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Agenda item 5

Improving the collection, reporting and analysis of data to monitor the implementation of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem

Annual report questionnaire: Part Two. Comprehensive approach to drug demand and supply reduction *

Note by the Secretariat

Pursuant to Commission on Narcotic Drugs resolution 52/12, a meeting of the expert group on data collection was held in Vienna from 12 to 15 January 2010 to review the current data collection tools and collection, collation, analysis and reporting processes. Pursuant to Commission decision 53/2, the Secretariat produced a revised version of the draft annual report questionnaire; the expert group held a meeting in Vienna from 11 to 13 October 2010 to finalize the questionnaire so that the Commission could adopt it at its reconvened fifty-third session. The Secretariat hereby transmits part two of the questionnaire; parts one, three and four will be made available in separate documents (E/CN.7/2010/19, E/CN.7/2010/21 and E/CN.7/2010/22).

* The present document was submitted after the date required by the 10-week rule as the meeting of the expert group on data collection was held from 11 to 13 October 2010.



Annual report questionnaire

Part Two. Comprehensive approach to drug demand and supply reduction

1. (a) Does your country have a written national drug strategy adopted by the Government that includes a demand reduction component?

☐ Yes

☐ No

If the answer is yes:

(b) Indicate the period covered by the strategy (Political Declaration on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,¹ para. 21, and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,² paras. 4 (c) and 20 (d)):

(c) Is there a specific budget for financing the national drug strategy?

☐ Yes

☐ No

(d) Are the areas listed below covered in the strategy? (Political Declaration, para. 21, and Plan of Action, paras. 8 (b) and (c) and 20 (a))

Prevention³ ☐ Yes ☐ No

Services for the treatment of drug disorders⁴ ☐ Yes ☐ No

Rehabilitation and social reintegration⁵ ☐ Yes ☐ No

¹ A/64/92-E/2009/28, sect. II.A.

² Ibid.

³ "Prevention" refers to interventions aimed at preventing or delaying the first use of drugs and the transition to more serious use of drugs among occasional users (*Report of the International Narcotics Control Board for 2009* (United Nations publication, Sales No. E.10.XI.1)); law enforcement interventions aimed at stopping the production of and trafficking in drugs should not be reported here. "Early intervention" refers to interventions aimed at identifying a real or potential drug problem and motivating an individual to do something about it (World Health Organization (WHO)).

⁴ "Services for the treatment of drug disorders" are part of clinical responses to substance-related disorders. Such services are aimed at stopping or reducing the effects of acute intoxication, managing withdrawal symptoms during detoxification, preventing relapse and dealing with long-term psychological and behavioural symptoms. "Substance-related disorders" include abuse and dependence, as well as intoxication, withdrawal and various mental states such as dementia, psychosis, anxiety, mood disorders etc. that a substance (whether licit or illicit) induces when used (*Diagnostic and Statistical Manual of Mental Disorders*).

⁵ "Rehabilitation and social reintegration" refers to the process of achieving, for individuals with a drug-related problem, an optimal state of health, psychological functioning, social well-being and integration into the community (WHO).

Services to prevent the health and social consequences of drug use⁶ ☐ Yes ☐ No

Drug use monitoring and research⁷ ☐ Yes ☐ No

(e) Are the sectors listed below involved in the implementation of the national demand reduction strategy? (Political Declaration, para. 20, and Plan of Action, para. 4 (b))

Health	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Social affairs	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Education	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Law enforcement	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Justice ⁸	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Private sector	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Non-governmental organizations	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Labour and employment	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Other (please specify)	<hr/> <hr/>			

(f) Does your country have a central coordinating entity for implementing the drug demand reduction component of the national drug strategy?

☐ Yes

☐ No

⁶ “Services to prevent the health and social consequences of drug use” are services aimed at eliminating or reducing the dangers related to drug use, including physical and mental health disorders and social and security problems. These services include outreach interventions providing in an unconditional manner: measures to prevent infections and guarantee front-line social assistance; the means to a livelihood; and basic hygiene.

⁷ “Drug use monitoring” refers to the regular collection of data about the extent and patterns of and trends in the illicit use of drugs and the health and social consequences of such use. “Drug use research” refers to scientific enquiry aimed at assessing the extent and patterns of and trends in the illicit use of drugs and the health and social consequences of such use and/or at assessing the process, effectiveness and cost-effectiveness of drug demand reduction interventions.

⁸ “Justice” is to be understood in the broadest sense. When appropriate, it does not exclude other areas of government.

(g) If the answer to subparagraph (f) is yes, indicate whether the sectors listed below are included in the work of the coordinating body:

Health	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Social affairs	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Education	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Law enforcement	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Justice	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Private sector	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Non-governmental organizations	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Labour and employment	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Other (please specify)				

2. How would you describe changes in the size of the budget for treatment programmes in the reporting year compared with the previous reporting year?⁹ (Political Declaration, para. 21, and Plan of Action, para. 2 (a))

- ☐ Increased
- ☐ Stable
- ☐ Decreased
- ☐ Not known

3. How would you describe changes in the size of the budget for prevention programmes in the current reporting year compared with the previous reporting year?⁹

- ☐ Increased
- ☐ Stable
- ☐ Decreased
- ☐ Not known

⁹ “Increased” refers to an estimated positive variation of 5 per cent or more; “stable” refers to an estimated variation ranging between minus 5 and plus 5 per cent; “decreased” refers to an estimated negative variation of 5 per cent or more.

Prevention and early intervention

4. Please indicate if any of the prevention activities in the table below were implemented in the reporting year. If any of the activities were implemented, specify whether they were targeted at the general population or at-risk groups (Political Declaration, paras. 21-23, and Plan of Action, paras. 2 (a), 4 (e)-(g), 13 and 14 (a) and (b)).

Activity	General population		At-risk groups		(Specify)
	Yes	No	Yes	No	
Education about drugs based on life skills ¹⁰					
Family and parenting skills training ¹¹ (identify the target group on the basis of the age of the children whose parents are trained)					
Workplace prevention programmes ¹²					
Alternative activities (sports, drama, music etc.) ¹³					
Vocational training and income-generating support ¹⁴					
Media campaigns (e.g. through print, radio, television, the Internet and mobile telephones) ¹⁵					
Dissemination of information about the danger of drugs ¹⁶					
Screening and brief interventions ¹⁷					

¹⁰ "Education about drugs based on life skills" refers to a series of interactive sessions delivered in schools aimed at providing students with the information and the personal and social skills needed to avoid or delay first-time use of illicit drugs (United Nations Office on Drugs and Crime (UNODC)).

¹¹ "Parenting and family skills training" refers to a series of interactive sessions targeting parents and their children and aiming at improving family bonding and functioning so as to avoid or delay first-time use of illicit drugs (UNODC, 2009).

¹² "Workplace prevention programmes" are comprehensive programmes implemented in the workplace aimed at promoting the health of employees by preventing substance abuse and assisting those with a substance dependence problem (UNODC).

¹³ "Alternative activities (sports, drama, music etc.)" are opportunities to engage young people in structured recreational activities that include a health promotion component, over a period of time.

¹⁴ "Vocational training and income-generating support" refers to activities aimed at providing participants with the skills and opportunities needed to engage in meaningful employment and sustainably support themselves and their families.

¹⁵ "Media campaigns" are coordinated activities aimed at raising awareness about drug use, drug dependence and drug prevention and treatment, and about ways of preventing the health and social consequences of drug use using messages channelled through a variety of mass media.

¹⁶ The activity "dissemination of information about the danger of drugs" is aimed at disseminating information and raising awareness about the danger of using illicit drugs through any means (e.g. rallies) other than print, radio, television and the Internet.

¹⁷ "Screening" is aimed at detecting health problems or risk factors at an early stage before they

5. According to your best estimate, what is the coverage¹⁸ of the prevention activities listed below that were implemented in your country in the reporting year?

<i>Activity</i>	<i>Coverage</i>	<i>Provide details of how your country defines the extent of coverage</i>
Education about drugs based on life skills	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	
Family and parenting skills training	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	
Workplace prevention programmes	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	
Alternative activities (sports, drama, music etc.)	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	
Vocational training and income-generating support	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	
Media campaigns	<input type="checkbox"/> None <input type="checkbox"/> Some <input type="checkbox"/> Most <input type="checkbox"/> All <input type="checkbox"/> Not known	

have caused serious disease or other problems (WHO). A “brief intervention” is a structured therapy of short duration aimed at assisting an individual to cease or reduce the use of a psychoactive substance or to deal with other life issues (WHO).

¹⁸ “Coverage” describes the extent to which an intervention is delivered to the target population, that is, the proportion of the target population in need of an intervention that actually gets it.

Dissemination of information about the danger of drugs	<input type="checkbox"/> None
	<input type="checkbox"/> Some
	<input type="checkbox"/> Most
	<input type="checkbox"/> All
	<input type="checkbox"/> Not known
Screening and brief interventions	<input type="checkbox"/> None
	<input type="checkbox"/> Some
	<input type="checkbox"/> Most
	<input type="checkbox"/> All
	<input type="checkbox"/> Not known

6. Please indicate in the table below whether an evaluation of the prevention activities that were implemented in the reporting year has been undertaken. If the answer is yes, please indicate whether a process,¹⁹ outcome,²⁰ or impact²¹ evaluation has been undertaken (Plan of Action, paras. 8 (a) and (b)).

<i>Activity</i>	<i>Was an evaluation carried out?</i>	<i>If yes, was it a process evaluation or an outcome/impact evaluation?</i>
Education about drugs based on life skills	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Process <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
Family and parenting skills training	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Process <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
Workplace prevention programmes	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Process <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
Alternative activities (sports, drama, music etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Process <input type="checkbox"/> Outcome <input type="checkbox"/> Impact
Vocational training and income-generating support	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Process <input type="checkbox"/> Outcome <input type="checkbox"/> Impact

¹⁹ In a process evaluation, the implementation of an intervention is assessed by looking at how and if the prevention intervention took place, whether its design worked and whether the designated target group was reached. It is also concerned with the quality of the intervention. For example, process evaluations of family skills training look at the number of sessions conducted, the number and kind of participants in the session, as well as at the feedback provided by participants on the sessions.

²⁰ Outcome evaluations look at the effects of the intervention and whether the intervention actually achieved its intended goals. For example, outcome evaluations of family and parenting skills programmes look at the number of families that have adopted or are practising the skills taught.

²¹ Impact evaluations essentially look at the final results of the intervention. For example, in family skills training impact evaluations look at whether children in families that practise the skills learned are less likely to use drugs and whether there is a reduction in incidence of drug use.

Media campaigns	<input type="checkbox"/> Yes	<input type="checkbox"/> Process
	<input type="checkbox"/> No	<input type="checkbox"/> Outcome
		<input type="checkbox"/> Impact
Dissemination of information about the danger of drugs	<input type="checkbox"/> Yes	<input type="checkbox"/> Process
	<input type="checkbox"/> No	<input type="checkbox"/> Outcome
		<input type="checkbox"/> Impact
Screening and brief interventions	<input type="checkbox"/> Yes	<input type="checkbox"/> Process
	<input type="checkbox"/> No	<input type="checkbox"/> Outcome
		<input type="checkbox"/> Impact

7. Does the school curriculum in your country incorporate elements aimed at preventing drug use? (Political Declaration, para. 23, and Plan of Action, para. 4 (f))

☐ Yes

☐ No

If the answer is yes, whenever possible please provide a copy of the text in one of the six official languages of the United Nations.

8. Do prevention policies incorporate interventions in the workplace? (Political Declaration, para. 23, and Plan of Action, para. 4 (f))

☐ Yes

☐ No

If the answer is yes, whenever possible please provide a copy of the text in one of the six official languages of the United Nations.

What are the sources of the information provided in the section on prevention?

Treatment*

9. Do you have an estimate of how many people need treatment for drug abuse?

☐ Yes

☐ No

(a) If the answer is yes, please provide the estimate: _____

(b) If the answer is yes, what is the source of the estimate?

(c) (i) In your country, are residential drug treatment facilities available?²²

☐ Yes

☐ No

(ii) In your country, are outpatient drug treatment facilities available?²³

☐ Yes

☐ No

(d) (i) At the end of the reporting year, what proportion (percentage) of the drug treatment facilities (beds) in your country were residential?
_____;

(ii) At the end of the reporting year, what proportion (percentage) of the drug treatment facilities (slots) in your country were for outpatients?
_____;

(e) When appropriate: does your country provide treatment for drug-using offenders as an alternative to sanctions or punishment? (Plan of Action, para. 16 (a))

☐ Yes

☐ No

* Political Declaration, para. 21, and Plan of Action, paras. 2 (a); 4 (e), (h) and (j); 6 (b); 10 (a); and 16 (a) and (b).

²² “Residential drug treatment” refers to treatment services that are offered to patients while they are in a health centre, specialized treatment centre or residence for more than one day (adapted from the National Institute on Drug Abuse (NIDA)).

²³ “Outpatient drug treatment” refers to treatment services that are offered to patients who regularly visit a health or specialized treatment centre without staying overnight (adapted from NIDA).

(f) (i) Does your country have written and approved standards and guidelines for drug abuse treatment?

☐ Yes

☐ No

(ii) Does your country have written and approved licensing regulations and processes for drug abuse treatment?

☐ Yes

☐ No

10. Please indicate in the table below the coverage of the treatment-related services offered in the reporting year in the country, including in prison settings, as a general estimate (indicate whether the coverage is “low”, “medium” or “high”).

	<i>Services/intervention in community</i>				<i>Services/intervention in prison settings</i>			
	Availability	Coverage ^a			Availability	Coverage ^a		
<i>Type of service</i>	Yes or no	Low	Medium	High	Yes or no	Low	Medium	High
Screening and brief interventions ^b								
Detoxification ^c								
Symptomatic								
Gradual withdrawal								
Opioid maintenance therapy ^d								
Opioid antagonist therapy ^e								
Treatment planning ^f								
Counselling ^g								
Cognitive behavioural therapy ^h								
Motivational interviewing ⁱ								
Contingency management ^j								
Peer support groups ^k								
Social assistance ^l								
Rehabilitation and aftercare ^m								
Vocational training and income-generation support ⁿ								
Educational activities on the risks posed by drug use ^o								
Treatment for comorbidity								
Other (please specify)								

^a “Coverage” describes the extent to which an intervention is delivered to the target population, that is, the proportion of the target population in need of an intervention that actually gets it.

- ^b “Screening” is aimed at detecting health problems or risk factors at an early stage before they have caused serious disease or other problems (WHO). A “brief intervention” is a structured therapy of short duration aimed at assisting an individual to cease or reduce the use of a psychoactive substance or to deal with other life issues (WHO).
- ^c “Detoxification” refers to a process carried out in a safe and effective manner aimed at eliminating or minimizing withdrawal symptoms that occur after drugs are no longer taken (WHO).
- ^d “Opioid maintenance therapy” refers to the regular administration of a long-acting opioid agonist to stabilize the patient without applying tapering dosage schedules. Opioid maintenance therapy coverage is considered low when it is below or at 20 per cent; medium when it is between 20 and 40 per cent; and high when it is above 40 per cent (WHO, UNODC, UNAIDS *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (WHO, Geneva, 2009)).
- ^e “Opioid antagonist maintenance treatment” refers to the regular administration of a long-acting opioid antagonist to block opioid receptors and avoid any opioid effect (adapted from WHO, 2009).
- ^f “Treatment planning” refers to the development of a written description of the treatment to be provided and its anticipated course. Such planning is done with the patient by establishing goals based on the patient’s identified needs and setting interventions to meet those goals (UNODC, *Principles of Drug Dependence Treatment: Discussion Paper*, March 2008).
- ^g “Counselling” refers to an intensive interpersonal process aimed at assisting individuals to achieve their goals or function more effectively (WHO).
- ^h “Cognitive behavioural therapy” refers to psychosocial interventions aimed at helping patients recognize, avoid and cope with the situations in which they are most likely to use drugs (adapted from NIDA).
- ⁱ “Motivational interviewing” refers to a counselling and assessment technique that follows a non-confrontational approach to questioning people about difficult issues like alcohol and drug use, assisting them to make positive decisions aimed at reducing or stopping such use (ODCCP).
- ^j “Contingency management” refers to psychosocial interventions that provide a system of incentives and disincentives designed to make drug use less attractive and abstinence more attractive (NIDA).
- ^k “Peer support groups” (self-help groups such as Narcotics Anonymous) refers to small groups of peers wishing to assist each other in their struggle with a particular problem (in the case of Narcotics Anonymous, with drug dependence) (WHO).
- ^l “Social assistance” refers to the many ways in which professionals and non-professionals can support the social and psychological well-being of drug users with a view to improving both the quality and duration of their lives (WHO, *Guidelines for the Psychosocially Assisted Pharmacological Treatment of Opioid Dependence*, 2009).
- ^m “Rehabilitation and aftercare” refers to the process aimed at achieving an optimal state of health, psychological functioning and social well-being for individuals with a drug-related problem (WHO).
- ⁿ “Vocational training and income-generation support” refers to activities aimed at providing participants with the skills and opportunities to engage in meaningful employment and sustainably support themselves and their families.
- ^o “Educational activities on the risks posed by drug use” refer to sessions aimed at informing and counselling people about the consequences of drug use, in other words, the ways in which such use affects physical and mental health, behavioural control and interpersonal relationships. In particular, these educational sessions should focus on providing information about overdosing, contracting infectious diseases, developing cardiovascular, metabolic and psychiatric disorders etc. and the benefit of abstaining from drug use. Treatment methods and goals are also explained in detail.

(a) For responses to question 10 above for which no definition of coverage was provided, please provide details of how your country defines the extent of coverage (attach additional pages if necessary).

(b) What difficulties were encountered in the provision of treatment-related services?

Quality standards and training of staff

11. Please provide information on the availability of training, at the relevant level of occupational responsibility, on drug demand reduction interventions to professionals as part of their qualification curriculum or continuing education (Plan of Action, paras. 16 (d) and 18 (a), (b) and (d)).

<i>Professional category</i>	<i>Training provided to professionals as part of their qualification curriculum</i>				<i>Training provided to professionals as part of their continuing education curriculum</i>			
General practitioners	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Nurses	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Medical doctors who provide drug dependence treatment	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Social workers/counsellors	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Psychiatrists	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Psychologists	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Law enforcement officers	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Prison staff	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Other (please specify)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
_____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
_____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

12. Who pays for treatment in your country (Plan of Action, paras. 10 (a) and 12 (a))? (Check all that apply.)

- ☐ Public insurance
- ☐ Private insurance
- ☐ Patients and/or their family
- ☐ Government (free to patients)
- ☐ Non-governmental organizations (free to patients)

13. (a) Does your country have a national treatment reporting and monitoring system?

- ☐ Yes
- ☐ No

(b) If the answer is yes, does the reporting system include any of the following? (Check all that apply.)

- ☐ Public drug treatment services
- ☐ Private drug treatment services
- ☐ Drug treatment services run by non-governmental organizations

14. Please rank, in order of importance, at least three main constraints that your country faced during the reporting year in providing treatment (1 being the most important and 7 the least important) (Plan of Action, para. 2 (b))

<i>Area where constraints were experienced</i>	<i>Ranking</i>
Legal framework (e.g. limits to providing pharmacological therapy)	<input type="text"/>
Coordination	<input type="text"/>
Finance	<input type="text"/>
Availability of trained personnel	<input type="text"/>
Infrastructures and supplies (building, equipment, medicines etc.)	<input type="text"/>
Linkages with support services	<input type="text"/>
Other (please specify)	
_____	<input type="text"/>
_____	<input type="text"/>
No difficulty	<input type="text"/>

Prevention of diseases, including infectious diseases*

15. Please indicate in the table below the coverage of the services listed below that were offered during the reporting year, including in prison settings, either as a percentage or as an estimate (Political Declaration, para. 21, and Plan of Action, paras. 2 (a) and 4 (h) and (j)).

<i>Services</i>	<i>Denominator (Estimated number of drug users in need of services)</i>	<i>Coverage^{a, b} of the service in the community</i>	<i>Coverage^{a, b} of the service in prisons</i>
Needle and syringe programmes ^c		<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
HIV testing and counselling for drug users ^d		<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Antiretroviral therapy for drug users ^e		<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known

* Including among non-injecting and injecting drug users.

Screening and treatment of drug users for sexually transmitted infections ^f	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Condom distribution programmes targeting drug users and their sexual partners ^g	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Targeted information, education and communication about HIV, hepatitis B, hepatitis C and other sexually transmitted infections for drug users and their sexual partners ^h	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Diagnosis and treatment of and vaccination for viral hepatitis B for drug users ⁱ	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Diagnosis and treatment of viral hepatitis C for drug users ^j	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Prevention, diagnosis and treatment of tuberculosis for drug users ^k	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
Other (please specify) _____	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known
_____	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known	<input type="checkbox"/> Not applicable <input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High <input type="checkbox"/> Not known

^a "Coverage" describes the extent to which an intervention is delivered to the target population, that is, the proportion of the target population in need of an intervention that actually gets it.

^b See WHO, UNODC, UNAIDS *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users*.

^c For needle and syringe programmes, "low" coverage means that less than 20 per cent of the target population has access to services; "medium" coverage means that between 20 and 60 per cent of the target population has access to services; "high" coverage means that more than 60 per cent of the target population has access to services.

^d For drug users who were tested for HIV in the past 12 months and know their HIV status, "low" coverage means that less than

40 per cent of the target population has access to services; “medium” coverage means that between 40 and 75 per cent of the target population has access to services; “high” coverage means that more than 75 per cent of the target population has access to services.

^e For HIV-positive drug users receiving antiretroviral therapy, “low” coverage means that less than 25 per cent of the target population has access to services; “medium” coverage means that between 25 and 75 per cent of the target population has access to services; “high” coverage means that more than 75 per cent of the target population has access to services.

^f For drug users screened for sexually transmitted infections in the past 12 months, “low” coverage means that less than 20 per cent of the target population has access to services; “medium” coverage means that between 20 and 50 per cent of the target population has access to services; and “high” coverage means that more than 50 per cent of the target population has access to services.

^g Here “low” coverage means that free condoms are distributed each year to less than 50 per cent of injecting drug users; “medium” coverage means that free condoms are distributed each year to between 50 and 100 per cent of injecting drug users; “high” coverage means that free condoms are distributed each year to more than 100 per cent of injecting drug users (i.e. more than the entire population of drug users).

^h Here “low” coverage means that different targeted materials on injecting drug use were distributed to less than 50 per cent of injecting drug users per year; “medium” coverage means that different targeted materials on injecting drug use were distributed to between 50 and 90 per cent of injecting drug users per year; “high” coverage means that different targeted materials on injecting drug use were distributed to more than 90 per cent of injecting drug users per year.

ⁱ For drug users diagnosed with and receiving treatment for viral hepatitis B, “low” coverage means that less than 50 per cent of the target population has access to services; “medium” coverage means that between 50 and 80 per cent of the target population has access to services; “high” coverage means that over 80 per cent of the target population has access to services.

^j For drug users diagnosed with and receiving treatment for viral hepatitis C, “low” coverage means that less than 5 per cent of the target population has access to services; “medium” coverage means that between 10 and 15 per cent of the target population has access to services; and “high” coverage means that more than 15 per cent of the target population has access to services.

^k For drug users diagnosed with tuberculosis who have started treatment in the past 12 months, “low” coverage means that less than 60 per cent of the target population has access to services; “medium” coverage means that between 60 and 90 per cent of the target population has access to services; “high” coverage means that more than 90 per cent of the target population has access to services.

Drug supply reduction

Domestic level

16. Do the following strategies describe the current measures used by your country to reduce drug supply? (Plan of Action, paras. 24 (g), 27 and 28, and Political Declaration, paras. 2 and 31)

A specific written strategy to reduce drug supply approved by the Government	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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An integrated written strategy to reduce the supply of and demand for drugs, approved by the Government and with a specific component to reduce drug supply	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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A written strategy against organized crime, approved by the Government and with a specific component to reduce drug supply	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

Other (please specify)

17. Has your country actively engaged in drug supply reduction activities in the following areas during the reporting year? (Plan of Action, paras. 32 (a) and (b), 39, 45 (b) and (j), and 41 (a), (b), (d), (f), (m) and (o), and Political Declaration, paras. 24, 28 and 37)

Control/monitoring of amphetamine-type stimulants and illicit substances ²⁴	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Programmes for the eradication of illicit drug crops	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Control/monitoring ²⁵ of precursor chemicals	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Forensic intelligence ²⁶	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Anti-money-laundering	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Research and evaluation ^{27, 28}	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Alternative development	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

17 *bis*. Indicate which specific programme or programmes have been adopted in your country in the area of arresting drug traffickers and dealers.

²⁴ "Monitoring" refers to activities for identifying and investigating activities potentially related to the illicit manufacture of amphetamine-type stimulants. "Substances" refers to substances in the schedules to the 1971 Convention.

²⁵ "Control of precursor chemicals" refers to maintaining a balance between preventing the diversion of precursors for the illicit manufacture of drugs and not affecting legitimate trade.

²⁶ "Forensic intelligence" refers to the use of forensic data resulting from activities such as the identification, quantification, characterization or chemical profiling of seized drugs to determine the origin of such drugs or for linking samples etc. to inform investigations.

²⁷ "Research" refers to systematic studies or investigations aimed at discovering, interpreting and developing methods and systems that enable a better understanding of the evolving drug markets and trafficking trends.

²⁸ "Evaluation" refers to assessing the implementation of an intervention (process evaluation), the effects of an intervention (outcome evaluation) or the final results of an intervention (impact evaluation).

18. Are the following types of law enforcement agencies mandated to reduce drug supply? (Plan of Action, paras. 22 (o), 36 (b) and 41 (p))

National/federal police	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Customs	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Subnational/non-federal police ²⁹	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Military entities	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Specialized national agency dedicated to drug law enforcement	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Other law enforcement agency ³⁰ (please specify)			

19. Is there an entity that coordinates the activities of agencies mandated to reduce drug supply? (Plan of Action, paras. 22 (o) and (q), 36 (b) and 41 (p))

☐ Yes

☐ No

If the answer is yes, please provide the name of the entity:

_____.

20. Have the following measures/institutions been adopted by your country to address the threat posed by corruption within domestic law enforcement agencies with a mandate to reduce the supply of drugs? (Plan of Action, paras. 24 (b), 29 and 30 (b))

Internal oversight body	<input type="checkbox"/> Yes	<input type="checkbox"/> No
External oversight body, including an anti-corruption body	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Code of conduct	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Obligation for staff of the above agencies to declare any assets	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Professional ethics training for staff of the above agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Obligation for staff of the above agencies to report suspected incidents of corruption	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

²⁹ In other words, police forces whose jurisdiction covers only part of the country, such as provincial police or state police.

³⁰ For example, the national gendarmerie.

21. Does the legal system in your country allow for the use of special investigative techniques (such as the ones mentioned in question 22 below)? (Plan of Action, paras. 24 (c), 30 (d) and 60 (a))

- ☐ Yes
☐ No

22. Which of the following investigative techniques did law enforcement agencies in your country use during the reporting period to gather evidence? (Plan of Action, paras. 24 (c), 30 (d) and 60 (b))

Electronic surveillance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Use of informants	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Undercover techniques	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Controlled delivery	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other special investigative technique (please specify)		

23. Does your country have a system in place to monitor the sale of pharmaceutical preparations containing narcotic drugs or psychotropic substances under international control over the Internet? (Plan of Action, paras. 22 (p), 24 (a), (e) and (f), 31, and 36 (a))

- ☐ Yes
☐ No

If the answer is yes, please describe the kinds of sales being monitored (e.g. sales by operators based in your own country, all transactions in which a product is being sold to buyers in your country):

Cross-border and international cooperation

24. Did your country engage in the following activities during the reporting period to support cross-border cooperation between law enforcement agencies in different countries? (Plan of Action, paras. 22 (f) and (p) and 60 (c), and Political Declaration, para. 33)

Joint operations with other countries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Exchange of liaison officers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Exchange of information	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Other (please specify)

(a) Please highlight any significant activities that resulted from such cooperation.

(b) During the reporting year, have personnel from the judiciary or law enforcement lost their lives or gone missing in action in the fight against drugs? (Political Declaration, para. 8, Plan of Action, para. 25)

☐ Yes

☐ No

If the answer is yes, please provide the number: _____.

25. During the reporting year, did your country extradite drug offenders (foreigners or nationals) to other countries under valid bilateral, regional or international agreements/memorandums of understanding? (Plan of Action, paras. 22 (i) and 53)

☐ Yes

☐ No

If the answer is yes, please give the number of countries:

26. During the reporting year, did the judicial or law enforcement agencies of your country encounter problems in cooperating with counterparts in other countries? (Plan of Action, paras. 22 (i), 24 (d), 53, 55 and 56 (a) and (c), and Political Declaration, para. 33)

Inability to identify counterparts to be contacted or with whom to quickly establish communication	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Slow formal procedures	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lack of a common language for communication ³¹	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lack of agreements enabling operational cooperation/mutual legal assistance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Lack of cooperation from counterparts/exchange of information	<input type="checkbox"/> Yes	<input type="checkbox"/> No

³¹ "Lack of a common language for communication" refers to the lack of multilingual staff or resources to communicate with counterparts in other countries.

27. Did law enforcement agencies use the communication platforms provided through the following entities or channels during the reporting year to exchange information with counterparts in other countries? (Plan of Action, paras. 22 (k), 24 (d), 30 (e) and (f) and 40)

INTERPOL	<input type="checkbox"/> Yes	<input type="checkbox"/> No
World Customs Organization	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Regional organizations	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Liaison officers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Diplomatic channels	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Meetings (regional, international)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Direct communication between law enforcement agencies	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

28. Did your country take the following steps during the reporting year to meet the challenges arising from new technologies (e.g. computers, mobile phones, Internet) in combating traffic in narcotic drugs and psychotropic substances? (Plan of Action, paras. 24 (a), (e) and (f))

Specific training to raise awareness among law enforcement personnel	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Specific training on the recovery of evidence	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Introduction of legislation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

International technical cooperation

29. During the reporting year, did your country receive technical assistance in the area of drug supply reduction from another country or from an international organization? (Plan of Action, paras. 22 (p), 24 (h), 26 (c), 29, 30 (g) and (j), 36 (e) and 41 (g), and Political Declaration, para. 24)

☐ Yes

☐ No

If the answer is yes:

(a) Did your country receive the following forms of assistance?

Training	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Software (for example, to process information in border control)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Financial	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Data sharing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

(b) Did the following entities provide your country with assistance?

Other countries (If the answer is yes, please provide the names of the countries: ☐ Yes ☐ No

_____.)

United Nations ☐ Yes ☐ No

International organizations (If the answer is yes, please provide the names of the organizations: ☐ Yes ☐ No

_____.)

Other (please specify)

(c) Was the assistance sufficient for the needs of your country?

☐ Yes

☐ No

Please describe the forms of assistance required by your country.

30. Has your country provided technical assistance in the area of drug supply reduction during the reporting year? (Plan of Action, paras. 22 (p), 24 (h), 26 (c), 29, 30 (g) and (j), 36 (e) and 41 (g), and Political Declaration, para. 24)

☐ Yes

☐ No

If the answer is yes:

(a) Did your country provide the following forms of assistance?

Training	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Equipment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Software	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Financial	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

(b) Were the following entities beneficiaries of assistance provided by your country?

Other countries (If the answer is yes, please provide the names of the countries: ☐ Yes ☐ No

_____.)

United Nations ☐ Yes ☐ No

Other international organizations (If the answer is yes, please provide the names of the organizations: ☐ Yes ☐ No

_____.)

Other (please specify)

Control of precursor chemicals

31. Has your country compiled a list of national companies authorized to manufacture, distribute and trade in precursors?

☐ Yes

☐ No

32. Has your country undertaken any new measures in collaboration with relevant industries on the supply of and trafficking in precursor and other chemicals not yet under international control?

☐ Yes

☐ No

If the answer is yes, please summarize the new measures. If codes of conduct have been developed, whenever possible please attach a copy of those documents in one of the official languages of the United Nations.

33. Has your country taken any steps to address the use of substances not under international control and substitute chemicals for the manufacture of precursors used in the manufacture of heroin, cocaine or amphetamine-type stimulants?

☐ Yes

☐ No

If the answer is yes, please summarize the steps taken.

34. Does your country's framework for the control of precursor chemicals include a system of pre-export notification?

☐ Yes

☐ No

35. Does your country utilize Pre-Export Notification Online (PEN Online), the system designed by the International Narcotics Control Board?

☐ Yes

☐ No

If the answer is no, please provide reasons.

36. Does the existing international cooperation on control of precursor chemicals adequately meet requirements in this regard?

☐ Yes

☐ No

If the answer is no, please provide details.

37. Does your country have systems in place to allow for the post-seizure investigation of precursor chemicals?

- ☐ Yes
☐ No

If the answer is yes:

(a) Do those systems make it possible to track the origin of the seized precursor chemicals?

- ☐ Yes
☐ No

(b) Do those systems make it possible to carry out controlled deliveries of precursor chemicals?

- ☐ Yes
☐ No

Alternative development as a strategy to control the cultivation of illicit crops

38. Does your country have a national alternative development³² strategy to address the illicit cultivation of coca bush, opium poppy or cannabis plant? (Plan of Action, paras. 45 (c) and (d), and Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development,³³ paras. 4 and 5)

- ☐ Yes, as a stand-alone plan
☐ Yes, as part of the national economic development plan
☐ No
☐ Not applicable (go to question 50)

39. If your country has an alternative development strategy, which illicit drug crops does it target? (Plan of Action, paras. 45 (c) and (d))

- ☐ Coca bush
☐ Opium poppy
☐ Cannabis plant
☐ Other crops (specify) _____

³² "Alternative development" refers to a process to prevent and eliminate the illicit cultivation of plants containing narcotic drugs and psychotropic substances through specifically designed rural development measures in the context of sustained national economic growth and sustainable development efforts in countries taking action against drugs, recognizing the particular sociocultural characteristics of the target communities and groups, within the framework of a comprehensive and permanent solution to the problem of illicit drugs (Commission on Narcotic Drugs resolution 44/11).

³³ General Assembly resolution S-20/4 E.

40. If your country has an alternative development strategy, please indicate the year in which it was established or in which it was last reviewed: _____.

41. Does your country have a central coordinating entity for implementing the national alternative development strategy? (Plan of Action, para. 47 (d); Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development, para. 5)

☐ Yes

☐ No

42. Are the Government entities listed below represented in the coordinating body? (See question 41 above and Plan of Action, paras. 45 (k) and 49 (b), (d) and (f))

Ministry of agriculture, fisheries etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of social affairs, welfare etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of education	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of the interior or similar Government ministry	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of justice	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of economics, finance etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of transport, roads etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of labour, employment etc.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Office of the president or prime minister	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of the family or women's affairs	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ministry of international trade	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Drug control agency	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Agency responsible for law enforcement	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other (please specify)		

43. What percentage of the national budget was allocated last year to the implementation of the alternative development strategy at the national/federal level and the state/provincial level? (Plan of Action, paras. 43 (c) and 45 (i) and (o))

As a percentage of national development expenditures _____

Total state/provincial budget (in national currency) _____

As a percentage of state/provincial development expenditures _____

44. Please provide the following information: (Plan of Action, paras. 43 (a) and (d))

(a) Number of households that live in areas under illicit cultivation of coca bush, opium poppy or cannabis plant: _____;

(b) Number of households for which the illicit cultivation of coca bush, opium poppy or cannabis plant is a major source of income: _____;

(c) Number of households benefiting from alternative development programmes: _____;

(d) Number of households benefiting from alternative development programmes that are involved in agricultural activities: _____;

(e) Number of households benefiting from alternative development programmes that are involved in non-agricultural activities: _____.

45. List the licit crops that the Government promoted during the reporting year through alternative development programmes and indicate whether the harvests are to be sold (on the domestic or foreign market) or used to address food security issues. (Check the appropriate column.) (See question 44 above.)

<i>Licit crop</i>	<i>For sale (on the domestic or foreign market)</i>	<i>To address food security issues</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

46. If your country has alternative development programmes, are measures taken to appropriately involve the relevant stakeholders³⁴ in the identification, preparation, implementation, monitoring and evaluation of alternative development programmes? (Plan of Action, para. 49 (g); Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development, para. 19)

☐ Yes

☐ No

If the answer is yes, please provide details:

47. To what extent have alternative development programmes, in particular those implemented under international cooperation frameworks, been effective in reducing the illicit cultivation of drug crops during the reporting year in your country? (Plan of Action, para. 43 (d))

48. When planning and implementing alternative development activities, are specific gender-related actions or measures included? (Plan of Action, para. 49 (f); Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development, para. 18 (e))

☐ Yes

☐ No

If the answer is yes, please provide details:

³⁴ Involving stakeholders refers to the actions executed by the different development programmes of central, regional and local governments, as well as new development agents (producer organizations, non-governmental organizations, universities, research centres, the church etc.) to obtain their commitment to and participation in the development of areas with coca bush, opium poppy and cannabis plant crops (Multilateral Evaluation Mechanism of the Inter-American Drug Abuse Control Commission of the Organization of American States).

49. Were environmental conservation components³⁵ included in the alternative development programmes implemented during the reporting year? (Plan of Action, para. 49 (e), and Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development, para. 18 (f))

☐ Yes

☐ No

If the answer is yes, please provide details: _____

50. Does your country have a strategy or plan to assist other Member States with alternative development? (Plan of Action, paras. 45 (b) and 49 (a) and (h))

☐ Yes

☐ No

If the answer is yes, please specify the names of the countries assisted and the names of the illicit drug crops targeted:

51. Has your country implemented preventive alternative development programmes during the reporting year?³⁶ (Plan of Action, paras. 45 (c) and (d))

☐ Yes

☐ No

If the answer is yes, please provide details:

³⁵ Environmental management refers to the inclusion, as key components in alternative, integral and sustainable development programmes, of environmental preservation issues, and the restoration of ecosystems degraded as a result of the cultivation of coca bush, opium poppy and cannabis plant used for illicit purposes. These actions are carried out through reforestation programmes, the collection of data on environmental degradation and the promotion of regular environmental educational programmes (Multilateral Evaluation Mechanism of the Inter-American Drug Abuse Control Commission of the Organization of American States).

³⁶ In accordance with Economic and Social Council resolutions 2006/33 and 2008/26, as well as the Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, the concept of alternative development includes preventive alternative development.

52. How would you describe the change in budgetary allocation for alternative development programmes during the reporting year compared to the previous year?³⁷

- ☐ Increased
- ☐ Stable
- ☐ Decreased
- ☐ Not known
- ☐ No budget allocated

53. What is the current situation in your country with regard to access to market³⁸ for products from alternative development programmes? (Plan of Action, paras. 45 (k) and 47 (k), and Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development, para. 15)

54. What role, if any, does the private sector play in promoting and finding market access for products from alternative development programmes? (Plan of Action, para. 45 (k))

55. Does your Government assess the impact of alternative development programmes on the following areas, which are included in the Millennium Development Goals? (Check all that apply.) (Plan of Action, para. 47 (a))

- ☐ Eradication of extreme poverty
- ☐ Access to primary education
- ☐ Gender equality and women's empowerment
- ☐ Reduction of child mortality
- ☐ Improvement of maternal health
- ☐ Improvement of health (including by fighting HIV, malaria and tuberculosis)
- ☐ Environmental sustainability
- ☐ Access to information and communications technology

³⁷ "Increased" indicates a positive variation of 5 per cent compared with the previous year's allocation; "stable" indicates a variation of between -5 and 5 per cent compared with the previous year's allocation; "decreased" indicates a negative variation of more than 5 per cent compared with the previous year's allocation.

³⁸ "Access to market" refers to actions geared towards facilitating and increasing the national and international marketing of alternative, integral and sustainable products (Multilateral Evaluation Mechanism of the Inter-American Drug Abuse Control Commission of the Organization of American States).