CHAPTER – II
THE GLOBAL DRUG SCENARIO: A COMPARATIVE ANALYSIS

Introduction

Drug trafficking is not an isolated phenomenon. The menace has extended its tentacles sans geographical boundaries. Hence, before discussing the effectiveness of the Indian law to check illegal drug trafficking, a brief overview of the global situation with regard to emerging trends in drug abuse and trafficking, seems to be highly necessary. A brief analysis of the situation in various nations\(^1\) is attempted hereunder:

- **Africa**

  The history of psychoactive substance use in Africa is relatively short except for reports on the use of traditional substances such as alcohol, cannabis and khat\(^2\). The introduction of *prescription drugs* to Africa drastically increased the availability and use of psychoactive substances. Notwithstanding this alcohol, cannabis and khat still remain the most common substances of abuse in Africa\(^3\). The main illicit drug in Africa is cannabis, which is abused by over 34 million people in the region\(^4\). The cannabis plant is illegally cultivated throughout Africa, and cannabis is smuggled within the region and
beyond, mainly into Europe and North America. While cannabis herb is illicity produced in all sub regions of Africa, Morocco continues to be one of the world’s largest suppliers of cannabis resin. The trafficking in and abuse of cocaine and heroin are the most recent developments in some African countries that had no previous experience with these drugs. While cocaine continues to be abused mainly in cities and tourist centres in Southern and Western Africa, there is concern that the increased transshipment of illicit drugs through the area of the Gulf of Guinea might have a spillover effect, resulting in increased drug abuse in countries in those sub-regions.

A particularly worrisome development in Africa is the large-scale trafficking in cocaine. Both the number of carriers apprehended and the volume of bulk seizures of cocaine in Africa have increased significantly. Taking advantage of the inherent weakness of Africa, drug trafficking networks are using the region as a transit area for smuggling cocaine from South America through Western, Central and Southern Africa. In addition, heroin from West and South-East Asia is smuggled through Eastern Africa, to be shipped to illicit markets in Europe; and, to a lesser extent, to North America.

Cultivation and production of cannabis, which remains the major drug of abuse in Africa, is on the rise, despite a marked reduction in cannabis
production in Morocco, the world’s largest producer of cannabis resin, and despite intensive eradication efforts undertaken by the authorities. Africa’s share of global trafficking in cannabis has been increasing continuously, as corroborated by number of multi-ton seizures of cannabis herb and resin in Africa. Many African countries face serious difficulties in providing adequate treatment and rehabilitation for persons abusing cannabis, as health-care facilities often lack the necessary resources\textsuperscript{10}. As a spill over effect of the ongoing transit trafficking in heroin in Eastern Africa, the abuse of heroin has become a problem there. In addition, heroin is now being smuggled by groups from Western Africa to that sub-region, in exchange for cocaine that is smuggled into South Asia, where the abuse of cocaine appears to have spread\textsuperscript{11}. The trafficking in cocaine in Africa is fuelled by rising demand for, and abuse of, cocaine in Europe\textsuperscript{12}. Although the abuse of opiates has remained limited in Africa, the increasing abuse of such drugs, especially by injection, is becoming a cause of concern, particularly in African countries along the Indian Ocean\textsuperscript{13}.

In Africa, the continued availability of illicitly manufactured and diverted pharmaceutical products containing narcotic drugs and psychotropic substances in unregulated markets has, for many years, been a major problem for national regulatory authorities in ensuring the safety and efficacy of
medicine. At the same time, controlled substances for legitimate medical purposes, in particular, opiates for the treatment of pain, are often not available. In the Western Cape area, while methamphetamine is mainly smuggled from China, some of it is also illicitly manufactured in laboratories.

To tackle these problems, national drug control master plans have been adopted by Algeria and South Africa. Similarly, a number of African Governments including Algeria, Morocco, Lesotho, Malawi, Libyan Arab Jamahiriya, Nigeria, Egypt, United Republic of Tanzania, Kenya, Tunisia etc. have adopted many legislative and administrative measures in tune with international conventions to combat drug trade and money laundering. However, Equatorial Guinea remains the only African State that is not yet a party to any of the three main international drug control conventions. In addition, Chad has not yet acceded to the 1972 Protocol amending the 1961 Convention; Liberia is not yet a party to the 1971 Convention; and Gabon, Namibia and Somalia are not yet parties to the 1988 Convention.

African Governments continue to take efforts to counter money-laundering in co-operation with the relevant sub regional groups, notably the Eastern and Southern Africa Anti-Money Laundering Group (ESAAMLG) and
the Intergovernmental Action Group against Money Laundering in West Africa (GIABA). In Namibia, to counter money-laundering, the Financial Intelligence Act entered into force in May 2009, while Senegal recently adopted legislation aimed at combating the financing of terrorism, supplementing its existing legislation against money laundering. A number of African countries have established or are in the process of establishing integrated national programmes to combat drug trafficking, drug abuse and associated transnational organized crime. The programmes, which have been developed by UNODC in partnership with national authorities, tackle a variety of issues such as capacity-building in law enforcement, drug supply and demand reduction, treatment for drug abusers, criminal justice, regional cooperation and activities to counter money-laundering, and are currently being implemented in Cape Verde, Guinea-Bissau and Mali. The international network of drug dependence treatment and rehabilitation resource centres (Treatnet) was recently launched jointly by UNODC and WHO to improve the quality of treatment for drug-dependent persons through co-operation, information exchange and the empowerment of selected resource centres in all regions of the world.17

However, the efforts of African Governments proved to be lukewarm due to the lack of adequate drug control mechanisms and skilled human resources.18 It is feared that if left unchecked, the problem of drug trafficking in
Africa might further aggravate existing social, economic and political problems\(^\text{19}\).

- America
  
  - Central America and the Caribbean

The region continues to be used as a major trans-shipment area for cocaine from South America destined for North America and Europe\(^\text{20}\). About 90 per cent of the cocaine entering North America every year passes through Central America, while the Caribbean region is situated along one of the main cocaine trafficking routes leading to Europe. The main smuggling routes are the maritime corridor of the Pacific Ocean, and the Caribbean Sea\(^\text{21}\).

Drug trafficking by sea remains a major problem in countries in Central America and the Caribbean. Furthermore, light aircraft, operating from clandestine airstrips and landing in remote areas, are increasingly being used to transport cocaine. Drug traffickers are increasingly using stolen or falsified aircraft registration numbers when transporting illicit consignments by air. Drug trafficking has become a major security threat and is contributing to an increase in drug abuse. The number of homicides linked to organized crime has
risen in areas where criminal groups fight to gain control of local drug distribution. The increase in criminal acts, such as robbery and kidnappings, may be linked to the increasing availability of drugs, which in turn may be attributable to the fact that drug traffickers are frequently paid in drugs rather than cash. Moreover, major tourist areas in the Caribbean continue to be a hub for drug abuse. There are indications that the abuse of psychotropic substances, particularly benzodiazepines, is increasing in the region. Jamaica continues to be a major producer and exporter of cannabis in the Caribbean, despite the efforts of its law enforcement agencies. The number of incidents of cocaine trafficking by air in Honduras has increased. There has also been an increase in drug trafficking by air in Haiti. The number of light aircraft landing on clandestine airfields has increased over the past three years. There appears to have been a resurgence of LSD trafficking in Central America.

Institutional weaknesses and corruption seriously undermine efforts by Governments to combat the drug menace. The link between local drug trafficking and organized crime perpetrated by youth gangs or ‘mafias’ in several countries in the region, especially El Salvador, Guatemala and Honduras, continues to be a threat. The smuggling of arms and ammunition in
exchange for drugs continues to prevail in the region, as reported in Honduras and Panama\textsuperscript{22}.

Trafficking in amphetamine-type stimulant precursors is increasing\textsuperscript{23}. The use of money transfer services to pay for illegal drug consignments is also on the rise. Money carriers have been detained in Antigua and Barbuda, El Salvador and Honduras\textsuperscript{24}.

- **North America**

The abuse of, trafficking in and manufacture of drugs are major problems in North America, which is comprised of Canada, Mexico and the United States, and these countries devote substantial resources to counteract the drug problem within and beyond their borders. The excellent regional cooperation, particularly in the area of law enforcement, has yielded significant results mostly with regard to dismantling major drug trafficking operations\textsuperscript{25}.

In the United States, the annual survey, “Monitoring the Future” has shown a decline for four consecutive years in the proportion of secondary students using illicit drugs. As a result, the annual prevalence rate for various
drugs is currently 10-30 percent lower than that prevailed ten years ago. There has been a significant decline in the percentage of students in secondary school who reported lifetime use of cannabis; there have also been declines in their lifetime use of other drugs, such as methamphetamine, MDMA, cocaine and heroin. It appears that such declines are largely related to the rising percentage of adolescents perceiving the abuse of these drugs as high risk. However, the high and increasing level of abuse of prescription drugs by both adolescents and adults is a serious cause of concern. The gradual increase in the abuse of sedatives, tranquillizers and narcotic drugs other than heroin by the general population have resulted in prescription drugs becoming the second most abused class of drugs after cannabis. The abuse of prescription drugs such as fentanyl, oxycodone and hydrocodone has lead to a rising number of deaths. There is a noticeable increase in the abuse of fentanyl, a synthetic opioid 80 times as potent as heroin, which is not only diverted from licit distribution channels but also illicitly manufactured in clandestine laboratories.

The spread in the abuse of prescription drugs is found to be related to the increasing use of the World Wide Web as a global drug market. Illegal internet pharmacies continue to proliferate, despite international law enforcement efforts. The threat posed to United States by the trafficking and abuse of methamphetamine is high and increasing. Production, distribution and
availability of methamphetamine have expanded to more areas of the country; however, national-level data indicate an overall decline in rates of methamphetamine use. Nevertheless, demand for the drug remains relatively high. In fact, in the year 2003 more than 1.3 million youngsters were found to be voluntarily seeking treatment for abuse of the drug\textsuperscript{30}. While United States drug law enforcement agencies have been successful in closing down illicit methamphetamine laboratories, domestic illicit manufacturers of methamphetamine have largely been replaced by transnational drug trafficking organizations, based in Canada and Mexico\textsuperscript{31}.

Cannabis abuse is rising in Canada from an annual prevalence among persons aged 15 and above of 6.5 percent in 1989 to 14.1 per cent in 2004. Illicit cannabis plant cultivation has become a thriving illegal industry in Canada, including outdoor cultivation and more sophisticated indoor crop growing used to produce cannabis with high tetrahydrocannabinol (THC) content. The biggest producer of cannabis in the region is, however, Mexico. In addition to cannabis grown in Mexico, Mexican drug mafia have increased the size and sophistication of their cannabis plant cultivation operations on public and private lands in the United States, producing cannabis with a higher THC content by use of new techniques\textsuperscript{32}. The involvement of organized criminal groups has led to Canada being used as a source country for cannabis,
methamphetamine and MDMA for domestic abuse or for the illicit market in the United States and consequently, the importance of illicit methamphetamine exports to the United States has declined\textsuperscript{33}.

The United States has enacted the Patriot Act for restricting even the sale of medication containing pseudo-ephedrine and ephedrine. Limits on imports of such drugs have also been introduced in Mexico\textsuperscript{34}. However, in Canada abuse of MDMA, MDA and \textit{Gamma – Hydroxybutyric Acid} (GHB) remains unchecked among broader user groups including youth attending clubs, private parties, secondary schools colleges and universities\textsuperscript{35}. Mexican mafia is having the upper hand in the drug trafficking in United States. They are expanding their control to areas formerly under the influence of Colombian, Dominican and other criminal groups\textsuperscript{36}.

In recent years, drug trafficking organizations have expanded their illicit cannabis cultivation operations in the United States, thus avoiding risky border crossings and keeping production sites closer to the market. The potency of samples of cannabis seized in the United States continued to increase; the average THC content of seized cannabis exceeded 10 per cent in 2008, the highest level ever recorded in that country. That increase was mainly attributed
to the use of technologically advanced methods to maximize the THC level of cannabis grown indoors in Canada and the United States.

Internet pharmacies continue to be the main channel used for the illicit distribution of pharmaceutical preparations in the United States. However, authorities have reported that the number of Internet pharmacies decreased in 2008, owing to increased efforts by law enforcement agencies. In addition, according to law enforcement authorities, street and motorcycle gangs are becoming increasingly involved in the retail-level distribution of diverted prescription drugs. While the measures to control precursors of methamphetamine in Mexico have led to a decrease in the illicit manufacture of and trafficking in methamphetamine, drug trafficking organizations have reacted in two ways: by shifting their operations to other countries, such as the United States and countries in Central and South America, and by smuggling into Mexico diverted precursor chemicals, including chemicals from Central and South America. In Canada, the high level of illicit manufacture of amphetamine-type stimulants is fuelled by the acquisition of bulk quantities of precursor chemicals by organized criminal groups. In the United States, ketamine continues to be among the active ingredients found in adulterated MDMA (“ecstasy”) tablets. The distribution of such tablets originating in Canada appears to be increasing. In Canada, approximately 23 tons of khat
were seized in 2008, less than the quantity seized in 2007. The majority of the seized khat shipments had arrived by courier package or had been concealed in air cargo. In Canada, the demand for khat is concentrated in urban centres with large East African communities.

The decline in the abuse of drugs, particularly cannabis, among youth in the United States is an encouraging sign. The use of illicit drugs among students aged 13-18 declined significantly during the period 1997-2008. Annual prevalence fell by 27 per cent: every fourth student reported having used illicit drugs in the previous year. The abuse of cannabis dropped by 29 per cent in the period 1997-2008, reaching an annual prevalence of 21.5 per cent. Even greater declines were recorded in the abuse of cocaine (-36 per cent), methamphetamine (-68 per cent) and MDMA (-52 per cent) compared with their respective peak levels during that period; the abuse of those drugs continued to fall in 2008. One matter of concern in the United States is that the number of first-time abusers of prescription drugs continues to be high. In 2008, 2.5 million people aged 12 or above reported having abused prescription drugs for the first time, over 300,000 more than the number of first-time cannabis abusers.
In the United States, the increase in the number of deaths due to overdose is to a significant extent related to the abuse of prescription drugs, in particular the abuse of opioid pain relievers such as oxycodone, hydrocodone, methadone, morphine and fentanyl. The number of deaths involving prescription opioids increased by two thirds from 2001 to 2005, reaching 5,789 in 2005.

The rapidly expanding illicit drugs trade provided the rationale for escalation to an actual “war on drugs”\textsuperscript{38}. In the United States, which was the most rapidly growing illicit drugs market, the political response was to declare war on the foreign providers rather than analyse and address the reasons for booming domestic demand. Initially the main target was Mexico, from where massive amounts of cannabis were illicitly supplying the countercultural revolution in the 1960s, and by 1974 had become the main supplier of heroin for the United States market. Funded by the United States, aerial spraying of cannabis and poppy fields started in Mexico in 1976.

The military was first deployed in 1983 when Special Forces were sent to the Andes to provide counter-narcotics training. President Reagan subsequently issued a National Security Decision Directive\textsuperscript{39} in April 1986, declaring drug trafficking a "lethal" threat to the United States. The directive set in motion Operation Blast Furnace from July to November 1986, the “first
publicized employment of United States Army to combat forces on the sovereign soil of another country to conduct joint anti-drug efforts."

Six helicopters and 150 troops were sent to Bolivia in a failed attempt to destroy some cocaine labs, and many more military operations were to follow. Also in 1986 the United States Congress enacted the disciplinary mechanism of drug certification. Countries that failed to fully co-operate with the anti-narcotics efforts would face mandatory sanctions including withdrawal of most of their foreign aid along with a concomitant opposition to loans those countries sought from multilateral development banks.

Countries decertified included Myanmar, Afghanistan, Colombia, Nigeria, Guatemala, Haiti, Venezuela and Mexico, although sanctions were occasionally waived for national security reasons. Many more countries appeared in at least one of the categories of the certification system. The procedure for inclusion was highly politicised, effectively working as a compliance mechanism to coerce countries to carry out the forced eradication of a specified number of hectares; tighten drug laws and arrest quotas: accept extradition of national citizens to the United States; or to refrain from adopting less repressive policies (as was the case in Jamaica when cannabis decriminalisation appeared on the political agenda). To its considerable
surprise, Netherlands once appeared on the drug certification list of “emerging threats”, with North Korea and Cuba as the two other new threats.

The Pentagon was thrust into the front lines of the drug war with the National Defiance Authorization Act, 1989 by President George Bush Senior, making the Department of Defence the lead agency responsible for monitoring, detecting and intercepting illicit drugs transports. This decision dedicated a dramatic increase of military assets and personnel to the counterdrug effort. Funding for military drug interdiction missions nearly quadrupled between 1989 and 1993.42

At that moment in history when anti-communist rationale for maintaining high military budgets and operations abroad was questioned after the Berlin Wall came down in 1989 the Pentagon was given a significant anti-drugs role43.

According to an Air Force analyst involved in counterdrug missions, the “timing for large-scale military involvement was excellent: the Cold War was drawing to a close, freeing up large amounts of assets, but the dramatic drawdown had not yet begun44.
In hindsight, the war on drugs can be seen as a transition between the Cold War and the War on Terror, in terms of legitimising military operations, bases and interventions abroad. The main theatre of military anti-drugs operations was Latin America, most prominently Colombia where the United States invested six billion dollars in “Plan Colombia,” a combined counterdrug and counterinsurgency strategy, including the highly controversial policy of mass aerial herbicidal spraying of coca and poppy fields.

This was the volatile political context in which the 1988 Convention with its requirements to apply criminal sanctions was carried out, under significant pressure from the United States on the rest of the world to join it in the declared war on drugs. A curious but convenient alliance was established between the United States and Russia and China—both already in a state of transition—along with such other diverse players such as Japan and some Islamic nations, all rallying to a “common cause”. What followed was an escalation of repression and consequent excessive negative effects.

Recent attempts to initiate a similarly aggressive strategy in Afghanistan, where opium production rapidly increased since 2004, were never fully implemented, perhaps a sign that political realities were changing. The Afghan government rejected spraying from the outset, as did European allies, objecting
to a “Plan Afghanistan”, fearing such a strategy would alienate a rural population heavily dependent on the opium economy.

President Obama stopped pressing for an aggressive eradication effort in Afghanistan, acknowledging after a policy review that it would be ineffective as long as alternative income sources were unavailable and would only drive Afghan farmers into the hands of the Taliban. An aggressive drug control strategy in Afghanistan, including military interdiction operations, forced eradication and possibly aerial spraying, now seems to be promoted most vigorously by the Russian Federation.

Obama’s newly appointed Director of the Office of National Drug Control Policy, Gil Kerlikowske, told the press he wanted to abandon the term “war on drugs” altogether, saying the bellicose analogy was counterproductive.

○ **South America**

In South America, the figure for 2005 represented a decrease of 28 per cent compared with that of 2000 for cocoa bush cultivation. Slight decrease in the total area under cultivation in Bolivia and Peru were offset by an increase
in Colombia, despite intensified eradication efforts\textsuperscript{48}. Colombia is the world’s top coca-cultivating nation and the source of about 90 percent of cocaine in the United States\textsuperscript{49}. The ability of coca bush growers to move their operations from one area to another adversely affected the results of eradication efforts by the Government of Colombia\textsuperscript{50}. Cocaine continues to reach the principal markets of the United States and Europe through the main trafficking routes in Central America and the Caribbean, as well as through Africa. In Peru, coca bush growers are putting pressure on the Government to stop manual eradication of coca bush\textsuperscript{51}. In Argentina, under current legislation, the possession of coca tea or coca leaf in a natural state for chewing purposes is not considered to be possession for personal use of a narcotic drug. Large amounts of precursor chemicals required for the illicit manufacture of drugs continue to be seized in most countries in South America, which indicates their availability for illicit purposes\textsuperscript{52}. Pharmaceutical preparations containing narcotic drugs and psychotropic substances are also smuggled into the countries in South America and sold over the counter in non-licensed outlets\textsuperscript{53}.

Cannabis is regarded as the most widely abused drug in South America\textsuperscript{54}, although data collected in 2001-05 indicate significant differences in the annual prevalence of abuse among the general population in the region. According to UNODC, nearly 1 million people in the region are treated annually for the
abuse of illicit drugs. The demand for treatment for the abuse of cannabis has increased significantly in the region in the past few years.

In Brazil, legislation in place since 2006 distinguishes between drug traffickers and drug users and established alternative sanctions for drug abuse without decriminalizing it. In 2009, the Supreme Court of Argentina, in a case involving personal use of cannabis by adult consumers, ruled that the punishment of personal use of cannabis was unconstitutional\textsuperscript{55}.

The eradication of illicitly cultivated coca bush and prevention of coca bush cultivation in new areas were among the main objectives of the Peruvian national strategy to combat drugs for the period 2007-2011. The permeable borders and long coastlines of countries in South America pose challenges to drug law enforcement authorities in the region, especially considering their limited resources. The drug seizures reported by the Governments of countries in South America attest to the fact that almost all countries in the region are affected by drug trafficking. 0.2 per cent of drug abusers in Brazil inject drugs. Uruguayan authorities estimate that 0.3 per cent of drug abusers in their country inject drugs.
Asia

East and South –East Asia

Illicit opium poppy cultivation is increasing in almost all countries in East and South East Asia, especially in Myanmar, the Lao People’s Democratic Republic and Vietnam\(^56\). Seizures of opium continue to be reported in such countries. In 2005, Chinese law enforcement officers seized a total of 2.3 tons of opium\(^57\). Law enforcement officials in Vietnam also reported seizures of opium. There has been an increase in seizures of cocaine in the Hong Kong Special Administrative Region (SAR) of China. Traffickers are attempting to arrange the illicit sale of drugs using the Internet and cellular phones. Attempts to smuggle illicit drugs into Japan through the postal system have increased. The abuse of Amphetamine Type Stimulants (ATS) has emerged as a serious and fast-growing problem in the Lao People’s Democratic Republic. Methamphetamine is the drug of choice among drug abusers in Japan, accounting for 82.5 per cent of the arrests for drug-related offences. It also remains the drug of choice among abusers in the Philippines, the Republic of Korea and Thailand. Methamphetamine is also widely abused in Brunei, Darussalam, Indonesia, Myanmar and Singapore.
Methamphetamine is rapidly gaining popularity in Malaysia: more than twice as many people abused methamphetamine in that country in 2005 (15 percent) than in 2004 (7 per cent)\textsuperscript{58}. Drug abusers in China are also increasingly using methamphetamine. Although the HIV epidemic remains concentrated among high-risk groups in East and South-East Asia\textsuperscript{59}, HIV infection continues to be a major problem in countries in the region where heroin is the drug of choice among persons who abuse drugs by injection\textsuperscript{60}.

In addition, there was a significant increase in the trafficking in methamphetamine and the illicit manufacture of MDMA (“ecstasy”). Moreover, for the first time in recent years, the illicit manufacture of GHB was reported. Seizures of new types of products containing mixtures of synthetic drugs were reported in China. In December 2008, tablets consisting of a mixture of methaqualone and ephedrine were seized in northern China (in the autonomous region of Inner Mongolia). In January 2009, mixtures of GHB, MDMA and ketamine concealed in bottles labelled “traditional cough medicine” were seized in the autonomous region of Guangxi, China. Drug traffickers are increasingly using social networking sites to recruit South-East Asian women to work as “mules” in countries in East and South-East Asia, including Singapore. The traffickers are believed to be targeting single women between the ages of 20 and 30 who do not have a criminal record and who are
unemployed or work in clerical, sales or service jobs. Although ketamine is not under international control, its illicit manufacture, trafficking and abuse are becoming major problems in many countries in East and South-East Asia.

- **South Asia**

The trafficking of heroin from West Asia remains a problem. Though the drug mafia use South Asia mainly as a transit point for the trafficking of heroin to markets in other regions, this trafficking stimulates the illicit market in South Asia, leading to more abuse. Unsafe practices surrounding abuse by injection remain one of the key factors in the spread of HIV/AIDS in the region. India, Nepal and Bangladesh have the potential for an HIV/AIDS epidemic. Available information suggests an emerging trend of increasing abuse and trafficking in cocaine in South Asia.

Courier and postal services have become a common means of smuggling drugs out of India. A broad range of substances under international control have been detected by law enforcement authorities in parcels transported by courier or post. In recent years, heroin and diazepam have been the drugs most frequently found in seized parcels, while morphine, cannabis herb, cannabis resin, ephedrine and pseudoephedrine have been seized occasionally. The
majority of clandestine shipments of controlled substances detected in India were destined for Australia and countries in North America and Europe.

- **West Asia**

  In Afghanistan, illicit opium poppy cultivation increased by 59 per cent in 2006 and the level of production increased nearly 50 per cent to a record 6,100 tons. It is estimated that Afghan opiates are trafficked predominantly through Iran, Pakistan and countries in Central Asia. As a consequence of continuing large scale opium poppy production in Afghanistan, those countries are faced with a wide range of problems related to large-scale drug trafficking, such as organized crime, corruption and relatively high illicit demand for opiates. For example, Iran has the highest rate of opiate abuse in the world. Illicit cultivation of opium poppy is increasing in Pakistan; one new trend is the smuggling of heroin from Pakistan into China, where information indicates that besides supplying the domestic market, the heroin is further smuggled into Europe via Hong Kong SAR. In addition, the abuse of amphetamine type stimulants (ATS) is spreading in various countries in West Asia, including Iran, Turkey and several countries on the Arabian Peninsula.
Though drug seizures in Central Asia decreased significantly in 2005, it appears that there was no decrease in the amount of drugs trafficked through the region. In 2006, opium production in north-eastern Afghanistan increased, resulting in rising level of drug trafficking through Central Asia. The abuse of drugs in Central Asia continued to increase, and a rise in drug abuse by injection fuelled the spread of HIV/AIDS. Armenia, Azerbaijan, Georgia, Iran, Russia and Turkey are experiencing an increase in drug trafficking and abuse.

The Middle East has become a market for illicit drugs such as cocaine that had not previously been known to be abused to any significant extent in the sub region and some countries in the region are confronted with new drug smuggling trends. Joint measures taken by Governments of countries in the Middle East to combat drug trafficking have continued to yield good results. For example, Jordanian authorities reported that in 2007 and 2008, they conducted 22 operations in which they coordinated efforts with Saudi Arabian and Syrian authorities. Jordan remains committed to existing bilateral agreements providing for drug control cooperation, with Egypt, Hungary, Iran Iraq, Israel, Lebanon, Pakistan, Saudi Arabia, the Syrian Arab Republic and Turkey. Jordan also cooperates with UNODC and the European Commission in a number of projects funded by the European Union.
Europe

Cannabis continues to be the most commonly abused drug in Europe\(^\text{63}\). According to European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) estimates, about 6 per cent of the adult population in the member States of the European Union and Iceland, Liechtenstein, Norway and Switzerland have tried cannabis once in their life time. The prevalence rate for cannabis abuse has been consistently high among young persons in Europe. In some countries, new legislation was adopted with the aim of identifying and removing regulatory barriers to the use of narcotic drugs and psychotropic substances for pain management. Other European countries amended their drug laws concerning penalties for possession and trafficking offences.

Europe is now the second largest illicit market for cocaine in the world after the United States\(^\text{64}\). Cocaine abusers account for about 10 per cent of drug abusers admitted for treatment in the European Union. The countries in Europe with the highest prevalence rate of cocaine abuse are Spain and the United Kingdom. The Government of the United Kingdom reclassified cannabis in January 2009, which means that cases involving cannabis are subject to stricter law enforcement. The decision reflects the fact that highly potent forms of cannabis (such as “skunk”) have become dominant on the illicit drug market of
the United Kingdom. Europe continues to be one of the main illicit markets in the world for stimulants. Only cannabis is more commonly abused than MDMA ("ecstasy")\textsuperscript{65}.

The main source of illicitly manufactured amphetamine type stimulants in Europe continues to be the Netherlands, followed by Poland, Belgium, Lithuania and Estonia. The illicit manufacture of amphetamines continues to expand throughout Europe. The abuse of methamphetamine continues to be reported by the authorities in the Czech Republic, Estonia, Latvia and Slovakia. The illicit manufacture of methamphetamine appears to be taking place on a small scale but is growing, the main source countries being the Czech Republic, Lithuania, Republic of Moldova and Slovakia. Heroin abuse has remained largely stable and even declined in Western and Central Europe, while the level of abuse of opiates has increased in Eastern Europe, particularly in members of the Commonwealth of Independent States (CIS) and countries in South – Eastern Europe along the Balkan trafficking route. Several countries in Eastern Europe also report increasing abuse and trafficking of illicitly manufactured fentanyl and 3-methyl fentanyl, two narcotic drugs with a much higher potency than heroin.\textsuperscript{66}
In the United Kingdom, a curriculum on substance misuse in undergraduate medical schools has been developed and is now being implemented at all of the medical schools in England. One of the core aims of the curriculum is to enable doctors to assist in the prevention of substance misuse and management of substance dependence. The other core aims include: to enable schools to help future doctors and doctors in training to be aware of the risks posed by substance misuse to their own health and to their professional Practice and conduct; and to promote the proper care and protection of the general public.

In Europe, cannabis abuse appears to be stable or declining in a number of countries. Intensified prevention efforts and increased availability of information on the health risks may have contributed to that development. In the United Kingdom, a clear downward trend has been observed over the years: Heroin abuse appears to be relatively stable in most countries in Western Europe. However, a substance abuse survey indicated an increase in the lifetime prevalence of heroin use among young people aged 17 years in France, from 0.7 per cent in 2005 to 1.1 per cent in 2008.

According to UNODC, the number of opiate users in Eastern Europe is estimated to be between 2 million and 2.5 million. According to the World
Drug Report 2009, the Russian Federation is the largest market for opiates in the region, with an estimated 1.68 million opiate abusers. The second largest market for opiates in the region is Ukraine, with an estimated 323,000-423,000 opiate abusers. In 2008, the abuse of opiates was reported to be increasing in most Eastern European countries, particularly in Albania, Belarus, Croatia, the Republic of Moldova and the Russian Federation, as well as in the countries along the Balkan route. The HIV epidemic in Eastern Europe is largely concentrated among persons who abuse drugs by injection.

**Oceania**

Cannabis continues to be abused in many countries in Oceania, being the drug of choice among drug abusers in Australia, Micronesia, New Zealand, Papua New Guinea, Samoa, Solomon Island, Tonga and Vanuatu. However, a survey by the Australian Department of Health and Ageing found that fewer secondary school children are using cannabis. In 2005, 18% of secondary school students had abused cannabis, compared to 35% in a similar survey conducted in 1996. Micronesia and Papua New Guinea have the highest prevalence of cannabis abuse in the region. The majority of the cannabis abused in Australia continues to have been produced in that country. The illicit manufacture of methamphetamine remains a problem in Australia. Most of the
pseudo ephedrine used in illicit methamphetamine manufacture has been extracted from commercially available pharmaceutical preparations. The abuse (including by smoking) of methamphetamine among young drug abusers is increasing in Australia. There are indications that Oceania may be developing into a significant transit area and a potential consumption area for methamphetamine. There was evidence of large-scale illicit manufacture of MDMA in Australia, particularly during the last quarter of 2005. Oceania continues to be used as a major trans-shipment area for illicit drugs.

Demand for MDMA (“ecstasy”) in Australia has increased in recent years. While Canada has remained a significant source of “ecstasy” destined for Australia, Mauritius was also identified as the country from which a shipment of “ecstasy” departed for Australia, an indication that traffickers are devising new routes for smuggling that substance into Australia.

In recent years, there has been a significant increase in the smuggling of pharmaceutical preparations containing pseudoephedrine into New Zealand, indicating continued illicit manufacture of amphetamine-type stimulants in that country.
Conclusion

Drug trafficking in Africa has gained international attention in recent years. This is demonstrated by the fact that the Security Council has repeatedly discussed the issue of the smuggling of cocaine through countries in West Africa, notably Guinea-Bissau, in particular the threats posed by such smuggling to regional stability and the possible impact on international security. Since 2004, drug trafficking organizations have been increasingly using West Africa as a transit area for smuggling large amounts of cocaine. Most of the cocaine transiting West Africa is transported across the Atlantic on large ships and then off-loaded to smaller vessels along the West African coast; from there, the cocaine is smuggled northwards by a variety of means, including boats, land vehicles and air couriers.

While until 2007, the amount of cocaine seized, either on the high seas en route to West Africa or in the sub region itself, increased markedly every year, there has been a decline in the number of seizures of cocaine in West Africa since 2008. The decline in the number of cocaine seizures might suggest that the smuggling of that drug through the subregion is decreasing, as a result of action taken by African Governments with the support of the
international community. Despite that development, the smuggling of cocaine continues to be a serious problem.

Impunity, corruption and weak institutions undermine drug control efforts and the rule of law in Central America and the Caribbean, despite attempts to reform judicial systems. Drug trafficking activities are often carried out under the protection of local gangs (maras) operating in border areas, especially in El Salvador, Guatemala and Honduras. There are indications that criminal associations have been established between members of Mexican drug cartels and gang members. Furthermore, the region is becoming used for trafficking in precursor chemicals. Despite new regulations banning ephedrine and pseudoephedrine in several countries, the region continues to be used as a trans-shipment area for the smuggling of precursor chemicals into Mexico, where the illicit manufacture of amphetamine-type stimulants continues.

The United States continues to be the world’s largest market for illicit drugs and a major destination of illicit drug consignments. Except for cannabis and methamphetamine, illicit drugs are not produced domestically but are largely smuggled into the United States. Cannabis remains the most commonly abused drug. It is encouraging, however, that the abuse of cannabis and other
illicit drugs among youth is declining in the United States. One matter of concern is the fact that in the United States, according to the latest national survey on drug abuse, the prevalence of abuse of prescription drugs containing controlled substances continues to be high and that such drugs are now among the most abused types of drug in the country. In addition to being used as a major transit area for illicit drug consignments, Mexico is experiencing increasing problems related to the abuse of cocaine and other drugs. The level of drug-related violence in the country remains high. Between 2007 and 2008, the death toll doubled. Drug cartels, in addition to fighting each other, are violently resisting efforts of the Government to counter drug trafficking and organized crime. Anti-corruption measures and large-scale law enforcement operations in Mexico that include the deployment of military troops have resulted in the disruption of drug trafficking operations throughout North America and the arrest of a number of high-level drug traffickers. Canada remains one of the primary countries supplying MDMA ("ecstasy") to illicit markets in North America and in other regions; it is also a source country of high-potency cannabis. One positive development is the decline in the abuse of drugs, in particular the abuse of cannabis, among adults and youth in Canada. Organized criminal groups have maintained and expanded their control over drug trafficking operations in North America; that represents a major challenge to the countries in the region.
Violent gangs affiliated with drug trafficking organizations are largely in control of the distribution of illicit drugs at the street level in the United States and are increasing their position in the distribution of illicit drugs at the wholesale level. While the consumption and cultivation of cannabis, except for scientific purposes, are illegal activities according to federal law in the United States, several states have enacted laws that provide for the “medical use” of cannabis. The control measures applied in those states for the cultivation of cannabis plants and the production, distribution and use of cannabis fall short of the control requirements laid down in the 1961 Convention.

Those insufficient control provisions have contributed substantially to the increase in illicit cultivation and abuse of cannabis in the United States. In addition, that development sends a wrong message to other countries. The ongoing discussion in several states on legalizing and taxing the “recreational” use of cannabis, which would be a serious contravention of the 1961 Convention. It is the responsibility of the Government of the United States to fully implement the provisions of the 1961 Convention with respect to all narcotic drugs, including cannabis. The illicit cultivation of cannabis appears to be rising in the United States. It is estimated that the total quantity of
cannabis illicitly produced in the United States may exceed the total quantity of cannabis in the country that had been illicitly produced elsewhere.

**South America** continues to be the sole source of illicitly manufactured cocaine, which is smuggled primarily into North America and Europe. The abuse of illicit drugs in several countries in South America, has continued to increase — a spillover effect of drug trafficking in the region.

States in **East and South-East Asia** have made progress in reducing illicit opium poppy cultivation over the years. However, it appears that they have recently been experiencing some setbacks. In 2008, the area under illicit opium poppy cultivation in the region increased by 2.3 per cent compared with 2007.

Trafficking in amphetamine-type stimulants has increased in **South Asia**, as evidenced by the fact that States in the region continue to report seizures of those substances. Neighbouring South-East Asian countries have typically been a major source of amphetamine type stimulants; however, the discovery of several clandestine methamphetamine laboratories in South Asia in the past two years indicates that countries in that region are increasingly being used as locations for the illicit manufacture of amphetamine-type stimulants.
In the past, the low-grade heroin base known as “brown sugar” that was found on the illicit market in India was suspected of having been derived from opium poppy diverted from licit cultivation. However, Indian law enforcement authorities estimate that in recent years, an increasing proportion of the heroin seized in India has originated in Afghanistan. The heroin that enters India is abused locally or is smuggled out of the country by couriers. That is an indication that India is being used as a transit area for heroin consignments. In India, pharmaceutical preparations containing dextropropoxyphene are commonly used by persons who abuse drugs by injection. Such preparations are often used as an alternative to heroin since they are cheaper and more easily available. Although India produces and exports large quantities of opium derived from licit cultivation, access to morphine for the treatment of pain remains limited in that country. There have been frequent reports of acute shortages of morphine in palliative care centres and hospitals.

The high prevalence of drug abuse by injection in several countries in South Asia and the common practice among persons who abuse drugs by injection of sharing needles are important factors contributing to the spread of HIV.
After peaking in 2007, the illicit cultivation of opium poppy and the illicit production of opium in Afghanistan decreased in 2008 and 2009. UNODC reports indicate that in Afghanistan prices of opiates continued to fall in 2009, fewer people were involved in opium poppy cultivation and opium production and the proceeds of the illicit drug industry decreased. At the same time, the number of Afghan provinces free of opium poppy in Afghanistan and the total quantity of drugs seized continued to rise. In addition, farm-gate prices of opium poppy have fallen due to oversupply, and food prices have risen due to undersupply. Given those circumstances, now is an opportune moment for the Government of Afghanistan and the international community to give higher priority to improving governance and economic development and to provide sustainable support for legitimate alternative livelihoods for farming communities.

The abuse of certain drugs appears to be stable or declining in some countries in Europe. Information from recent national surveys suggests that cannabis use is stabilizing in many countries in the region. Similarly, the most recent data available support reports that the abuse of amphetamines and MDMA (“ecstasy”) in Europe is stabilizing or even decreasing, after having increased in the 1990s.
The low rate of accession by States in Oceania to the international drug control treaties and the geographical proximity of the region to illicit drug manufacturing countries in South-East Asia make Oceania more vulnerable to drug trafficking. It is suggested that the States in the region that are not yet parties to the international drug control treaties to ratify those instruments and to provide comprehensive drug-related data.

For most of the countries in Oceania other than Australia and New Zealand, published surveys on drug abuse are not available. Countries in Oceania other than Australia and New Zealand have reported limited information on treatment for drug abuse. However, it is noted that in certain countries, such as Fiji, Papua New Guinea and the Solomon Islands, treatment for drug abuse is provided mainly by general or psychiatric hospitals. In general, such treatment is received on a voluntary basis and drug abuse issues are usually addressed through counselling.

There has been an unprecedented increase in the seizures of cocaine and other drugs world wide. In many countries including India, pharmaceutical preparations continue to be diverted from domestic distribution routes and are sold without prescription in pharmacies and various other retail outlets.
especially through internet pharmacies. India is wedged between the world’s largest areas of illicit opium production: the *Golden Crescent*, the *Golden Triangle* and the *Golden Hexagon*. This proximity has made India both a destination and a transit route for opiates produced in these regions.

In India, cultivation of opium is permitted under government’s strict licensing, supervision and control. In almost all nations, stringent actions are taken under narcotics law in all cases of embezzlement of opium by cultivators and traffickers.

However, despite the existence of international law and municipal law, illicit drug trafficking, narco-terrorism and money laundering, which are inextricably intertwined, remain a global problem warranting immediate attention at all levels – *global, regional and national*. 
The nations are grouped together on the basis of the regional groupings used in the report of the International Narcotics Control Board for 2009.


Supra n.8.


Supra n. 12 at p.42, See also, www.cia.gov.


In Africa, Cape Verde, Côte d’Ivoire, Kenya, Mozambique, Nigeria, Sierra Leone, the United Republic of Tanzania and Zambia are currently participating in Treatnet. In addition, capacity-building initiatives have been launched in Algeria, Egypt and Morocco to provide a comprehensive response to drug abuse and HIV/AIDS, including community outreach services for drug abusers, drug abuse prevention services and treatment services for drug abusers, including prison inmates.


Herbert, David T, Smith and David M, Social Problems and the City (Oxford University Press, 1989).
21 Supra n.8.


26 Supra n.12.

27 Ibid.


31 National Narcotics Intelligence Consumers Committee Report, (US Department of Justice, DEA, Intelligence Division, Washington DC).


33 www.unis.unvienna.org.

34 Supra n. 12.

35 Ibid.


38 The term “War on Drugs” was first used by President Richard Nixon in 1971, identifying drug abuse as ”Public Enemy No. 1”.

39 NSDD-221. The list of U.S Agencies involved in implementing U.S anti-drug activities is given in the Appendix.


41 Spencer, Bill, “Drug Certification,” in Foreign Policy in Focus, Volume 3, Number 24, Interhemispheric Resource Center (IRC) and the Institute for Policy Studies (IPS), (Albuquerque, New Mexico, September 1998.)


Corcoran, Major Kimberly J. DOD Involvement in the Counterdrug Effort – Contributions and Limitations,(Air Command and Staff College, AU/ACSC/0077/97-03, March 1997).


“White House Czar Calls for End to 'War on Drugs’”, Wall Street Journal, (14th May 2009).

Supra .n.24.


Supra.n.25.

Supra. n.12.

Ibid.

Ibid. n.25.

Americas Central America and the Caribbean, p.35., www.incb.org.


Supra.n.12.

Ibid.


Malik and Amarnath, Drug Abuse, ( Sree Bhumi Pub. 1991) p.82.


Ibid at p.4.


*National Narcotics Intelligence Consumers Committee Report*, (US Department of Justice, DEA, Intelligence Division, Washington DC.).

*Supra. n.12.*
