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perspectives

A collection of various synthetic drugs, including yellow, pink, blue, and orange tablets, is scattered across the cover. The background is black, making the colorful pills stand out.

**Synthetic drugs
on the rise**

perspectives

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Close-up photo of ecstasy pills.

Photo: Drug Enforcement Administration.



Editorial

Photo: Alessandro Scotti

The November issue of *Perspectives* highlights **synthetic drugs** as an emerging multi-billion dollar industry and the choice of a growing number of drug users, particularly in developing countries and in South-East Asia. Ecstasy, methamphetamine and other amphetamine-type stimulants can be produced anywhere on the cheap and sold for a large profit. Users, their families and communities are the ones left to deal with the negative consequences of such a business.

The good news is that addiction is a treatable illness. People who undergo treatment can recover from addiction and lead a productive and healthy life. In our special feature on the **Islamic Republic of Iran**, a country that is hard-hit by the trafficking of opiates coming from Afghanistan, we discuss the different **treatment** programmes that are available to drug users and HIV-positive patients. Every year, Iran provides assistance to hundreds of thousands of opiate addicts who are affected by the illicit trade.

Several law enforcement initiatives are in place to stop the flow of illicit drugs originating in Afghanistan, the world's top opium producer. The **Central Asian Regional Information and Coordination Centre (CARICC)** is one of them. In an interview with *Perspectives*, the Director of the Centre, **Lieutenant General Beksultan Sarsekov**, explains how CARICC fights crime in the region.

In addition, UNODC and its partners marked **World Drug Day** (26 June) at different events held worldwide. These events raised awareness among young people, who are the most vulnerable to drug abuse, about the dangers linked to consumption and the benefits of leading a healthy lifestyle.

Perspectives also explores what can be done to fight **human trafficking in Central America**. Like many other areas of the world, Central America is struggling with poverty and illegal migration, the breeding ground for trafficking in persons. With UNODC assistance, police officers, prosecutors and other legal practitioners are doing their part to strengthen their criminal justice system and get human traffickers convicted.

Norha Restrepo
Editor

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Non-governmental organizations speak out on the future of drug control

Over 300 non-governmental organizations (NGOs) from across the world met at UNODC headquarters in Vienna from 7 to 9 July to review international drug control policy in the last decade and elaborate proposals for consideration to the United Nations.

At the international NGO forum entitled “Beyond 2008”, organized by the Vienna NGO Committee on Narcotic Drugs (VNGOC) in partnership with UNODC, participants reflected on the goals set out at the twentieth special session of the General Assembly, on the world drug problem, held in 1998. In the Political Declaration adopted at that session, Member States reaffirmed their commitment to overcoming the world drug problem through domestic and international strategies to reduce the illicit supply of, and the demand for drugs, and called upon NGOs to promote a society free of drug abuse.

Ten years since the special session, the world continues to struggle with illicit drugs but the problem has been contained. In the words of Antonio Maria Costa, Executive Director of UNODC, “the number of people whose life is ruined by drugs has stabilized—whether we speak of farmers living on illegal crops, common citizens victimized by criminal gangs, or addicts wasting away.”

Although significant progress has been achieved in the last decade, NGOs are of the view that, in general, results have been limited. More needs to be done to address the global drug problem and its adverse health, social and economic consequences. At the Beyond 2008 Forum, NGOs holding divergent ideological positions reached common ground on how to move forward. The declaration and three resolutions adopted at the Forum will be presented to the Commission on Narcotic Drugs at its fifty-second session, to be held in March 2009.

Participants in the Forum agreed that countering the global drug problem requires building productive partnerships. As it is a shared responsibility, Governments should leverage the knowledge and experience of NGOs, whose fieldwork “is fundamental to success,” as VNGOC Chairperson Eva Tongue said.

Mr. Costa shares that opinion: “Moving drug control beyond 2008 requires solidarity—among States taking a shared responsibility, between Governments and civil society working together, and among all of humanity—to ensure that no one falls through the cracks because of drug dependence.”

NGOs are also in a good position to give a voice to the individuals, families and communities affected by drug use and drug policies since many of them provide assistance to those in need. The recommendations made by NGOs represent these people and focus on improving their health and well-being.



Besides outlining the future of drug control policy from the perspective of NGOs, the Beyond 2008 Forum was a call to action for participants to build on what was achieved in Vienna upon returning to their communities. Michel Perron, Chairman of the Beyond 2008 Steering Committee, said that the “commitment to consensus has created the opportunity for civil society to have a voice” in shaping drug policy, strategy and practice.

To learn more about the work carried out by NGOs with UNODC, please visit <http://www.unodc.org/unodc/en/ngos/index.html>.

Photo: Walter Astudero

Building a strong case against human trafficking

By Amanda Di Lorenzo

Human trafficking is a growing crime in Central America. Taking advantage of poverty and desperation, organized criminal groups recruit victims through fraud, force and deception. Men, women and children are forced into labour and the sex industry within the region, in the United States and Europe.

Police officers and prosecutors fighting human trafficking in Central America face a daunting task. In the UNODC publication *Trafficking in Persons: Global Patterns*, Latin America and the Caribbean is reported as primarily a region of origin, with Guatemala and Mexico ranking high in Central America. The border with Mexico, in particular, is an area of heightened concern due to the steady flow of illegal migrants, many of whom fall victim to traffickers.

All Central American countries have ratified the Protocol to prevent, suppress and punish trafficking in persons, especially women and children. Governments of the region are also making significant efforts to pass anti-trafficking legislation and are devoting resources to establish specialized units. However, more needs to be done at the national and regional levels to dismantle trafficking groups and increase criminal convictions. Here, it is crucial to strengthen the capacity to investigate and prosecute cases.

Trying a trafficking case requires a high level of specialization. Understanding organized crime in general, and human trafficking in particular, as a transnational phenomenon is the first step towards fighting this complex crime.

“Prosecutors, especially those in rural areas, still conduct investigations from a very local perspective, paying no attention to elements that can lead to uncovering cases of a transnational nature,” says UNODC Crime

Prevention Expert Felipe De La Torre, who is based in Mexico City.


In order to support anti-trafficking efforts in the region, earlier this year UNODC started a project to provide technical assistance to national anti-trafficking units. “We want prosecutors to be able to compile the right evidence and present sound cases,” says De La Torre. “This will contribute to reducing impunity and restoring public confidence in the rule of law.”

Together with the Latin American Institute for the Prevention of Crime and the Treatment of Offenders, UNODC is conducting a regional assessment to identify strengths, weaknesses, opportunities and threats in addressing human trafficking offences. The findings will help design and tailor training courses to be delivered in the next two years.

The effective prevention of human trafficking requires strong domestic and regional leadership. “The high level of commitment we have received for this project proves that joint ventures between public entities and international organizations can make a difference in strengthening criminal justice systems,” says De La Torre.

And there is still room for growth. “We need to make this a long-term, sustainable programme capable of supporting not only public prosecution and police services in the fight against trafficking, but also others in the justice sector, such as members of the judiciary and border control authorities,” says De La Torre. “Cooperation is vital for developing and expanding this initiative.”

Rogelio Quintero and Mariana Alegret from the UNODC Office in Mexico contributed to this report on project XCAS26.



Today, Iran's proximity to Afghanistan, which supplies more than 90 per cent of the world's opiates, means that the country is particularly vulnerable to drug abuse and drug-related HIV infections. Iran is also a main trafficking route for heroin destined for European markets. This special feature explores how the country is responding to the health and social problems linked to drug use.

Smoking opium, as seen in this picture, is common in Iran.

Text: Raggie Johansen
Photos: Alessandro Scotti

Iran

Comprehensive treatment for drug users

Opium use has a long history in the Islamic Republic of Iran. References to opium use can be found in literature dating back several thousand years and it has long been considered an effective painkiller. Colonial powers started cultivating opium poppy in the country in the 1800s and the income from opium production soon made up a huge part of then-Persia's gross national product.

Opium addiction started to be considered a serious problem in the early twentieth century. Partly due to international pressure, opium poppy cultivation and opium use were outlawed in 1955. However, opium poppy was never completely eradicated and addiction continued to soar. The Government tried to contain the addiction level by establishing a nationwide system of health clinics and rehabilitation centres and



IRAN

Official name: Islamic Republic of Iran

Life expectancy: 70.2 years

Per capita GDP: US\$ 7,968 (2005 estimate)

Population: 65.9 million

Official language: Persian (Farsi)

President: Mahmoud Ahmadinejad

Sources: UNDP Human Development Report 2007/2008; CIA World Factbook

A recovering addict wears Narcotics Anonymous (NA) pendants. He received treatment at an Iranian NGO.





Some hospitals provide drug abuse treatment.

by giving out ration coupons to older addicts. This was the first harm reduction measure in Iran.

Governmental efforts

To tackle the drug abuse situation, the Government established the Drug Control Headquarters (DCHQ) in the late 1980s. Made up by senior officials who report directly to the President of Iran, DCHQ monitors the drug problem nationwide, sets policy, and plans and coordinates action on all drug control issues.

Approximately 1.2 million of Iran's 70 million inhabitants are drug dependent. Providing treatment to help them recover from their addiction is a priority for the Government. Last year, Iran provided treatment for hundreds of

thousands of drug addicts through various treatment and harm reduction programmes. For the last decade, drug users who enter treatment programmes voluntarily have been exempt from prosecution.

The work of UNODC in Iran

The UNODC Country Office in Iran opened in 1999, focusing initially on stemming the drug flow from Afghanistan. Gradually, its attention moved to drug demand reduction initiatives, including treatment. All initiatives are carried out in close cooperation with DCHQ and various ministries.

“Drug abuse treatment programmes also relieve society of some of the most devastating social ills—crime, the transmission of infectious diseases, loss of productivity, and

family and social disorder,” said UNODC Executive Director Antonio Maria Costa. “Robust research and confirmed clinical experience have repeatedly proven that drug abuse treatment is effective in helping drug abusers achieve abstinence, in HIV/AIDS prevention and care, and in improving people's lives and increasing their contribution to society.”

A key component of the work undertaken by UNODC has been to provide training on drug treatment for public officials and health practitioners. UNODC has also carried out scientific studies on Iran's drug and HIV situation to support the Government in formulating policies. Moreover, UNODC has run awareness campaigns and organized events to help educate the public about drugs.

Non-governmental organizations are key partners

Non-governmental organizations (NGOs) are key partners in implementing drug treatment programmes. While many initiatives are funded and supported by the Government, NGOs do most of the work on the ground. Often run and supported by health practitioners,

social workers and former drug users, their constant effort and lobbying has helped convince political and religious authorities to adopt new approaches to tackling the drug problem.

One of these NGOs is Congress 60, which treats some 300 drug users every year across the country, including Abbas Amir-Mafi (see separate story). Through treatment,

patients gradually reduce the amount of drugs they use over an 11-month period and acquire skills to help them lead a productive and abstinent life.

Other NGOs working in this field include Rebirth and Persepolis. The latter was the first NGO to start harm reduction activities in Iran. These organizations greatly enhance Iranian drug control efforts.

HIV/AIDS and injecting drug use

It is estimated that there are some 200,000 injecting drug users in the Islamic Republic of Iran, 15-20 per cent of whom are HIV positive. The Government has made significant progress in tackling this HIV epidemic with the support of international organizations like UNODC and a range of local non-governmental organizations (NGOs).

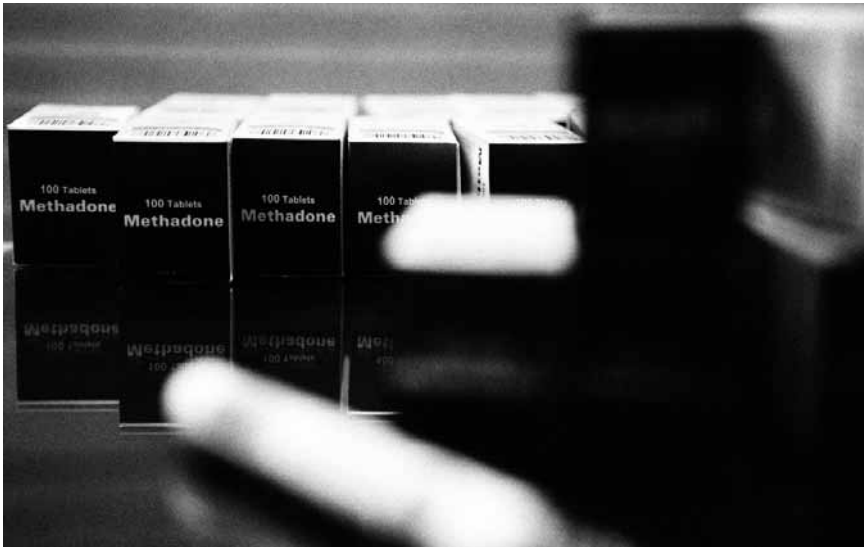
Harm reduction

Injecting drug use is the most common means of HIV transmission in Iran. According to Government statistics, some two-thirds of HIV-positive people contracted the virus in this way. For this reason, the work of the Joint United Nations programme on HIV/AIDS (UNAIDS), which UNODC co-sponsors, focuses primarily on injecting drug use.

A key strategy to control and prevent the spread of HIV among injecting drug users is to design and implement appropriate harm reduction initiatives. UNODC and other international organizations are working closely with the Government of Iran to make this a reality. The work has already seen much success, as Iran, a developing country, currently has comprehensive harm reduction policies in



Contaminated syringes may transmit HIV.



The Government runs a large methadone maintenance programme.

place. As a result, more than 20,000 drug users take part in the Government methadone maintenance programme, used in the treatment of opium or heroin addiction.

Moreover, thanks to effective needle and syringe exchange programmes initiated by the Government and implemented by NGOs the vast majority of drug users in Tehran use clean needles to inject drugs. These measures make Iran a pioneer in the region and among Islamic countries in providing comprehensive services to injecting drug users.

Injecting drug use in Iranian prisons

As in many countries, in Iran imprisonment is a main risk factor for HIV infection. In fact, the HIV epidemic was first detected among injecting drug users in two prisons in the mid-1990s, prompting prison authorities to develop strategies for tackling the issue.

“Iran now has one of the best prison programmes for HIV not just in the region, but in the world,” said Dr. Hamid Setayesh, UNAIDS Country Coordinator. “They’re passing out condoms and syringes in prisons. In the whole world, there aren’t more than six or seven countries doing that.”

Methadone maintenance programmes are also run in prisons and thousands of inmates are taking part in them. According to Dr. Setayesh, these programmes are having an impact, as demonstrated by the fact that there is a lower prevalence of HIV in prisons that provide methadone to treat addiction.

With technical support from UNODC, the Government has established 74 so-called “triangular”

clinics that provide voluntary counselling and testing services in prisons. These centres offer inmates comprehensive guidance on HIV and related issues. Moreover, bleach is available to inmates so that they can sterilize equipment used for injections and tattoos.

Challenges

While Iran has made significant progress in dealing with HIV transmission among injecting drug users, there are still outstanding issues. One major challenge is to reduce the stigma attached to HIV, which is pervasive, and felt most strongly by people who have contracted HIV through unsafe sex. Transmission through drug use is generally better understood and carries less stigma. Topics such as homosexuality and sex workers are still taboo in Iran.

The next phase of the Government’s strategy for tackling HIV includes stepping up efforts to reach women who use drugs, given that current initiatives have largely been aimed at men. Increased attention to monitoring and evaluation—ensuring that the lessons learned are not ignored—is also on the agenda.

Preparing the different medications for substitution therapy.



Former drug user now top athlete

Five years ago, Abbas Amir-Mafi was one of the hundreds of thousands of drug users in Iran. He became hooked on opium at 12, was kicked out of home and then focused on feeding his habit with money earned from odd jobs. Thanks to treatment, he is now a member of the national archery team, trains 6-7 hours per day and is drug free.

Iran is strongly affected by harsh drug realities and has some of the world's highest opiate addiction rates. Although Abbas was fortunate to find a suitable treatment programme and recover from his addiction, this is not the case for all drug addicts.

Abbas was introduced to opium by friends in his neighbourhood in south Tehran. "I looked big for my age and mixed with older kids," he says. "I started experimenting with alcohol when I was around 6 or 7, and was drinking regularly by the time I was 9. When we couldn't get a hold of alcohol we started taking opium instead. It was easily available and cheap."

At first, he smoked the drug, but then began eating it in order to be less conspicuous. He also smoked hashish with friends.

"Opium was like a medicine for me," he says. "In the beginning it

gave me a lot of energy, making me hyperactive, which felt great. But after several years, the effect of the drugs can be seen in your face and body. You need more and more drugs to get the same feeling. And, as you consume more, your habit gets more expensive."

Abbas financed his habit first with pocket money from his parents, then with earnings from short-term jobs. By the age of 18, he was spending around 800,000 rials (roughly US\$ 90) per week on drugs.

Abbas spent years trying to break free from drugs but only succeeded after his sister put him in touch with Congress 60, a non-profit organization which uses sport to help addicts. The organization advocates a gradual cut in consumption alongside sporting activities to develop new skills and another life focus. Unlike other facilities in Iran, it does not use methadone treatment.

The head of the organization, Engineer Dezhakam, himself a recovering addict, introduced him to archery. "I didn't like it in the beginning," Abbas says. "The daily practice was tough. But I began to see improvement after a month and realized I could do it. Now I get to compete with international sportsmen who come to Iran. I hope one day to compete abroad."

Today, Abbas is feeling positive about his life and says he does not miss drugs and that he is not afraid that he will use again. He now works for Congress 60, mentoring drug users undergoing treatment.

"I went from being someone others looked down on to being a role model for young people," he says. "My story is a positive lesson and example for teenagers on how people can change."

Regional information centre supports counter-narcotic efforts

Over the last decade, criminal organizations have increasingly smuggled Afghan heroin through Central Asia. In order to support counter-narcotic efforts in that area, UNODC is assisting in the establishment of the Central Asian Regional Information and Coordination Centre (CARICC) together with the Governments of Azerbaijan, Kazakhstan, Kyrgyzstan, the Russian Federation, Tajikistan, Turkmenistan and Uzbekistan. CARICC is based in Almaty.

Such assistance is also being provided in the framework of the UNODC Rainbow Strategy, which aims to tackle the threat posed by the trafficking in, and the production and consumption of opium originating in Afghanistan.

Lieutenant General Beksultan Sarsekov, Director of CARICC, spoke to Galina Fomaidi from the UNODC Regional Office for Central Asia about the initiative.



Lieutenant General Beksultan Sarsekov

What is CARICC and what does it hope to achieve?

The main goal of CARICC is to promote cooperation among law enforcement agencies in Central Asia to counter transborder drug trafficking and drug-related organized crime. CARICC will serve as the region's main centre for information exchange and analysis on transnational crime, as well as for the coordination of joint operations.

So far, cooperation in the region has only existed between similar agencies; police in one country with police in another. Our task is to make sure that any

agency engaged in counter-narcotic activities—be it the police, a customs authority, a border control body, a specialized drug control agency or the national security services—can cooperate with any relevant agency in another country if and when need be.

What are some of the issues you are facing?

Presently, the Centre is in its pilot phase. For it to become fully operational, at least four States must ratify the CARICC agreement. Kyrgyzstan and Turkmenistan have already done so. Azerbaijan, Kazakhstan, Tajikistan and Uzbekistan are in the process of ratifying. The President of Russia has issued a decree in favour of signing the agreement.

Any State interested in joining CARICC can do so. The involvement of Afghanistan, initially as an observer, is under consideration.

We've travelled to Tajikistan, Kyrgyzstan, Turkmenistan, Azerbaijan and Uzbekistan and met with law enforcement and specialized agencies to discuss ways of cooperating, establishing secure communication channels and developing joint operations.

The Centre is still small. As we grow, personnel will be subjected to regular checks to ensure that only the most qualified and competent officers are selected. If personnel integrity isn't prioritized, none of the States will trust the Centre enough to share sensitive information. Any information leak would have serious consequences.

What is CARICC focusing on in its pilot phase?

So far, we're focusing on collecting and analysing information on drug-related issues as well as on organizing and supporting multilateral operations. Together with member States, we are developing reliable mechanisms for these purposes by establishing secure communica-



Border control is key to counter-narcotic operations. Photos: Stefano Zardini.

“ Even though the Centre is a new initiative, we’re glad to see that our experience is being replicated in other regions.”

tion channels, developing databases, ensuring security of information and creating networks of focal points.

We also have liaison officers seconded from member States whose role it is to ensure cooperation between CARICC and the competent authorities in their respective country. At present, we have liaison officers from Kazakhstan, Kyrgyzstan, Tajikistan and Turkmenistan, all of whom are highly qualified; for instance, the liaison officers from Tajikistan and Kazakhstan are major-generals. Such high-level appointees make it possible to efficiently resolve issues related to the coordination of counter-narcotic activities.

Despite still being piloted, has CARICC achieved any results? We’ve been involved in the coordination of activities that resulted in the identification of 10 drug trafficking routes, the arrest of drug traffickers and the seizure of about 200 kg of illicit drugs. It’s worth mentioning that these operations involved not only CARICC member States but also others. We’re organizing field exercises on controlled delivery operations with the involvement of most of the States in the region.

Mechanisms for exchanging information, carrying out joint operations and securing communication channels are being established and tested. We regularly issue bulletins to provide updates on drug seizures, drug trafficking routes, methods of concealment and criminal activities. CARICC members and our partners in Asia,

North America, Europe and Australia have expressed great interest in these bulletins, which we publish in English and Russian.

What kind of relations do you have with international law enforcement organizations?

We have excellent contacts with INTERPOL, EUROPOL and the World Customs Organization. CARICC was modelled after EUROPOL, and INTERPOL has granted us access to most of their secure databases. As for the World Customs Organization, it has shared with us one of their communication platforms, which enables us to safely exchange information.

We have agreed on ways of collaborating with all three organizations and formal cooperation agreements will be signed as soon as the CARICC agreement comes into force. Their experience and support is vital to CARICC. INTERPOL also plans to establish a liaison office in the Centre.

We are open to collaborating with all relevant international and regional organizations. In addition, Canada, China, the United States and a number of European States have expressed a keen interest in our activities. Many States are considering assigning their liaison officers in the region the task of working with CARICC. We’re ready to cooperate. Even though the Centre is a new initiative, we’re glad to see that our experience is being replicated in other regions.

Synthetic drugs such as these colourful ecstasy pills are becoming a growing problem in the developing world.

Synthetic drug use on the rise

By Luciana Viegas

Photo: Drug Enforcement Administration



Each year, more synthetic drugs such as ecstasy, amphetamine and methamphetamine are used worldwide than cocaine and heroin combined. In some regions, the use and manufacture of such amphetamine-type stimulants (ATS) continues to rise.

The UNODC *Amphetamines and Ecstasy—2008 Global ATS Assessment* documents an increase in consumption and production of synthetic drugs in developing countries and the spread of these drugs to new markets. On a positive note, the report shows that synthetic drug use has stabilized and even declined in North America, Europe and Oceania, after alarming increases in the late 1990s.

Asia, with its huge population and growing affluence, is now driving the demand for ATS worldwide. In 2006, almost half of Asian countries reported an increase in methamphetamine use. South-East Asia in particular—a sub-region that has successfully managed to curb illicit opium and heroin production in the last decades—has seen a dramatic boom in the manufacture and

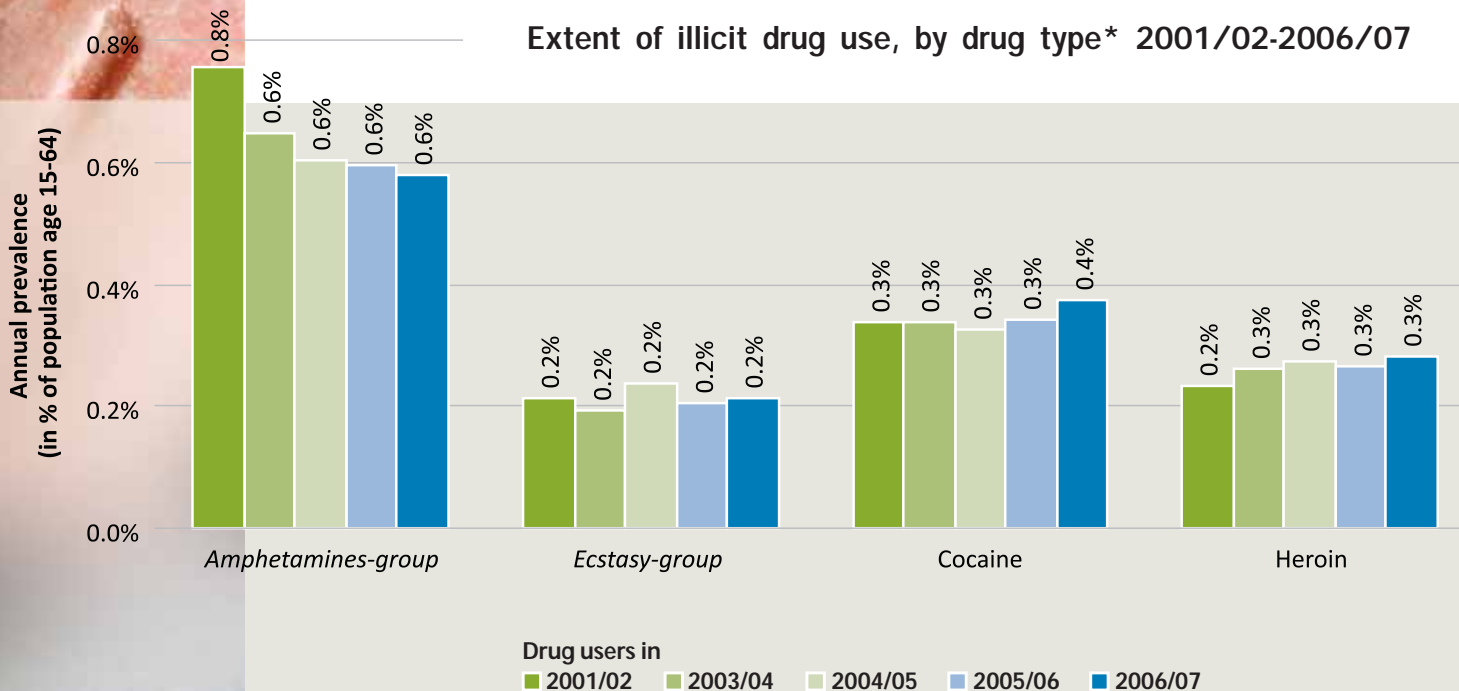
use of synthetic drugs in recent years. “This is of concern,” says UNODC expert Jeremy Douglas. “These are emerging, rapidly growing economies with large young populations. Young people are particularly vulnerable to methamphetamine use.”

Although most synthetic drugs are still consumed in the areas where they are produced, the findings of the assessment show that increasing amounts are being trafficked to areas that used to have only small ATS-related problems. The biggest increase was seen in the Middle East, where seizures jumped from 1 per cent of global totals in 2000-2001 to 25 per cent, or one-quarter, of all reported seizures in 2005-2006; in Saudi Arabia, the number of reported seizures of amphetamine continued to rise throughout 2007.



An occupational hazard in some countries

Synthetic drugs are being used worldwide because they seem to appeal to the needs of



* Excluding cannabis

Sources: UNODC estimates; Government reports; EMCDDA; CICAD; local studies

today's fast-paced societies and have become part of what is perceived to be a modern and dynamic lifestyle. Synthetic drugs are being used as "a cheap and easily available tonic for our fast and competitive times," says UNODC Executive Director Antonio Maria Costa. While young people in the West use synthetic drugs mostly for entertainment in nightclubs, older users often consume methamphetamine to maintain stamina at blue-collar jobs. Many use the drug to cope with long hours of labour—a direct result of the region's economic boom.

Synthetic drugs are often perceived as being less harmful than cocaine or heroin because they are commonly swallowed instead of being injected or smoked. They are, however, far from being harmless. While users may feel more confident, sociable and energetic, they can quickly become dependent on the drugs and suffer serious mental health problems and even brain damage. Paranoia, kidney failure, violence and internal bleeding are only some of the side effects.

These drugs are also easily modified. In its assessment, UNODC notes that new forms are emerging, such as the high purity crystalline

methamphetamine found in several countries of South-East Asia. In addition to the negative health effects common to all synthetic drugs, "crystal meth" can be used intravenously and thus has the potential to fuel the spread of HIV if contaminated injecting equipment is used. Dangerous mixtures—such as with the hallucinogen ketamine—are also being increasingly found in tablets of ecstasy in some countries.



Adaptive and organized suppliers

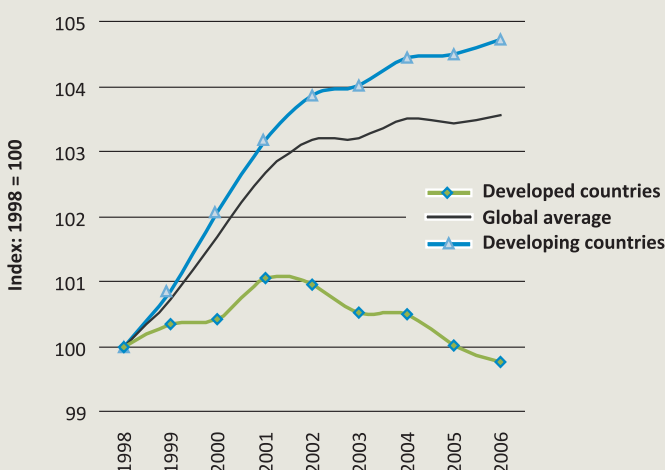
Unlike plant-based drugs like cocaine and heroin, the production of synthetic drugs is hard to trace because the raw materials used in their manufacture, commonly known as precursor chemicals, are readily available for legitimate industrial purposes. Supply chains are often short and synthetic drugs (also called "laboratory drugs") can be made in a kitchen or garage. "Suppliers adapt quickly. When one lab is shut, another opens. When one type of precursor chemical is unavailable, producers switch to an alternative," says Mr. Costa. "This presents a

challenge to law enforcement, also because production sites are often close to retail outlets."

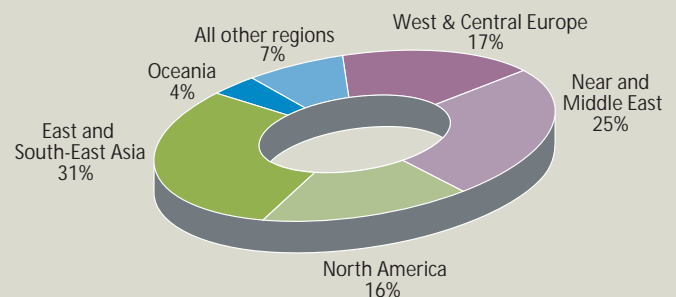
With a global market value of about US\$ 65 billion, and a markup between wholesale and retail as high as 400 per cent, synthetic drugs are attractive commodities: with little initial investment, large quantities can be manufactured, and production can take place anywhere. While organized criminal groups have always been involved in the trade, the market for ATS is changing from being a cottage industry to being a more sophisticated trade, led by transnational organized crime groups. These groups now often control the entire chain of production: from the provision of the precursors to the manufacture of the drugs and the trafficking in the end product.

Just as opium poppy and coca leaves are cultivated in hard-to-reach places, synthetic drugs are mostly produced in areas beyond Government control. The UNODC assessment highlights the rise of industrial-scale laboratories capable of producing hundreds of millions of tablets in parts of the world where law enforcement agencies are weak and corrupt.

ATS use trends as perceived by experts, developed¹ and developing² countries 1998-2006³



ATS seizures by region 2005/06 (47.1 mt average)⁴



¹ OECD countries

² Non-OECD countries

³ Sources: UNODC ARQ; UNODC Field Offices; Drug Abuse Information Network for Asia and the Pacific (DAINAP); UNODC, Global Assessment Programme on Drug Abuse (GAP); Govt. reports; EMCDDA; CICAD; HONLEA reports and local studies

⁴ Source: UNODC ARQ/ DELTA



Clandestine methamphetamine/MDMA laboratory located in Cikande (west of Jakarta), Indonesia.



Dangerous and costly disposal

Whether they are kitchen-size or industrial-scale laboratories, clandestine ATS operations are responsible for significant environmental damage through the generation and dumping of hazardous waste created dur-

ing the manufacturing of the drugs. Illicit operations often dispose of leftover precursor chemicals using a variety of harmful practices, such as by burying them in soil, dumping them in public sewage systems or streams, setting them on fire and throwing them out of trucks.

Safe disposal of these chemicals is costly and can be an additional

burden on already under-funded law enforcement agencies and public health and safety services. For example, in Cambodia—a country that has recently seen a surge in ATS manufacture—it cost US\$ 200,000 to clean up a laboratory from which 5.8 metric tons of precursors were seized in 2007.



FACTS

RESPONDING TO A GROWING PROBLEM

One of the main conclusions of the UNODC 2008 *Global ATS Assessment* is that the spread of synthetic drugs in recent years is strongly correlated with the inadequate implementation of existing regulations and a lack of resources. Developed countries with sufficient resources demonstrate a stabilization and even decrease in manufacture, trafficking and use, while more vulnerable countries are increasingly targeted by organized criminal groups.

In order to address this disparity, UNODC launched the first phase of the *Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme*, designed to reduce the world's information deficit about ATS. Initially funded by Australia, Japan, New Zealand and Thailand, the programme will work with Governments—particularly in vulnerable regions—to improve their capacity to gather, analyse and share information on ATS products, their use and trafficking routes. This information will help countries design more efficient prevention, treatment and law enforcement strategies.





Young boys from the outskirts of Brasilia play a friendly match.

World Drug Day 2008

UNODC field offices around the world commemorated the International Day against Drug Abuse and Illicit Trafficking, which falls on 26 June, with a campaign and a series of events aimed at raising awareness on the problems caused by illicit drugs to society.

Government institutions, non-governmental organizations, the private sector and concerned citizens joined UNODC in promoting the slogan “Do drugs control your life? Your life. Your community. No place for drugs.”

Four examples from different regions illustrate how UNODC and its partners mobilized community support throughout the month of June and on World Drug Day 2008.

Brazil

Coinciding with the opening of the Euro 2008 championship, hosted by Austria and Switzerland, over 100 Brazilian boys participated in a football tournament to promote sports and prevent drug use among youth. Organized by the Austrian and Swiss embassies together with UNODC, the mini-Euro Cup was held in Brasilia on 7 June.

Rudolf Barfuss, Ambassador of Switzerland to Brazil, said his country wanted to bring the most important European tournament closer to children who are passionate about football. “We were so happy to host the Euro Cup this year and felt it would be great to share this joy with children in Brasilia.”

The children played friendly matches throughout the day in teams representing Austria, Croatia, Italy, Poland, Portugal, Spain and Switzerland.

Nearly 1,000 people cheered the boys on. The children, who attend state schools in the outskirts of Brasilia, brought along their parents, families and teachers. Diplomats and Government authorities also supported the event and its goals.

School teacher Sandra Santos praised the UNODC initiative aimed at preventing drug use among the very young. Working in vulnerable communities, Santos has seen children as young as 7 meddle with drugs.

The UNODC stand at the event promoted the slogan “Use sports. Don’t let drugs control your life.” Moreover, UNODC produced and distributed an informational kit for



Left and right: Pakistani and Brazilian children at football camps. Centre: Vietnamese motorbike owners join the anti-drugs campaign.

children intended to answer the most common questions they have about drugs.

Nigeria

World Drug Day was observed in various parts of Nigeria from 17 to 26 June. The anti-drug week was held with the support of several Government ministries and agencies, led by the National Drug Law Enforcement Agency (NDLEA) and civil society groups.

Special emphasis was placed on drug crop cultivation and drug production. The need for action against cannabis cultivation in the country was highlighted. Mr. Ahmadu Giade, NDLEA Chairman, described cannabis cultivation as a threat to Nigeria's development and a problem his Agency was determined to curb.

The Farmers' Interactive Forum, held in Abuja on 18 June, was organized to inform cannabis growers about sustainable alternatives. At the Forum, farmers were introduced to microcredit and legitimate farming choices available to them throughout the country.

Mr. Giade called the Forum a milestone in the collective effort to address cannabis cultivation in Nigeria. Ms. Dagmar Thomas,

UNODC Representative in Nigeria, said that NDLEA and UNODC will continue to organize such events and "reach out to farmers and the rural population to gain a better understanding of what can be done at all levels to reduce cannabis cultivation."

Pakistan

Events held between 19 and 30 June included seminars, walks, talk shows on radio and television and various health activities. Moreover, innovative methods, such as printing anti-drug messages on umbrellas and electricity bills, were used to reach a broad audience.

The radio campaign started on 19 June with pre-recorded messages on FM100, the most popular radio station in Pakistan. With 7 million listeners, FM100 is a big hit especially among youth, a group that is particularly vulnerable to drug use. Tips were provided on how to cope with peer pressure to try drugs and where to go for help in case drug use becomes a problem. On 26 June, approximately 1,000 listeners participated in a text message quiz UNODC prepared to test people's knowledge about drugs.

Considering that nearly 18 million households receive electricity bills every month, UNODC

arranged for anti-drug messages to be printed in Urdu on these bills. The corporate sponsor is currently negotiating with the billing company to extend the campaign for a year and to continue giving UNODC free space to publish its messages.

Viet Nam

Given the rise in the use of ecstasy in Viet Nam, UNODC produced a leaflet to explain the myths and facts related to this synthetic drug. The cover reads "Using ecstasy? Not such a good idea."

As part of the awareness-raising campaign, thousands of stickers reading "Fill me up with gas, not drugs" were distributed to motorbike owners. Decorating and personalizing motorbikes is popular in Viet Nam, where at least one quarter of the population owns one.

Raincoats specifically designed to be worn when riding a motorbike during the rainy season were also produced for the occasion. The campaign logo "Do drugs control your life?" was printed in Vietnamese on the back of the raincoats, which were available in blue and yellow. More anti-drug messages were printed on handbags with the messages "Up with hope, down with dope" and "Kids need hugs, not drugs."

CORRUPTION

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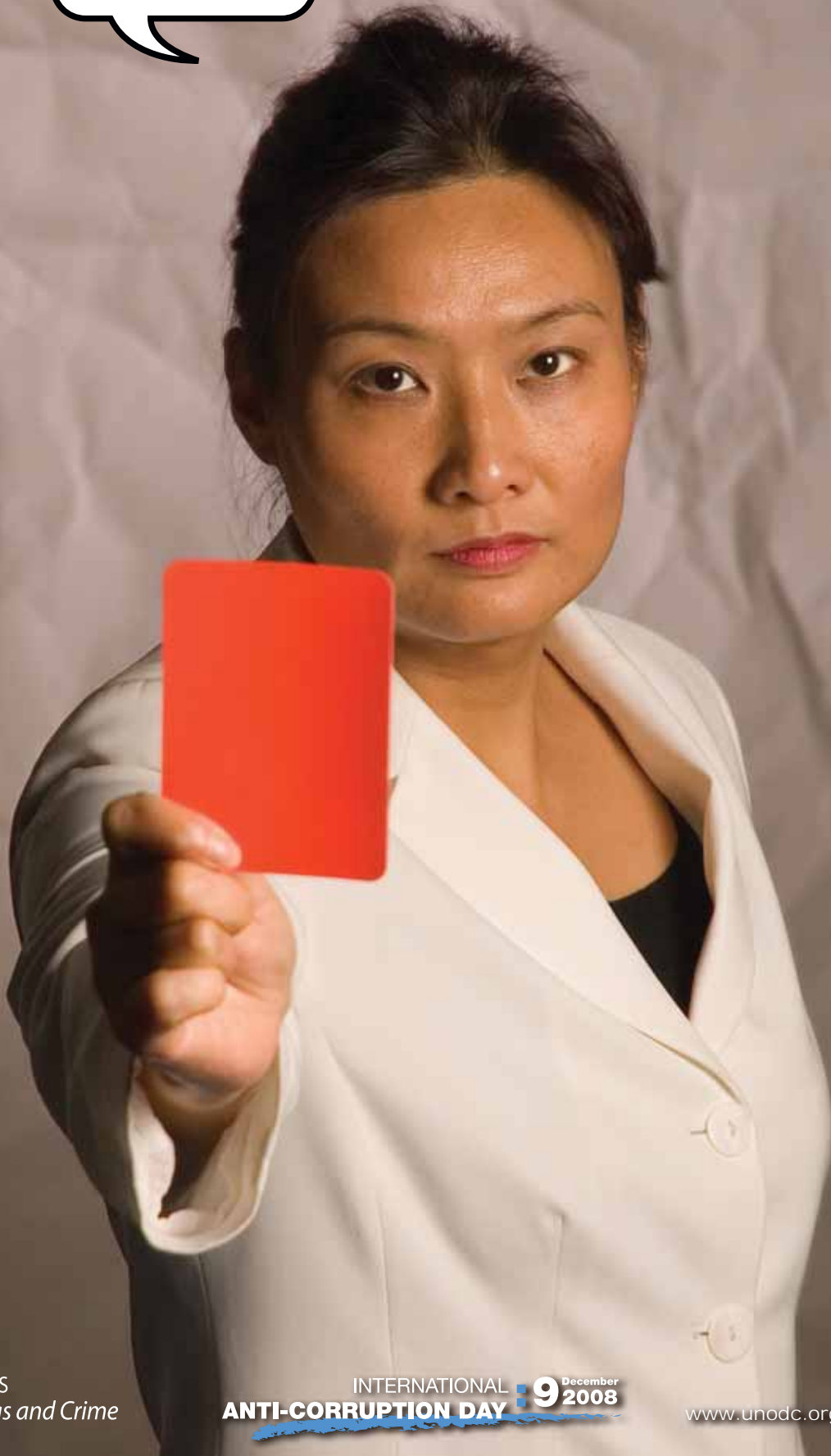


Photo: Ioulia Kondratovitch



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