nearly 2 tons of cocaine hidden inside three containers of coffee, soy and sugar destined for export. According to the authorities, it was the largest seizure of cocaine in the Port's history and the sixth significant seizure in the Port in 2018. Santos was the second busiest port in South America in 2017, as reported by the Economic Commission for Latin America and the Caribbean.

539. According to figures reported by the Amazon Military Command of the Brazilian Army, the Armed Forces of Brazil seized 6,674 kg of illicit drugs from January to May 2018 in the Amazon region, in the course of 170 operations. The operations were conducted in partnership with governmental agencies of the five States bordering the Amazon region, namely, Bolivia (Plurinational State of), Colombia, Guyana, Peru and Venezuela (Bolivarian Republic of).

540. The Government of Chile reported the following seizures in the period from 1 November 2017 to 20 July 2018: 6,842 kg of cocaine hydrochloride, 6,339 kg of free-base cocaine, 14,830 kg of cannabis, 132,001 cannabis plants, 4,872 tablets of "ecstasy", 2,530 g of "ecstasy", 1,792 units of NBOMe, 628 units of LSD, 21.5 litres of hydrochloric acid and 7.3 litres of sulphuric acid. Authorities in Chile reported that quantities of cocaine base paste seized between 1 January and 18 July 2018 had increased by 102.3 per cent relative to the same period in 2017, i.e., from 4,047 kg to 8,187 kg.

<sup>76</sup>E/INCB/2017/1, para. 533.

541. Compared with 2016, in 2017, illicit coca bush cultivation and cocaine production in Colombia increased by 17 per cent and 31 per cent, respectively. As stated in the UNODC *World Drug Report 2018*, in 2016, almost 69 per cent of the total area under coca cultivation worldwide was in Colombia. The area under illicit coca bush cultivation has been increasing constantly since 2013, from 48,000 ha in 2013 to 171,000 ha in 2017. Sixty-four per cent of the increased area was concentrated in the Departments of Antioquia, Putumayo, Norte de Santander and Cauca. Nariño continued to be the department with the largest coca cultivation area. As reported by the Ministry of National Defence of Colombia, 52,000 ha were eradicated in 2017.

542. Although efforts to eradicate coca crops in Colombia were increased in 2017, the concomitant increase in cocaine production in the country, from 1,053 metric tons in 2016 to 1,379 metric tons in 2017, appears to have resulted in the increased availability and use of cocaine in the United States. In March 2018, the Governments of the two countries agreed to develop a plan to reduce cultivation and production by half in relation to the levels estimated for 2018 over the next five years. For 2018, the outgoing Colombian authorities set as an objective the manual eradication of 70,000 ha of coca bush, to be reviewed in 2019. According to the Ministry of National Defence of Colombia, as at June 2018, 42,000 ha had been replaced voluntarily with licit crops, of which 14,000 ha had been certified by UNODC as having been replaced.

543. In 2017, cocaine seizures in Colombia increased by 20 per cent, compared with 2016. On 26 June 2018, the outgoing President of Colombia announced that, after a series of pilot tests, the Ministry of Health and Social Protection and the Ministry of Environment and Sustainable Development had authorized the use of drones for the spraying of glyphosate at a concentration level 50 per cent lower than that used previously; aerial spraying of glyphosate on coca crops had been suspended since October 2015. According to the Presidential statement, drones flying at low altitude were akin to the current practice in which ground-based eradication crews sprayed glyphosate herbicide from tanks mounted on their backs.

544. The Ministry of National Defence of Colombia reported the seizure of 78.6 tons of cocaine between January and March 2018, 31 per cent less than the 113.5 tons seized in the same period in 2017. Cannabis seizures decreased by 25 per cent, from 78.9 tons in the period from January to March 2017 to 59.4 tons in the same period in 2018. Heroin seizures increased by 30 per

cent, from 100 kg in the period from January to March 2017 to 130 kg in the same period in 2018.

545. According to data from the Drug Observatory of Colombia, in 2017, 435 tons of cocaine, 52 tons of cocaine base paste, 240 tons of cannabis and 521 kg of heroin were seized. In addition, 321 cocaine crystallization laboratories were dismantled.

546. Information provided by the national authorities of Ecuador indicated that 14,713 kg of cannabis herb, 381 kg of heroin and 81,713 kg of cocaine salts had been seized in Ecuador in 2017. The Government of Ecuador reported that 100 per cent of the drugs seized had originated in Colombia. The cannabis herb had been destined for Ecuador (85 per cent), Chile (10 per cent) and Peru (5 per cent). A total of 80 per cent of the seized heroin had been destined for the United States. Compared with 2016, seizures of heroin had increased by 171 per cent in 2017, while seizures of cannabis had increased by 18 per cent.

547. Paraguay remains the main source of illicitly produced cannabis in South America. According to SENAD, 80 per cent of the illicitly produced cannabis is smuggled into Brazil and there is a constant flow of drugs to Argentina, Bolivia (Plurinational State of), Chile and Uruguay. The Government of Uruguay reported that, in 2017, almost 100 per cent of the cannabis herb seized in the country had originated in Paraguay and had been trafficked overland through Argentina (53 per cent) and Brazil (46 per cent). The Plurinational State of Bolivia also reported that its territory continued to be used to traffic cannabis originating in Paraguay. SENAD reported the eradication of 1,456 ha of cannabis crops in 2017, 1,298 ha in 2016 and 1,995 ha in 2015, and an increase in cannabis seizures, from 276.379 tons in 2016 to 1,070.9 tons in 2017.

548. On 2 February 2018, the Ministry of the Interior of Peru announced the eradication of almost 26,000 ha of illicit coca bush; almost 23,000 ha had been eradicated in 2017 and approximately 3,000 ha in January 2018. In the context of the annual plan for the reduction of the illegal coca growing area for 2017, which ended on 31 January 2018, the Special Project for the Control and Reduction of Illegal Crops in Alto Huallaga (CORAH) of the National Police reported having met its eradication target for 2017 with the destruction of 25,784 ha of coca bush, equivalent to an estimated production of

approximately 238 tons of cocaine. During the operations, 113 cocaine base paste laboratories were destroyed.

549. CORAH reported the eradication of a further 14,115 ha of illicit coca bush between 1 February and 24 June 2018. According to the information provided by the Ministry of the Interior of Peru, 5,298 ha were eradicated in Tocache, 1,056 ha in Puerto Inca, 6,745 ha in Oxapampa and 1,015 ha in Padre Abad. In addition, 32 clandestine drug laboratories were destroyed in those same provinces. All the eradication efforts were carried out within the framework of the annual plan for the reduction of the illegal coca growing area for 2018, under the National Strategy to Combat Drugs.

550. The Government of the Plurinational State of Bolivia reported that its territory continued to be used for the transit of cocaine originating in Peru and that remote areas with difficult access in the east of the country were used for the establishment of clandestine cocaine crystallization laboratories.

551. The Government of Uruguay reported the seizure of 1,894 kg of cannabis herb and 1,926 cannabis plants, as well as 144 kg of cocaine and 32 kg of cocaine base paste, in 2017. The Government also reported that the cocaine seized in the country in 2017 had originated in Bolivia (Plurinational State of), Colombia and Peru, had entered the country through Argentina and Brazil, and had been destined mainly for Uruguay (85.67 per cent) and, to a lesser extent, for Australia (3.48 per cent) and China (2.58 per cent). Furthermore, the trafficking in all illicit drugs had mostly been done by land (85 per cent) and by post (15 per cent). All of the heroin seized in Uruguay in 2017 had originated in the Netherlands.

## (b) Psychotropic substances

552. In South America, synthetic drugs are typically not produced locally but rather are trafficked into the region from other parts of the world. According to the data on seizures, most of the synthetic drugs found in South America originate in Europe.

553. Governments in South America have issued public warnings about drugs sold as LSD that may not always contain the expected psychoactive substance, thus representing an additional danger for users. In Colombia, there were three reported deaths associated with the consumption of new psychoactive substances, according to reports from the National Institute of Legal Medicine. On 30 December 2017, the Ministry of Justice of Colombia

published crime laboratory findings on samples of drugs sold in four Colombian cities, finding that seven new psychoactive substances had been sold as LSD. As a result, the early warning system of the Drug Observatory of Colombia issued a warning in that regard.

554. A particular characteristic of the region is the comparatively high prevalence of use of hallucinogenic drugs, as evidenced in surveys of the general population and university students. A drug use survey conducted among university students in Bolivia (Plurinational State of), Colombia, Ecuador and Peru published in November 2017 showed a rise in the annual prevalence of LSD use in those countries. In South America, new psychoactive substances with hallucinogenic effects emerged on the markets for LSD and 4-bromo-2,5-dimethoxyphenethylamine (2C-B).

555. All of the methamphetamines seized in Uruguay in 2017 originated in the Netherlands, having been trafficked through France. It was reported that, in Uruguay, synthetic drugs were acquired through the Internet from producers in Europe, who dispatched the drugs through mail delivery services.

## (c) Precursors

556. According to official data from the Government of the Plurinational State of Bolivia, the Departments of Santa Cruz and Cochabamba recorded the highest percentages of cocaine base paste seized nationwide in 2017, accounting for 43 per cent and 28 per cent of the total seized, respectively, followed by the Department of La Paz (8 per cent). The highest percentage of seizures of cocaine hydrochloride were made in Santa Cruz (46 per cent) and Beni (28 per cent).

557. In July 2018, the National Police of Colombia reported the seizure of 40 tons of controlled chemical substances destined for use in the production of 50 tons of cocaine hydrochloride. The seizure operation took place in the Departments of Putumayo and Caquetá and was carried out under the country's comprehensive strategy against drug trafficking.

558. 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 South America can be found in the report of the Board for 2018 on the implementation of article 12 of the 1988 Convention.

#### (d) Substances not under international control

559. In December 2017, the Government of Argentina requested the scheduling of hydriodic acid, *alpha*-phenyl-acetoacetamide (APAA) and PMK-glycidate under the 1988 Convention. As indicated by the Government, the request responds to the need to establish more effective controls on these substances, given, in its view, their extensive use in the manufacture of some synthetic drugs. INCB has conducted a technical review of the request and has relayed its recommendation to the Commission on Narcotic Drugs for consideration at its sixty-second session, in March 2019.

560. Analyses carried out by laboratories in Colombia of samples obtained in drug seizures by the national police confirmed the discovery of two new psychoactive substances, namely, AMB-FUBINACA and allylescaline. Allylescaline is a new psychedelic substance with effects similar to those caused by the consumption of substances such as “ecstasy”, including depressant effects on the central nervous system.

561. In order to address the problem of new psychoactive substances, DEVIDA commissioned the design of a national early warning system on new psychoactive substances. The system is expected to generate alerts on emerging drugs and new psychoactive substances in Peru and to periodically report them to the UNODC early warning advisory on new psychoactive substances.

### 5. Abuse and treatment

562. In January 2018, the Government of Ecuador presented its national plan on drug prevention. The plan is focused on children and adolescents and has four objectives: (a) preventing the use and consumption of drugs; (b) providing comprehensive and cross-sectoral care for people with problematic consumption of drugs; (c) decreasing the supply of drugs intended for domestic consumption; and (d) preventing the illicit production of drugs. It was developed with the participation of more than 1,500 social actors and involved the signing of more than 300 agreements with educational institutions, private treatment centres, institutes of art and culture, media outlets, sports clubs and federations, and driving schools, among others. Involving the participation of the police and other agencies, the plan is aimed at strengthening controls to prevent drugs from reaching stockpiling centres set up by drug traffickers in towns near the seaports and coastal areas. To contribute to the plan, the national police have developed different strategies to prevent the

entry of drugs through the country's borders. The plan was developed on the basis of a preventive approach as a social strategy aimed at assisting vulnerable groups, one in which the police are expected to actively participate, in addition to their responsibility for tackling the criminal organizations that supply drugs for local consumption and organize shipments of drugs to international markets.

563. The Ministry of Health of Guyana launched a substance abuse prevention programme on 30 May 2018. The programme is aimed at reducing the abuse and misuse of drugs by raising awareness of the harmful effects of such abuse and misuse among the school-aged population and other young people.

564. The Demand Reduction Expert Group of CICAD held its nineteenth meeting in Santiago on 24 and 25 July 2018 to address recommendations on drug use prevention and treatment. At the meeting, national experts in the area of drug demand reduction discussed the implementation of specific policies, with an emphasis on trauma treatment, prevention among adolescents at risk and social vulnerability, and treatment outcome indicators.

565. The Government of Uruguay reported that, in 2017, 1,786 persons had received treatment for drug use disorders, of which 1,446 had received treatment for cocaine use. Other treatments for drug abuse disorders involved cannabis (316 persons) and, in far fewer cases, painkillers and LSD. As reported, in 2017, 75 per cent of the people receiving treatment for drug abuse were receiving it for the first time, and only 18 per cent of them were female.

566. During the first half of 2018, the UNODC support project on reduction of demand for illegal drugs in the Andean Community (PREDEM) launched two concluding activities, one that was technical in nature and one involving decision makers, aimed at establishing activities to ensure the future sustainability of the project. As a result, officials of the prevention programme Strong Families (*Familias Fuertes*) and the international network of drug dependence treatment and rehabilitation resource centres (Treatnet) agreed to continue to train professionals in the development of activities focused on demand reduction in the Andean countries. Although the PREDEM project ended in June 2018, the Andean countries of Bolivia (Plurinational State of), Colombia, Ecuador, and Peru committed to continuing its activities, under the leadership of Ecuador as of July 2018.