

# Chapter II.

## Functioning of the international drug control system

### A. Promoting the consistent application of the international drug control treaties

55. The stated objective of the three international drug control conventions is to safeguard the health and welfare of humankind through two overarching goals, namely: (a) ensuring the availability of controlled narcotic drugs and psychotropic substances for medical and scientific purposes and ensuring the availability of precursor chemicals for legitimate industrial use; and (b) preventing the diversion of controlled substances into illicit channels.

56. The international drug control conventions, supplemented by additional control measures adopted by the General Assembly, the Economic and Social Council and the Commission on Narcotic Drugs, are the expression of the international community's commitment to finding concerted responses to common challenges in the spirit of joint and shared responsibility. This commitment is reflected in the fact that the conventions are among the most widely ratified international instruments.

57. The continued relevance of the instruments has been highlighted by the global health emergency brought about by the COVID-19 pandemic. This crisis has emphasized the need to take measures to address unequal access to controlled substances for medical treatment and has exposed the adaptability of drug traffickers in terms of identifying new methods of both smuggling and diversion, which in turn has emphasized the need for cooperation among States in the area of supply reduction. The crisis has also exacerbated drug dependence and the use of drugs for non-medical purposes through increases in

substance misuse brought about by physical and psychological isolation and the interruption of access to treatment services.

58. In the pursuit of its treaty monitoring functions, the Board reviews the implementation by States parties of the international legal obligations stemming from the three international drug conventions. The present section sets out actions to be taken by States to ensure the performance of their treaty obligations, including challenges encountered and recommendations to address them.

#### 1. Status of adherence to the international drug control treaties

59. In the period under review, there were no changes to the status of adherence to the international drug control conventions.

60. The 1961 Convention as amended has been ratified or acceded to by 186 States, with the following States having yet to become parties: Cook Islands, Equatorial Guinea, Kiribati, Nauru, Niue, Samoa, South Sudan, Timor-Leste, Tuvalu and Vanuatu. Chad has ratified the 1961 Convention in its unamended form.

61. The 1971 Convention has 184 States parties. The Cook Islands, Equatorial Guinea, Haiti, Kiribati, Liberia, Nauru, Niue, Samoa, Solomon Islands, South Sudan, Timor-Leste, Tuvalu and Vanuatu have not yet acceded to it.

62. The 1988 Convention has a total of 191 parties (190 States and the European Union), making it the most

widely ratified of the three international drug control conventions. The States that have not yet acceded to it are Equatorial Guinea, Kiribati, Papua New Guinea, Solomon Islands, Somalia, South Sudan and Tuvalu.

63. The three international drug control conventions provide a common normative framework for effective international drug control, in particular in their capacity as the legal basis for international cooperation, extradition and mutual legal assistance. As such, the Board continues to engage with States having yet to become party to one or more of the three conventions with the aim of supporting them in this pursuit and to encourage the comprehensive incorporation of the conventions into national law.

## 2. Changes to the scheduling of substances under international control

### Narcotic drugs

64. At its sixty-fourth session, held from 12 to 16 April 2021, the Commission on Narcotic Drugs, in its decision 64/1, included one new substance, isotonitazene, in Schedule I of the 1961 Convention as amended. In accordance with article 3, paragraph 7, of that Convention, that decision was communicated by the Secretary-General to all Governments, WHO and the Board on 10 June 2021 and became effective with respect to each party upon receipt of that notification. As it is a synthetic opioid with a high potential for abuse and dependence and has potency greater than that of morphine or fentanyl, the WHO Expert Committee on Drug Dependence had recommended that isotonitazene be placed in Schedule I of the 1961 Convention as amended.

### Psychotropic substances

65. Also at its sixty-fourth session, the Commission on Narcotic Drugs decided, in its decisions 64/2, 64/3, 64/4, 64/5, 64/6, 64/7 and 64/8, to include seven new substances in the schedules of the 1971 Convention. Four substances, namely, CUMYL-PEGACLONE, MDMB-4en-PINACA, 3-methoxyphencyclidine and diphenidine, were included in Schedule II; and three substances, namely, clonazepam, diclazepam and flubromazepam, were included in Schedule IV. With those additions, the total number of substances controlled under the 1971 Convention was brought to 166.

66. The scheduling decisions became fully effective on 7 December 2021, namely, 180 days after the date of communication by the Secretary-General.

### Precursor chemicals

67. In October 2021, the Government of the United States proposed that three precursors of fentanyl and fentanyl-related substances, namely 4-AP, boc-4-AP and norfentanyl, be scheduled under the 1988 Convention. Pursuant to the procedure set out in article 12, paragraph 3, of that Convention, Governments were invited to submit their comments and supplementary information for each of the chemicals to assist the Board in establishing assessments and making scheduling recommendations to the Commission on Narcotic Drugs at its sixty-fifth session.

## 3. Submission of information by Governments to the Board

### (a) Statistical reports for narcotic drugs, psychotropic substances and precursor chemicals

68. In accordance with its mandate, the Board publishes an annual report and a report on the implementation of article 12 of the 1988 Convention. The Board also publishes technical reports that provide Governments with an analysis of statistical information on the manufacture, consumption, utilization and stocks of and trade in internationally controlled substances, together with an analysis of estimates and assessments of requirements for those substances.

69. The Board's reports and technical publications are produced on the basis of information that parties to the international drug control treaties are obligated to submit. In addition, pursuant to resolutions of the Economic and Social Council and the Commission on Narcotic Drugs, Governments voluntarily provide information in order to facilitate an accurate and comprehensive evaluation of the functioning of the international drug and precursor control system.

70. The data and other information received from Governments enable the Board to monitor licit activities involving narcotic drugs, psychotropic substances and precursor chemicals and to evaluate treaty compliance and the overall functioning of the international drug and

precursor control system. On the basis of its analysis, the Board makes recommendations to improve the workings of the system with a view to ensuring the availability of narcotic drugs, psychotropic substances and precursors for medical, scientific and industrial needs, while at the same time preventing their diversion from licit into illicit channels.

## Narcotic drugs

71. As at 1 November 2021, the Board had received annual statistical reports from 167 States (both parties and non-parties) and territories on the production, manufacture, consumption, stocks and seizures of narcotic drugs covering the calendar year 2020 (form C), or about 78 per cent of those requested. That number was slightly higher than the number of reports received by the same cut-off date in 2020, but still lower than the year before the COVID-19 pandemic (158 reports were submitted for 2019 and 173 for 2018). The decrease is probably due to the difficulties experienced in the collection of data by the competent national authorities as a result of the continuing impact of the pandemic. However, most large manufacturing, consuming and exporting countries did submit statistics.

72. A total of 99 Governments, or 59 per cent of all Governments providing data, submitted their statistical forms on time, that is, by the deadline of 30 June 2021, which was less than in 2020 (109 Governments). As at 1 November 2021, 46 Governments (22 per cent) – that is, 38 countries and 8 territories – had not submitted their annual statistics for 2020. It is expected that several additional countries and territories will be submitting the data over the coming months. Most countries and territories that have not submitted their reports are in Africa, the Caribbean, Asia and Oceania and some are in conflict and post-conflict situations, which, in addition to a general lack of human and financial resources arising from such situations, presents additional obstacles to drug control efforts.

73. Most countries that produce, manufacture, import, export or consume large amounts of narcotic drugs submitted annual statistics, although of differing quality. Accurate and timely reporting is an important indicator of the effectiveness and efficiency of drug control systems and the availability of good data is vital for the Board to accurately carry out the monitoring function accorded to it under the international drug control treaties. The quality of some data is a concern for the Board, in particular if they are data from major producing and manufacturing countries, as they indicate deficiencies in national

mechanisms for regulating and monitoring internationally controlled substances. **The Board urges Governments to continue to strengthen their national mechanisms to monitor the cultivation, production and manufacture of and trade in controlled substances.** This may be achieved, in part, by improving and developing national data-collection systems, training staff of the competent national authorities and ensuring close cooperation with companies licensed to deal with internationally controlled substances.

74. As at 1 November 2021, the complete set of four quarterly statistics of imports and exports of narcotic drugs for 2020 (form A) had been received from 179 Governments (162 countries and 17 territories), or about 84 per cent of the 213 Governments requested. In addition, nine Governments (about 4 per cent) had submitted at least one quarterly report. A total of 25 countries (about 12 per cent) had failed to submit any quarterly statistics for 2020.

## Psychotropic substances

75. The number of annual statistical reports on psychotropic substances submitted for 2020 (form P), in accordance with article 16 of the 1971 Convention, decreased in comparison to the year before. As at 1 November 2021, annual statistical reports for 2020 had been submitted by 153 countries and 13 territories. Of the 184 States parties to the Convention, 147, representing 80 per cent, had submitted their annual statistical report, out of which 84, or 57 per cent, did so by the 30 June deadline. A small number of States parties to the Convention continued to submit statistics through partner countries. Furthermore, the Board received annual statistics from 13 countries that are not parties to the Convention but that submit national data on a voluntary basis.

76. In addition, 112 Governments voluntarily submitted all four quarterly statistical reports for 2020 on imports and exports of substances listed in Schedule II of the 1971 Convention, as requested by the Economic and Social Council in its resolution 1981/7, and a further 35 Governments submitted at least one quarterly report for 2020. **The Board notes with satisfaction the good rate of submission of the annual statistical reports for 2020 on psychotropic substances and the number of non-party countries and territories that have submitted an annual report, taking into consideration limitations related to the COVID-19 pandemic.**

77. While the Board takes into account pandemic-related limitations in all parts of the world, it notes with

concern the high percentage of States parties that did not furnish form P. A total of 24 countries and territories in Africa failed to furnish form P for 2020. Likewise, nine countries and territories in Oceania, eight countries and territories in Central America and the Caribbean, three countries in South America, three countries in Asia and one country in Europe failed to furnish form P for 2020. Form P for 2020 was furnished by all countries in North America.

78. The Board takes note of the countries that have provided data regarding their use of psychotropic substances for the manufacture of preparations exempted from some measures of control pursuant to article 3 of the 1971 Convention: nine countries reported using 40 substances for such purposes in 2020. **The Board recalls recommendation 13 from its annual report for 2019, in which it called upon Governments to ensure that all aspects of article 3 of the 1971 Convention were correctly implemented if they wished to exempt a preparation from certain measures of control.**

79. The Economic and Social Council, in its resolutions 1985/15 and 1987/30, requested Governments to provide the Board with details on trade (data broken down by countries of origin and destination) in substances listed in Schedules III and IV of the 1971 Convention in their annual statistical reports on psychotropic substances. As at 1 November 2021, complete details on such trade had been submitted by 147 Governments (89 per cent of all submissions of form P for 2020). A further 19 Governments submitted blank forms or forms containing incomplete trade data for 2020.

80. The Board notes with appreciation that a number of countries have already submitted consumption data for psychotropic substances on a voluntary basis, in accordance with Commission on Narcotic Drugs resolution 54/6.

81. For 2020, a total of 95 countries and territories submitted data on the consumption of some or all psychotropic substances. **The Board appreciates the cooperation of the Governments concerned and calls upon all Governments to report on the consumption of psychotropic substances on an annual basis, pursuant to Commission on Narcotic Drugs resolution 54/6, as such data are essential for an improved evaluation of the availability of psychotropic substances for medical and scientific purposes.**

82. The Board notes with appreciation that reports on seizures of psychotropic substances were furnished by the Governments of India, Iran (Islamic Republic of),

Mozambique, Norway, Romania, the Russian Federation and the Syrian Arab Republic. **The Board welcomes reports from Member States on their interdiction efforts and calls upon all Governments to furnish regularly to the Board, pursuant to Commission on Narcotic Drugs resolution 50/11, information on seizures of psychotropic substances ordered over the Internet and delivered through the mail.**

## Precursor chemicals

83. Under article 12 of the 1988 Convention, parties are obliged to furnish information on seizures of substances frequently used in the illicit manufacture of narcotic drugs and psychotropic substances. That information, provided on form D, helps the Board to monitor and identify trends in trafficking in precursors and the illicit manufacture of drugs. Together with information provided voluntarily on licit trade in such substances, it also enables the Board to offer recommendations to Governments concerning remedial action and policies, as necessary.

84. As at 1 November 2021, a total of 122 States parties, corresponding to almost 65 per cent of the States parties to the 1988 Convention, had submitted form D for 2020. From the total number of States parties that provided data on form D for 2020, 88 reported the mandatory information on seizures of substances listed in Tables I or II of the 1988 Convention and only 72 reported seizures of non-scheduled substances, even though the proliferation of such chemicals has become one of the biggest contemporary challenges in international precursor control. As in previous years, most Governments did not provide details on the methods of diversion and illicit manufacture. **The Board reiterates its call to Governments to make every effort to collect and report complete precursor statistics, as mandated in article 12, paragraph 12, of the 1988 Convention, and to submit form D on time and consolidated into a single submission.**

85. Pursuant to Economic and Social Council resolution 1995/20, Governments are requested to provide information regarding their licit trade in substances listed in Tables I and II of the 1988 Convention on a voluntary and confidential basis. As at 1 November 2021, 112 States parties had provided such information for 2020 to the Board, and 103 States parties had furnished data on licit uses of and/or requirements for one or more of the substances in Tables I and II of the 1988 Convention.

86. Data on seizures of precursor chemicals received annually from Governments by means of form D are

complemented by specific information provided through PICS, which has been in use for the past 10 years. Through PICS, Governments can share real-time information on chemical-related incidents such as seizures, shipments stopped in transit, diversions and the discovery of illicit laboratories and associated equipment. Information provided through the platform has often provided the missing link for national authorities to initiate backtracking investigations in relation to precursor incidents, often leading to further seizures, and has prevented diversions. Since early 2019, a complementary focus of PICS has been the exchange of information on incidents involving illicit drug manufacturing equipment, as one element to enhance use of article 13 of the 1988 Convention (for more details on PICS, see paras. 363–365 below).

87. The seizure data reported and a detailed analysis of the latest trends and developments in trafficking in precursors under international control, as well as substances not included in Tables I or II of the 1988 Convention, can be found in the Board's report for 2021 on the implementation of article 12 of the 1988 Convention.<sup>36</sup>

## (b) Estimates for narcotic drugs, assessments for psychotropic substances and annual legitimate requirements for precursor chemicals

### Narcotic drugs

88. The system of estimates and assessments of annual illicit requirements for narcotic drugs and psychotropic substances is the cornerstone of the international drug control system. It enables both exporting and importing countries to ensure that trade in those substances stays within the limits determined by the Governments of importing countries and that diversion of controlled substances from international trade is effectively prevented. For narcotic drugs, such a system is mandatory under the 1961 Convention as amended, and the estimates furnished by Governments need to be confirmed by the Board before becoming the basis for calculating the limits on manufacture and import. As at 1 November 2021, the Governments of 175 countries and territories, or 82 per cent of those requested, had submitted annual estimates of requirements for narcotic drugs for 2022. To ensure that Governments may import narcotic drugs for medical and scientific purposes, estimates are established by the Board for countries that are unable to supply them and,

in 2021, a total of 28 countries in all regions of the world operated on the basis of estimates established for them by the Board.

89. Governments are obliged to comply with the limits on imports and exports of narcotic drugs provided for under articles 21 and 31 of the 1961 Convention as amended. Article 21 stipulates, *inter alia*, that the total of the quantities of each drug manufactured and imported by any country or territory in a given year is not to exceed the sum of the following: (a) the quantity consumed for medical and scientific purposes; (b) the quantity used, within the limits of the relevant estimates, for the manufacture of other drugs, preparations or substances; (c) the quantity exported; (d) the quantity added to the stock for the purpose of bringing that stock up to the level specified in the relevant estimate; and (e) the quantity acquired within the limit of the relevant estimate for special purposes. Article 31 requires all exporting countries to limit the export of narcotic drugs to any country or territory to quantities that fall within the limits of the total of the estimates of the importing country or territory, with the addition of the amounts intended for re-export.

90. The system of imports and exports continues to be implemented by Governments and, as trade increases, it works well. In 2021, a total of 18 countries were contacted regarding possible excess imports or excess exports identified with regard to international trade in narcotic drugs that had been effected during 2020. As at 1 November 2021, 13 of those countries had responded. The Board continues to pursue the matter with those countries that have not responded.

91. The Board recommends that Governments continue to strengthen the capacity of competent national authorities to adequately estimate the medical and scientific need for narcotic drugs, including through the use of globally available e-learning modules, and also recommends that Governments enhance domestic data-collection mechanisms so that they can present estimates that reflect the national need for narcotic drugs for medical purposes.

### Psychotropic substances

92. Pursuant to Economic and Social Council resolutions 1981/7 and 1991/44, Governments are requested to provide to the Board assessments of annual domestic medical and scientific requirements for psychotropic substances listed in Schedules II, III and IV of the 1971 Convention. The assessments received are communicated to all States and territories to assist the competent authorities of exporting

<sup>36</sup>E/INCB/2021/4.



countries when approving exports of psychotropic substances. As at 1 November 2021, the Governments of all countries and territories, except for South Sudan, for which assessments were established by the Board in 2011, had submitted at least one assessment of their annual medical requirements for psychotropic substances.

93. **The Board recommends that Governments review and update the assessments of their annual medical and scientific requirements for psychotropic substances at least every three years.** However, 44 Governments have not submitted a revision of their legitimate requirements for psychotropic substances for three years or more. The assessments for those countries and territories may therefore no longer reflect their actual medical and scientific requirements for such substances.

94. When assessments are lower than the actual legitimate requirements, the importation of psychotropic substances needed for medical or scientific purposes may be delayed. When assessments are significantly higher than legitimate needs, the risk of psychotropic substances being diverted into illicit channels may be increased.

95. As in previous years, the system of assessments of annual requirements for psychotropic substances continues to function well and is respected by most countries and territories. In 2020, the authorities of 17 countries issued import authorizations for substances for which they had not established any such assessments or for quantities that significantly exceeded their assessments. Only one country was identified as having exported psychotropic substances in quantities exceeding the relevant assessment.

## Precursor chemicals

96. In its resolution 49/3, entitled “Strengthening systems for the control of precursor chemicals used in the manufacture of synthetic drugs”, the Commission on Narcotics Drugs requested Member States to provide the Board with estimates of annual legitimate requirements for imports of four ATS precursors (ephedrine, pseudoephedrine, 3,4-methylenedioxyphenyl-2-propanone (3,4-MDP-2-P) and 1-phenyl-2-propanone (P-2-P)) and, to the extent possible, preparations containing those substances that could be easily used or recovered by readily applicable means. The estimates help Governments to assess the legitimacy of shipments and to identify any excesses in proposed imports for the substances.

97. Although these estimates are provided to the Board on a voluntary basis, the majority of countries submit them annually. As at 1 November 2021, 179 Governments

had provided an estimate of their annual legitimate requirement for at least one of the above-mentioned substances. During the reporting period (November 2020–November 2021), more than 120 Governments reconfirmed or updated their annual legitimate requirements for at least one substance. The Governments of seven countries, namely Dominica, Gabon, Grenada, Kuwait, Micronesia (Federated States of), the Niger and North Macedonia, submitted an estimate for the first time for at least one of the above-mentioned four substances.

98. Governments provide estimates of annual legitimate requirements for precursors on form D and can update them at any time throughout the year by submitting the information to the Board using any formal means of communication. Tables with the latest annual legitimate requirements, as updated or reconfirmed by countries and territories, are regularly published on the Board’s website. They are also accessible to registered users through PEN Online.

## 4. Efforts to prevent diversion from international trade

99. The system of control measures laid down in the 1961 Convention as amended provides for the monitoring of international trade in narcotic drugs to prevent the diversion of such drugs into illicit channels. As a result of the almost-universal implementation of the control measures stipulated in the 1971 Convention and the relevant Economic and Social Council resolutions, there has been only one identified case involving the diversion of psychotropic substances from international trade into illicit channels in recent years. In addition, the 1988 Convention requires parties to prevent the diversion of precursor chemicals from international trade to the illicit manufacture of narcotic drugs and psychotropic substances. The Board has developed various systems to monitor compliance with that aspect of the 1988 Convention and to facilitate cooperation between Governments to that end.

### Requirement for import and export authorizations

100. The universal application of the requirement for import and export authorizations laid down in the 1961 Convention as amended and the 1971 Convention is key to preventing the diversion of drugs into the illicit market. Such authorizations are required for transactions involving any of the substances controlled under the 1961 Convention as amended or listed in Schedule I or II of the 1971 Convention.

101. Competent national authorities are required under those conventions to issue import authorizations for transactions involving the importation of such substances into their country. The competent national authorities of exporting countries must verify the authenticity of such import authorizations before issuing the export authorizations required to allow shipments containing the substances to leave their countries.

102. The 1971 Convention does not require import and export authorizations for trade in the psychotropic substances listed in its Schedules III and IV. However, in view of the widespread diversion of those substances from licit international trade during the 1970s and 1980s, the Economic and Social Council, in its resolutions 1985/15, 1987/30 and 1993/38, requested Governments to extend the system of import and export authorizations to cover those psychotropic substances as well.

103. Most countries and territories have already introduced an import and export authorization requirement for psychotropic substances listed in Schedules III and IV of the 1971 Convention, in accordance with the above-mentioned Economic and Social Council resolutions. As at 1 November 2021, specific information had been made available to the Board by 206 countries and territories, showing that all major importing and exporting countries and territories now require import and export authorizations for all psychotropic substances listed in Schedules III and IV of the 1971 Convention. Upon request, the Board will make available, to all Governments, a table showing the import authorization requirements for substances listed in Schedules III and IV pursuant to the relevant Economic and Social Council resolutions. That table is also published in the secure area of the Board's website, which is accessible only to specifically authorized government officials, so that the competent national authorities of exporting countries may be informed as soon as possible of changes in import authorization requirements in importing countries.

104. The Board urges the Governments of the few remaining States in which national legislation and/or regulations do not yet require import and export authorizations for all psychotropic substances, regardless of whether they are States parties to the 1971 Convention, to extend such controls to all substances listed in Schedules III and IV of the 1971 Convention as soon as possible, and to inform the Board in that regard.

105. I2ES is provided to Governments at no cost to allow countries to securely exchange import and export authorizations for the trade in internationally controlled narcotic drugs and psychotropic substances. Greater use of the

platform by Governments will help prevent the diversion of internationally controlled substances from international trade, in addition to facilitating more rapid movement across international borders. **The Board continues to encourage all Governments that are not yet doing so to utilize I2ES; the Board's secretariat remains ready to help Governments to implement and use the platform.**

106. Article 13 of the 1971 Convention allows a State party to notify the other parties to the Convention that it prohibits the import of a specific substance included in Schedule II, III or IV of the Convention. In addition to being formally notified by the Secretariat of the United Nations when the article has been invoked, parties can find the list of countries that have invoked article 13 in the INCB "Green List", along with the substances for which an import prohibition has been put into place. As at 1 November 2021, Thailand and Turkey had revoked their import prohibitions on methylphenidate under article 13. **The Board calls upon States to ensure that the import prohibitions invoked by States parties pursuant to article 13 of the 1971 Convention are respected. The Board encourages States with import prohibitions under article 13 to ensure that such prohibitions are appropriate with respect to their current needs for controlled substances.**

107. The 1988 Convention does not impose a requirement for import and export authorizations for trade in substances listed in Tables I and II of that Convention. However, Governments that do not apply some system of control over exports and imports of precursors are not fully complying with their treaty obligations to effectively contribute to the prevention of diversion. In addition, pursuant to article 12, paragraph 10 (a), of the 1988 Convention, Governments of exporting countries and territories are to provide advance notification to the authorities of the importing Government of planned shipments with a view to preventing the diversion of those substances (see paras. 111–113 below for more information on pre-export notifications for precursor chemicals).

## Discrepancies in international trade in narcotic drugs and psychotropic substances

108. Discrepancies in government reports on international trade in narcotic drugs and psychotropic substances are regularly investigated with the competent authorities of the relevant countries to ensure that no diversion of narcotic drugs and psychotropic substances from licit international trade has taken place. Those investigations may reveal shortcomings in the implementation of control measures for narcotic drugs and psychotropic

substances, including the failure of companies to comply with national drug control provisions.

109. Since May 2021, investigations regarding discrepancies for 2020 related to the trade in narcotic drugs have been initiated with 66 countries. As at 1 November 2021, replies had been received from 45 countries. The responses indicated that the discrepancies had been caused by clerical and technical errors in preparing the reports, reporting on exports or imports of preparations in Schedule III of the 1961 Convention as amended without indicating it on the form, or inadvertent reporting of transit countries as trading partners. In some cases, countries confirmed the quantities reported by them, resulting in the initiation of follow-up investigations with their trading partners. **The Board encourages the countries that have not yet replied to investigate the discrepancies as a matter of urgency and to inform it of their findings.**

110. Similarly, with regard to international trade in psychotropic substances, investigations into 647 discrepancies related to 2020 data were initiated with 115 countries. Owing to delays in the reporting of statistical data for 2020 by some countries, investigations into trade-related discrepancies for that year are still ongoing.

### Pre-export notifications for precursor chemicals

111. To prevent the diversion of precursors, article 12, paragraph 10 (a), of the 1988 Convention allows the Governments of importing countries to make it mandatory for exporting countries to inform them of any planned export of precursors to their territory.

112. Since the annual report of the Board for 2020, the Government of one country, Iceland, has officially requested to be pre-notified, thus increasing the number of Governments that have invoked that provision to 116. **The Board renews its call to those Governments that have not formally requested pre-export notifications to take the necessary steps to invoke article 12, paragraph 10 (a), of the 1988 Convention.**

113. Real-time communication between importing and exporting Governments as regards international trade in precursors and preventing diversion into illicit channels is facilitated by the Board's secure Internet-based tool, PEN Online. As at 1 November 2021, the Government of one more country, Gabon, had registered with PEN Online, bringing the total number of registered countries and territories to 166. **INCB calls upon the Governments that have not yet registered with the PEN Online system**

**to nominate at least one focal point for that purpose as soon as possible and calls upon Governments to use PEN Online actively and systematically. The Board stands ready to assist Governments in that regard.**

### Prevention of diversion of precursors from domestic distribution channels

114. The diversion of precursors from domestic distribution channels remains a major source of such chemicals for use in illicit drug manufacture. The control measures applied by Governments to domestic trade in and distribution of chemical substances vary from country to country and often fall short of those used in international trade. To address this, the Board has called for fuller utilization of article 12, paragraph 8, of the 1988 Convention, and has conducted a survey among Governments to that end.

115. A detailed analysis of the domestic controls worldwide can be found in the report of the Board for 2021 on the implementation of article 12 of the 1988 Convention.

### Cooperation with industry in relation to precursor control

116. Cooperation with industry is an integral part of the implementation of article 12, paragraph 9 (a), of the 1988 Convention. Such cooperation, which is to a large extent the result of voluntary initiatives and agreements, has come to play an increasingly significant role in global precursor control. It is aimed at ensuring the effective and sustainable prevention of the diversion of precursors, including non-scheduled chemicals and designer precursors used for illicit purposes, through timely cooperation between national authorities and relevant private sectors. **The Board strongly encourages such cooperation and welcomes and promotes successful initiatives taken in this area by several Governments.**

117. The Board, in line with its mandate, also continues to support Governments in their efforts to establish and implement cooperation with industry, on the basis of shared responsibility, mutual respect and goodwill. During the reporting period, the Board invited all Governments to provide it with relevant information on experiences and lessons learned in relation to cooperation with industry in the area of drug precursors and non-scheduled chemicals used in illicit drug manufacture. This information will serve as a basis for a compilation of good practices, specific scenarios and case studies with



the purpose of transferring knowledge and sharing learning among Governments. The compilation will complement the Board's guidance materials related to industry cooperation, which are already available to competent national authorities on its secure website.

118. Apart from the chemical and pharmaceutical industry, another industry sector with which cooperation has proved useful and necessary in terms of precursors is business-to-business Internet platforms. Information regarding listings of precursors, shared on a voluntary basis by the platforms with national regulatory or law enforcement agencies, has resulted in the interdiction of diverted consignments of precursor chemicals and the apprehension of perpetrators of offences in some countries. During the reporting period, the Board conducted a targeted, time-bound operation, Operation Acronym, which was focused on precursor trafficking over the Internet (surface web). In this connection, the Board would like to acknowledge the information provided on a voluntary basis, through competent national authorities, from seven business-to-business platforms from India and the Republic of Korea. Further details about Operation Acronym are available in the report of the Board for 2021 on the implementation of article 12 of the 1988 Convention.

119. Since 2016, the Board has encouraged twinning between Governments that have established cooperation with industry and those that wish to develop or enhance such a concept. Details of those activities are provided in the report of the Board on the implementation of article 12 of the 1988 Convention.

120. The Board wishes to reiterate the importance of cooperation with industry, including the voluntary aspect thereof, and encourages Governments to continue their efforts to establish and implement mechanisms for such cooperation. While the nature, extent and scope of cooperation remains within the purview of individual countries, INCB highlights the importance of cooperation between national regulatory authorities and relevant industry sectors, in particular with a view to addressing the proliferation of non-scheduled chemicals and designer precursors. The Board and its secretariat stand ready to assist Governments in this regard.

### Challenges posed by the spread of non-scheduled chemicals and designer precursors

121. INCB continues to advance policy discussions and facilitate consensus-building for global action to address

the proliferation of non-scheduled chemicals and designer precursors. To this end, and in response to the increasing calls for global dialogue and cooperation, several activities were conducted in the reporting period. For example, consultations with Member States were held in November 2020 and October 2021; a statement was given to the Commission on Narcotic Drugs at its sixty-fourth session on challenges to the scheduling systems under the international drug control conventions; a side event was organized during the sixty-fourth session of the Commission; and a technical expert consultation was held in June 2021.

122. INCB has also developed several technical resources for competent national authorities to increase their capacity to identify and act on an ever-increasing range of non-scheduled chemicals.

123. The efforts undertaken during the reporting period built on a series of policy dialogues led or supported by the Board in recent years that resulted in a list of practical and concrete measures and approaches for national action and international cooperation. The Board believes that the list could serve as a basis for attaining consensus among countries on the way forward, including decisions by the Commission on Narcotic Drugs at its sixty-fifth session.

124. INCB encourages Governments to sustain the momentum and increase the level of cooperation with each other and with the Board in order to reach global consensus on measures regarding non-scheduled chemicals and designer precursors. INCB also calls upon Governments to continue exchanging relevant information on suspicious transactions involving non-scheduled chemicals and designer precursors and to contribute to the detection of possible loopholes in national or regional control systems that may be exploited by traffickers.

### Article 13 of the 1988 Convention: materials and equipment used in illicit drug manufacture

125. The Board continues to promote the use of article 13 of the 1988 Convention as a valuable complementary tool in addressing illicit drug manufacture and underlines the need for a continued search for new and innovative approaches with a view to improving the implementation of the article.

126. To this end, the Board has conducted several activities to raise awareness and guide international policy efforts and action aimed at preventing the diversion of

equipment essential for illicit drug manufacture, enhancing the operational use of article 13 of the 1988 Convention and encouraging cooperation in that regard. In April 2021, the Board convened a second expert group meeting on enhancing the operational use of article 13 of the 1988 Convention. The experts reviewed progress made through multilateral cooperation to prevent and investigate the diversion of equipment used to illicitly manufacture drugs and precursors and discussed practical tools, approaches and mechanisms that would contribute to building global consensus for action on the basis of that provision of the 1988 Convention. The resulting awareness-raising and guidance document was shared with all Governments, and their feedback was sought to provide input to a follow-up expert group meeting that was convened on 30 November and 1 December 2021.

127. To support Governments in their efforts to increase the use of article 13 of the 1988 Convention and prevent specialized equipment from reaching illicit laboratories, the Board has had the *Guidelines to Prevent and Investigate the Diversion of Materials and Equipment Essential for Illicit Drug Manufacture* translated and made available in all six official languages of the United Nations. All related resources are available on the Board's website.

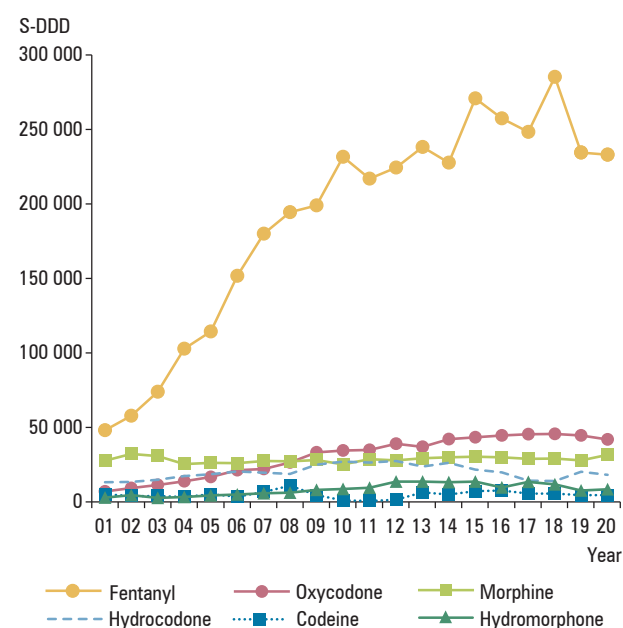
128. The Board calls upon Governments to continue developing new and innovative approaches to improve the practical implementation of article 13 of the 1988 Convention and recommends seeking the secretariat's assistance to make full use of the resources on materials and equipment available on its website.

## B. Ensuring the availability of internationally controlled substances for medical and scientific purposes

129. In line with its mandate to ensure the availability of internationally controlled substances for medical and scientific purposes, the Board carries out various activities related to narcotic drugs and psychotropic substances. The Board monitors action taken by Governments, international organizations and other bodies to support the availability and rational use of controlled substances for medical and scientific purposes and provides, through its secretariat, technical support and guidance to Governments in their implementation of the provisions of the international drug control treaties.

130. A comparison of the consumption of individual substances (see figure I) shows the predominance of fentanyl over the past two decades. However, after peaking in 2018 at 285,959 S-DDD, global consumption of fentanyl decreased to 235,074 S-DDD in 2019 and remained relatively stable, with a slight decrease in 2020, to 233,636 S-DDD. The consumption of oxycodone has been increasing, although at a lower level, and, since 2009, has replaced morphine as the second most-consumed opioid (after fentanyl). Like fentanyl, consumption of oxycodone reached an all-time high in 2018 (45,726 S-DDD), decreasing to 44,821 S-DDD in 2019 and falling further, to 42,099 S-DDD, in 2020. The trend in the use of morphine, on the other hand, remained relatively stable between 2004 (25,644 S-DDD) and 2019 (27,957 S-DDD), but in 2020 it increased to 31,824 S-DDD, the highest level of consumption since 2002. After decreasing steadily since 2014, hydrocodone consumption increased from 14,161 S-DDD in 2018 to 20,415 S-DDD in 2019 but decreased to 18,366 in 2020. The consumption of codeine for pain management decreased from 5,720 S-DDD in 2018 to 4,591 S-DDD in 2019 but increased to 4,665 S-DDD in 2020. Hydromorphone consumption decreased from 11,834 S-DDD in 2018 to 7,713 S-DDD in 2019, the lowest level since 2008, but increased to 8,528 S-DDD in 2020. The United States accounted for almost all global hydrocodone use (99.2 per cent), whereas the consumption of the other drugs shown in figure I was reported in more than one country.

Figure I. Consumption of codeine, fentanyl, hydrocodone, hydromorphone, morphine and oxycodone, expressed in total S-DDD,<sup>a</sup> 2001–2020



<sup>a</sup>Total consumption of a drug is the sum of the S-DDD of all individual countries reporting consumption.

131. A regional analysis of the main trends in the consumption of the main opioid analgesics (codeine, dextro-propoxyphene, dihydrocodeine, fentanyl, hydrocodone, hydromorphone, ketobemidone, morphine, oxycodone, pethidine, tilidine and trimeperidine), expressed in S-DDD per million inhabitants per day, shows that the highest consumption of these drugs is in developed countries in Europe and North America. Countries reporting the highest average consumption of opioids for pain management in the period 2018–2020 were the United States (26,122 S-DDD), Germany (22,298 S-DDD), Austria (20,323 S-DDD), Israel (17,947 S-DDD) and Belgium (15,422 S-DDD).

132. The regional analysis confirms the persistence of a global disparity in the consumption of opioid analgesics. Regional S-DDD is calculated on the basis of the total population of the countries reporting consumption and the overall amounts of opioid analgesics reported as consumed. In 2020, the reported consumption of some countries in North America, Oceania and Western and Central Europe resulted in regional averages of 19,214 S-DDD for North America, 10,001 S-DDD for Western and Central Europe and 5,984 S-DDD for Oceania, the latter representing a marked decrease, from 9,984 S-DDD, in 2019. Although also reporting a decline, from 26,151 S-DDD in 2019, North America remains the region with the highest

consumption of opioids for pain management in the world. Consumption had declined in Western and Central Europe between 2018 (11,021 S-DDD) and 2019 (9,200 S-DDD), but increased again in 2020 (see figure II).

133. The levels of opioid consumption in North America, Oceania and Western and Central Europe are far higher than in all other regions in the world, as seen in figure II. Figure III provides a closer look at consumption in other regions. A general upward trend in consumption was evident in South-Eastern Europe until 2018, when it reached 1,415 S-DDD, but it decreased to 1,192 S-DDD in 2019 and to 1,188 in 2020. Consumption in South America has been increasing since 2017, when countries reported 537 S-DDD, and reached an all-time high of 919 S-DDD in 2020. In West Asia, a similar trend was observed, also with an all-time high (743 S-DDD) seen in 2020. Eastern Europe reached an all-time high in 2019, with 601 S-DDD, but consumption in 2020 decreased, to 457 S-DDD.

134. The Board considers levels of consumption of opioid analgesics in quantities between 100 and 200 S-DDD to be inadequate, and in quantities of less than 100 S-DDD to be very inadequate. In this context, the average levels of consumption reported in 2020 in East

Figure II. Consumption of opioids for pain management in all regions, S-DDD per million inhabitants per day, 2001–2020

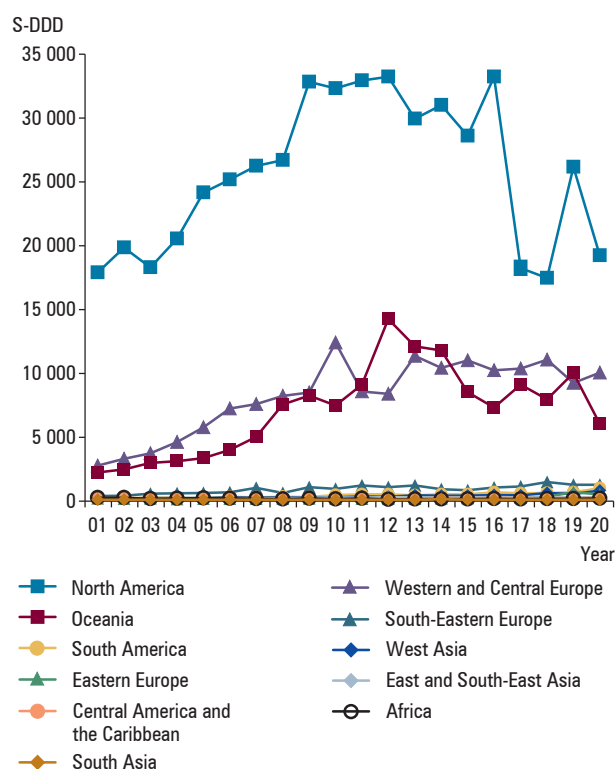
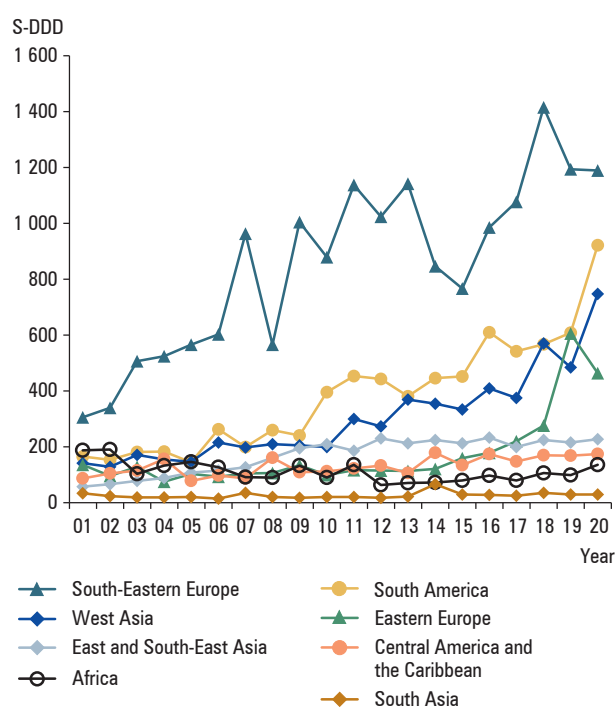


Figure III. Consumption of opioids for pain management in the regions with the lowest consumption, S-DDD per million inhabitants per day, 2001–2020





140. At the outset of the pandemic, in early 2020, there were reports of shortages of medicines containing midazolam in some parts of the world, in part driven by higher demand for the substance and in part owing to delivery and transport challenges associated with the closure of borders adopted by some countries at that time. As the pandemic progressed, the data provided by Governments indicated that the situation had improved, with countries successfully resuming imports and exports of the substance across the globe.

## 1. Patterns and trends in the production, manufacture, consumption, utilization and stocks of narcotic drugs and psychotropic substances

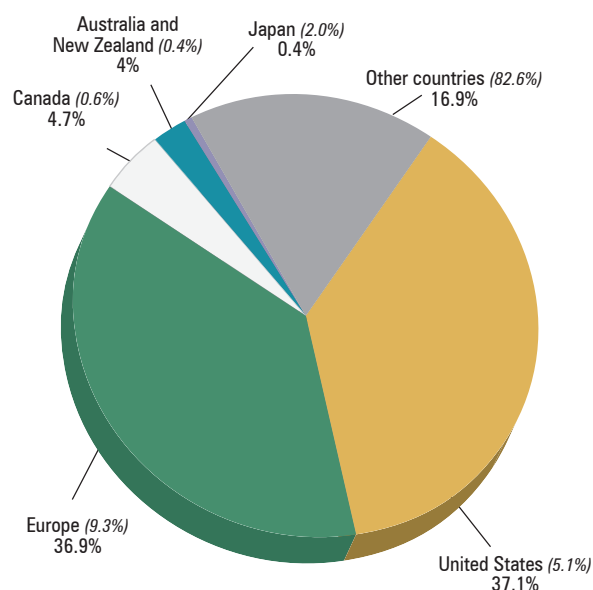
### Narcotic drugs

141. Since the beginning of 2020, the COVID-19 pandemic has put to the test the ability of the international community to ensure adequate access to and the availability of internationally controlled drugs for those in need. As reported above, the global supply chain of medicines has been affected as a result of both the disruption in the manufacturing of key starting materials of active pharmaceutical ingredients and of the ingredients themselves in some major manufacturing countries and the logistical challenges arising from border closures and other social-distancing policies adopted by a number of countries. The Board, in its annual report for 2020, alerted the international community to this. The consolidated statistics on narcotic drugs for some countries in 2020 confirm that there has been an increase in the consumption, manufacturing and stocks of some substances (specifically fentanyl and its analogues), largely driven by significant increases in the need to provide pain relief and sedation for patients with COVID-19 admitted to intensive care units.

142. Regional analysis of the overall consumption of opioid analgesics for the treatment of pain confirms the persistence of disparities among regions in the consumption of those drugs. Almost all consumption is concentrated in developed countries in Europe and North America, while the level of consumption in other regions is often insufficient for the medical needs of the population (see figure VI).

143. The regional imbalance is not due to the lack of opiate raw materials. Apart from opium, the production of which has been declining for a number of years, overall utilization of poppy straw and concentrate of poppy straw derived from both the morphine-rich and the

Figure VI. Morphine: distribution of consumption in relation to share of world population, 2020



Note: Percentages in parentheses refer to share of the world population (i.e. total population of all reporting countries).

thebaine-rich varieties remained high in 2020 and stocks increased, indicating that the supply is more than sufficient to satisfy demand, even though the demand expressed by a number of countries might not reflect the actual medical needs of the population.

144. A major problem in many low-income countries is limited access to affordable opioid analgesics such as morphine. In 2020, 239.7 tons of morphine (77.6 per cent of global production) was converted into other narcotic drugs or into substances not covered by the 1961 Convention as amended. Only 35.3 tons (11.4 per cent, up from 9.4 per cent in 2019), the greatest amount registered in the last 20 years, was used for direct consumption, mainly for palliative care. A smaller amount, 8.1 tons (2.6 per cent of global production), was used to manufacture preparations in Schedule III, while the remaining amount was used for other purposes. Of the amount of morphine consumed for the management of pain and suffering (35.3 tons, or 11.4 per cent of the total global production), only 16.9 per cent was available for use by most of the world population (82.6 per cent), mainly those living in low- and middle-income countries. Most of the total direct consumption of morphine (83.1 per cent), excluding preparations in Schedule III, continued to be in a small number of countries, mainly in Europe and North America.



145. Oxycodone is the semi-synthetic opioid that has been most associated with overdose deaths in recent years, in particular in North America. Manufacture of oxycodone has increased, but consumption, after having increased sharply between 2001 and 2013, gradually decreased, falling to 88.1 tons in 2020. Oxycodone consumption was concentrated in North America, Western and Central Europe, Australia and China. Both consumption and manufacture of hydromorphone, another potent opioid, increased, with most of the consumption concentrated in Canada and the United States. Consumption of heroin for medical purposes remained relatively stable, at 658.4 kg in 2020. Switzerland, the Netherlands and Germany, in that order, were the main consumer countries.

146. Among synthetic opioids, fentanyl is, after oxycodone, the other opioid associated with overdose deaths in recent years. After increasing for several years, manufacture of fentanyl peaked in 2010 and has followed a volatile decreasing trend since then, dropping to 2.5 tons in 2020. As with oxycodone, the downward trend may be associated with continued concerns about overdose deaths attributed to the use of fentanyl or fentanyl-type substances. Consumption of the fentanyl analogues alfentanil, remifentanyl and sufentanil, which are used mainly as anaesthetics, increased during the COVID-19 pandemic in some countries for analgesia and the suppression of respiratory activity in mechanically ventilated patients in intensive care and to provide analgesic cover for painful manoeuvres.

147. No manufacture of dextropropoxyphene or ketobemidone was reported in 2020. Diphenoxylate continued to be manufactured in much smaller quantities than before. The manufacture of tilidine decreased further, falling to 27.4 tons in 2020. The manufacture of pethidine and trimeperidine continued to follow a volatile pattern. The manufacture and the consumption of methadone increased to 44.1 tons and 59 tons, respectively.

148. The licit cultivation, production and use of cannabis have been increasing considerably since 2000, when more countries from all regions started to use cannabis and cannabis extracts for medical purposes, as well as for scientific research. The total licit production of cannabis in 2020 was 650.8 tons. Since the licit cultivation of cannabis plant for medical and scientific purposes has increased considerably in recent years and the yield and manufacturing processes are not standardized, some data are being clarified with the relevant Governments in order to ensure consistency.

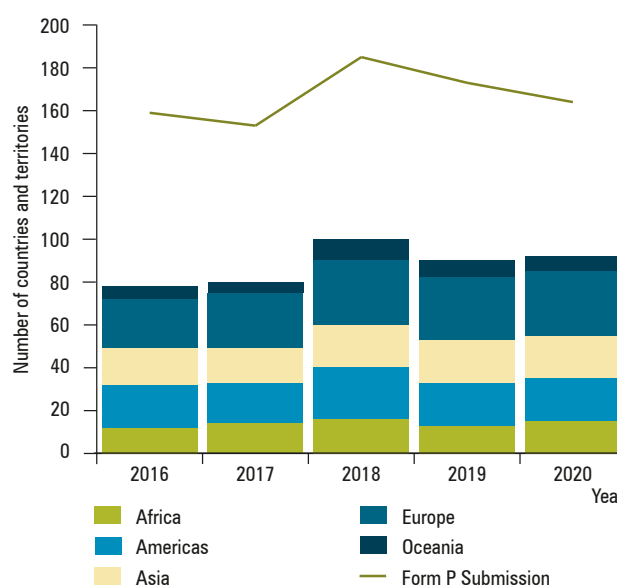
149. Peru is the only country to have exported coca leaf for the global market since 2000. In 2020, its exports amounted to 148.9 tons, all of which were imported by

the United States to be utilized for the extraction of flavouring agents and the manufacture of cocaine as a by-product. The Plurinational State of Bolivia reported the production of 30,954 tons in 2020 for the use allowed in the country, in accordance with the reservation made by that State in 2013, when it reaccessed to the 1961 Convention as amended. In 2020, licit global manufacture of cocaine decreased considerably, to 18.3 kg, while licit consumption remained relatively stable, at 396.4 kg.

## Psychotropic substances

150. Between 2016 and 2020, submission rates of form P (annual statistical report on internationally controlled psychotropic substances) from countries and territories fluctuated, from a low of 153 in 2017 to a high of 185 in 2018. In 2021, 166 countries and territories provided an annual statistical report. The number of countries and territories providing consumption data fluctuated along with the number of statistical reports received, with 100 countries and territories providing consumption data for 2018, the most ever for one year. For 2020, 95 countries and territories provided consumption data (see figure VII). Increasing the rate of submission of consumption data from countries and territories will provide the Board with a more comprehensive picture of actual demand for psychotropic substances. This will help inform the Board how to develop methods to assess appropriate levels of use of psychotropic substances for medical and scientific purposes.

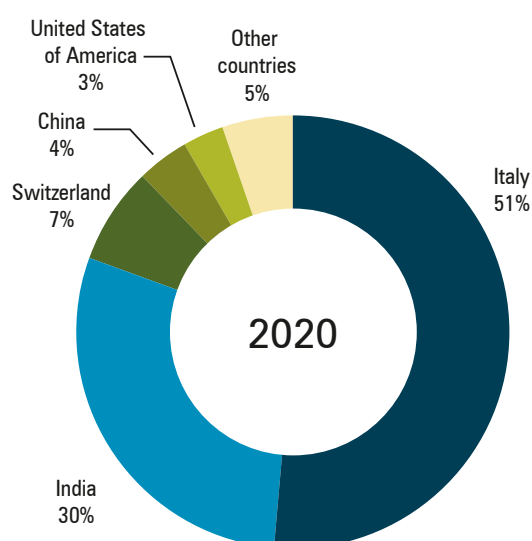
Figure VII. Rate of submission of form P and rate of submission of consumption data by countries and territories, 2016–2020



151. Global manufacture of midazolam increased by over 35 per cent between 2019 and 2020. The substance has traditionally been manufactured by five countries, namely, Brazil, China, India, Israel and Italy. In 2020, India, Israel and Italy all nearly doubled their manufactured volumes of midazolam. Global manufacture reached a record high of over 8.5 tons. In addition, the total volume traded increased from an average of 7.2 tons in the period 2016–2018 to 11 tons per year in 2019 and 2020. Of the countries and territories reporting the import of midazolam in 2020, 35 increased their imports by at least 100 per cent compared with the previous year.

152. In 2020, similar to previous years, benzodiazepines accounted for most of the manufacture of, trade in and consumption of internationally controlled psychotropic substances. Of the 36 internationally controlled benzodiazepines, 21 were identified as having a significant presence on the licit market in 2020. The main manufacturers of this group of substances overall were Italy, India, Switzerland, China and the United States (in descending order of the amount manufactured), together accounting for 95 per cent of the total global manufacture (see figure VIII). In 2020, the most-traded benzodiazepines were diazepam, midazolam, clonazepam, alprazolam and lorazepam, in terms of the number of importing countries. The total reported manufacture of those benzodiazepines amounted to more than 72 tons, with manufacture reported in all regions of the world.

**Figure VIII. Benzodiazepines with a significant presence on the licit market: share of global manufacture, by country, 2020**



153. For 2020, the Board received data from more than 90 countries reporting consumption of at least one benzodiazepine, which represented a slight increase from the

previous year, for which 87 countries submitted national consumption data. The highest rates of consumption of all benzodiazepines with a significant presence on the licit market combined, measured in S-DDD per 1,000 inhabitants per day, were reported by, in descending order, Spain, Belgium, Portugal, Israel, Montenegro and Hungary. The most heavily consumed benzodiazepines in 2020 were alprazolam, diazepam, lorazepam, oxazepam, clonazepam, bromazepam, lormetazepam and brotizolam, each of which were reported to have been consumed in quantities greater than 40 S-DDD<sub>pt</sub> globally. In 2020, Bosnia and Herzegovina, Burkina Faso, Jordan, Madagascar, Malta, Mauritania, Palau, the Republic of Korea and the United Arab Emirates provided consumption data for the first time in more than five years.

154. As in previous years, phenobarbital was one of the most manufactured psychotropic substances under international control, at 324 tons in 2020, a decrease of 63 tons compared with 2019 mainly owing to a significant drop in manufacture in Hungary and a slight decrease in China and India. China (174 tons) and India (104 tons) accounted for more than 85 per cent of all global manufacture, a trend largely unchanged from previous years. Other major manufacturers of the substance in 2020 were the Russian Federation (33.1 tons) and Hungary (4.3 tons).

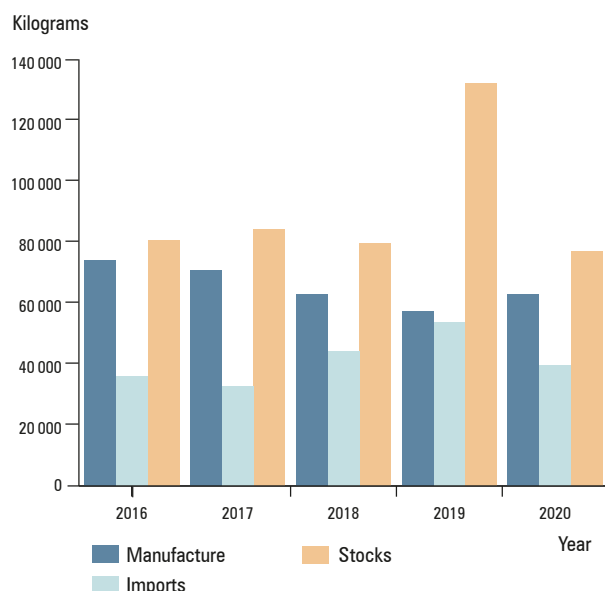
155. For 2020, 83 countries and territories provided data on their consumption of phenobarbital, up slightly from 82 for 2019. Among the countries that provided such data for 2020, average consumption stood at 0.79 S-DDD<sub>pt</sub>, up from the 2019 average of 0.59 S-DDD<sub>pt</sub> among countries and territories that reported consumption for that year. The increase in average consumption is a result of the marginally higher consumption reported by many countries for 2020. Burkina Faso, providing data for the first time in several years, reported the highest level of consumption of phenobarbital, at 11.81 S-DDD<sub>pt</sub>.

156. Global manufacture of methylphenidate rose in 2020 for the first time following the downward trend that began in 2017. Total imports of the substance, however, declined in 2020, to 39 tons. Global stocks of methylphenidate registered a considerable decrease, to 77 tons in 2020, down from 132 tons in 2019 (see figure IX). Similar to previous years, the United States accounted for most of the global stocks in 2020 (68 per cent), followed by Switzerland (13 per cent).

157. A total of 62 countries provided consumption data on methylphenidate for 2020, with rates varying from previous years among the countries with the highest rates of consumption. The countries with the highest rates of reported consumption of methylphenidate in 2020 were,

in descending order of the amounts consumed, Iceland, Israel, Canada, Denmark, Sweden, the United States, the Netherlands, Finland, Switzerland and New Zealand.

**Figure IX. Methylphenidate: global manufacture, imports and stocks, 2016–2020**



158. A detailed analysis of the patterns and trends in the manufacture, trade, stocks and consumption of psychotropic substances is contained in the technical report of the Board for 2020 on psychotropic substances.<sup>37</sup>

## 2. Supply of and demand for opiate raw materials

159. The Board, in fulfilment of the functions assigned to it under the 1961 Convention as amended and the relevant resolutions of the Economic and Social Council and the Commission on Narcotic Drugs, regularly examines issues affecting the supply of and the demand for opiates for licit requirements and endeavours to ensure a standing balance between that supply and demand.

160. The Board analyses the data provided by Governments on opiate raw materials and opiates manufactured from those raw materials to establish the status of the supply of and the demand for opiate raw materials globally. In addition, the Board analyses information on the use of those raw materials, estimated consumption for licit use and stocks at the global level. A detailed analysis of the current situation as it pertains to the supply of and the demand for opiate raw materials is

contained in the technical report of the Board for 2021 on narcotic drugs.<sup>38</sup>

161. The combined total area cultivated with opium poppy varieties rich in morphine, thebaine, codeine and oripavine decreased by 16 per cent in 2020 compared with 2019, after a trend of growth since 2017. However, it should be noted that the total area cultivated with opium poppy rich in morphine decreased by 30 per cent, the total area cultivated with both opium poppy rich in thebaine and opium poppy rich in codeine doubled, and the total area cultivated with opium poppy rich in oripavine grew almost tenfold. The production of opiate raw materials rich in morphine decreased, while the production of opium raw materials rich in thebaine increased.

## Morphine

162. The total actual harvested area of opium poppy rich in morphine decreased from 86,982 ha in 2019 to 59,957 ha in 2020. Compared with 2019, most producing countries saw their total harvested area decrease in 2020, and even halve in the cases of Hungary and Spain. France saw only a minor decrease in the actual area cultivated, whereas Australia and Slovakia were the only two countries that saw their area cultivated with morphine-rich opium poppy increase compared with 2019. India is the only opium-producing country included in the present analysis. Australia and Spain were the only two countries that cultivated opium poppy rich in codeine in 2020. The area harvested with that variety nearly doubled in Australia, from 2,300 ha in 2019 to 4,236 ha in 2020, whereas in Spain it tripled, from 863 ha in 2019 to 2,532 ha in 2020.

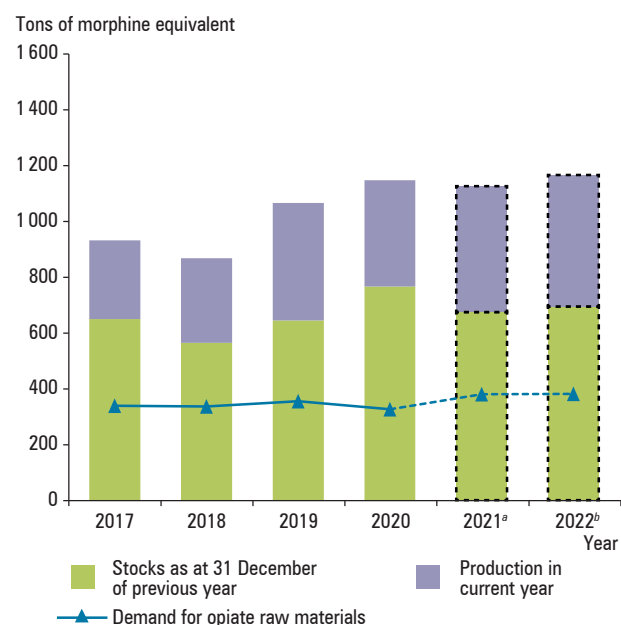
163. Global production of morphine-rich opiate raw materials in the main producing countries decreased significantly, from 421 tons in morphine equivalent in 2019 (see figure X) to 380 tons in 2020. In 2020, Spain remained the leading producer (113 tons), followed by Australia and France (75 tons each), Turkey (69 tons), India (27 tons), Slovakia (15 tons) and Hungary (6 tons). Those six countries accounted for nearly all global production in 2020.

164. At the end of 2020, the global stocks of opiate raw materials rich in morphine, which includes poppy straw, concentrate of poppy straw and opium, amounted to about 767 tons in morphine equivalent, an increase from 645 tons at the end of 2019. Those stocks were considered to be sufficient to cover 24 months of expected global demand by manufacturers (380 tons), on the basis of

<sup>37</sup>E/INCB/2021/3.

<sup>38</sup>E/INCB/2021/2.

Figure X. Supply of and demand for opiate raw materials rich in morphine, 2017–2022



<sup>a</sup>Data on production and demand for 2021 are based on advance data submitted by Governments.

<sup>b</sup>Data for 2022 are based on estimates submitted by Governments.

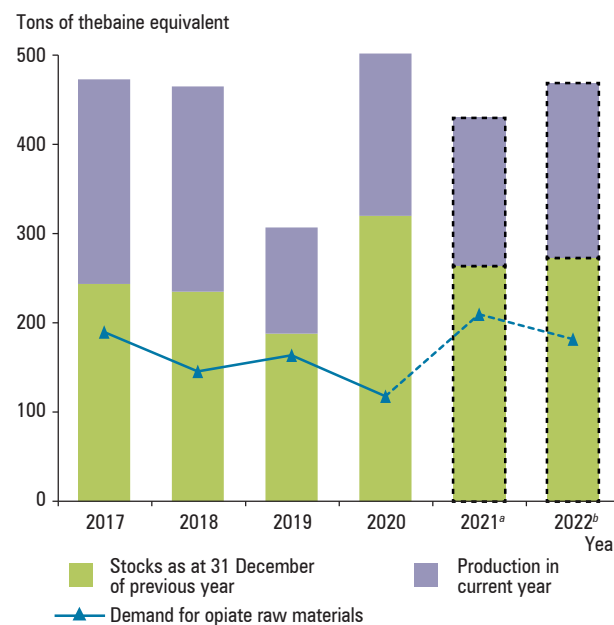
advance data for the level of demand in 2021. In 2020, Turkey continued to be the country with the largest stocks of opiate raw materials rich in morphine, with 252 tons in morphine equivalent, followed by France (135 tons), Spain (114 tons), India (92 tons, all in the form of opium), Australia (90 tons), the United States (28 tons), Japan and the United Kingdom (20 tons each), Slovakia (9 tons) and Hungary (8 tons). Together, those 10 countries accounted for 98 per cent of the global stocks of opiate raw materials rich in morphine. The remaining stocks were held in other producing countries and in countries importing opiate raw materials.

165. At the end of 2020, global stocks of opiates of morphine-based opiate raw materials, mainly in the form of codeine and morphine, amounted to 523 tons in morphine equivalent and were sufficient to cover global demand for those opiates for about 16 months at the 2021 level of demand (404 tons).

166. On the basis of data reported by Governments, total stocks of opiates and opiate raw materials are fully sufficient to cover demand for medical and scientific purposes for morphine-based opiates for more than a year.

167. Between 2009 and 2016, global production of opiate raw materials rich in morphine exceeded global demand. As a result, stocks increased during that period,

Figure XI. Supply of and demand for opiate raw materials rich in thebaine, 2017–2022



<sup>a</sup>Data on production and demand for 2021 are based on advance data submitted by Governments.

<sup>b</sup>Data for 2022 are based on estimates submitted by Governments.

with some fluctuations. In 2017 and 2018, global production was lower than global demand, which led to a decline in global stocks. However, in 2019, production was again higher than demand and, consequently, stocks increased. In 2020, both global production and global demand decreased, but stocks grew significantly, to about 767 tons in morphine equivalent.

## Thebaine

168. In 2020, the area sown with opium poppy rich in thebaine in major producing countries doubled compared with 2019, from 3,562 ha in 2019 to 7,148 ha in 2020, a development that was expected, as noted in the report of the Board for 2020 on narcotic drugs. The actual harvested area nearly doubled in France, from 55 ha in 2019 to 92 ha in 2020, while in Spain it went from zero in 2019 to 2,695 ha in 2020. Hungary reported cultivation of 2 ha of this variety of opium poppy in 2020 after a few years of no cultivation, while Australia saw a small increase, from 3,400 ha in 2019 to 3,817 ha in 2020.

169. In 2020, the global production of opiate raw materials rich in thebaine amounted to 182 tons in thebaine equivalent, a 54 per cent increase compared with the 119 tons produced in 2019 (see figure XI). Australia was the leading global producer of those opiate raw materials

(115 tons), followed by Spain (59 tons), France (5 tons) and India (3 tons, with thebaine being extracted from opium).

170. Stocks of opiate raw materials rich in thebaine (poppy straw, concentrate of poppy straw and opium) increased from 188 tons in thebaine equivalent at the end of 2019 to 320 tons at the end of 2020. Those stocks were considered to be sufficient to cover the expected demand by manufacturers worldwide for about 18 months at the 2021 level of demand (210 tons).

171. Global stocks of thebaine-based opiates (oxycodone, thebaine and a small quantity of oxymorphone) decreased from 241 tons in thebaine equivalent at the end of 2019 to 194 tons in 2020. Those stocks were sufficient to cover global demand for thebaine-based opiates for medical and scientific purposes for about 18 months at the 2021 levels of demand (130 tons).

172. Global production of opiate raw materials rich in thebaine grew by over 50 per cent, from 119 tons in 2019 to 182 tons, whereas demand decreased, from 164 tons in 2019 to 118 tons in 2020. This led to an increase in the quantity of stock (320 tons in 2020, compared with 188 tons in 2019).

173. On the basis of data reported by Governments, total stocks of opiates and opiate raw materials are fully sufficient to cover demand for medical and scientific purposes for thebaine-based opiates for more than a year.

174. Despite the fact that the supply of both morphine-rich and thebaine-rich opiate raw material is calculated to be sufficient to cover the demand for medical and scientific purposes as expressed by countries, the Board highlights that there are notable disparities in the availability of narcotic drugs between countries due to the fact that many countries do not accurately estimate their medical need for opioid analgesics. Consequently, and in line with the provisions and objectives of the 1961 Convention as amended, the Board emphasizes the importance of ensuring sufficient availability at the global level and calls upon countries with greater availability of and access to opiate raw materials and opiates to assist countries with limited access and availability in their efforts to increase access to and availability of such substances and raw materials.

## Noscapine

175. Even though noscapine is not under international control, a significant amount of morphine can be extracted

from opium poppy rich in noscapine. For the purposes of monitoring and controlling the production of morphine, the Board requests the countries that cultivate opium poppy rich in noscapine to provide information in a consistent and regular manner about that cultivation and the intended use of and any extraction and use of the morphine alkaloid from this variety.

176. Cultivation of noscapine-rich opium poppy for the purpose of opiate production was reported by France in 2020. France sowed 2,290 ha and harvested 1,790 ha of noscapine-rich opium poppy in 2020 and produced noscapine-rich poppy straw with a gross weight of 826 tons. France reported no extraction of the morphine alkaloid from the noscapine-rich variety of opium poppy that it cultivated.

## C. Overall treaty compliance

### 1. Evaluation of overall treaty compliance

177. In order to ensure the implementation of their legal obligations, States parties to the three international drug control conventions commit to the adoption of a series of legislative and policy measures.

178. These include the monitoring of the licit production and manufacture of and trade in narcotic drugs, psychotropic substances and precursor chemicals and measures related to the permitted uses for controlled substances; the development of a legal framework to combat the trafficking in and diversion of drugs, and related conduct; and the provision of measures for the prevention of illicit drug use and for the early identification, treatment, education, aftercare and social reintegration of persons with drug use and dependence issues.

179. As the monitoring body established under the three drug control conventions, INCB reviews developments in States parties with the aim of supporting them to implement the conventions by assisting in identifying implementation gaps and proposing remedial action.

180. The Board's deliberations are informed by its ongoing interactions with States parties, including the submission of statistical reports by Governments to the Board, the exchange of official correspondence and meetings between government representatives and the Board, the undertaking of country missions by the Board and the participation of Governments in INCB initiatives.



181. For the period under review, the Board reviewed the drug control situation in Guinea-Bissau, Kenya, Lebanon, Mexico, Myanmar, the Philippines, Singapore, Sri Lanka and the United States.

### (a) Guinea-Bissau

182. The Board takes note of the closure, on 31 December 2020, of the United Nations Integrated Peacebuilding Office in Guinea-Bissau, in line with Security Council resolution 2512 (2020). During the reporting period, that Office was involved in strategic coordination to enhance the capacity of law enforcement and justice institutions to combat drug trafficking and organized crime. It also provided support to operationalize a case management database and to populate it with information to track and help analyse drug trafficking and organized criminal cases.

183. UNODC has been providing technical assistance to law enforcement and judicial authorities in Guinea-Bissau for the investigation, prosecution and adjudication of drug trafficking cases. Moreover, Guinea-Bissau developed, with UNODC support, a new national strategic action plan on combating drug trafficking, organized crime and security threats. On 10 August 2020, at the 8754th meeting of the Security Council, the Executive Director of UNODC raised concerns in a briefing to the Council about the resurgence of drug trafficking and the re-emerging influence of criminal operators in the country (see S/PV.8754).

184. In the light of those developments, the Board has sought dialogue with the Government of Guinea-Bissau on drug control matters. The Board supports regional and international cooperation efforts to advance the Government's national strategic action plan.

185. The Board will continue to closely monitor future drug control developments in Guinea-Bissau. INCB stands ready to support the country through operational and learning activities and can help the Government utilize INCB platforms and projects to facilitate the exchange of information for the full and effective implementation of the drug control conventions.

### (b) Kenya

186. The Board takes note of the adoption, in May 2021, of the Narcotics, Drugs and Psychotropics Substances (Control) (Amendment) Bill 2020 by the National Assembly of Kenya. The Board understands that the

purpose of the new legislation is to update the Narcotic Drugs and Psychotropic Substances (Control) Act of 1994, in particular with respect to the penalties applied for offences of possession of and trafficking in narcotic drugs and psychotropic substances.

187. The amendment bill specifically addresses threshold amounts for charges related to possession of controlled substances and stipulates penalties on the basis of the weight of the substances. As part of these changes to the country's drug control law, the amendment bill provides for court-appointed treatment programmes and rehabilitation in instances where a person possesses less than 1 gram of a narcotic drug or psychotropic substance, except cannabis. The amendment bill further defines, for the first time, offences relating to precursors and chemical substances that may be used in the illicit manufacture of narcotics.

188. The Board commends the implementation of education, treatment, rehabilitation and aftercare measures in addition to, or as alternatives to, punishment for drug offences of a minor nature and offences committed by persons who use drugs, in line with the provisions of article 36, paragraph 1 (*b*), of the 1961 Convention as amended, article 22, paragraph 1 (*b*), of the 1971 Convention and article 3, paragraph 4 (*a*)–(*d*), of the 1988 Convention.

189. The Board will continue to monitor changes to the drug control policies of Kenya, including any updates to the country's legal framework with respect to the proportionality of sanctions applicable to drug-related behaviours. The Board looks forward to continued cooperation and dialogue with Kenya on the country's institutional and legislative framework on drug control.

### (c) Lebanon

190. In August 2020, in response to the devastating explosion in Beirut, the Board issued a press release in which it called upon Governments to facilitate the supply of internationally controlled substances that were urgently needed for the medical treatment of those affected and drew the attention of the international community to the possibility of using simplified control procedures for the export, transportation and provision of medicinal products containing controlled substances. The Board remains concerned about continued reports of shortages of medicines, including internationally controlled substances, in Lebanon.

191. Political instability and limited institutional capacity have continued to be exploited by trafficking

networks in Lebanon and the neighbouring Syrian Arab Republic, which have been reported as major source countries for “captagon” and amphetamine by countries in the Middle East, North Africa and, more recently, Europe. Lebanon also continues to report seizures of large quantities of amphetamine tablets.

192. The Board has continued to monitor developments in Lebanon with respect to the country’s legal framework related to cannabis since the adoption of legislation by the Parliament of Lebanon in April 2020 allowing the cultivation of cannabis for medical and industrial purposes.

193. The stated objectives of the law include empowering the State to monitor, regulate and control cannabis cultivation and its derivatives containing psychoactive substances and allowing legal access to the drug for exclusively medical and industrial purposes; promoting sustainable development in areas affected by the illegal and clandestine cultivation of cannabis plant and furthering public interest through development activities and programmes in these areas; educating and raising the awareness of the public of the health dangers linked to the illegal use of cannabis, taking into account WHO guidelines; protecting public health and safety by imposing strict requirements for the cultivation, storage, packaging and transportation of cannabis; and decreasing the burden on the criminal justice system by limiting organized criminal activities linked to trafficking in cannabis and increasing criminal penalties for violations of the legislation.

194. The law establishes the Medical and Industrial Cannabis Cultivation Regulatory Authority, which oversees the implementation of the law and issues licences for every stage of cannabis production and distribution, including the import of seeds and seedlings, planting and harvesting, production and export. Licences are to be awarded to selected Lebanese and foreign pharmaceutical companies, as well as individuals, such as farmers and landowners who meet the licensing requirements and have no criminal record, laboratories and research centres that are deemed qualified. The law does not specify the regulatory process by which cannabis will be made available to the public for use for medical purposes in Lebanon.

195. In its communications with the Government of Lebanon, the Board has emphasized that, while the 1961 Convention as amended allows for the establishment of programmes for the use of cannabis for medical purposes, it also subjects the operation of such programmes to the legal requirements set forth in its articles 23 and 28, in

addition to the obligation to submit the estimates and statistical and trade data applicable to all controlled substances.

196. The Board values its positive cooperation with the Government of Lebanon and looks forward to continuing its engagement with the country.

#### (d) Mexico

197. The Board has continued to monitor legal developments in Mexico pertaining to the regulations for the use and possession of cannabis for both medical and non-medical purposes. The Board appreciates the ongoing dialogue and exchange of information with Mexico about changes to its drug policies and laws. The Board has specifically taken note of the approval by the Supreme Court on 28 June 2021 of the general declaration of unconstitutionality with regard to the regulation of the use of cannabis by adults for non-medical purposes. That decision followed a ruling by the Supreme Court in 2018 that required that personal cannabis use for non-medical purposes be made legal in the country.

198. The Board understands that the Supreme Court’s 2021 decision was aimed at removing those provisions of the country’s General Act on Health that prohibited cannabis use for non-medical purposes, on the basis that prohibition of cannabis use would restrict the right of consumers to freedom of personal development. The constitutional principle of the right to free development of the personality is the basis for authorizing activities related to personal cannabis and THC use, including sowing, cultivation, harvesting, preparation, possession and transportation.

199. The Supreme Court of Mexico has established, with this ruling, that the Ministry of Health may issue permits to adults for the use of cannabis and THC, but not for other substances. The Federal Commission for Protection against Health Risks is to establish guidelines and modalities for the acquisition of cannabis seeds, although these will not include permission to import, trade in or supply the substances or any other act relating to their disposal or distribution. The personal use of cannabis for non-medical purposes must not affect third parties; therefore, the substances should not be consumed in the presence of minors or in public places where there are persons who have not given their consent to the act. The Supreme Court urged the Congress to establish legislation on the personal use of cannabis and THC for non-medical purposes in order to create legal certainty for those consuming the substances.

200. With respect to the regulation of the use of cannabis for medical purposes, the Board takes note of the publication, on 12 January 2021, of the regulations implementing the General Act on Health in respect of public health control measures applicable to the production of, research into and the use for medical purposes of cannabis and its pharmacological derivatives. The objective of the regulations is to control, develop and monitor, from a public health perspective, cannabis raw materials, pharmacological derivatives of cannabis and medicines containing cannabis. The regulations apply to research, production, manufacture, import and export, health-care facilities supplying cannabis medicines, and advertising and marketing.

201. The Board will continue to monitor the changing landscape of cannabis regulation in Mexico and looks forward to continuing the close dialogue with the Government of Mexico on matters relating to drug control policy.

#### (e) Myanmar

202. In June 2016, the Board undertook a mission to Myanmar. Since then, the Board has continued to monitor drug policy developments and the overall conduct of drug control activities in the country, including in areas such as opium poppy cultivation and methamphetamine use and trafficking, which continue to increase. Recent developments in drug control policy include the launch, on 13 January 2021, of the National Strategic Framework on Health and Drugs and regional cooperation on alternative development and crop substitution programmes.

203. The Board notes that, in its resolution 75/287, on the situation in Myanmar, the General Assembly expressed grave concern about the declaration of the state of emergency by the Myanmar armed forces on 1 February 2021 and subsequent actions taken against the elected civilian Government. The Assembly, *inter alia*, called upon the armed forces to immediately stop all violence against peaceful demonstrators and called for safe and unimpeded humanitarian access to all people in need and respect for the safety of medical facilities and staff.

204. The Board has taken note of the recent calls from the Secretary-General that the military in Myanmar should respect the will of the people, refrain from acts of violence and repression and act in the interests of peace, sustainable development and human rights. The deepening humanitarian crisis in the country has grave consequences for access to health care and the provision of medicines containing controlled narcotic drugs and

psychotropic substances. In this context, the Board reminds all Governments that, in acute emergencies, it is possible to utilize simplified control procedures for the export, transportation and provision of medicinal products containing controlled substances, as provided for in the Model Guidelines for the International Provision of Controlled Medicines for Emergency Medical Care, developed by WHO in cooperation with the Board and available on the INCB website.

205. The Board will continue to closely monitor the crisis in Myanmar, in particular for any impacts on public health and welfare and the effective implementation of drug control policies. It will also follow developments with respect to measures to address illicit opium poppy cultivation, given the country's status as a major source of opium.

#### (f) Philippines

206. The Board continued to monitor drug-related developments in the Philippines during the reporting period. Following consultations with the Government, held online during the 129th session of the Board, in November 2020, the Board issued a press release providing information on the overall content of the consultations, noting that it remained in dialogue with the Government on the issue of the alleged extrajudicial targeting of persons suspected of drug-related activity and had been working to secure a mission to the country to review implementation of the three international drug control conventions on the ground as soon as practicable.

207. The Board welcomes the development of the United Nations joint programme on human rights in the Philippines as an important step towards strengthening accountability and curbing human rights violations. It underscores the importance of technical assistance and capacity-building for meaningful improvement to the human rights situation in the country.

208. On 24 February 2021, the Secretary of Justice of the Philippines delivered a statement to the Human Rights Council at its forty-sixth session, in which he stated that his Government welcomed the constructive approach taken by the Council in its resolution 45/33, adopted in October 2020, and that, since the adoption of that resolution, the Government had engaged actively and openly with the United Nations to support the development of the United Nations joint programme on human rights in the Philippines. The Board welcomes the series of consultations held between United Nations agencies and the Government, as well as civil society, which

resulted in the endorsement of key directions for the programme. The Board also welcomes the recent efforts by the Department of Justice of the Philippines to examine the records of certain key areas and cities where most of the deaths linked to police operations had occurred, which revealed certain shortcomings in the work of law enforcement agents. The Board further welcomes that internal investigations into those incidents were conducted, resulting in recommendations for administrative and criminal action towards those responsible.

209. At the same time, senior government officials continue to advocate action against those suspected of drug trafficking and continue to publicly discourage cooperation with human rights organizations. During the reporting period, the Government continued to authorize police operations against those suspected of drug trafficking and use, resulting in the deaths of many individuals.

210. On 14 June 2021, the Prosecutor of the International Criminal Court at the time, Fatou Bensouda, announced the completion of the preliminary examination of the situation in Philippines, having concluded that there was a reasonable basis to believe that the crimes against humanity of murder, torture and the infliction of serious physical injury and mental harm, as well as other inhumane acts, had been committed on the territory of the Philippines between at least 1 July 2016 and 16 March 2019, in connection with the “war on drugs” campaign launched throughout the country. Consequently, the Prosecutor requested judicial authorization to proceed with an investigation. That authorization was granted by Pre-Trial Chamber I of the Court on 15 September 2021.

211. The Board reiterates its position that extrajudicial responses to drug-related activities are in clear violation of the international drug control conventions, which require that States address drug-related behaviours through formal criminal justice responses based on full adherence to internationally recognized human rights standards. In this regard, the Board renews its call to the Government of the Philippines to take immediate steps to stop and prevent any further extrajudicial targeting and to accelerate the ongoing investigations, which could be done through, among other things, the establishment of an independent and impartial review mechanism for any such cases, improvement of data collection and analysis and further strengthening cooperation with the international community, including United Nations human rights institutions, to enable effective monitoring and capacity-building in the areas of human rights and the rule of law.

212. The Board notes that, in December 2020, several senators in the Philippines called for the reestablishment

of capital punishment. On 2 March 2021, the National Economic and Development Authority of the Philippines released the complete list of priority measures that the Government wanted to be enacted in 2021. According to the list, one of the bills planned for passage includes the reinstatement of the death penalty by lethal injection for drug-related crimes as specified under the Comprehensive Dangerous Drugs Act of 2002. In this regard, the Board wishes to reiterate its position that, although the determination of sanctions applicable to drug-related crime remains the prerogative of States parties to the conventions, the Board encourages States that have abolished capital punishment for drug-related offences not to reintroduce it and encourages those States that retain capital punishment for that category of offence to commute death sentences that have already been handed down and to consider the abolition of the death penalty for drug-related offences.

### (g) Singapore

213. During the reporting period, the Board has continued its constructive dialogue on all aspects of the implementation by Singapore of the drug control conventions, including the country’s policies on addressing drug-related criminality.

214. The Board has noted that Singapore has a “drug-free vision” for its communities that is based on a strategy of “harm prevention” through preventive drug education, robust law enforcement and evidence-based treatment, rehabilitation and aftercare. The Board commends Singapore for the effective implementation of and investment in education, treatment, rehabilitation and aftercare measures in addition to, or as alternatives to, punishment for drug offences of a minor nature and offences committed by persons who use drugs, in line with the provisions of article 36, paragraph 1 (b), of the 1961 Convention as amended, article 22, paragraph 1 (b), of the 1971 Convention and article 3, paragraph 4 (a)–(d), of the 1988 Convention.

215. The approach of Singapore to drug control is anchored in protecting communities from the threats of drug use and trafficking. The approach to capital punishment is further characterized as a tool of deterrence to everyone in the drug supply chain, especially those engaged in trafficking and those in possession of drugs above threshold amounts. The Board has engaged in dialogue with Singapore on the use of the death penalty and it has taken note of public reports indicating that executions continue to take place in Singapore in response to drug offences.

216. The Board's position on capital punishment for drug offences is governed by the principle in the international drug control conventions that the determination of sanctions applicable to drug-related behaviour falls within the sovereign prerogative of each State party. However, the Board also seeks to strike a balanced approach that recognizes the wider policy and human rights implications of drug control. As such, the Board reiterates its human rights-based position and calls for the abolition of the death penalty for drug-related offences, reflecting the growing consensus within the international community with regard to the abolition of capital punishment for drug-related behaviours.

217. The Board appreciates the ongoing dialogue with Singapore and will continue to monitor, within its mandate, the country's drug control policies.

#### (h) Sri Lanka

218. The Board has continued to monitor the drug control policies and criminal justice approaches of Sri Lanka, including public reports that the country plans to resume the use of the death penalty for drug-related offences, following a 43-year moratorium. While there are reports of death sentences being issued, the Board understands that the punishment has not been implemented in practice. The Board is concerned about emerging public reports of extrajudicial acts of retribution against persons suspected of drug-related conduct, legal changes resulting in a reversal of the presumption of innocence for some drug-related offences and the non-eligibility for legal aid of persons facing drug-related charges.

219. Since 2019, when there were indications that Sri Lanka was planning to implement a policy change on executions for drug-related offences, the Board has sought to engage the country in a dialogue to seek clarifications on those matters and to encourage the Government to commute death sentences that have been handed down. The Board regrets that, at the time of writing, there has been no progress in securing a dialogue with the Government of Sri Lanka on the drug control situation in the country and wishes to reiterate the INCB position on the death penalty for drug-related offences. While the determination of applicable criminal sanctions falls within the sovereign prerogative of each State party, the Board's human rights-based position includes a call to States to consider the abolition of the death penalty for drug-related offences and to commute those sentences already handed down.

220. The Board will continue monitoring drug control developments in Sri Lanka and pursuing a dialogue to

support the full and effective implementation of the drug control conventions. It trusts that Sri Lanka will improve its cooperation and respond to those efforts of the Board, in line with article 9 of the 1961 Convention as amended, which sets out the Board's responsibility to engage in dialogue with States parties in order to promote cooperation.

#### (i) United States of America

221. The Board takes note of developments pertaining to drug control in the United States since November 2020, including measures adopted in response to the worsening overdose epidemic that, according to the country's Centers for Disease Control and Prevention, resulted in nearly 841,000 deaths in the United States between 1999 and 2019, and 100,000 deaths during the first 12 months of the COVID-19 pandemic alone.

222. The Board has examined new regulations on the use of cannabis for both medical and non-medical purposes in multiple states. While there have been no substantive changes to the drug control responsibilities of federal agencies and cannabis remains controlled under Schedule I of the Controlled Substances Act, an increasing number of acts passed at the state level are in violation of federal law owing to their legalization of the personal use and commercial sale of cannabis.

223. During the reporting period, Connecticut, Montana, New Jersey, New Mexico, New York and Virginia all signed cannabis regulations into state law, in order to allow the use and possession of cannabis by adults for non-medical purposes. The Board recognizes the discretion exercised by federal prosecutors with regard to cannabis offences within states as consistent with the requirements of article 36, paragraph 4, of the 1961 Convention as amended and has taken note of the prosecutions by federal authorities of cannabis-related cases, including in states where cannabis is available for sale for use for non-medical purposes, contrary to the Controlled Substances Act.

224. The Board reiterates that measures to permit the use of cannabis for non-medical purposes are inconsistent with article 4, paragraph (c), of the 1961 Convention as amended, which requires States parties to take such legislative and administrative measures as may be necessary, subject to the provisions of that Convention, to limit the use of narcotic drugs exclusively to medical and scientific purposes. Article 3, paragraph 1 (a) (i), of the 1988 Convention requires the criminalization of the production, manufacture, extraction, preparation, offering, offering for sale, distribution, sale,



delivery on any terms whatsoever, brokerage, dispatch, dispatch in transit, transport, importation or exportation of any narcotic drug or any psychotropic substance contrary to the provisions of the 1961 Convention as amended or the 1971 Convention. Article 3, paragraph 1 (a) (ii), of the 1988 Convention requires the criminalization of the cultivation of cannabis plant for the purpose of the production of narcotic drugs contrary to the provisions of the 1961 Convention as amended.

225. The Board notes that a significant proportion of people in the United States now live in jurisdictions where the use and possession of cannabis for non-medical purposes has been legalized under state law. Moreover, the results of the 2019 National Survey on Drug Use and Health of people aged 12 and older show that past-year initiates to cannabis use increased by 13.6 per cent. In view of this increase, the Board reiterates its call to the United States to continue to take measures aimed at informing its population of the harms associated with drug use and to address the declining perceptions of harm with respect to the use of cannabis. The Board also takes this opportunity to reiterate, in the context of state-level violations of the Controlled Substances Act, the importance of full compliance with the obligations as set out in article 4 of the 1961 Convention as amended.

226. The Board notes that certain data would be particularly useful for analysing the legal and policy framework in the United States concerning the control of cannabis, including data related to intoxications and emergency room visits. While data exist on drug seizures that demonstrate that the United States is a major destination for various types of drugs trafficked from other countries, information about inter-state cannabis trafficking, for example, is sparse. More data collection on cannabis trafficking within the United States between jurisdictions with different levels of control over cannabis could help provide a more complete picture.

227. In pursuit of its mandate to monitor treaty compliance, the Board appreciates its ongoing and productive dialogue with the United States and looks forward to continuing that dialogue with the country's authorities in the coming year, including through a mission to the country as soon as circumstances permit.

## 2. Country missions

228. In keeping with the Board's commitment to dialogue with the States parties to the international drug control conventions, the Board normally conducts several country missions per year.

229. The purpose of country missions is to allow the Board to gain a deeper understanding of the specific realities of drug control in each country visited through dialogue with government officials, regulatory agencies, medical and treatment personnel and civil society groups. In this manner, country missions offer the Board insight into the situation on the ground and allow it to make a more accurate appraisal of the drug control situation in the country visited, to identify good practices, challenges and gaps in implementation and to issue recommendations to the Government on how best to address such challenges and gaps.

230. In order to ensure that the Board's missions benefit from an open and frank dialogue that accurately portrays each country's specific circumstances, the content of the discussions held remains confidential, as do the recommendations conveyed to each Government.

231. For the second consecutive year, the Board has suspended its country missions owing to the global public health situation brought about by the COVID-19 pandemic. Accordingly, during the period under review, no country missions were undertaken. The Board looks forward to resuming the conduct of this essential part of its work at the earliest opportunity.

## 3. Evaluation of the implementation by Governments of recommendations made by the Board following its country missions

232. Every year, the Board reviews developments in countries that received a Board mission two years prior. In order to do so, the Board requests the Governments in question to apprise it of relevant developments since the missions took place, including any legislative or policy actions taken to implement the Board's post-mission recommendations.

233. In 2020, the Board invited the Governments of Armenia, Botswana, Estonia, France, Germany, Jamaica, Luxembourg, Mauritius, Mongolia, Nepal, the Netherlands, Paraguay, Qatar, Tunisia, the United Arab Emirates and the United Kingdom, countries to which missions had been conducted in 2018, to report on any drug policy-related developments that had resulted from the Board's recommendations.

234. The Board wishes to express its appreciation to the Governments of Armenia, France, Germany, Luxembourg, Mauritius, the Netherlands, Paraguay, Tunisia, the United

Arab Emirates and the United Kingdom for submitting responses and renews its call to the Governments of Botswana, Estonia, Jamaica, Mongolia, Nepal and Qatar to provide the information requested at the earliest opportunity.

### (a) Armenia

235. In June 2018, the Board undertook a mission to Armenia to review the drug control situation in the country and to discuss the Government's experience in the implementation of the international drug control treaties. Since the mission, several of the Board's recommendations have been implemented by the Government.

236. The Board acknowledges the establishment of an inter-agency commission aimed at improving coordination among various national agencies in the field of supply reduction and law enforcement. The Board notes that the commission is composed of representatives from relevant stakeholders and is headed by the Chief of Police of Armenia.

237. Since the mission, Armenia has also launched several drug use prevention initiatives, increased the availability of treatment services, including opioid substitution treatment, and added about 50 NPS to the country's list of controlled substances.

238. While welcoming the progress made in the implementation of the Board's recommendations, the Board encourages the Government of Armenia to take additional measures to ensure the availability of controlled narcotic drugs and psychotropic substances in order to meet medical needs.

239. The Board also encourages the Government of Armenia to develop measures to evaluate the extent and scope of drug use in Armenia in order to inform the development of evidence-based drug policies, to continue to bolster its drug prevention and treatment capacity and to consider further measures to address the stigma associated with drug use and dependence, in particular with respect to the mandatory registration of persons entering treatment.

240. The Board acknowledges the effective cooperation of the Government of Armenia in fulfilling the country's obligations under the international drug control treaties and notes that it will continue to work closely with the authorities to facilitate the implementation of its recommendations.

### (b) France

241. In June 2018, the Board conducted a mission to France to discuss the country's implementation of its legal obligations under the three drug control conventions, in particular in the light of developments that had occurred since the previous INCB mission to the country, in 1999.

242. The Board notes with appreciation the strong commitment of France to the international drug control legal framework, which is evidenced by the country's participation in and support of INCB activities.

243. The Board acknowledges the adoption of the French National Strategy on Addictive Behaviours for the period 2018–2022, which encompasses a series of behaviours that may lead to addiction, beyond those related strictly to substance use. The Strategy's six priority areas are: (a) protecting persons from addictive behaviours, starting at the earliest possible age; (b) better responding to the consequences of addiction for individuals; (c) improving responses to trafficking; (d) raising awareness and spreading knowledge; (e) strengthening international cooperation; and (f) creating conditions for effective action in all areas of the country.

244. The Board notes the application of fines for drug-related behaviour of a minor nature that are intended to give effect to the provisions of the international drug conventions that provide for alternatives to conviction and punishment for drug-related offences of a lesser relative gravity, in particular when committed by persons who use drugs. While it welcomes this development, the Board encourages the Government of France to continue to take steps to address, through training and awareness-raising activities for police officers, the potential for the disproportionate application of fines to certain vulnerable groups.

245. The Board acknowledges the Government's efforts in the area of treatment and rehabilitation and encourages it to take further steps to ensure access to treatment, rehabilitation and social reintegration. In this regard, the Board welcomes the significant progress made thus far by the Government, in particular in increasing the availability and scope of treatment and harm-reduction measures in prison settings, as well as ensuring the provision of social housing for homeless persons with drug use and dependence conditions.

246. The Board values its constructive relationship with the Government of France and looks forward to its ongoing dialogue.

## (c) Germany

247. In September 2018, the Board undertook a mission to Germany in order to obtain updated information on the Government's policy, national legislation and practical experiences in the area of drug control, and to discuss important issues of international drug control policy.

248. The Board notes the Government's firm commitment to the objectives of the international drug control system and its active support of the work of INCB, including through participation in INCB activities and projects. In addition, Germany regularly shares background information and details on seizures to enable INCB to substantively analyse the precursors trafficking situation and to identify and address potential weaknesses in drug control.

249. As a major manufacturer and trading nation of pharmaceutical products, including those subject to international control measures, the Board encourages the Government of Germany to continue its efforts to implement I2ES in the country in order to facilitate the exchange of trade information in real time as a further safeguard for stemming the diversion of controlled substances. It notes that work in this area is progressing.

250. The Board commends the Government for its treatment and rehabilitation facilities and for the good functioning of drug demand-reduction services, which are provided free of charge by local authorities. The Board encourages the Government to further build on the existing treatment system and to expand the provision of treatment, including through methadone-substitution therapy, to cover drug use among vulnerable population groups, including persons in detention facilities and migrants.

251. The Board acknowledges the substantial efforts made by Germany to address the illicit manufacture of and trafficking in NPS and non-scheduled precursors and encourages the Government to continue actively sharing information internationally on the subject, including through Project Ion, Project Prism and Project Cohesion, as well as IONICS and PICS.

## (d) Luxembourg

252. In September 2018, the Board undertook a mission to Luxembourg to review the implementation of the international drug control treaties in general, and to obtain updated information in certain areas of drug control, including licit trade in controlled substances, the use of

cannabis for medical purposes and "drug consumption rooms", since the last mission to the country, in 2006.

253. The Board commends the Government for its comprehensive approach to the care of persons affected by drug use and dependence, including in prisons, and for the considerable efforts made in the areas of treatment, rehabilitation and prevention.

254. In this regard, the Board notes the adoption of the fifth national action plan on illicitly acquired drugs and their corollaries covering the period 2020–2024, which contains items intended to bolster coordination, research and measures to reduce risk, harm and nuisance associated with drug use and to strengthen international cooperation. The plan also provides for the expansion of counselling services for young people and the increased use of information and communications technologies in order to reach a broader audience.

255. The Board also notes that the country's cannabis trial project, initiated in 2019, has been extended indefinitely following consultations with pharmacists and medical practitioners and that an evaluation of the programme is planned for release in late 2021.

256. In addition, the Board recalls that, in December 2018, the Government of Luxembourg announced plans to legalize and regulate the use of cannabis for non-medical purposes in the country. In October 2021, the Ministers of Justice and the Interior announced that the plans were moving ahead, subject to parliamentary approval, and would include allowing the cultivation of cannabis for personal consumption for non-medical purposes in private homes. In its interactions with the Government, the Board has reiterated its position that the legalization of the use of controlled substances for non-medical or non-scientific purposes is inconsistent with the obligations incumbent upon States parties to the international drug control conventions.

257. According to information provided by the Government since the Board's mission, the Pharmacy and Drugs Division of the Health Directorate, which is responsible for the control, monitoring and proper use of drugs, in particular narcotic drugs and psychotropic substances, has been restructured and is now supported by a professional team of pharmacists, veterinarians, doctors and technical specialists. The Government also reported that the Pharmacy and Drugs Division had set up a working group with the precursors unit of the Customs Authority in Luxembourg to improve collaboration on the control of chemical precursors, a development welcomed by the Board. Moreover, the Division has established

collaboration with the police, the public prosecutor's office and the EMCDDA national focal point concerning data on seizures.

258. In its communications with the Board, the Government has noted that regional collaboration remains a priority in view of the geographical position of Luxembourg and the important cross-border movements of goods. The Board welcomes this approach and encourages the Government to continue its efforts to bolster drug control activities at the regional level.

### (e) Mauritius

259. The Board undertook a mission to Mauritius in July 2018. The Board notes the Government's commitment to the objectives of the international drug control treaties and the Government's expressed willingness to take necessary action for the comprehensive implementation thereof.

260. Since 2013, Mauritius has been experiencing a surge in the amounts and types of NPS seized and reported as available on the market. The Board welcomes the Government's efforts to actively strengthen its intelligence-collection capacity to disrupt NPS trafficking networks, which has led to an increase in the number of arrests and in the amounts seized. The Board notes the role in particular of the Anti-Drug and Smuggling Unit of the Mauritius Police Force and the Customs Anti-Narcotics Section of the Mauritius Revenue Authority.

261. The Board acknowledges the establishment of a high-level drugs and HIV council within the Prime Minister's Office to ensure a strong, efficient and effective national response to the drug problem in Mauritius that encompasses demand reduction, treatment, rehabilitation and supply reduction, in accordance with the country's National Drug Control Master Plan for the period 2019–2023.

262. The Board welcomes the commissioning by the National Drug Secretariat of a comprehensive national study that is aimed at collecting baseline information on drug use, including: (a) the extent and pattern of drug use in the country; (b) the sociodemographic characteristics of those who use drugs; (c) the age of onset of drug use; (d) frequency and patterns of use; (e) high-risk drug use and the extent of poly-drug use and drug dependence; (f) the accessibility and utilization of services for drug dependence treatment, HIV prevention and care; and (g) community perceptions of the extent of drug use. This national survey will be conducted with the technical assistance and support

of WHO. The Board acknowledges the effective cooperation of Mauritius in fulfilling the country's obligations under the international drug control treaties. The Board notes that it will continue to work closely with the Government to facilitate the implementation of its recommendations.

### (f) Netherlands

263. The Board conducted a mission to the Netherlands in June 2018 to review the drug control situation in the country and to discuss the Government's experiences in the implementation of the international drug control treaties.

264. The Board acknowledges its strong working relationship with the Government of the Netherlands, which actively participates in INCB activities and consistently submits high-quality data to the Board.

265. Under the "controlled cannabis supply chain experiment" initiated by the Government in 2020, the cultivation and wholesale supply of cannabis for non-medical purposes to "coffee shops" were expected to be authorized in up to 10 municipalities for a trial period of four years, followed by an evaluation of the effects on public health and public order, including crime rates. The Controlled Cannabis Supply Chain Experiment Bill (Experiment Act), the accompanying order in council and the ministerial regulation entered into force on 1 July 2020, which marked the start of the preparation phase. During that phase, the Government was reportedly working on measures to select and appoint the growers, who would produce cannabis to be sold in the "coffee shops" located in the 10 participating municipalities.

266. The Board has engaged in close dialogue with the Government on the controlled cannabis supply chain experiment and has repeatedly emphasized that the legislation regulating the experiment is inconsistent with article 4, paragraph (c), of the 1961 Convention as amended, which requires States parties to take such legislative and administrative measures as may be necessary to limit the use of narcotic drugs exclusively to medical and scientific purposes.

267. The Netherlands remains one of the main manufacturing and transit countries for synthetic drugs, including NPS not subject to international control, and the Board welcomes efforts being made by the country to address this situation, including proposed amendments to drug control legislation that would provide new means to counter the increasing manufacture of and trafficking in synthetic drugs.

268. The Board welcomes the recent adoption of measures to combat drug-related organized crime, such as the planned establishment of a new multidisciplinary anti-crime unit, which will enhance cooperation among investigative services and act decisively in combating criminal networks. At the Department of Justice and Security, a temporary and project-based unit will forge coalitions between public and private stakeholders, with a focus on reducing trafficking in cocaine and the manufacture of synthetic drugs.

269. The Board notes that further policies are being developed in order to improve the seizure of criminal assets and the disruption of criminal activity and looks forward to being informed of the outcome of those deliberations in due course.

270. Finally, the Board also notes the comprehensive prevention, harm reduction, treatment and rehabilitation structures in place in the Netherlands and welcomes recent steps to ensure the dissemination of information and materials in English, making them accessible to residents and visitors who do not speak Dutch.

### (g) Paraguay

271. In December 2018, the Board undertook a mission to Paraguay to pursue its dialogue with the Government on matters relating to the implementation of the international drug control conventions and to examine legislative and administrative measures, as well as achievements in preventing drug use and combating drug trafficking, since its previous mission, in 2005.

272. The Board notes that the Government of Paraguay has undertaken several initiatives, including the organization of inter-agency round tables on addiction treatment and restorative justice and the signing of inter-institutional cooperation agreements.

273. To effectively monitor illicit cannabis crop cultivation, Paraguay has been working on a concept note with UNODC through the global illicit crop monitoring programme. The Board acknowledges other efforts of Paraguay to strengthen its engagement with international organizations in the area of drug control and reiterates the importance of having reliable systems in place for the monitoring of cannabis cultivation.

274. Paraguay has implemented several initiatives aimed at improving prison conditions and reducing prison overcrowding. In this regard, the Board encourages the Government to continue to give effect to the provisions of

the international drug control conventions that provide for alternatives to conviction and punishment for drug offences of a lesser relative gravity, in particular when committed by persons who use drugs, including by promoting the use of restorative justice and alternative sentencing practices.

275. While commending the Government for its comprehensive drug use treatment, rehabilitation and prevention efforts, the Board continues to encourage the Government to conduct comprehensive epidemiological studies in order to help gauge the scope and extent of drug use in the country and to inform the development of evidence-based drug policies.

276. The Board encourages the Government of Paraguay to continue its efforts to implement the provisions of the international drug control conventions and looks forward to continued dialogue with the authorities on drug control matters.

### (h) Tunisia

277. In October 2018, the Board undertook a mission to Tunisia to discuss various issues relating to national drug control and the measures necessary to achieve the objectives of the international drug control treaties.

278. The Board notes that the COVID-19 pandemic has slowed the implementation of legislative reforms and projects in the field of drugs. Nevertheless, the Board notes the continued commitment of Tunisia to addressing the drug-related challenges in the country.

279. Since the mission, Tunisia has made substantial efforts to implement the Board's recommendations. The Board commends the Government for the adoption of a national strategy for prevention, harm reduction and management of illicit psychoactive substance use disorders developed in collaboration with UNODC.

280. The Board welcomes the Government's recognition of drug addiction as a health condition, giving rise to the right to medical care. Tunisia has taken measures to improve its drug use treatment framework, including initiating discussions on the introduction of opioid agonist treatment with methadone and drafting an action plan for the prevention and treatment of drug use.

281. While taking note of the efforts of Tunisia to assess and understand drug use in the country, the Board encourages the Government to undertake additional measures to establish a national monitoring centre on drugs and to carry out epidemiological surveys to ensure



that the adoption of drug policy in the country is evidence-based.

282. The Board encourages the Government of Tunisia to provide further information on the establishment of a competent authority for the purposes of the implementation of the 1988 Convention and on the operational status of the National Narcotics Bureau.

283. The Board acknowledges the effective cooperation of the Government of Tunisia in fulfilling the country's obligations under the international drug control treaties and looks forward to its further cooperation.

### (i) United Arab Emirates

284. In September 2018, the Board undertook a mission to the United Arab Emirates with the aim of reviewing the drug control situation in the country and discussing the Government's experience in the implementation of the international drug control treaties.

285. The Board takes note of the Government's commitment to the three international drug control conventions and its efforts to optimize the collection of data and its reporting to the Board pursuant to the treaties. The Board acknowledges the Government's active interest in the use of INCB tools for monitoring the import and export of precursor chemicals and for exchanging information with counterparts.

286. While commending the measures taken to further strengthen the treatment and rehabilitation capacities for drug users, the Board encourages the Government to strengthen its collection of epidemiological data on drug use in the country in order to tailor its drug policy to specific realities and to take measures to address drug use and dependence that are evidence-based.

287. The Board encourages the Government of the United Arab Emirates to continue its efforts to implement the provisions of the international drug control conventions and looks forward to continued cooperation with the Government on drug control matters.

### (j) United Kingdom of Great Britain and Northern Ireland

288. The Board undertook a mission to the United Kingdom in October 2018 to review the drug control situation and the implementation of the three drug control treaties in the country.

289. The Board takes note of measures taken by the Government to prevent drug use and to provide treatment and rehabilitation for persons who use drugs.

290. In particular, the Board welcomes the allocation by the Government of the United Kingdom of substantial new funding for treatment for drug users throughout the country in order to guarantee access to drug use treatment for those seeking it.

291. Since the mission, the Government has undertaken a range of actions aimed at reducing the number of drug-related deaths and has expressed its commitment to research into the complex factors involved in drug-related deaths.

292. In addition, the Board commends the engagement of the United Kingdom in addressing trafficking in drugs and NPS.

293. The Board notes, however, that the country's performance in the fulfilment of its treaty-mandated reporting obligations to the Board remains unsatisfactory, a situation that has a significant impact on global trade and statistics given the size of the country's pharmaceutical industry and its position as a major trader in medicines containing controlled substances. Accordingly, the Board encourages the Government to take measures to ensure the timely and accurate performance of its treaty-mandated reporting obligations.

294. The Board welcomes the regular exchange of information with the United Kingdom and looks forward to continued cooperation with the authorities.

## D. Action taken by the Board to ensure the implementation of the international drug control treaties

### 1. Action taken by the Board pursuant to articles 14 and 14 bis of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol and article 19 of the Convention on Psychotropic Substances of 1971

295. When the Board has objective reasons to believe that the aims of the international drug control treaties are being seriously endangered by the failure of a State party

to comply with the obligations contained in those treaties, or there is a serious situation requiring cooperative action at the international level, the Board can undertake specific courses of action to facilitate compliance. These actions are set forth in articles 14 and 14 bis of the 1961 Convention as amended, article 19 of the 1971 Convention and article 22 of the 1988 Convention. Under those articles, the Board engages in a formal dialogue with the States in question, as well as with the international community, with a view to facilitating and ensuring compliance with the international drug control conventions.

296. Since its establishment, INCB has invoked article 14 of the 1961 Convention as amended and/or article 19 of the 1971 Convention with respect to various States and has engaged in a close dialogue with them with the objective of bringing about compliance with each party's international legal obligations under the conventions. Pursuant to the relevant provisions of the treaties, the names of the States concerned are not publicly disclosed, unless the Board decides to bring the situation to the attention of the parties, the Economic and Social Council or the Commission on Narcotic Drugs following its consultations with the Government in question or if the country in question consents to the invocation of the provisions being publicly disclosed, as in the case of Afghanistan.

297. The present section contains information on measures taken by the Board in relation to Afghanistan and provides details of the Board's engagement with the authorities of Afghanistan since 2001 under articles 14 and 14 bis of the 1961 Convention as amended. It also contains information on the political and security situation in Afghanistan and the action taken by the United Nations in relation to the country.

## 2. Consultations with the Government of Afghanistan pursuant to articles 14 and 14 bis of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol

298. The Board, having determined that Afghanistan had become by far the world's largest illicit producer of opium, and that this seriously endangered the aims of the 1961 Convention as amended, decided at its sixty-eighth session, in May 2000, to invoke article 14 of that Convention with respect to Afghanistan and, under paragraph 1 (a) of that article, to propose to the *de facto* Government of Afghanistan at the time the opening of consultations and the provision of information.

299. At its sixty-ninth session, in November 2000, the Board decided that representatives of the authorities of Afghanistan should be invited to discuss with it measures that they had taken to comply with the provisions of the 1961 Convention as amended and, in particular, any progress made to address the illicit cultivation of opium poppy and the illicit production of and trafficking in opiates. On 28 March 2001, consultations were held in Vienna with high-ranking representatives of the *de facto* Government of Afghanistan and the Board organized a country visit to Afghanistan from 4 to 6 September 2001 to pursue consultations with the authorities of the country under article 14, paragraph 1 (a), of the Convention. As a result of those consultations, the Board found that a serious situation existed that called for cooperative action at the international level and with the authorities of any future governing body in Afghanistan, whether transitional or permanent. Concluding that addressing the serious drug control situation in Afghanistan needed the support and cooperation of the international community, the Board decided to call the attention of the parties, the Economic and Social Council and the Commission on Narcotic Drugs, through its annual report, to the situation in Afghanistan, under the provisions of article 14, paragraph 1 (d), of the 1961 Convention as amended. The Board also observed that, at the time, achieving peace, security and development in Afghanistan was closely linked to addressing the drug control problem.

300. After that period, and following the removal of the Taliban from power, dialogue and consultations were held with the authorities of Afghanistan under article 14 of the 1961 Convention as amended. Two high-level missions to Afghanistan, led by the President of the Board, were held, in August 2002 and May 2016, to support the authorities of Afghanistan in addressing drug challenges and meeting their obligations under the international drug control treaties.

301. Following its high-level mission to Afghanistan in May 2016, the Board decided that there was a need to invoke article 14 bis of the 1961 Convention as amended, with a view to further facilitating the provision of technical and financial assistance to the country. That article states that "in cases which it considers appropriate and either in addition or as an alternative to measures set forth in article 14, paragraphs 1 and 2, the Board, with the agreement of the Government concerned, may recommend to the competent United Nations organs and to the specialized agencies that technical or financial assistance, or both, be provided to the Government in support of its efforts to carry out its obligations under this Convention". On 28 March 2018, the Board received a

letter from the Government of Afghanistan in which the Government expressed its agreement to invoking article 14 bis of the 1961 Convention as amended, in addition to the measures already invoked by the Board under article 14. At its 122nd session, in May 2018, the Board decided to invoke article 14 bis with regard to Afghanistan.

302. Following the invocation of article 14 bis, the Board undertook a series of actions to identify the urgent needs of Afghanistan in addressing serious drug situation in the country, to call the attention of the international community to those challenges and to mobilize international assistance to address them. In order to gauge the nature and scope of the assistance needed, several consultations were held with the Government of Afghanistan, including at the Board's 127th session, held in Vienna in February 2020, to which a high-level delegation from Afghanistan was invited. The Government of Afghanistan called for urgent and sustained technical and financial support by the international community for: (a) building alternative livelihood programmes; (b) addressing linkages between terrorism, insurgency, corruption and drug trafficking; (c) strengthening law enforcement capacities for the interdiction of drug trafficking and investigation of domestic and international drug-related offences; (d) facilitating regional cooperation in addressing drug control challenges; (e) addressing trafficking in chemical precursors used in illicit drug production; and (f) increasing health-care opportunities for the treatment and rehabilitation of drug users, in particular women and young people.

303. With a view to mobilizing international assistance for those areas identified by the Board and the Government, the Board issued a press release on 10 February 2020 on the consultations held, highlighting several areas requiring international assistance.

304. In his statement during the opening meeting of the sixty-third session of the Commission on Narcotic Drugs, the President of the Board also addressed the drug control situation in Afghanistan and reported on the outcome of the consultations with the Government of Afghanistan at the Board's 127th session, noting that the urgent needs in drug control that could be addressed through technical and financial assistance from the competent United Nations organs and specialized agencies had been identified. A similar call for international assistance was made by the President during meetings of the Economic and Social Council in June 2020 and July 2021.

305. In its annual report for 2020, the Board described areas that required support and called for international assistance to Afghanistan under article 14 bis of the 1961

Convention as amended. In an official statement issued on 10 February 2020, the Board stressed that efforts to stabilize the country would not be sustainable unless the country's illicit drug economy was effectively addressed.

306. The Board has consistently sought to integrate the need for support to Afghanistan into all of its ongoing and planned meetings with its partners, including, but not limited to, UNODC, WHO, the Commission on Narcotic Drugs and the Economic and Social Council.

### Latest consultations with the Government of Afghanistan

307. During the reporting period and until the overthrow of the democratically elected Government of Afghanistan in August 2021, the Board continued to pursue consultations under articles 14 and 14 bis of the 1961 Convention as amended. On 15 April 2021, the President of the Board held a meeting with the delegation of Afghanistan on the margins of the sixty-fourth session of the Commission on Narcotic Drugs. The meeting was focused on the latest drug control challenges and needs for technical and financial assistance. The delegation gave a briefing to the President on recent drug control efforts in the country, which included adopting drug action plans and relevant regulations, dismantling laboratories, providing alternative livelihood assistance, introducing measures to address precursor trafficking, developing regional and international cooperation initiatives, and making drug control one of the main priorities of the Government. The delegation reiterated the drug control challenges facing the country, which included armed opposition to opium poppy eradication, the lack of technical equipment for use in counter-narcotics law enforcement, the lack of compliance with agreed memorandums of understanding among certain countries in the region and the lack of a regional strategy to combat drug trafficking.

### Situation in Afghanistan

308. The political and security situation in Afghanistan during the reporting period was dominated by the announcement of the withdrawal of all United States and NATO troops from Afghanistan followed by the rapid takeover by the Taliban of almost the entire territory of the country, resulting in the collapse of the Government of Afghanistan.

309. On 14 April 2021, the President of the United States announced that all United States troops in

Afghanistan would be withdrawn during the period 1 May–11 September 2021. Foreign troops under NATO command also started withdrawal from Afghanistan, which was to be completed by 11 September 2021. In July 2021, the President announced that the United States military mission in Afghanistan would conclude on 31 August, 11 days earlier than initially planned.

310. Soon after the announcement of the military withdrawal, the Taliban launched an offensive against the government forces and rapidly advanced, meeting little resistance and eventually taking over most of the territory of Afghanistan, including Kabul. This led to unprecedented international efforts to evacuate foreign citizens and diplomats, as well as Afghan nationals who had supported foreign missions and many others fleeing Afghanistan fearing for their safety, ahead of the agreed deadline of 31 August 2021.

311. On 17 August 2021, the Taliban held its first press conference following its takeover of Afghanistan. It declared that it wanted peaceful relations with other countries, would respect the rights of women “within the framework of Islamic law” and would not seek retribution against former soldiers and former government members, or contractors and translators who had worked for international forces. On 17 August, the First Vice President of Afghanistan, Amrullah Saleh, proclaimed himself the caretaker President of Afghanistan and announced the formation of an anti-Taliban front in the Panjshir Valley.

## United Nations action

312. On 16 August 2021, the Security Council held an emergency meeting on the situation in Afghanistan, following which the Council issued a statement calling for the cessation of hostilities and the establishment, through inclusive negotiations, of a new Government in Afghanistan that was united, inclusive and representative, with the full, equal and meaningful participation of women. Council members called for an immediate end to the violence and the restoration of security and civil and constitutional order. They emphasized the need for urgent talks to resolve the crisis of authority and to arrive at a peaceful settlement through a national reconciliation process that was both Afghan-led and Afghan-owned.

313. Also at that meeting, the Secretary-General called for the Council to stand as one and to ensure that human rights were upheld, humanitarian aid continued and the country did not again become a haven for terrorism. He highlighted the need to protect civilians and allow humanitarian access and urged Member States to show

willingness to receive Afghan refugees and to halt any deportations to Afghanistan.

314. On the same day, a group of United Nations-appointed human rights experts issued a statement calling upon Member States to take immediate and preventive action to prevent the “slaughter of civilians”, the destruction of essential civilian infrastructure and the undoing of decades of human rights, rule of law and gender equality work to advance the health, education, culture and social infrastructure of Afghanistan. They also urged the Security Council to take appropriate action under Chapter VII of the Charter of the United Nations to safeguard the human rights and humanitarian needs of the people of Afghanistan, including its most vulnerable, and to address the role of Member States to prevent acts of terrorism under international law.<sup>39</sup>

315. On 17 August 2021, the Deputy Special Representative of the Secretary-General for Afghanistan, Resident Coordinator and Humanitarian Coordinator of the United Nations Assistance Mission for Afghanistan issued a statement reiterating the commitment of the United Nations in Afghanistan “to stay and deliver aid to millions of people in need in the country”. He noted that, while some United Nations personnel who were not location-dependent had been temporarily relocated, the majority of humanitarian personnel were staying to support the humanitarian response in line with the principles of humanity, neutrality, impartiality and independence.

316. In addition to other dire humanitarian challenges in Afghanistan, the Board is also concerned about the lack or low level of availability of medicines containing controlled substances in the country, which has been aggravated by the emergency situation. In this context, the Board reminds all Governments that, in emergencies, it is possible to utilize simplified control procedures for the export, transportation and provision of medicinal products containing controlled substances. Competent national authorities may permit the export of medicines containing narcotic drugs and/or psychotropic substances to affected areas in the absence of the corresponding import authorizations and/or estimates. Urgent deliveries do not need to be included in the estimates of the receiving country. In addition, the Board reiterates the importance of taking urgent measures to increase the availability of treatment and rehabilitation programmes accessible to all persons affected by drug use and dependence in Afghanistan, including women and young people.

<sup>39</sup>Chapter VII of the Charter concerns the response of the Security Council to threats to peace, breaches of peace and acts of aggression, and allows for non-military and military action.

317. The Board continues to closely monitor the evolving political and security situation in Afghanistan and stands ready to facilitate the efforts of the international community to support peace and security in Afghanistan, with full respect for human rights and the rule of law. The Board will also continue to work with the United Nations and other international entities to further facilitate measures to address the complex drug control challenges in Afghanistan in the context of supporting peace and sustainable development.

### 3. Supporting Governments' compliance with the treaties

#### (a) INCB Learning

318. INCB Learning is the Board's initiative to enhance the ability of Governments to estimate and assess their needs for internationally controlled substances for medical and scientific purposes, in compliance with the three international drug control conventions. Since its launch in 2016, the programme has been supporting Member States and their competent national authorities in implementing the recommendations contained in the outcome document of the special session of the General Assembly on the world drug problem held in 2016 and the reports of the Board for 2015 and 2018 on the availability of internationally controlled drugs.<sup>40</sup>

319. The ultimate goal of INCB Learning is to ensure the adequate availability of narcotic drugs and psychotropic substances required for medical and scientific purposes, while preventing their abuse and diversion into illicit channels. The submission of timely and accurate national reports to the Board of estimated requirements and statistical data for controlled substances and estimates of annual legitimate requirements for precursors is essential for achieving this objective.

320. INCB Learning supports Member States in fully implementing and complying with the international drug control conventions, in particular through training and awareness-raising. Capacity-building activities include regional training seminars, availability workshops, e-modules, bilateral consultations and, since mid-2020, online training sessions.

321. Since the pandemic began, INCB Learning training seminars have been held online for 128 government officials from 27 countries and territories. In the 12-month

period to 1 November 2021, INCB Learning conducted training for 95 officials from 21 countries in Africa, South America, South-East Asia and the Pacific. On 25 and 26 November 2020, a seminar was conducted, in Spanish, for officials of the competent national authorities of Colombia, Ecuador and Peru. The sessions were attended by 41 officials (of whom 25, or 61 per cent, were women). From 7 to 14 December 2020, a seminar was conducted, in French, for officials from eight countries in West Africa. Nineteen officials (of whom 14, or 74 per cent, were women) from Burkina Faso, the Democratic Republic of the Congo, Gabon, Guinea, Morocco, the Niger, Senegal and Togo participated in the sessions. From 8 to 23 March 2021, a seminar was conducted, in English, for officials from 10 countries in South-East Asia and the Pacific: Bangladesh, Bhutan, Indonesia, Malaysia, Nepal, Philippines, Singapore, Sri Lanka, Timor-Leste and Viet Nam. Of the 35 officials who participated, 24, or 69 per cent, were women.

322. INCB Learning seminars are evaluated anonymously by participants. The evaluations show that the content meets participants' expectations, the sessions are highly relevant and the learning materials are of a high quality.

323. INCB Learning has also developed e-modules to support Governments in adequately estimating and assessing their needs for internationally controlled substances. Available in English and Spanish, the three INCB Learning e-modules offer interactive, self-paced training on the estimates system for narcotic drugs, the assessment system for psychotropic substances and the estimates of annual legitimate requirements for imports of precursors of ATS. In 2021, a fourth module, on the international drug control framework and INCB, was made available, in English and Spanish.

324. In line with the commitment of the Board and the United Nations to multilingualism, the first three INCB Learning e-modules were translated into French and Portuguese during 2021.

325. In total, 1,171 officials, 54 per cent of whom were women, from 132 countries and territories were enrolled in INCB Learning e-modules. Successful completion of the modules is acknowledged with an online certificate and, to date, 1,095 digital certificates have been issued. The Board encourages Governments to register officials of their competent national authorities for the modules and to provide feedback and suggestions for areas in which the development of further training is needed.

<sup>40</sup> E/INCB/2015/1/Supp.1 and E/INCB/2018/Supp.1.



326. In its capacity-building activities, INCB Learning works with key partner organizations the African Union Commission, CICAD, UNODC and WHO.

327. INCB Learning presented its capacity-building responses to the COVID-19 pandemic at an online side event during the sixty-fourth session of the Commission on Narcotic Drugs. The side event was organized by the Government of Switzerland in cooperation with INCB, and it was co-sponsored by Australia, Belgium, Brazil, Canada, Chile, China, Ecuador, El Salvador, France, Honduras, Kazakhstan, Kyrgyzstan, Mexico, the Netherlands, Paraguay, Peru, Poland, Portugal, the Russian Federation, Singapore, Spain, the African Union Commission, the European Commission, OAS, UNODC and WHO. The event was attended by over 100 participants, and key speakers included high-level representatives of the Governments of Honduras and Portugal and of the African Union Commission, as well as experts from Médecins Sans Frontières, UNODC and WHO. During the side event, the African Union Commissioner for Health, Humanitarian Affairs and Social Development highlighted the relevance and impact of the technical assistance provided by INCB Learning through its capacity-building responses.

328. The second of the nine pillars of the African Union Plan of Action on Drug Control and Crime Prevention (2019–2023) covers availability of and access to controlled substances for medical and scientific purposes while preventing their diversion, with an emphasis on removing barriers that reduce access to medicines. INCB Learning has been working closely with the African Union Commission in this regard and is to provide a technical briefing to the Specialized Technical Committee on Health, Population and Drug Control at its fourth ordinary session, which is expected to be held in 2022.

329. A new section, containing questions frequently asked by competent national authorities, was included on the INCB Learning website. The section, currently available in English, French and Spanish, provides information on compliance with the provisions of the three international drug control conventions in the regulatory control and monitoring of the licit trade in narcotic drugs, psychotropic substances and precursor chemicals. Drug control officials can use the section to find information related to, for example, accurate submission of forms and timelines. Access to all the forms is also provided in that section.

330. To assist competent national authorities in their duties, all training materials have been consolidated and are now available on a dedicated page of the INCB

Learning website. The page provides links to different sources of information, training materials, various guidelines, tools and forms that support reporting to INCB.

331. INCB Learning newsletters are published regularly on the INCB Learning website and disseminated to competent national authorities upon subscription. In that connection, the Board invites national drug control officials interested in INCB Learning activities and learning tools to subscribe to the newsletter by sending an email to [incb.learning@un.org](mailto:incb.learning@un.org).

**332. The Board is grateful for the contributions to INCB Learning made by the Governments of Australia, Belgium, France, the Russian Federation, Thailand and the United States, and reiterates its invitation to Governments to consider actively supporting INCB Learning by participating in its activities and providing the resources required to ensure the programme's continuation and expansion.**

## **(b) International Import and Export Authorization System**

333. Pursuant to article 31 of the 1961 Convention as amended, article 12 of the 1971 Convention and relevant resolutions of the Economic and Social Council, international trade in narcotic drugs and psychotropic substances requires both import and export authorizations. Given the growing volume of licit trade in internationally controlled substances, which leads to an increasing workload for competent national authorities, it is essential to modernize the import and export authorization system in order to keep pace with rapidly developing supply chains. This will further reduce the risk of diversion of controlled substances while ensuring the adequate availability of and access to those substances.

334. I2ES, an Internet-based electronic system developed by the Board together with UNODC, with financial and technical support from Member States, was designed to promote paperless trade in internationally controlled substances by facilitating the online exchange of import and export authorizations.

335. Available to all Governments at no cost, I2ES serves as a safe and secure platform for generating and exchanging import and export authorizations between trading countries while ensuring full compliance with all provisions of the 1961 Convention as amended and the 1971 Convention. The system helps competent national authorities to reduce errors in data entry and save time and communication costs.

336. The estimates of requirements of narcotic drugs and the assessments of psychotropic substances established by States parties and endorsed by the Board are automatically synchronized with I2ES. After an import authorization has been approved, the system calculates in real time the remaining balance of the estimates or assessments available to the importing country. Trading partners registered with the platform can access that information at any time. Authorities of the trading countries can also use the system to securely communicate and exchange information directly with their counterparts if further clarification relating to a transaction request is required.

337. Unlike paper-based systems, in which authorizations can be further processed only after their physical delivery and receipt, the online exchange of import and export authorizations using I2ES enables the instantaneous transfer of data between trading countries, thus facilitating a much faster approval process. To provide a fully electronic and paperless international trade system, the Board established the possibility for Governments to use electronic signatures along with the import and export authorizations processed using the system.

338. In its resolutions 55/6, 57/10, 58/10 and 61/5, the Commission on Narcotic Drugs set out actions to further the establishment of an import and export authorization system and invited the secretariat of INCB to administer and monitor I2ES and report on the progress made on its implementation.

339. In the outcome document of the thirtieth special session of the General Assembly, Heads of State and Government recommended expediting the process of issuing import and export authorizations for licit international trade on narcotic drugs and psychotropic substances by using I2ES.

340. The COVID-19 pandemic has highlighted the important role that I2ES plays in the international drug control system. The Board notes that many countries have initiated emergency procedures to expedite the authorization process for the trade in narcotic drugs and psychotropic substances in order to respond to heightened demand, stemming from the pandemic, for medicines containing controlled substances. Several countries already registered with I2ES were able to leverage the advantages of the platform to rapidly respond to their needs.

341. The Board notes that, in the 12-month period to 1 November 2021, 25 Governments registered with I2ES, bringing the total to 89 Governments that have registered

with the system. Of those, 70 Governments have an active administrator account.

342. In order to encourage the further adoption of I2ES among Member States, INCB has carried out multiple activities to raise awareness of the system and improve the technical capabilities of competent national authorities.

343. Technical webinars were held to introduce the competent national authorities of Botswana, Montenegro and Poland to the functions of I2ES. An introductory session was conducted during an INCB Learning webinar for representatives from the competent national authorities of Burkina Faso, Cameroon, the Central African Republic, the Democratic Republic of the Congo, Gabon, Guinea, Morocco, the Niger, Senegal and Togo.

344. The efforts made by the Board can be reinforced and complemented only by the ongoing commitment of Member States in supporting the adoption of I2ES as the unequivocal choice of a digital international trade system for controlled substances. In its resolution 61/5, the Commission on Narcotic Drugs invited Member States to consider providing extrabudgetary resources for the maintenance and promotion of I2ES.

345. Know-how at the operational level and commitment to using I2ES at the decision-making level continue to be significant barriers to be overcome. The Board reiterates its commitment to working hand in hand with Member States on activities that encourage the wider adoption of the system and greater user engagement.

346. It is essential for Governments and the Board to continue their cooperation to implement I2ES in order to fully realize the benefits of the platform and facilitate the more rapid trade of internationally controlled substances.

**347. INCB encourages Governments that have not yet done so to request the assistance of the INCB secretariat in implementing and integrating I2ES into their national systems, including through the provision of guidance on first steps and initial training.**

348. Following the recommendations contained in Commission resolutions 58/10 and 61/5, the Board has continually expressed the need for extrabudgetary resources to increase awareness of I2ES, improve the capacity of Governments to use it and expand the functionalities of the system to address the challenges faced by Member States.

349. A multilingual user interface would facilitate the adoption of I2ES in more countries and regions. The

possibility of adding nationally controlled substances to the import authorizations processed using I2ES would enable competent national authorities to comply with domestic legal obligations and avoid the burden at the operational level of running two parallel systems, one for nationally controlled substances and another for internationally controlled substances. In addition, trade data stored in I2ES could be exported for post-processing purposes, which would help competent authorities to expedite and help alleviate the reporting burdens of countries on substances controlled under the international drug control treaties. These functions to improve I2ES cannot be realized without financial support from Member States.

350. The Board wishes to reiterate to Member States the need for continual support, including extrabudgetary resources, to expand the functionality of I2ES, address technical issues identified by Governments and provide expanded training to further support countries in adopting and implementing the platform.

### (c) Global Rapid Interdiction of Dangerous Substances Programme

351. The INCB GRIDS Programme focal point networks form the core of activities under the Board's operational projects on dangerous substances, namely Project Ion and the OPIOIDS project. These networks comprise an infrastructure that enables the rapid exchange of information and alerts, facilitates bilateral and multilateral operational actions that assist with investigations and provides participating agencies with practical solutions to stop trafficking in non-scheduled substances. As at 1 November 2021, there were 1,824 Project Ion focal points representing 519 agencies from 188 Governments and 1,802 OPIOIDS project focal points from 184 Governments.

352. Through those focal points, in 2021, INCB coordinated Operation New Horizons, bringing together 164 officers representing 70 Governments and four international partners (INTERPOL, Oceania Customs Organization, Universal Postal Union and WCO). During the operation, more than 230 communications were exchanged through IONICS and 113 kg of tramadol (1.1 million tablets) and 194 kg of tapentadol (1.7 million tablets) were seized. The operation focused on key sources and redistribution points for consignments of the two substances trafficked primarily through the international post, express mail and courier services, air cargo and freight forwarders.

353. The above operation serves as an indication of what can be achieved through operational activities

facilitated by the real-time communication platform IONICS to promote the sharing of intelligence and actionable information by law enforcement authorities to prevent dangerous substances from reaching consumer markets. The number of incidents shared through IONICS has consistently increased and, in 2021, exceeded 20,000. In addition, more than 100,000 pieces of intelligence have been received and analysed. As a result, Governments have been able to carry out investigations and analyses, which, in turn, have led to seizures of dangerous substances, arrests of traffickers, prosecutions and disruptions of international trafficking networks. **The Board encourages the Governments of Andorra, Azerbaijan, Belarus, Burundi, Cabo Verde, the Central African Republic, Chad, Comoros, the Congo, the Democratic People's Republic of Korea, the Democratic Republic of the Congo, Djibouti, Equatorial Guinea, Eritrea, Eswatini, Gabon, Guinea-Bissau, the Holy See, Honduras, Iran (Islamic Republic of), Kazakhstan, Kyrgyzstan, Lesotho, Liberia, Liechtenstein, Madagascar, Malawi, Mauritania, Mongolia, Morocco, Nauru, Nepal, Niue, Panama, the Republic of Moldova, San Marino, Sao Tome and Principe, Serbia, Seychelles, Sierra Leone, Slovenia, South Sudan, the Syrian Arab Republic, Tajikistan, Togo, Tonga, Turkmenistan, Uganda, Yemen and Zimbabwe to nominate both law enforcement and regulatory focal points to exchange communications using IONICS. The Board is pleased to note that the Governments of the Marshall Islands, Oman, Timor-Leste and Zambia have been using IONICS since 1 November 2020.**

354. The GRIDS Programme further facilitates case meetings based on the information and intelligence made available through the communication platforms and from other sources, at the request of the Governments concerned, which has strengthened investigations, expanded operational capacities and facilitated international cooperation.

355. An important element of the work undertaken by the GRIDS Programme concerns public-private partnerships and the provision of support to Governments to develop and implement voluntary action to prevent dangerous substances from reaching end users. In this work, the Programme focuses on four key areas, namely manufacture, marketing, monetization and movement of dangerous substances. In the 12-month period from 1 November 2020, six expert group meetings and events were convened that brought together leading global private sector partners from these four areas, for example, e-commerce platforms, e-wallet services, chemical reference standards companies, freight forwarders, private postal and express mail operators and express courier services. These forums resulted in

operational outcomes, with a substantial number of vendors of dangerous substances being removed from e-commerce platforms, thereby reducing the availability of dangerous substances.

356. The GRIDS Programme also supports Governments in their response to the increasing trafficking in non-medical synthetic opioids, the group of substances that is most frequently associated with fatalities. In 2018, the Board first published a list of fentanyl-related substances with no known legitimate uses. This list, which has been updated on an ongoing basis, serves as a practical tool to prevent the diversion of and trafficking in these substances and reduce their availability to potential end users. The most recent version of that list contains 152 substances, of which 130 have not been scheduled under the international drug control conventions, and was circulated to Governments in November 2021.

357. Building on the success of the above list, the GRIDS Programme has developed, through an expert group, a second list with non-fentanyl opioids and other NPS which have no legitimate uses beyond limited research and analytical purposes. This list contains 56 non-fentanyl opioids and related NPS, of which 52 have not been scheduled under the international drug control conventions. This list was also circulated to Governments in November 2021.

358. **The Board invites all Governments and, through them, industry partners, to voluntarily refrain from any manufacture, marketing, export, import or distribution of the substances on these lists. As these substances have no legitimate purposes, Governments may also use the lists for interdiction actions.**

359. Between 1 January and 1 November 2021, four confidential global alerts and special notices were circulated to GRIDS Programme focal points, including a notification in March 2021 on the emergence of and increased number of reports on encounters involving xylazine, an NPS that is increasingly encountered in misdeclared consignments and in combination with fentanyl-related substances. Another special alert issued in March 2021 alerted focal points to numerous falsely declared tramadol consignments sent by means of express courier services from Spain.

360. The GRIDS Programme continued to provide officers worldwide with access to and training on the Board's intelligence tools throughout the ongoing COVID-19 pandemic, through distance-learning technologies. Between 1 January and 1 November 2021, 10 training sessions were held on topics including information

exchange using IONICS, intelligence development, awareness of NPS and safe handling and interdiction methods for opioids. A total of 750 law and regulatory enforcement officers, representing 83 Governments and three international organizations, took part in those training sessions.

#### (d) Project Prism and Project Cohesion

361. Project Prism and Project Cohesion, two international initiatives of INCB, continued to serve as platforms for international cooperation and the secure exchange of real-time information to address the diversion of chemicals used in the illicit manufacture of synthetic drugs (Project Prism) and heroin and cocaine (Project Cohesion).<sup>41</sup> The two projects currently bring together operational focal points from law and regulatory enforcement entities from more than 140 Governments worldwide.

362. During the reporting period, INCB continued to serve as a focal point for the exchange of information on suspicious transactions in legitimate trade, trafficking trends, identified *modi operandi* and emerging non-scheduled chemicals, including through PICS (see paras. 363–365 below). Six special alerts were circulated to focal points, including on the following: (a) the emergence of ethyl *alpha*-phenylacetoacetate (EAPA) and methyl 3-oxo-2-(3,4-methylenedioxyphenyl)butanoate (MAMDPA), two new designer precursors for ATS; (b) the cancellation of the import licence of a company in Costa Rica; (c) the seizure of fentanyl chemicals in the Netherlands; (d) new controls for fentanyl precursors in Mexico; and (e) results of the Board's Operation Missing Links in relation to an alternative precursor used in the illicit manufacture of amphetamine in "captagon" tablets.

#### (e) Precursors Incident Communication System

363. PICS is the INCB operational communication platform, designed to connect and facilitate the direct exchange of information between the competent national authorities responsible for the control of precursors, in particular law enforcement, customs and regulatory authorities. For example, PICS has been used to communicate information on effected seizures and on investigations into chemical diversions or attempts by national

<sup>41</sup> A summary of the minimum action needed for international multilateral cooperation under Project Prism and Project Cohesion is available in the INCB report on precursors for 2015 (E/INCB/2015/4, box 2).



bodies in a position to identify, suspend or stop suspicious shipments entering, transiting or leaving their territory. By providing a mechanism for the exchange of actionable information in a secure environment, PICS has provided leads to national authorities to initiate back-tracking investigations. An upgraded version of PICS was launched in October 2021.

364. As at 1 November 2021, more than 300 agencies had registered with PICS, with some 600 registered users from 127 countries and territories. Since its inception, information on more than 3,400 incidents involving trafficking in precursors has been shared. During the reporting period, almost 300 new incidents involving almost 800 communications on individual substances were shared through the platform. Information on more than 40 substances that are not scheduled in any of the tables or included in the international special surveillance list of non-scheduled substances was also communicated to the Board.

365. The Board reiterates that the usefulness of communications through PICS depends by and large on the timeliness of the information and on the inclusion of actionable information, such as shipping documents and *modi operandi*, which can then trigger and facilitate immediate investigative follow-up and cooperation between law enforcement agencies. Early communication of incidents involving chemicals not included in Tables I or II of the 1988 Convention also helps to identify emerging trends and generate information for use with industry partners to prevent misuse of such substances as substitutes for controlled chemicals by illicit drug manufacturers.

## (f) Operation Acronym

366. Operation Acronym, a targeted, time-bound operation aimed at combating trafficking in precursors over the Internet (surface web), was conducted in February 2021 with the participation of 34 countries and four

international organizations. INCB held informal consultations with several countries regarding legal and operational challenges encountered during the period, as well as possible follow-up activities emerging from the operation.

367. The operation was conducted with support of the members of the Project Prism Task Force and was focused on three major trends highlighted by the Board in recent years, namely: (a) the role of domestic markets for internationally controlled precursors; (b) the use of non-scheduled chemicals and designer precursors and pre-precursors to circumvent controls; and (c) the use of the Internet, including legitimate business-to-business e-commerce platforms, in supplying precursors for illicit activities. Further details on the operation and its key outcomes are included in the report of the Board for 2021 on the implementation of article 12 of the 1988 Convention.

368. The Board commends all countries and private partners who participated in Operation Acronym. The Board will continue to support Governments' efforts in this regard and will capitalize on the lessons learned during the operation, in particular with regard to preventing trafficking in precursor chemicals over the Internet.

## (g) International Narcotics Control Board newsletter on precursors

369. By October 2021, three INCB newsletters on precursors had been sent to some 800 recipients, including competent national authorities, Project Prism and Project Cohesion contacts and PEN Online users. The newsletters included information on recent developments, thematic issues and tools related to precursors control available to Governments. Among the thematic issues that the newsletters covered were the proliferation of non-scheduled chemicals and designer precursors and the need for increased attention to article 13 of the 1988 Convention and to the role of equipment in preventing illicit drug manufacture.