E/INCB/56

INTERNATIONAL NARCOTICS CONTROL BOARD

Vienna

Report of the International Narcotics Control Board

for 1981



UNITED NATIONS

ABBREVIATIONS

The following abbreviations are used, except where the context otherwise requires:

Abbreviation	Full title
Board (or INCB)	International Narcotics Control Board
Commission on Narcotic Drugs (or Commission)	Commission on Narcotic Drugs of the Economic and Social Council
Council (or ECOSOC)	Economic and Social Council of the United Nations
1961 Convention	Single Convention on Narcotic Drugs, signed at New York on 30 March 1961
1971 Convention	Convention on Psychotropic Substances, signed at Vienna on 21 February 1971
Division of Narcotic Drugs (or Division)	Division of Narcotic Drugs of the United Nations Secretariat
Fund (or UNFDAC)	United Nations Fund for Drug Abuse Control
General Assembly	General Assembly of the United Nations
ICPO/Interpol	International Criminal Police Organization
Narcotic drug	Any of the substances in Schedules I and II of the 1961 Convention, whether natural or synthetic
1972 Protocol	Protocol amending the Single Convention on Narcotic Drugs, 1961, signed at Geneva on 25 March 1972
Psychotropic substance	Any substance, natural or synthetic, or any natural material in Schedule I, II, III or IV of the 1971 Convention
Secretary-General	Secretary-General of the United Nations
UNDP	United Nations Development Programme
WHO	World Health Organization

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NOMENCLATURE OF COUNTRIES AND TERRITORIES

In referring to political entities, the Board is guided by the rules governing the practice of the United Nations. The designations employed and the presentation of material in this publication do not imply the expression of any opinion whatsoever on the part of the Board concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

IN MEMORIAM

Sir Harry Greenfield

It was with deep regret that the members of the Board and its secretariat learned that the Board's first President, Sir Harry Greenfield, died in England in April 1981. Sir Harry's experience and invaluable contribution to international drug control began in 1946 when he participated in the first session of the Commission on Narcotic Drugs. In 1948 he was elected to the Permanent Central Narcotics Board, serving first as its Vice-President until 1952 and thereafter as its President until 1968 when the International Narcotics Control Board entered upon its duties. It was then only natural that Sir Harry should also assume the office of President of the new Board, a post which he held with great distinction until 1974 when he retired at the age of 75.

FOREWORD

The International Narcotics Control Board is the successor to drug 1. control bodies, the first of which was established by international treaty more than half a century ago. A series of treaties confer on the Board specific responsibilities. On the one hand, the Board "shall endeavour to limit the cultivation, production, manufacture and use of drugs to an adequate amount required for medical and scientific purposes" and "to ensure their availability for such purposes". On the other hand, the Board shall endeavour "to prevent illicit cultivation, production and manufacture of, and illicit traffic in and use of, drugs". In carrying out its responsibilities the Board acts in co-operation with Governments and maintains continuing dialogues with them in order to further the aims of the treaties. Such dialogues are pursued through regular consultations and sometimes through special missions arranged in agreement with the Governments concerned.

2. The Board consists of thirteen members who serve in their personal capacities and not as government representatives. The present composition of the Board and the curricula vitae of the members are to be found in Annex I, pages I/1-3. The Board held two regular sessions during 1981. Between sessions the policies decided upon by the Board, in pursuance of its mandate under the drug control treaties, are carried out by its secretariat in consultation with the President and other members of the Board as appropriate.

3. The Board collaborates with the other international bodies concerned with drug control. These include not only the Economic and Social Council and its Commission on Narcotic Drugs but also the relevant specialized agencies of the United Nations, particularly the WHO. At the secretariat level, there is close co-operation on a daily basis between the Board's staff on the one hand and those of the Division and the Fund on the other.

4. The Board is required to prepare an annual Report on its work. This Report analyzes the drug control situation worldwide, so that Governments may gain an overall understanding of current and potential problems which endanger the objectives of the Conventions. In the light of the developing situation, the Board draws Governments' attention to weaknesses in national control and in treaty compliance. It may also make suggestions and recommendations for improvements, both at the national and international levels.

5. The general Report is supplemented by four detailed technical reports 1) concerning data on the licit movement of narcotic drugs and psychotropic substances and the Board's analyses of this information. Moreover, in 1981 the Board is publishing a special study 2) concerning the supply of and demand for opiates for medical and scientific purposes and the need to achieve a balance between such supply and demand. This was done pursuant to a request of the Economic and Social Council. 3)

¹⁾ E/INCB/57; E/INCB/58; E/INCB/59; E/INCB/60

E/INCB/52/Suppl.

³⁾ Resolution E/1980/20

6. In order to ascertain that Governments adopt the prescribed measures to limit the availability and use of drugs exclusively to medical and scientific purposes, the Board monitors the licit movement of drugs. With a view to facilitating and expediting this effort, the Board is now using computerized word and data processing systems. In addition, the Board has produced a multi-lingual audio-visual programme on its work. This programme is available without cost upon request.

THE CURRENT WORLD SITUATION - AN OVERVIEW

7. The drug abuse situation continues to deteriorate in most parts of The number of drug abusers has risen; abuse has spread the world. geographically: the number, variety and potency of narcotic drugs and psychotropic substances, illicitly used, have increased. Illicit production has expanded and trafficking flourishes. Despite actions taken at the national, regional and international levels, the situation has never been more complex or more serious. Indeed, the future is grim, unless concerted, determined and co-ordinated action is pursued on an immediate priority basis. There must be a new awakening that stimulates action at all levels, from the international to the local, involving families, communities, neighbourhoods, schools, religious institutions, as well as public, private and voluntary associations and organizations. One method to mobilize public opinion and resources would be for the United Nations to declare an International Year Against Drug Abuse. This could serve as a catalyst for raising worldwide awareness and for stimulating the wide range of activities required at all levels in the battle against illicit drugs.

Narcotics

8. Licit Movement. The international system to control licit trade continues to function in a generally satisfactory manner. Specific data, together with a discussion of trends, are considered separately. 4) Because an expansion in the sources of production of <u>opiate raw materials</u> for export has created an over-supply, increased Governmental action is needed. It is for this reason that the Board is publishing a special report 5) which sets forth the situation in detail, together with conclusions and recommendations to Governments aimed at rectifying the imbalance between the demand for and the supply of narcotic drugs for legitimate purposes. The huge over-production of <u>coca leaves</u> far beyond the quantity needed for legitimate purposes also remains a serious problem.

9. <u>Illicit Movement</u>. A bumper crop of <u>opium</u> from Southeast Asia, currently showing up in seizures, has augmented the already enormous quantities of opium primarily produced illicitly in the Middle East and trafficked mainly in the form of <u>heroin</u>. Much of this production is consumed in the source countries in the form of opium and increasingly in the form of heroin. An ever expanding amount is trafficked abroad, mainly to Western Europe and North America. In both regions heroin-related injuries and deaths remain high. While in some parts of Europe the worsening situation continues to deteriorate, in North America the level of heroin abuse remains serious and widespread.

⁴⁾ See paragraphs 18 and 19 and document E/INCB/58

⁵⁾ E/INCB/52/Suppl.

10. The quantitative dominance in the illicit traffic of <u>cannabis</u> and its products continues unabated. The number of abusers in many countries is enormous. More potent cannabis products are increasingly available and traffickers in this substance are expanding their illicit activities to include the distribution of other drugs of abuse. While in some circles in a number of countries there remains an erroneous belief that cannabis is harmless, mounting scientific evidence shows significant health hazards resulting from cannabis abuse, including cancer. On the positive side, there is also evidence in one country that publicizing such research findings among a high risk youth population has led both to a somewhat diminished appeal of this drug and to a certain reduction of its use. 6)

11. Uncontrolled production of <u>coca leaves</u> originating mainly in Bolivia and Peru, is available in ever increasing quantities. These leaves give rise to enormous clandestine manufacture of <u>cocaine</u>, principally in Colombia, but also in Bolivia and Peru. While coca leaves and cocaine are abused in South America, most of the cocaine is trafficked to other regions - a disturbing rise occurring in Western Europe. There are further indications that traffickers are making determined efforts also to exploit European and African transit facilities to cover their tracks by rerouting cocaine to the Near and Middle East and also across the Atlantic to North America. The smoking of <u>coca paste</u>, which has become a serious South American health problem, is continuing to spread, carrying with it high risks of psychological and other disorders. As use increases the prospect is that cocaine will be abused in more dangerous ways.

Psychotropic Substances

12. As noted in previous Reports the Board is aware that many psychotropic substances, when properly used under competent medical supervision, are highly beneficial in the treatment of illness. Improper use, however, adversely affects not only individuals, but societies as well.

13. Control of psychotropic substances remains complex because of the rising number of such substances, their extensive use in medical treatment, their growing illicit non-medical usage, and the ease with which many of them can be clandestinely manufactured. In addition, unlike the case of narcotic drugs, the international control system for psychotropic substances does not set forth arrangements for estimating projected scientific and medical requirements against which manufacturing output can be matched. Substantial licit over-production therefore continues to exist, especially in the case of amphetamines and methaqualone, thus increasing the dangers of diversion, misuse and abuse. Against this background in 1980 the Board made proposals concerning the voluntary submission by Governments of information to enable national administrations and the Board to monitor production, exports and imports 7). This matter is discussed in more detail elsewhere in this Report. 8)

⁶⁾ See also paragraph 155

⁷⁾ E/INCB/52, paragraphs 162 to 172

⁸⁾ See paragraphs 20 to 30

14. Licit Movement. The Board notes with satisfaction that the number of Parties to the 1971 Convention continues to increase and includes many manufacturing countries. It is also heartening that a large number of non-Parties apply at least partial controls and supply statistical data on trade and manufacture, particularly for substances in Schedules I and II. Statistical data and a commentary on trends are published in a separate report. 9)

15. <u>Illicit Movement</u>. Significant amounts of psychotropic substances involved in wide-ranging abuse continue to be diverted from licit manufacture and trade. Of particular concern is the diversion of Schedule II substances, especially amphetamines and methaqualone, which entails large amounts and is directly attributable to countries' failure strictly to apply the export and import authorization system provided for in Article 12, paragraph 1, of the 1971 Convention. The situation has been further complicated by the use of forged import certificates. Furthermore, some psychotropic substances, including those from Schedules I and II, are available for abuse from the clandestine manufacturing that occurs in a number of countries. An additional difficulty is the ready availability of precursors required for illicit manufacture.

16. On a positive note, concerted action by a number of Governments, working together with the Board, has resulted in the adoption of measures which should significantly improve the situation in respect of diversion from licit manufacture of one Schedule II substance, methaqualone. These measures include the decision on the part of one country to curtail manufacture, of another to enact comprehensive legislation, and of several to ban import of that substance pursuant to Article 13.

17. The primary concern remains the dire human consequences caused by the misuse and abuse of some narcotic and psychotropic substances, trafficked and financed by unscrupulous criminals and nefarious organizations. Many national administrations international and organizations are admittedly under increasing financial and economic constraints. With many other worthy social programmes competing for scarce human and financial resources, drug abuse control programmes are being reduced by direct budgetary decreases and by inflation. While in the short run such an approach may appear to result in savings, in reality the social costs of drug abuse are staggering in terms of lowered human potential, escalating expenditures to combat crime and diminished economic development and growth.

9) See E/INCB/59

OPERATION OF THE INTERNATIONAL DRUG CONTROL SYSTEM

Narcotic Drugs

18. To date, 113 States have become Parties to the 1961 Convention and 75 to the amended Convention. Nevertheless, the majority of States which have not yet formally adhered to these treaties co-operate with the Board in practice; however, the Board hopes that such States will become Parties at an early date. The very few States which do not yet participate in the international drug control system could assist the world community by developing at least <u>de facto</u> co-operation. Informal relations, which already exist with the People's Republic of China, were reinforced during 1981 when talks took place with the Chinese observers to the twenty-ninth session of the Commission. The Board looks forward to developing this dialogue and to the participation of the People's Republic of China in the international drug control effort at the earliest possible time. The Board would welcome collaboration with the Socialist Republic of Viet Nam and the Democratic People's Republic of Korea.

Three technical reports on narcotic drugs published annually by the 19. Board set forth information furnished by Governments, in accordance with the international treaties, together with the Board's analyses of the data received. These documents provide estimated opium production and licit requirements for marcotic drugs; 10) statistics on marcotic drugs, accompanied by an analysis of the major trends in the licit movement of 11) such drugs: and a comparative statement of estimates and statistics. 12) This information permits the Board and the international community to verify whether Governments have adequately applied treaty provisions.

Psychotropic Substances

20. Although the international control system has been operational for a relatively short time, progress through international co-operation continues to be made at a steady pace. The number of Parties to the 1971 Convention continues to grow and now stands at 74, including most manufacturing-exporting countries. In addition, it is heartening that the number of countries which now regularly report to the Board has risen to 120. While this level of participation compares favourably with that attained by the 1961 Convention ten years after it was signed, it remains imperative that more States accede as soon as possible to the 1971 Convention.

21. In its Report for 1980 the Board devoted special attention to the international control situation with regard to psychotropic substances, since diversions from licit international trade of a number of these substances were extensive and represented one of the most serious aspects of modern drug problems. Additional cases of diversion were discovered and attempts at diversion thwarted during 1981.

- 11) E/INCB/58
- 12) E/INCB/60

¹⁰⁾ E/INCB/57

22. Historically, in the years before the 1931 Convention substantial diversion occurred from the licit trade in narcotic drugs. To-day, the world is confronted with a similar problem with regard to licitly manufactured psychotropic substances, particularly those listed in Schedule II. However, in the opinion of the Board this problem can be progressively resolved if all Governments would fully and faithfully apply all of the control measures established in the 1971 Convention and bring their laws and regulations into conformity thereto. The Board maintains and reaffirms this position, and also reiterates the importance it attaches to some additional measures which it proposed and which the Economic and Social Council unanimously endorsed in resolution 1981/7.

23. The diversions which have come to light continue mainly to involve exports of considerable amounts of amphetamines and methaqualone which have taken place because of inadequate control or have been authorized by the exporting countries although no corresponding valid import certificate had been received. In some instances falsified import authorizations have been used. These cases demonstrate the significance of all countries' strictly applying the export and import authorization system specified in Article 12, paragraph 1, of the 1971 Convention. It goes without saying that Parties to the Convention have a treaty obligation so to act.

24. The export and import authorization system could be improved and the problem of falsified import authorizations diminished if a copy of the import certificates were always sent by the competent authorities of importing countries directly to their counterparts in exporting countries.

25. Traffickers are taking advantage of the arrangements afforded by free trade zones. The Board therefore wishes to emphasize that the Convention in Article 12(3)(a) requires that each Party exercise in free ports and zones the same supervision and control as is applied in other parts of its territory. Unless this is done strictly, such free zones can seriously undermine the objectives and effectiveness of the international control effort.

26. A growing number of countries are availing themselves of the protection against the import of unwanted substances afforded by Article 13. Governments are reminded of the need to implement the necessary measures to ensure that no exports of such substances take place to the prohibiting countries. Only in an exceptional case in which a country might later need a substance, the import of which it had previously prohibited, may exports be permitted, but then only if the importing country issues a special import licence as foreseen in Article 13, paragraph 3. Otherwise such exports would constitute a violation of the obligations imposed by Article 13 on exporting countries. This is relevant not only with regard to Schedule II substances, but also to those covered by Schedule III and IV. In order to facilitate the work of national administrations, the Board provides annually a complete list of Article 13 prohibitions, both on a country-by-country basis and a substance-by-substance basis. 13)

^{13) &}quot;Green List" (Annex to Form P), Part four

27. In view of the semi-unilateral nature of the 1971 Convention's exemption procedure for preparations, the Board recognizes the need for standard guidelines to achieve the greatest possible extent of uniformity in exemption decisions by Parties. A Party to the 1971 Convention may exempt one or more preparations from certain measures of control subject to review by the Commission, following receipt of WHO's assessment of the appropriateness of the exemption and possible recommendation of termination in whole or in part. In contrast to the system instituted by the 1961 Convention, such exemptions apply only to the exempting Party. WHO. in response to the Commission's request, is now completing its proposed guidelines on the exemption of preparations. Until such guidelines are approved by the Commission, the Board urges Parties wishing to invoke an exemption to consider carefully the requirement of Article 3 that only those preparations may be exempted that are compounded in such a way that they present no, or a negligible, risk of abuse and cannot be recovered by readily applicable means in a quantity liable to abuse. It is essential that the guidelines be established and communicated to Governments at the earliest possible time. Unless this is done and national administrations act in accordance with such guidelines, confusion will inevitably prevail and greatly hamper control.

28. Additional measures recommended in the Board's last Report, involve submission to the Board of voluntary assessments of medical and scientific requirements for substances listed in Schedule II, as well as quarterly submission of data on exports and imports in such substances. The assessments are essential if the Board is to be able to advise manufacturing countries of the amounts required for medical purposes so that these countries can take steps to match production to need. Ensuring against over-production is an important measure to reduce the risks of diversion to the illicit traffic. Manufacturing-exporting countries are again reminded of the prime importance of exercising the utmost vigilance to ensure the validity of the request and amount involved in each international trade transaction. The proposed assessments may help them in this endeavour.

29. Quarterly statistics on imports and exports would enable the Board better to monitor international trade and to alert the national authorities concerned to take timely action as soon as it appears that there are discrepancies between import and export figures, indicating that exports may not have reached their destination.

30. In a note verbale to all Governments the Board asked for their views on these recommendations. The positive tenor of their replies has convinced the Board that many Governments concur in the importance of the proposed measures and that they are ready to co-operate by voluntarily complying with them. The Board, therefore, intends to pursue its initiative and to prepare the necessary forms in order to facilitate the voluntary reporting of assessments of legitimate requirements and quarterly international trade statistics in respect of Schedule II substances. It is hoped that Governments will supply this information.

DEMAND AND SUPPLY OF OPIATES FOR MEDICAL AND SCIENTIFIC NEEDS

31. In 1980 the Economic and Social Council requested the Board to undertake a detailed study of the situation and to suggest measures designed to achieve a lasting balance between the demand for and the supply of narcotic drugs for legitimate purposes. 14) Accordingly, in 1981 a wide range of statistical and other information was collected and analysed, and consultations were held with all Governments principally concerned as producers, manufacturers or consumers in order to explore with them the possibility of their agreeing on a programme of action. On the basis of this material the Board has published its detailed study together with its conclusions and recommendations in a separate report. 15)

ANALYSIS OF THE WORLD SITUATION

32. Implementation of the international systems for drug control established by the treaties is above all the responsibility of national authorities, since they, and they alone, are able to control the movement of these substances within their respective jurisdictions. The Board for its part is striving, in co-operation with Parties and non-Parties alike, to help them attain the aims of the treaties. In analysing the drug control situation worldwide as well as in individual countries and regions, the Board utilizes information provided by Governments, United Nations organs. specialized agencies and other competent international organizations. The Board gives special attention to countries in which problems relating to drug abuse, illicit trafficking, and uncontrolled or illicit production of narcotic raw materials are most acute, or where particular problems arise.

NEAR AND MIDDLE EAST

33. This region continues to be a major source of illicit opiates, mainly produced in parts of Afghanistan, Iran and Pakistan. These countries themselves have large addict populations and the increase in illicit production exacerbates the distressful abuse problems. Opium remains the principal drug of abuse, but with the growing availability of locally manufactured heroin there has been a concomitant increase in heroin abuse in many areas. The surplus is finding its way chiefly to Western Europe and North America where seizures have augmented ominously in recent years. The wide influx into the region of acetic anhydride, a key agent in heroin manufacture, has made possible the increase in the illicit manufacture of heroin. This chemical product enters the region from Western Europe, sometimes under false labelling. It is ironic that this essential agent in the manufacture of heroin is produced in huge quantities and exported virtually uncontrolled from countries which are themselves gravely suffering from the effect of heroin abuse.

34. Cannabis trafficking and abuse continue to be widespread throughout the Near and Middle East.

¹⁴⁾ Resolution E/1980/20, paragraph 3

¹⁵⁾ E/INCB/52/Suppl.

35. Psychotropic substances, licitly manufactured in some Western European countries, are being diverted into the illicit traffic bringing in their wake a sharp increase in abuse in some parts of the Near and Middle East.

36. The Sub-Commission on Illicit Drug Traffic and Related Matters in the Near and Middle East remains a useful forum for promoting regional co-operation. Bilateral arrangements to facilitate enforcement efforts at the working level have been concluded between some countries. The full development of an interlocking regional network of such arrangements should result in improved border control and enforcement activities and therefore have a beneficial impact in containing illicit traffic. The Board hopes that such a regional network can be established and become effectively operational at the earliest possible time. Further strengthening of regional and inter-regional co-operation is essential to sustained progress.

37. The Board remains convinced that the only solution to the drug control problem in this region, as well as in other producing regions, lies in the substitution of alternative sources of income for poppy farmers, coupled with a strict policy of eradication of illicit poppy cultivation. A comprehensive development programme aimed at these objectives has been started in Pakistan. It is axiomatic that if a long-term solution is to be found, such rural development and law enforcement programmes must be pursued in parallel in all producer countries. However, this can only be done if the international community is willing to assist the efforts of the countries concerned by making adequate technical and financial resources available.

Afghanistan

38. Events in the country have continued to hamper United Nationsassisted drug control activities. Available information does not permit an estimate of the current extent of either illicit cultivation of the opium poppy or of clandestine laboratory operations. However, Afghanistan has traditionally been a significant illicit source of opiates. More opium was seized in the first nine months of 1981 than in all of 1980; this could reflect either more effective enforcement measures or an increase in the illicit supply, or both.

39. The Government has indicated its willingness to co-operate with the international community in its fight against drug abuse, and Afghanistan was represented at the meeting in October 1981 of the Sub-Commission on Illicit Drug Traffic and Related Matters in the Near and Middle East. The Board has not yet been able to renew its dialogue with the Government.

Cyprus

40. Few cases of opiate addiction have been reported, but some abuse of cannabis and methaqualone has been noted among the young. As the Board anticipated with concern in its last Report, Cyprus is being exploited as a staging area for illicit transit traffic, mostly related to cannabis resin from Lebanon. The more serious cases all involve the use of sea routes by merchant ships or pleasure cruisers. The enforcement authorities are making noticeable incursions into illicit trafficking through large-scale seizures.

Egypt

41. Opium continues to be smuggled into Egypt from parts of the Middle East. The Government is also faced with limited illicit cultivation of the opium poppy in Upper Egypt. Cannabis and cannabis resin, mainly of Lebanese origin, are widely abused, but illicit local cultivation likewise occurs. Amphetamines continue to cause concern, and methaqualone is also subject to growing abuse. Both substances originate abroad, notably from Western Europe. In the case of methaqualone, local attempts have been made clandestinely to process the bulk material into tablets.

42. The Government's deep concern with the rising drug abuse problem has led, with the assistance of WHO and UNFDAC, to the initiation of a concrete programme involving more vigorous enforcement, the treatment and rehabilitation of drug-dependent persons and the eradication of illicit poppy and cannabis cultivation. The Board follows with interest these endeavours and welcomes the Government's firm determination to contain drug abuse and fight illicit trafficking.

<u>Iran</u>

43. Illicit production of opium and heroin persists in Iran. A part of this production is trafficked abroad, but a considerable portion is consumed by the large addict population. The authorities indicate that treatment facilities are being organized for addicts and that traffickers are being severely punished. Iran's geographical position also renders it attractive to international drug traffickers and, although enforcement efforts by the authorities have disrupted some trafficking routes, there is substantial smuggling, particularly of heroin, across the country's eastern border. The magnitude of the volume involved is shown by large seizures reported for the first six months of 1981 amounting to more than one ton of heroin, almost one ton of morphine, and 17 tons of opium. This might indicate increased illicit production, more widespread trafficking, stronger enforcement efforts, or a combination of these elements.

Lebanon

44. Traffickers' readiness to exploit the conditions in Lebanon since 1975 has led not only to a steady increase in drug abuse, but also to an alarming upsurge of illicit cultivation of cannabis and the illicit export of resin in large consignments. Illicit cultivation of the opium poppy in the Bekaa Valley appears to continue unchecked. Moreover, there are signs that traffickers of cannabis are now also dealing in heroin as well as psychotropic substances. In the circumstances existing in the country, law enforcement agencies should be commended for the seizures they make, but as conditions permit more vigorous enforcement action is urgently required, especially against illicit cultivation.

Pakistan

45. In March 1981, at the invitation of the Government, the Board sent a mission to study the general drug control situation in Pakistan. The illicit production of opium in 1981 is expected to have diminished to only about one-eighth of the record 800 tons produced two years ago. However, there remains illicit poppy cultivation in the North-West Frontier Province, both in the "tribal" and in the "merged" areas, even in parts of the Buner pilot project area. Opium is abused locally and also trafficked beyond the country's boundaries. 46. The illicit traffic in morphine sulphate tablets manufactured in Pakistan is on the rise. An even more ominous development is the illicit manufacture of high-purity heroin within the country, most of which is destined for abuse abroad. However, heroin abuse is emerging within Pakistan itself and has already begun to endanger its youth.

47. The Government is undertaking a comprehensive programme involving rural development, law enforcement and rehabilitation. Under the rural development sector of the programme suitable substitute crops have been introduced and are being cultivated over a wide area. The law enforcement sector should, however, be given greater emphasis and poppy eradication systematically extended.

48. Cannabis grows wild and is widely abused in the country in spite of the clear prohibition contained in the Enforcement of Hadd Order of 1979. The Government should consider withdrawing its now obsolete transitional reservation under Article 49 of the 1961 Convention with regard to the non-medical use of cannabis.

49. Although some domestic illicit manufacture of psychotropics has been reported, a new and threatening development of great concern to the Government is the ever larger quantities of psychotropic substances, in particular methaqualone, which are smuggled into Pakistan. The source of these substances is Western Europe where they are legitimately manufactured and hence exported without the application of adequate controls. In an effort to combat this diversion the Government has invoked Article 13 of the 1971 Convention, banning the import of almost all internationally controlled substances. Moreover, the Government has used diplomatic channels in an attempt to ensure that its import prohibitions are strictly respected.

50. Within Pakistan diversion of psychotropic substances from licit channels also takes place because the distribution network of wholesalers and retailers of medicaments is far too large to be effectively controlled by the competent authorities. This problem requires remedial measures, including the reduction of distribution outlets.

51. Illicit opiates from Pakistan are known to transit Iran and the Gulf countries. Another known trafficking route is via Karachi and then onwards either to Africa or the Far East.

52. A prerequisite for containing the drug abuse problem is availability of sufficient facilities for treatment and rehabilitation throughout the country. This need is recognized by the Government which is endeavouring, despite its scarce resources, to enlarge the number of such facilities.

53. The central agency for co-ordinating the Government's drug control policy is the Pakistan Narcotics Control Board (PNCB), which is functioning under an effective and dedicated leadership. A new narcotics control law, which has been in the process of formulation for several years, will further strengthen the authority of the PNCB. The Board urges the earliest possible enactment of this comprehensive legislation.

54. The determination of the Government to contain drug abuse and to fight illicit traffic remains firm. It should be matched by equally firm commitments of technical and financial assistance from the international community.

Turkey

55. The Government is strongly committed to the continued successful control of the licit cultivation of the poppy for production exclusively of unincised poppy straw, and no opium is produced in Turkey.

56. The authorities are also making a determined effort to stem or reduce the flow of illicit drugs which transit the country, as witnessed by an impressive volume of seizures, particularly of heroin and morphine base originating elsewhere in the region.

57. In addition to its efforts at the national level, the Government plays an active role in regional and international activities. Bilateral protocols have been proposed to several countries, which have an interest in countering the drug traffic transitting Turkey, and a Protocol between Iran and Turkey in the final stage of negotiation will supplement those already concluded with Bulgaria, Egypt and the Syrian Arab Republic. In April 1981 the Government of Turkey ratified the 1971 Convention. It has also banned the import of several psychotropic substances pursuant to Article 13.

58. A useful exchange of views regarding the operation of the international drug control system took place during a Board mission to Turkey at the beginning of the year. The Board commends the Government for its unswerving drug control policy and the vigour with which this policy is being applied, not only in its own interest but for the benefit of the entire international community. The Board continues to believe that the international community should co-operate fully with Turkish the authorities and provide resources to assist them.

The Gulf Area

59. Since the publication of the Board's last Report, the situation in the Gulf Area has remained virtually unchanged. Cannabis continues to be the main drug of abuse and cannabis trafficking persists on a considerable scale. Opium is also abused, but to a lesser degree, and heroin is emerging both in the illicit traffic and for local abuse. These narcotic drugs are mainly smuggled from or through Pakistan, Iran, Lebanon and India.

60. Another cause of concern is the growth in the abuse and smuggling of psychotropic substances, mainly manufactured in Europe, and in some instances diverted to Africa and destined for the Gulf Area. Large amounts of amphetamines, methaqualone and other substances have been seized in Saudi Arabia and other countries of that area. Vigorous enforcement action and continuous co-operative efforts are indispensable to counter these developments. Four countries in the region (Bahrain, Oman, Qatar and the United Arab Emirates) have not yet formally adhered to any of the international drug control treaties, although in practice they co-operate with the Board. It is hoped that they will soon formalize their <u>de facto</u> co-operation by acceding to the 1961 Convention, as amended by the 1972 Protocol, and to the 1971 Convention.

SOUTH ASIA

India

61. During the course of 1981 India has emerged as a transit point in illicit trafficking. This is in contrast to minor opium trafficking from India which for several years has been reported by Sri Lanka. Recent seizure data indicate that heroin, coming from India, may be finding its way to Western Europe. Clandestine laboratories manufacturing opiates have been discovered by the authorities and dismantled. In addition, large amounts of methaqualone, shipped from India, have been seized in South Africa, the Gulf States and Mauritius. The Board is aware that India has traditionally played an effective and constructive role in drug control and is confident that the authorities will move energetically to contain illicit activity through and in India.

EAST AND SOUTHEAST ASIA

62. The most disturbing development in the region is the estimated three-fold increase in the illicit production of opium in 1981. Available information suggests that this may exceed 600 tons, compared to about 200 tons in 1980, and is already evidenced by seizures both within and outside the region. The increase in the availability of opiates of Southeast Asian origin will add to the already immense drug abuse problems within the region as well as abroad.

63. Central to the problem of illicit manufacture of heroin is the easy availability of acetic anhydride. As noted elsewhere in this Report, this chemical product, essential for the manufacture of heroin, continues to find its way, mainly from Western Europe, into the countries of illicit manufacture in spite of their regulations to prohibit unauthorized import. The Board notes once again that countries exporting acetic anhydride are themselves affected by the heroin which this trade helps to bring into existence. These countries, therefore, in their own interest and in that of the international community, will undoubtedly wish to take more effective action to curtail the export of this chemical to regions where illicit opium poppy cultivation takes place and clandestine laboratories operate.

64. As in the case of other producing regions, the long-term solution to drug abuse problems lies in rural development programmes, embracing crop substitution, combined with vigorous law enforcement, including eradication of illicit cultivation. Furthermore, co-operative efforts between the enforcement services of the region must be actively pursued and developed into a wide inter-connecting system also embracing inter-regional collaboration. Meetings of Heads of National Narcotics Law Enforcement Agencies, Far East Region, have been held every year since 1974 and remain a useful form for promoting such co-operative efforts. Burma

65. More than half of the illicit opium crop in East and Southeast Asia is estimated to be produced in northeast Burma. In recent years the Government has embarked on a vigorous eradication campaign and has destroyed large areas of poppy. Clandestine laboratories exist in this area, particularly along the Thai/Burmese border. Most cultivation now takes place in areas not fully under Government control and often inaccessible. Opiates are normally trafficked through Thailand although there have been cases of trafficking by ship to the coastal towns of peninsular Malaysia.

66. There have been indications of a reduction in heroin abuse but an increase in the abuse of cannabis and psychotropic substances. Drug treatment centres have been established in major towns and the Government intends to extend these facilities to rural areas under its primary health care scheme. In addition, residential vocational training centres have been set up which provide counselling services as well as training in a variety of skills. Volunteer workers have been used both to identify addicts and encourage them to seek treatment as well as counselling. The Government has also vigorously carried out preventive education campaigns with a view to reducing illicit demand.

67. With UNFDAC the Government assistance has carried out а multisectoral 5-year programme (1976 to 1981). Based on the progress made, a second 5-year phase is being implemented. A major part of the programme is devoted to crop substitution and law enforcement. The Board commends the firm commitment and energetic action being undertaken by the authorities, who merit sustained support of the international community. The Board hopes that the required resources will be promptly forthcoming.

The Lao People's Democratic Republic

68. Little information is currently available to the Board from Laos, although illicit opium production in 1981 is estimated to have been as high as 70 tons. UNFDAC supports a livestock development project as part of a resettlement and rural development scheme involving several international agencies. The Board remains ready to resume its dialogue with the Government at the earliest opportunity.

Malaysia

69. The Government's intensification of its efforts against the illicit drug traffic has caused some traffickers to bypass Malaysia as a transit point. Legislation has been enacted to provide heavier penalties for trafficking as well as greater supervision of drug addicts. In addition, manpower in the law enforcement agencies has been increased and the telecommunications system for drug control throughout the country is being strengthened with support from UNFDAC. Malaysia, in response to the Thai Government's appeal, has also banned the transit of acetic anhydride through its territory.

70. The abuse of heroin continues, and increasing abuse of psychotropic substances has further aggravated the situation. The Government has set up centres for detection, detoxification and rehabilitation of drug abusers. UNFDAC is supporting programmes of drug analysis, treatment and rehabilitation, and drug prevention.

Thailand

71. A number of adverse developments have taken place. Illicit production of opium increased significantly in 1981. This increase is attributable to favourable weather conditions and to greater acreage sown because farmers were paid higher opium prices during the previous two years of drought. Mobile morphine and heroin laboratories continue to exist along the Thai-Burmese border, with the illegal importation of acetic anhydride aggravating control efforts. Bangkok continues to be the main outlet for illicit opiates produced in the region and an important trafficking centre. There also appears to be a trend for opiates to be shipped from points along the Western coast of Southern Thailand.

72. The abuse of heroin, often in conjunction with diazepam, constitutes a major problem. The authorities estimate an addict population of about half a million. Efforts to treat and rehabilitate addicts continue and the Institute of Health Research of Chulalongkorn University conducts research in this field. Community workers are involved in the long term follow-up and aftercare programmes.

73. The United Nations income substitution programme for poppy farmers has been further extended, with emphasis on improved marketing and credit management. It will be integrated into the fifth Thai National Economic and Social Development Plan (1982-86). Although the income substitution programme supported by the UN has been carried out for a decade, illicit opium production continues in much of the programme areas. The Government is urged promptly to rectify this situation. The Board hopes that the Government will intensify its efforts to promote income substitution on an extensive scale, in conjunction with vigorous eradication and enforcement, throughout the poppy growing area.

Territory of Hong Kong

74. Indicators show that with the increased availability of opiates in the region, drug trafficking to and through Hong Kong has increased. Profits from drug trafficking are often re-invested into legitimate businesses, and this is particularly so in Hong Kong since it is an important financial centre. Although legislation in the Territory provides for confiscation of assets related to drug trafficking, detection is extremely difficult and requires the co-operation of all countries on the trafficking routes.

75. In the efforts to reduce drug demand, both drug prevention and treatment and rehabilitation continue to have high priority.

EUROPE

Eastern Europe

76. In general, the drug abuse picture in the area remains the same and problems mainly involve some diversion of drugs from licit sources, including thefts from hospitals or pharmacies. In Hungary an attempt to set up a clandestine amphetamine laboratory has been thwarted.

77. Some countries in Eastern Europe have been the source of certain psychotropic substances diverted from licit international trade. Hungary, in solidarity with the international community, has responded positively by curtailing the licit manufacture of methaqualone.

78. A main problem remains the growing traffic, chiefly in cannabis and heroin, which originates in the Near and Middle East and transits particularly Bulgaria and Yugoslavia. The Eastern European countries are therefore concentrating their efforts at preventing this smuggling across their territories, and in 1980 Yugoslavia alone seized 300 kg of heroin or one-fourth of total seizures of that drug within or entering Western Europe. This achievement is all the more commendable since Yugoslavia, with little external resources, has to cope with an ever increasing flow of motor vehicles across its borders.

79. In 1980 Poland reported a seizure of 51 kg of heroin, which presumably originated in Southeast Asia and was destined for Western Europe. Poland is also concerned about the emergence of a mounting abuse problem affecting its youth and involving consumption of opiates and psychotropic substances.

80. In following up the two previous successful seminars in 1978 and 1979, WHO and the Ministry of Health of the Soviet Union organized a third travelling seminar in the USSR from 5-17 October 1981 on the safe use of psychotropic and narcotic substances. The Board was represented by its Secretary.

Western Europe

81. Unremitting drug abuse persists in most of Western Europe, and the region remains a major target for traffickers dealing in illicit opiates and other drugs of abuse. It is believed that in many countries there is a corresponding growth of drug-related violent crime such as assaults, hold-ups and break-ins.

82. Heroin abuse remains serious and widespread. For the first time more than one ton of heroin was seized within or entering Western Europe during 1980. In recent years the Middle East has been the main source of heroin destined for Western Europe, but with this year's sharp increase in the opium harvest in Southeast Asia, heroin from that part of the world will undoubtedly create new problems. The discovery of clandestine heroin laboratories in some Western European countries, particularly in Italy and France, points to the gravity of the overall picture.

83. Acetic anhydride, a necessary chemical agent in heroin manufacture, continues to be diverted from its many legitimate industrial uses. In spite of the difficulties involved in controlling this substance, urgent and whole-hearted efforts are required to stem this diversion. Ninety per cent of all acetic anhydride seizures reported to the United Nations originate from one firm in one Western European country.

84. Cocaine seizures, which have been increasing faster than those of any other drug, indicate that cocaine is becoming a major drug of abuse. Traffickers have apparently embarked on a systematic effort to develop and expand a lucrative illicit market in Western Europe and beyond. While only a few kilogrammes were seized in the region in 1970, the amounts seized in 1980 totalled more than 200 kg and an almost equal quantity has already been seized in the first nine months of 1981. The drug arrives from Bolivia, Colombia and Peru, most frequently by air. The large seizures made in France, the Netherlands, Spain and the United Kingdom may indicate that these countries are the preferred entry and distribution points. Cocaine smuggling into and through Italy shows a two-way traffic of morphine and heroin from Europe to South America and cocaine in the opposite direction. 85. The upward trend of cannabis abuse continues unabated as witnessed by seizures within or entering Western Europe which reached 72 tons in 1980. The Near and Middle East is decreasing in relative importance as a source of cannabis for Western Europe, while remaining on a high absolute level. Morocco and Africa south of the Sahara are supplying a larger share of the illicit market. Colombia and Jamaica remain significant sources.

86. Certain psychotropic substances, mainly amphetamines and barbiturates, and to a lesser degree hallucinogens, continue to be widely abused. Clandestine amphetamine manufacture has been detected in some countries.

87. In June 1981 the Federal Republic of Germany passed a new drug control law subjecting psychotropic substances to the same full control as opiates. This law will enter into force on 1 January 1982, and the Board understands that all administrative regulations which may be necessary for the application of the law will have been promulgated by that date. The Board also understands that these regulations will apply to the free port of Hamburg, through which certain psychotropic substances, included in Schedule II, transit.

88. In solidarity with the international community and in defense of their youth, all countries in the area should take effective measures to keep under close surveillance the movement of acetic anhydride with a view to prohibiting export in the case of suspicious orders liable for use in the manufacture of heroin. To the same end they should strengthen regional and inter-regional co-operation. Maximum attention should be given to full implementation of the 1971 Convention and prevention of diversion from the licit trade of psychotropic substances, particularly those controlled in Schedule II. With regard to cocaine, the public should be warned of the health hazards involved in abuse. Finally the Board wishes to recall that inadequate exercise of drug control on the part of one Government can affect the situation not only in that country itself, but also in other, particularly neighbouring, countries.

THE AMERICAS

NORTH AMERICA

Canada

89. In Canada multiple drug abuse continues to be the dominant trend in illicit consumption. An increasingly disturbing problem is the expanding availability of heroin, particularly on the Western seaboard, with Southeast Asia remaining the primary source. Spreading abuse of cocaine also gives rise to serious concern; Canada's international airports are the principal points of entry for the illicit traffic in cocaine. Cannabis dominates the illicit traffic throughout the country, and the abuse of cannabis products remains widespread. A wide range of psychotropic substances is likewise available on the illicit market. Clandestine manufacture and diversion of licit supplies, especially of amphetamines, into illicit channels present a complex enforcement problem. Another recent trend appears to be an increase in LSD abuse.

Mexico

90. Extensive eradication campaigns of illicit opium poppy and cannabis cultivation, now in their fifth consecutive year, continue to produce significant results in restricting the availability of drugs in the international illicit traffic. This eradication is increasingly being directed against illicit cannabis crops.

Mexican authorities 91. repeatedly stressed that The have the eradication campaign against narcotic plants is only part of the Government's strategy. Interdiction activities within the country's borders are equally important, in view of the increasing illicit transit traffic moving from Central and South America towards markets in North America. Large-scale confiscations of materials and transportation equipment are being made.

92. Cannabis remains the most abused drug. Non-medical use of stimulants and tranquillizers also prevails.

93. At the invitation of the Attorney-General, the President of the Board visited Mexico at the beginning of 1981 and was able personally to witness the effective programme to eradicate illicit cannabis and opium poppy cultivation. Also by invitation of the Attorney-General, and with the financial support of UNFDAC, the Board has requested its secretariat to conduct a training seminar for drug control administrators and law enforcement officers in Latin America. The Board's seminar, under the patronage of the President of Mexico, will be organized in co-operation with the Division of Narcotic Drugs, and be held in Mexico City in December 1981.

United States of America

94. Drug abuse continues to be a serious problem in the United States. Data show a tendency of rising heroin abuse in some metropolitan areas in the North-eastern part of the country, giving rise to concern that this development could point to a reversal of the declining trend which had been observed in the country as a whole for the last few years. The authorities view with anxiety the abundant supplies of illicit opiates available abroad, in particular the large opium harvest in Southeast Asia this year, which augments the already considerable supply from other sources abroad.

95. A further disturbing trend is the illicit use of Pentazocine and Tripelenamine, so-called "T's and blues". This illicit use, which began in Chicago four years ago, has now reached epidemic proportions in several United States cities. Accordingly the Government is considering further measures to bolster control.

96. Abuse of cannabis remains widespread throughout the country. The authorities indicate that most of this drug, trafficked in enormous quantities, originates mainly in Colombia, Jamaica and Mexico. There has been, however, an increase in domestic illicit cultivation of high potency cannabis in several regions of the United States. This necessitates vigorous counter-measures of eradication. 97. Cocaine abuse is increasing significantly with a corresponding rise in cocaine-related psychoses, injuries and deaths, and a growing number of admissions to treatment centres. It is estimated that 25 - 30 tons of cocaine are illicitly imported every year. The authorities are not only concerned with expanding availability and use, but also with the increased health hazards associated with the smoking of coca paste.

98. The level of abuse of certain psychotropic substances is a matter of serious concern. These substances are frequently abused in combination with other drugs or alcohol. The magnitude of the problem is illustrated not only by the seizure of over 230 clandestine laboratories in 1980, but also by the substantial traffic in some substances, particularly methaqualone. During 1980, an estimated 100 tons of methaqualone, legitimately manufactured in Europe, were smuggled into the United States, whose licensed national manufacture was restricted to 4 tons. Developing international co-operation, however, is beginning to reduce this leakage from licit sources.

99. In its efforts to reduce the illicit demand for drugs and the medical and social consequences of drug abuse, the United States continues its research, treatment and rehabilitation approaches through which drug dependent persons are assisted in resolving the personal, social or emotional problems involved in their drug abuse. Private community groups, notably parents' organizations, also actively participate in such undertakings.

100. In its endeavour to suppress illicit drug supply, the Government is reinforcing its defences against the illicit inflow of drugs and is expanding its law enforcement efforts through a vigorous drive against the unscrupulous financiers who provide the vast funds used in drug trafficking. These efforts involve not only specialized law enforcement agencies, but also the Internal Revenue Service and federal bank examiners; moreover, the authorities are seeking to expedite the prosecution of major drug traffickers and their financial backers.

101. At the international level the United States continues actively to participate in bilateral and multilateral undertakings directed against illicit production, traffic and abuse of drugs.

THE CARIBBEAN, CENTRAL AND SOUTH AMERICA

102. In spite of recent measures to improve co-operation within the region and increased enforcement activity by some Governments, there has been no decrease in the volume of cocaine and cannabis available in the international illicit market from this part of the world. Indeed, illicit production and traffic seem to be gaining ground. This is evidenced by the spreading cultivation and the ever larger seizures of these drugs, worldwide and in the region. There is substantial smuggling into the region of psychotropic substances destined mostly for North America, and major seizures, especially of methaqualone of European origin have been made. The negative and economically and politically destabilizing effects of drug trafficking are evident in some countries.

103. Apart from the exclusively Andean phenomenon of coca leaf chewing, the abuse of cannabis is most widespread throughout the region. The practice of coca paste smoking 16) is expanding, bringing in its wake dangerous health hazards. Furthermore, many countries are faced with grave problems of abuse of psychotropic substances, particularly amphetamines and barbiturates, and also methaqualone and tranquillizers. These substances are frequently consumed in combination with other drugs, and often with alcohol.

104. In general the Caribbean seems to attract illicit finance because of the relative impunity with which dubious transactions may be made in countries of the area. Progress depends on enactment and strict enforcement of national legislation to prevent traffickers from depositing or investing illicitly gained capital.

105. Some psychotropic substances, particularly methaqualone, often move through free trade zones in the area. Moreover, complex shipping routes are used and drugs are deliberately mislabelled and falsely invoiced to escape detection.

106. The control of coca leaf production is the key to curtailing cocaine availability and the wide-spread rampant abuse of this substance, which is being used in ever more hazardous ways. Consequently, any improvement in the situation will depend importantly on the ability of the Governments of <u>Bolivia</u> and <u>Peru</u>, the world's two major sources of illicit supply of coca leaves, to reduce the current staggering production to quantities needed for legitimate purposes. The magnitude of the problem clearly requires prompt and comprehensive measures to eradicate large-scale coca bush cultivation.

107. In Peru 17) a drug control programme is being planned for the Huanuco-Tingo Maria area. The strategy is to combine enforcement, development assistance to farmers and marketing arrangements in order to substitute the traditional and relatively profitable coca leaf production by new income-producing activities. The Board hopes that this beginning will be pursued vigorously and lead to a full-scale and sustained attack on the long-standing drug problems.

108. In Bolivia 17) a programme aimed at establishing a coca marketing control board in conjunction with a planned reduction of coca cultivation has been interrupted by unstable political conditions. The Board notes that Bolivia proposed that an item entitled "International campaign against the drug traffic" be included in the agenda of the General Assembly in 1981; it is hoped that this will help clarify the policy which the authorities envisage to carry out in respect of the country's treaty obligations.

¹⁶⁾ See Report of the Board for 1978, E/INCB/41, paragraph 70 and Report of the Board for 1979, E/INCB/47, paragraph 73.
17) See also paragraphs 137 to 139

109. In <u>Colombia</u> illicit manufacture of cocaine is growing, and the country remains an important staging point for cocaine smuggling overseas. However, illicit cultivation of coca leaves is now increasing, especially in the Cauca region and Eastern Plains. Moreover Colombia is confronted with serious difficulties in cannabis trafficking, since large-scale local cultivation remains. Seizures of over one thousand tons of cannabis have been reported by the Colombian authorities. There are indications that under pressure from traffickers some farmers, tempted by the higher profit to be reaped from cocaine, are replacing cannabis cultivation with the coca bush.

110. The authorities have also reported important seizures of psychotropic substances. For example, one seizure amounting to 555 kg of methaqualone would have been sufficient to manufacture one hundred million tablets. In another incident, one and a half million tablets, ready to enter the illicit traffic in the United States, were confiscated.

111. In view of the seriousness of the problems, Colombia has allocated high priority to drug control as indicated by the spectacular seizures mentioned above. The Government is deeply concerned about spreading abuse of cocaine and other drugs, particularly among the youth, and is taking measures to promote prevention, treatment and rehabilitation. Colombia has become a party to the 1971 Convention and pursuant thereto has banned the import of methaqualone, as recommended by the Board in its Report for 1980.

112. In <u>Jamaica</u> illicit cannabis cultivation is expanding, and may have reached an almost four-fold increase over the last few years. The Government will undoubtedly take the necessary enforcement action to eradicate this cultivation.

113. In <u>Panama</u> a seizure of one ton of methaqualone of Western European origin and destined for North America has recently been made. The Board has been following up this development with the authorities.

114. A further strengthening of national commitments in the region, as well as regional and inter-regional efforts, is indispensable if concerted action against drug abuse is to be effective. The next conference of the member states of the South American Agreement on Narcotic Drugs and Psychotropic Substances will take place in Brasilia in November 1981. In 1982 the Pan-American Sanitary Conference will discuss a special report on drug abuse in the region.

115. The Board, for its part, is organizing a training seminar in Mexico City for senior drug control administrators and law enforcement officers in Latin America in December 1981. This has been reported in paragraph 93.

AFRICA

116. The most wide-spread problem of drug abuse and illicit traffic throughout Africa remains that of cannabis. Cannabis abuse seems to be a common phenomenon in many countries of the region. It is a cause for special concern that this kind of abuse in recent years has spread among young people, primarily in urban environments. An additional concern is the adverse economic and social impact which follows in the wake of increased illicit cannabis cultivation and the harvesting of wild cannabis, which has occurred both to satisfy rising domestic abuse as well as the enormous illicit market abroad. Countries in other parts of the world, especially those in which certain groups underestimate or play down the gravity of cannabis abuse, would do well to note the burden this difficult problem places on Africa.

117. While abuse of opiates and cocaine is still very limited, there is a keen awareness in many African countries of the growing threat presented by psychotropic substances, particularly amphetamines and methaqualone. Large quantities of a preparation of amphetamine compounded with aspirin have been exported to certain African countries without the knowledge and approval of the countries of destination 18). Hundreds of kilogrammes of this Schedule II preparation have been seized in the illicit traffic. Furthermore, over one million tablets of methaqualone in the form of Mandrax have been reported seized in one southern African country alone. In spite of the fact that in most African countries little or no medical need exists for these substances, their influx is continuing because of a lack of trained personnel, of control mechanisms and of administrative regulations. This situation is being exploited by traffickers who at the same time have been able to take advantage of the inadequate vigilance in some manufacturing countries.

118. However, the insufficiency of controls over licitly manufactured substances which has existed in certain manufacturing-exporting countries has now begun to be remedied, and this should hopefully contribute to alleviating the problem. In this connection the Board wishes once again to emphasize that the 1971 Convention permits countries to protect themselves against unwanted psychotropic substances through the notification procedure specified in Article 13. Problems would be reduced if countries restrict imports to substances and amounts corresponding to actual requirements.

119. The Board, moreover, notes that a large number of African countries have not yet become Parties to the international drug control treaties. An essential first step towards successful control is adherence to the treaties, which must, of course, be followed up by the necessary legislative and administrative measures at the national level. Where such measures cannot be obtained from domestic resources, the international community should provide assistance in support of national efforts.

120. In Eastern Africa and Southern Arabia the chewing of khat, a plant which does not fall within the scope of international control, is the cause of public health and social problems. It is first and foremost incumbent on the countries concerned to resolve this strictly regional situation by taking suitable legislative, administrative and co-operative measures to contain and counter this abuse.

121. In response to the Economic and Social Council's call for increased priority to drug control in Africa, the Board requested its secretariat to organize a training seminar for senior officials in charge of national drug control administrations in African countries. The seminar, financially supported by UNFDAC, took place in December 1980 in Mauritius with anglophone and francophone participants from twenty countries. Apart from training and a wide exchange of information and viewpoints, the seminar was significant in establishing personal contacts among the participants with a potentially catalytic effect on regional co-operation and the future drug control efforts of the countries concerned. Moreover, the participation of these officials has already led to a concrete improvement in the information submitted to the Board pursuant to the treaties.

122. A meeting of the African Expert Committee on Problems of Drug Abuse held in Rabat, Morocco, in April 1981 confirmed the general trend of drug abuse as described above and expressed special concern at its spread to ever younger sectors of the population.

THE MAIN ELEMENTS IN THE CAMPAIGN AGAINST DRUG ABUSE

123. At the beginning of the second decade of concerted national, regional and international action to stem the new wave of drug abuse which became evident in the late 1960's, the Board has deemed it useful to recall some elements from which this comprehensive undertaking proceeds.

124. It is universally recognized that the campaign to counter drug abuse must be directed against the demand created by those who abuse drugs, the supply generated by illicit production and manufacture, and the illicit trafficking which meets, and sometimes provokes, the demand, while encouraging, and often financing supply.

125. Although interrelated, these three elements spring from entirely different motives. Addicts are driven by a compulsive need. Illicit producers of narcotic raw materials are often poor farmers living in remote or inaccessible areas without other sources of cash income. The traffickers at all levels - including those who transform raw materials into a finished product - are motivated by sheer financial gain, disregarding the human misery they cause.

126. It follows that the basic differences between these factors require different means to counteract them. It is also clear that in order to be effective, co-ordinated attacks must be undertaken simultaneously on all three fronts. Otherwise rising demand will consistently offset law enforcement efforts against the illicit traffic and lead to the emergence of new areas of illicit supply as others are brought under control. The policy, strategy and proposed activities to achieve international drug control recommended to the General Assembly in 1981 by the Commission and the Council embrace this three-pronged approach. 19)

Illicit demand

127. Demand poses a complex problem, involving as it does human personality and behaviour. Effective prevention, treatment and rehabilitation efforts have been hampered because the causes of drug abuse are difficult to identify.

128. Persistent abuse of narcotic drugs or psychotropic substances is often associated with psychological disabilities or socio-economic factors. Whatever the cause, the addict is compelled to satisfy his craving irrespective of the consequences, including severe deterioration of his own health and personality. Under such stress, the confirmed abuser often commits unlawful acts, including small-scale trafficking, to satisfy his need; the threat of punishment is not necessarily a deterrent.

¹⁹⁾ E/1981/24-E/CN.7/668, Annex II

129. Therefore, over the last two decades there has been a discernible shift in many countries from emphasizing punitive methods of dealing with drug addicts towards a medical approach involving treatment and rehabilitation. Amendments to the Single Convention on Narcotic Drugs, contained in the 1972 Protocol, reflect this change, stressing "early identification, treatment, education, after-care, rehabilitation and social reintegration of the persons involved." (Article 38, paragraph 1).

130. It is now recognized that the treatment and rehabilitation of drug dependent persons require the use of specialized techniques adapted to different types and causes of dependence. Different methods have been applied in various countries. Drug abuse has sometimes been contained, but not eradicated. It is therefore more important than ever to continue to seek to identify short- and long-term causes of drug abuse and effective treatment responses thereto.

131. Research has not yet shown the extent to which these causes are rooted not only in the human personality, but also in the structure and environment of modern society. Moreover, circumstances differ widely from one place to another. Personality factors may include curiosity, feelings of insecurity or unhappiness. Environmental and social factors may include family stress, peer pressure, increasing urbanization, absence of employment, work which is emotionally unsatisfying, and pressures of everyday life. In addition, the modern methods of mass communication permit the rapid transmission of ideas and fashions throughout the world. At the same time, ease of transport has greatly facilitated the movement of people and the distribution of goods - including drugs.

132. There is no single common problem, rather a series of problems in different parts of the world. The spectrum ranges from the misuse of a single natural substance, such as cannabis, opium or coca leaf, to the abuse of sophisticated chemical products and multiple drug abuse, often in conjunction with alcohol.

133. Drugs are abused in the least developed as well as the more developed regions of the world. No solution can be achieved by a single country acting alone. This truism is now more widely recognized than ever, and countries are working in concert, exchanging information and comparing their experiences in preventing and reducing illicit demand.

134. Prevention offers the best potential for combatting drug abuse and requires not only full and co-ordinated action by Governments, but also the mobilisation of society, including the family, schools, universities, religious institutions and youth groups. The community has an important and decisive role to play in its own defence. Moreover, these activities must be co-ordinated to ensure that no time is lost and that all necessary skills, energy and finances available will be used to the best advantage.

Illicit supply

135. As is the case with demand, illicit supply involves not one common problem but rather a series of problems and in different parts of the world. At the same time illicit supply of narcotic raw materials presents characteristics different from those of psychotropic substances.

136. As noted previously in this Report, illicit cultivation of the poppy for the production of opium occurs almost exclusively in Southeast Asia (in parts of Burma, the Lao People's Democratic Republic and Thailand), the Middle East (in parts of Afghanistan, Iran and Pakistan) and in parts of Mexico. Minor illicit cultivation is also reported in Egypt and Lebanon. 20) In Southeast Asia and the Middle East cultivation often occurs in inaccessible areas, frequently not under the full control of the central Government. The cultivators who inhabit these areas do not benefit from national, social and economic development and for many of them the illicit sale of opium is the major source of cash income. These constraints have long been taken into account by the international community - including the Board - and by the Governments of the countries concerned who have been aware that elimination of opium production would be a long and arduous process. Therefore elimination of illicit cultivation requires not only sustained political commitments to allocate sufficient priority to this objective, but also large-scale resources. Since such resources are beyond the capacities of most countries where cultivation occurs, the support of the international community is essential. Βv providing such support countries act in their own interests since their peoples are imperilled by opiates, particularly heroin, originating in the growing regions.

137. The circumstances of cultivation of the <u>coca bush</u> have remained substantially unchanged over the past three decades. Cultivation of the coca bush is confined almost exclusively to the Andean regions of Bolivia and Peru where the bush is indigenous, although there are disquieting reports that such cultivation is spreading in Colombia. Production remains far in excess of the modest legitimate requirements for cocaine in medical practice and the limited industrial use of coca leaves. Statistics available to the Board indicate that only some 5 per cent of the quantity of coca leaves produced is used for legitimate purposes. The remainder is used for chewing, for other non-medical purposes and for the illicit manufacture of cocaine and coca paste which, as noted elsewhere in this Report, are increasingly abused. 21)

138. United Nations organs have repeatedly striven to promote remedial measures. Resolutions of the Commission, of the Council and of the General Assembly have been directed towards this problem. The Board for its part has undertaken five separate missions to Peru and Bolivia, the last one occurring in 1979. Each of them has involved consultations with senior officials and Ministers, and on two occasions with the then Heads of State of Bolivia. Despite the sporadic local efforts to reduce cultivation, production has increased.

139. So long as vast and uncontrolled production of coca leaves persists, it will be virtually impossible to prevent the clandestine manufacture and export of cocaine for the international illicit market. Nevertheless, despite the formidable difficulties, it is essential that a supply reduction campaign be started, first and foremost in the interest of the welfare of the local population, and furthermore to begin to stem the rising flow of cocaine from the region into the international illicit traffic.

 ²⁰⁾ An analysis of the situation in each of these countries is contained above in the section entitled "Analysis of the World Situation" (paragraphs 32 to 122)
 21) See also paragraphs 11 and 103

140. <u>Cannabis</u>²²⁾ can be cultivated or grows wild in most countries of the world. As indicated above major illicit cultivation occurs in Morocco and widely in Africa south of the Sahara; in Lebanon and Pakistan; in Burma, Nepal and Thailand; and in Colombia, Jamaica, and Mexico. Some illicit cultivation is now also taking place in parts of the United States of America.

141. Apart from the non-medical use permitted in Bangladesh, India and Pakistan on a transitional basis until 1989, all Parties to the 1961 Convention are obliged to take such legislative and administrative measures as may be necessary to limit the availability of cannabis exclusively to the relatively minor amounts required for medical and scientific purposes.

142. There has been a proliferation of illicit production, dominated and financed by traffickers who seek to feed a growing demand which they actively encourage. This calls for far-reaching remedies, such as destruction of plantations in all countries where cultivation occurs. It implies in the first instance a political will and also adequate financial and technical resources. Until all Governments concerned fully commit themselves to this end, no real solution to the cannabis problem is in sight.

143. As the Board has indicated many times and especially in its Report for 1980, the illicit supply of <u>psychotropic substances</u> except those in Schedule I, largely consists of substantial diversion from licit manufacture and trade. The main problem is that some exporting countries authorize the dispatch of large quantities, particularly of Schedule II substances, without applying control over the exporting firms and without seeking the required import authorizations. 23)

Illicit Traffic

144. Financial operations connected with the illicit traffic involve considerable sums and huge profits which not only constitute the basis for the expansion of illicit trafficking, but also have serious adverse economic, social and political consequences, particularly in certain developing countries. Many Governments are concerned about these developments and several have taken legislative and administrative measures, or are considering strengthening such measures, in order to enhance their ability to detect and curb these operations.

145. More strict and specialized investigation of the movement of capital when it is believed to be destined for or derived from the financing of international trafficking might make it possible to identify the financiers who are behind the traffic. In this connection, the Board noted with satisfaction at its session last year that the first international meeting of experts on this subject was convened in 1980 under the auspices of the Division 2^{4}). The consensus of the group that special agreements be concluded among countries to facilitate investigation and prosecution merits careful study by all Governments.

²²⁾ See also paragraphs 150 to 155 below

²³⁾ See also paragraphs 20 to 30 above

²⁴⁾ See document E/CN.7/657/Add.2

146. In its Reports for 1978 and 1979 the Board referred to the heavy reliance by traffickers on transporting drug contraband by sea and to the desirability of the international community's taking concerted action to combat such activity. In this connection the Board notes with interest the provisions relevant to this question proposed for inclusion in the Draft Convention on the Law of the Sea.

147. Law enforcement could also be enhanced if more countries were to accede to the International Convention on mutual administrative assistance for the prevention, investigation and repression of Customs offences (the Nairobi Convention) and its Annex X. This Annex deals exclusively with the smuggling of drugs and the financial operations undertaken in connection therewith and expressly states that its provisions complement the implementation of the provisions of the international drug control treaties.

148. Because of the involvement of organized criminal groups in drug trafficking networks, such groups properly constitute a priority target for enforcement agencies. The links between drug trafficking and other criminal activities should continue to be carefully studied, and the information gathered and expertise gained should be shared among enforcement agencies.

In addition, it should be noted once again that the trade in 149. chemicals which serve as precursors or agents in the illicit manufacture of drugs (for example, acetic anhydride, a key to illicit manufacture of heroin) continues to pose serious problems. The monitoring of trade in such substances is difficult because of the wide legitimate industrial use of most of them. The Division organized a meeting in 1980 on measures against the illicit use of acetic anhydride and acetyl chloride. 25) Its recommendations should be studied by all Governments with a view to finding countries have already successfully solutions. appropriate Some established voluntary reporting programmes by which licit chemical manufacturing and supply firms are requested to notify the authorities of any unusual or suspicious orders. This has led, in one country, to the seizure of a considerable number of clandestine laboratories. Consideration might be given to the establishment of a precursor surveillance programme at the international level. It might initially consist of drawing up a short list of important chemicals and reagents most widely used in the illicit manufacture of narcotic drugs and psychotropic substances and of bringing this list constantly to the notice of police, customs and other control authorities.

CANNABIS : RECENT DEVELOPMENTS

150. The Board notes that the problem of cannabis and its products (including marihuana, hashish and hashish oil) continues to dominate the illicit traffic in many countries and that the non-medical consumption of cannabis is far higher than that of any other substance subject to control. Furthermore, the drug is being used in ever more harmful forms.

²⁵⁾ See document E/CN.7/657/Add.1

151. The increasing concentration of cannabis' most important active component, delta-9-tetrahydrocannabinol (THC), is resulting in the availability of more potent cannabis. Whereas marihuana, consisting mainly of dried leaves and stems, has a potency ranging up to 8% THC, the solvent extracts of leaf material, flowers or resin ("liquid cannabis" or "hashish oil") can have a potency of up to 60% THC. Consumption of such potent cannabis, unavailable 10 years ago, has risen steeply.

152. In previous Reports the Board noted that increased cannabis consumption might reflect a widespread belief that cannabis is harmless. Accordingly, the Board called for accelerated scientific research to elaborate more definitive conclusions about adverse health consequences.

153. Diverse studies carried out in a number of countries show that heavy cannabis use can produce acute psychotic reactions, lowered resistance to disease, and adverse effects on the reproductive and endocrine systems, the lungs and even on personality. Moreover, sophisticated pulmonary function testing in many well-controlled studies concludes that cannabis smoke is more injurious to the lungs than tobacco. Its smoke contains over 2,000 compounds. These include such well-known toxic agents as carbon monoxide and cyanide and such carcinogenic substances as nitrosamines and some polycyclic hydrocarbon compounds.

154. Studies also show that even occasional use of cannabis commonly results in headaches, dizziness, diarrhea, vomiting, abdominal distress and a host of ear, nose and throat maladies - and these effects may be severe enough to require medical intervention. Furthermore, these studies consistently conclude that cannabis use interferes with learning, with psycho-motor functions, with driving motor vehicles, and with doing any complex task.

155. The importance of the research itself and the dissemination of its findings can help to alter the drug abuse picture. This is illustrated in the case of one high risk group, when such knowledge resulted in decreased cannabis use, showing that young people themselves respond to evidence of potential hazards. Therefore, Governments should take action to ensure that such evidence is made known to the public at large. They should also conduct research to enable them to monitor changes in national drug use levels and in related public attitudes and perceptions.

CONCLUSIONS

156. The international control system as it relates to the licit movement of narcotic drugs for medical and scientific purposes remains generally satisfactory and diversions from licit manufacture and trade are relatively minimal. However, vast oversupply of opiates persists. This serious problem is discussed in detail in a separate report 26). With regard to psychotropic substances, improvements have been made in the control of licit manufacture and trade. Nevertheless substantial diversion is revealed from an analysis of the statistics which Governments submit to the Board. Suggestions for continuing remedial action are set forth elsewhere in this Report 27).

157. Despite the international community's efforts to date, drug abuse throughout most of the world has not decreased. On the contrary, it has spread and the situation continues to deteriorate. Of particular concern is that victims include adolescents and even children. Geographically, more and more countries are afflicted, both developing and developed. Furthermore, drugs of greater potency are more widely available and are consumed in more hazardous ways.

158. Against the background of the deterioration in a number of regions and countries, suggestions are made earlier in this Report concerning remedial action which might be taken. Additional conclusions and possible courses of action are set forth below.

159. For its part, the Board intends to pursue its dialogues with Governments to promote such remedial measures. In this endeavour it proposes to accord priority to countries in which substantial illicit production and/or manufacture of drugs take place, where controls are inadequate, where drug abuse is prevalent, and where large-scale illicit trafficking occurs.

160. Governments are aware that unless illicit demand for drugs is diminished, whether in developing or developed countries, the reduction of illicit supply in one area will make little impact, since the elimination of one source of supply will merely be offset by another. Accordingly, heavy stress should be placed on the prevention of abuse, and the treatment and rehabilitation of drug dependent persons. For maximum impact such programmes should mobilize the participation of all segments of society.

161. Governments are reminded that in the long term, progress towards containing and reducing illicit production of narcotic raw materials can be made only if farmers are afforded alternative means of earning their livelihood, such as by growing food crops. Commitments to this end by the Governments concerned reflected in concrete economic and social development programmes, merit the support of the international community. The need for such programmes to be carried out in conjunction with law enforcement and demand reduction remains of paramount importance. Unless poppy eradication is undertaken progressively as alternative means of livelihood are available, drug control objectives will not be achieved. In fact, the illicit production of opium will actually increase, and the continued support of the international community might lose its justification.

²⁶⁾ E/INCB/52/Suppl.

²⁷⁾ See paragraphs 20 to 30 above

162. To be successful, programmes aimed at elimination and substitution need necessarily to be based on the fullest possible information regarding the extent and location of illicit poppy cultivation. The Board therefore wishes to reiterate that the Governments concerned might consider the possibility of utilizing modern technology which could assist to this end.

163. The substantial increase in illicit opium production during the most recent crop year necessarily enlarges the threat of heroin which is now being manufactured in an ever-increasing number of countries and over a wider geographic spread. This makes it even more imperative not only that poppy eradication be resolutely undertaken but also that more vigorous concerted action be taken by the countries in which heroin is manufactured, through which it transits, and in which it is consumed.

164. The ever-expanding illicit production of cannabis has aggravated an already serious situation which cannot be contained unless strong remedies are applied. They include prompt eradication on a large scale, identification of major traffickers and their severe punishment and the dismantling of the criminal organizations which finance and promote production and traffic.

165. More and more potent cannabis products are widely available and abused. Steadily increasing scientific evidence shows that the hazards to human health of such consumption are serious. The wide dissemination of this information could be beneficial in preventing and reducing cannabis use. Research conducted in one country in respect of a high risk group revealed that young people themselves are responsive to evidence of potential hazards.

166. reduce the ever-expanding Efforts designed to contain and production of coca leaf and cocaine have been initiated from time to time This long-standing problem must be resolutely and but not pursued. systematically tackled by the producer countries, in conjunction with the international community. Firm and sustained political commitments by the producer countries are indispensible to avoid further deterioration. At the same time it is essential that determined efforts be made to reduce coca leaf chewing and the abuse of cocaine and coca paste. This is all the more necessary since it can be expected that this drug will be abused in ever more dangerous ways.

167. With regard to psychotropic substances, resolute and conscientious application of the 1971 Convention by Parties and non-Parties can bring about improved international control and contain leakage from licit manufacture. Voluntary supplementary action by Governments, as proposed in the Board's Report for 1980, can enable the Board and national administrations to have better knowledge of the medical and scientific requirements for Schedule II substances, thus facilitating the adjustment of manufacture to these requirements. Another voluntary measure would permit the Board more effectively to monitor international trade and take timely action to prevent diversion. The Board is highly gratified that Governments' response to these proposals for voluntary action in respect of Schedule II substances has been affirmative. It therefore intends forthwith formally to invite Governments to submit the information proposed. 168. The Board wishes further to suggest that the export and import authorization system could be improved if a copy of the import certificates were routinely sent by the competent authorities of importing countries directly to their counterparts in exporting countries.

169. Reiterating an observation made in its previous Reports, the Board wishes to stress that developing countries may be at particularly high risk from misuse and abuse of psychotropic substances, in part because their administrative resources do not permit effective control of import and distribution for medical use. Requests from such countries for assistance to establish or improve their drug control administrations merit a prompt and favourable response from the international community. For their part, importing countries can take rapid action to protect themselves by reviewing their medical needs and banning the import of unwanted substances.

170. The trade in chemicals which serve as precursors or agents, such as acetic anhydride, in the illicit manufacture of drugs, should be monitored by all producing and manufacturing countries and consideration should be given to establishing an international arrangement to provide, at a minimum, for prompt exchange of information concerning suspicious import orders. At the national level similar arrangements have been proven to be beneficial and have led to the seizure of clandestine laboratories.

171. The Board wishes also to recommend once again that Governments give increased attention to the question of suspicious financial transactions which may be connected with drug trafficking. The necessary legislation should be promulgated and the required administrative measures taken. Close cooperation among countries is especially important, particularly with regard to timely exchange of information 28).

172. The serious drug control situation in many parts of the world requires renewed awareness, dedication, vigilance, and co-ordinated action. One way to mobilize such action on a global scale and involve, not only Governments, but all sectors of society, would be for the United Nations as early as feasible to declare an International Year Against Drug Abuse. As in the case of other international years, preparatory work on a wide range of national and international activities could begin as soon as a formal decision is taken and would culminate during the designated year in the execution of a specific programme aimed at not only reducing availability of illicit drugs but also at preventing abuse and treating and rehabilitating abusers.

(signed) Paul Reuter <u>President</u> (signed) Mohsen Kchouk Rapporteur

(signed) Abdelaziz Bahi Secretary

Vienna, 6 November 1981

^{28) 1961} Convention, Articles 35-36; 1971 Convention, Articles 21-22; Council Resolution 2002(LX)

Annex I

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PRESENT MEMBERSHIP OF THE BOARD

Dr. Nikolai K. BARKOV

Chief, Laboratory for the Pharmacology of Narcotic Drugs, Serbsky Institute of Forensic Psychiatry, Moscow; member of the Commission on the Problem of Pharmacology of the Ministry of Public Health of the USSR; member of the National Narcotics Control Board of the USSR; member of the Commission on Clinical Pharmacology of the Ministry of Public Health of the USSR; member of the World Health Organization Expert Advisory Panel on Drug Dependence; member of the Board since 1971; its Vice-President and Chairman of the Standing Committee on Estimates since 1981.

Dr. Béla BÖLCS

Former Head of Department of Pharmacy, Ministry of Health, Hungary. Head of the Hungarian delegation to the Commission on Narcotic Drugs from 1966 to 1979 (except 1975), to the United Nations Conference for the adoption of a Protocol on Psychotropic Substances (Vienna, 1971), and to the United Nations Conference to consider amendments to the Single Convention on Narcotic Drugs (Geneva, 1972); member of the Board since 1980 and its Rapporteur in 1980.

Professor Daniel BOVET

Professor of Psychobiology in the Faculty of Science of the University of Rome; Nobel Prize in Medicine for achievements in Pharmacology (1957); member of the World Health Organization Expert Advisory Panel on Neurosciences; member of the Board since 1977.

Professor Tadeusz L. CHRUSCIEL

Professor of Pharmacology and physician specialized in clinical pharmacology; Deputy Director of the Institute for Drug Control and Research, Warsaw, Poland; former Senior Medical Officer, Drug Dependence Programme, Division of Mental Health, World Health Organization (1968-1975); member of the World Health Organization Expert Advisory Panel on Drug Dependence; member of the Board since 1977 and Vice-Chairman of the Standing Committee on Estimates since 1981.

Dr. Diego GARCÉS-GIRALDO

Physician and surgeon, M.R.C.S., L.R.C.P., M.A. (Cantab.); alternate delegate of Colombia to the Preparatory Commission of the United Nations (London, 1945); Minister plenipotentiary of Colombia in Cuba (1948-1949); Ambassador of Colombia to Venezuela (1950-1951); Governor of the Department of the Valle del Cauca, Colombia (1953-1956); Senator of the Republic of Colombia (1958-1962); Permanent Representative of Colombia to the Office of the United Nations and other International Organizations in Geneva (1971-1976); member of the Board since 1977.

Miss Betty C. GOUGH

Former diplomat and specialist in international organizations; former Counsellor for Narcotics Affairs, United States Mission to the United Nations and other International Organizations at Geneva; former Adviser, United States Mission to International Atomic Energy Agency, Vienna; former Deputy, United States Permanent Delegation to UNESCO; member of United States delegation to the United Nations Conference to consider amendments to the Single Convention on Narcotic Drugs (Geneva, 1972) and to sessions of the Commission on Narcotic Drugs (1971-1976); member of the Board since 1977; Rapporteur in 1979 and Vice-President since 1980.

Professor Şükrü KAYMAKÇALAN

Chairman of the Department of Pharmacology, Medical Faculty of Ankara University; member of the World Health Organization Expert Advisory Panel on Drug Dependence; Founder and member of the Turkish Pharmacological Society; member of the Turkish Academy of Medicine; member of the Turkish Pharmacopoeia Commission; member of the International Society for Biochemical Pharmacology; member of the New York Academy of Science; member of the American Association for the Advancement of Science; member of the Balkanic Medical Union; member of the Technical Committee during the Conference of the United Nations for the Adoption of a Single Convention on Narcotic Drugs, 1961; member of the International Medical Council on Drug Use; recipient of the Sedat Simavi Foundation Prize in Health Sciences for research on cannabis; member of the Board since 1968, its Vice-President and Chairman of the Standing Committee on Estimates from 1975 to 1980.

Dr. Mohsen KCHOUK

Pharmacist biologist; former student at the Pasteur Institute, Paris; former Deputy-Director of the Pasteur Institute, Tunis; Vice-President of the Tunisian Society of Clinical Biology; fellow (foreign) of the French Society of Legal Medicine and Criminology; member of the Board since 1977 and its Rapporteur in 1981.

Dr. Nobuo MOTOHASHI

Director of Adverse Drug Reaction Injury Relief Fund, Tokyo; former Counsellor for Pharmaceutical Affairs in the Ministry of Health and Welfare, Japan. Alternate delegate of Japan to the Commission on Narcotic Drugs in 1973 and Head of delegation to the Commission from 1974 to 1979. Head of delegation to the meeting of Heads of National Narcotics Law Enforcement Agencies, Far East Region, from 1974 to 1977. Member of the Board since 1981. Professor of medicine at the Faculty of Medical Sciences, National University of Buenos Aires; Brigadier (Medical Corps) and General Director, medical services of the Argentine Air Force; Director of Hospital Institutions; advisor to the Ministry of Social Welfare and Public Health, and Director of International Relations of the Ministry and the Secretariat of Public Health and the Secretariat of Science and Technology; President of the XVIIIth World Health Assembly, member of the Executive Board and member of the Panel of Experts of the World Health Organization; member of national and international scientific institutions; representative of the Argentine Government at the United Nations Conference for the Adoption of a Protocol on Psychotropic Substances (Vienna, 1971), and to the United Nations Conference to Consider Amendments to the Single Convention on Narcotic Drugs, 1961 (Geneva, 1972); Member of the Board from 1974 to 1977 and again, since 1980; Vice-President of the Board in 1975 and 1976.

Professor Paul REUTER

Professor in the Faculty of Law and Economics, Paris; member of the Permanent Court of Arbitration, The Hague; member of the United Nations International Law Commission; member of the Permanent Central Narcotics Board from 1948 to 1968 and its Vice-President from 1953 to 1968; member of the Board since 1968, its Vice-President in 1973 and its President since 1974.

Mr. Jasjit SINGH

Former Chairman of the Central Board of Excise and Customs and Special Secretary to the Government of India in the Ministry of Finance. During 1976-77 functioned as the highest quasi-judicial departmental tribunal to hear final appeals in customs, excise, foreign exchange and gold control cases. Head of the Indian delegation to the Commission on Narcotic Drugs (1973-1976; 1978-1979) and its Chairman in 1975. Head of the Indian delegation to the Customs Co-operation Council (1973-76; 1978) and its Chairman in 1975 and again in 1976. Member of the Board and Chairman of its Budget Committee since 1980.

At its spring session in May 1981 the Board re-elected Professor Paul Reuter as President. Ms. Betty Gough was re-elected First Vice-President and Dr. Nikolai Barkov elected Second Vice-President and Chairman of the Standing Committee on Estimates. Moreover, Professor Tadeusz Chrusciel was elected Vice-Chairman of the Estimates Committee, Dr. Mohsen Kchouk was elected Rapporteur and Mr. Jasjit Singh re-elected Chairman of the Budget Committee.

Pursuant to article 10, paragraph 3 of the Single Convention on Narcotic Drugs, 1961, the seat previoulsy held by Dr. B.S.M. Diop has now become vacant, and the procedure prescribed by the Convention to fill the vacancy has been initiated.

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Annex II

BOARD SESSIONS IN 1981

The Board held its twenty-ninth session from 18 May to 29 May and its thirtieth session from 13 October to 6 November. The Secretary-General was represented by Mr. F. Mayrhofer-Grünbühel, Deputy Director of the United Nations Office at Vienna at the twenty-ninth session and by Mr. C.E. Bourbonnière, Director, at its thirtieth session. The Division of Narcotic Drugs was represented by its Director, Dr. G.M. Ling, at its twenty ninth session and by its Deputy-Director, Mr. F. Ramos-Galino, at its thirtieth session. The United Nations Fund for Drug Abuse Control was represented by its Executive Director, Dr. B. Rexed. The World Health Organization was represented by Dr. I. Khan, of the Office of Mental Health. At the of thirtieth session, a representative of the Secretary-General ICPO/Interpol, Mr. Iqbal Hussain Rizvi, addressed the Board on illicit traffic in drugs.

REPRESENTATION AT INTERNATIONAL CONFERENCES

UNITED NATIONS

Economic and Social Council First regular session, 1981 (New York, April-May 1981)

Commission on Narcotic Drugs Twenty-ninth session (Vienna, February 1981)

WORLD HEALTH ORGANIZATION

Consultative Meeting on the Development of Guidelines in the Context of the International Treaties for the Control of Narcotic and Psychotropic Substances (Geneva, February 1981)

WHO/Addiction Research Foundation Study on Adverse Health and Behavioural Consequences of Cannabis Use (Toronto, March-April 1981)

34th World Health Assembly (Geneva, May 1981)

68th Session of the Executive Board (Geneva, May 1981)

4th Review of Psychoactive Substances for International Control (Geneva, September 1981)

5th Review of Psychoactive Substances for International Control (Geneva, November 1981)

Travelling Seminar on the Safe Use of Psychotropic and Narcotic Substances (Moscow and Uzbekistan, October 1981)

8th INTERNATIONAL PHARMACOLOGICAL MEETING (Tokyo, July 1981)

REPRESENTATION AT REGIONAL CONFERENCES

AFRICA

International Council on Alcohol and Addictions / United Nations Meeting of Expert Committee on Drug Abuse (Rabat, Morocco, April 1981)

Pan Arab Bureau for Narcotics Affairs / Interpol / United Nations North African Drug Law Enforcement Seminar (Tangiers, Morocco, May 1981)

NEAR AND MIDDLE EAST

United Nations Sub-Commission on Illicit Drug Traffic and Related Matters in the Near and Middle East (Vienna, October 1981)

EUROPE

ICPO/Interpol: 7th European Meeting for Heads of National Drug Services (St. Cloud, France, March 1981)

United Nations European Seminar on National Pilot Projects on the Utilization of Community Resources for the Prevention and Reduction of Drug Abuse (Vienna, November 1981)

Annex III

INTERNATIONAL DRUG CONTROL AGREEMENTS

International Opium Convention signed at the Hague on 23 January 1912, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Agreement concerning the Manufacture of, Internal Trade in and Use of Prepared Opium, signed at Geneva on 11 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

International Opium Convention signed at Geneva on 19 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Convention for limiting the manufacture and regulating the distribution of narcotic drugs, signed at Geneva on 13 July 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Agreement for the Control of Opium Smoking in the Far East, signed at Bangkok on 27 November 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Convention for the suppression of the illicit traffic in dangerous drugs, signed at Geneva on 26 June 1936, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Protocol amending the Agreements, Conventions and Protocols on Narcotic Drugs concluded at The Hague on 23 January 1912, at Geneva on 11 February 1925 and 19 February 1925 and 13 July 1931, at Bangkok on 27 November 1931 and at Geneva on 26 June 1936, signed at Lake Success, New York, on 11 December 1946.

Protocol signed at Paris on 19 November 1948 bringing under international control drugs outside the scope of the Convention of 13 July 1931 for limiting the manufacture and regulating the distribution of narcotic drugs, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.

Protocol for limiting and regulating the cultivation of the poppy plant, the production of, international and wholesale trade in, and use of opium, signed at New York on 23 June 1953.

Single Convention on Narcotic Drugs, signed at New York on 30 March 1961.

Convention on Psychotropic Substances, signed at Vienna on 21 February 1971.

Protocol amending the Single Convention on Narcotic Drugs, 1961, signed at Geneva on 25 March 1972.

THE ROLE OF THE INTERNATIONAL NARCOTICS CONTROL BOARD

The responsibilities of the Board under the drug control treaties are to endeavour, in co-operation with Governments, to limit the cultivation, production, manufacture and utilization of narcotic drugs to the amounts necessary for medical and scientific purposes, to ensure that the quantities of these substances necessary for legitimate purposes are available, and to prevent the illicit cultivation, production, manufacture of, trafficking in and use of these substances. Since the entry into force of the 1971 Convention on Psychotropic Substances, the functions of the Board include also the international control of these drugs.

The Board is required, in the exercise of these responsibilities, to investigate all stages in the licit trade in narcotic drugs; to ensure that Governments take all the requisite measures to limit the manufacture and import of drugs to the quantities necessary for medical and scientific purposes; to see that precautions are taken to prevent the diversion of these substances into the illicit traffic; to determine whether there is a risk that a country may become a major centre of the illicit traffic; to ask for explanations in the event of apparent violations of the treaties; to propose appropriate remedial measures to Governments which are not fully applying the provisions of the treaties or are encountering difficulties in applying them and, where necessary, to assist Governments in overcoming such difficulties. The Board has therefore frequently recommended, and will recommend even more often under the 1972 Protocol, that multilateral or bilateral assistance, either technical or financial or both, should be accorded to a country experiencing such difficulties. However, if the Board notes that the measures necessary to remedy a serious situation have not been taken, it may call the attention of the Parties, the Commission on Narcotic Drugs and the Economic and Social Council to the matter, in cases where it believes that this would be the most effective way to facilitate co-operation and improve the situation. Finally, as a last resort, the treaties empower the Board to recommend to Parties that they stop the import of drugs, the export of drugs, or both, from or to the defaulting country. Naturally, the Board does not confine itself to taking action only when serious problems have been discovered; it seeks, on the contrary, to prevent major difficulties before they arise. In all cases the Board acts in close co-operation with Governments.

If the Board is to be able to perform its task, it must have the relevant information on the world drug situation, as regards both the licit trade and the illicit traffic. Consequently, the treaties stipulate that Governments shall regularly provide the Board with such information; almost all Governments, Parties and non-Parties alike, are conforming to this practice. Accordingly, in co-operation with Governments, the Board administers the systems of estimated world requirements of narcotic drugs and of statistics on narcotic drugs. The first of these systems enables it, by analyzing future licit requirements, to verify in advance whether these requirements are reasonable; and the second enables it to exercise an *ex post facto* control. Finally, the information on illicit traffic which is communicated to it either directly by Governments or through the competent organs of the United Nations enables it to determine whether the aims of the 1961 Convention are being seriously endangered by any country and, if necessary, to apply the measures described in the preceding paragraph. كيفية الحصول على منشورات الامم المتحدة. يمكن الحمول على ستورات الامر السحدة من المكنيات ودور النوزية في حيدة إنعاء العال ، إستطير.

يتكن العمول على متثورات الام السعدة من السكنيات ودور التوزيع في جنيع العام العالم - استطم عنها من السكنية التي سعامل معها أو اكتب إلى : الام المتحقة «فسم النبع في نيوسورك او في جنيف «

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