



Acknowledgements

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DISCLAIMER

The publication has not been formally edited. The boundaries, names and designations used in all maps do not imply official endorsement or acceptance by United Nations.

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West Africa – 2012 ATS Situation Report

A Report from the Global SMART Programme June 2012

United Nations Office on Drugs and Crime

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Abbreviations

ACC Australian Crime Commission

ADEC Asia Pacific Drug Enforcement Conference

AFP Australian Federal Police

ARQ UNODC Annual Reports Questionnaire

ATS Amphetamine-type stimulants BMK Benzyl methyl ketone (P-2-P)

BZP Benzylpiperazine

CICAD Inter-American Drug Abuse Control Commission

DAINAP Drug Abuse Information Network for Asia and the Pacific

DEA Drug Enforcement Administration (USA)

DELTA UNODC Database on Estimates and Long Term Trend Analysis

ECOWAS Economic Community Of West African States

EUROPOL European Police Office
GMS Greater Mekong Subregion

HONLAF Heads of National Drug Law Enforcement Agencies, Africa
Heads of National Drug Law Enforcement Agencies, Asia and

HONLAP the Pacific

HONLEA Heads of National Drug Law Enforcement Agencies

INCB International Narcotics Control Board

INCSR International Narcotics Control Strategy Report (USA)

Interpol/ICPO International Criminal Police Organization

JNPA Japan National Police Agency

MDMA 3,4-Methylenedioxymethamphetamine
NADA National Anti-Drug Agency (Malaysia)

NDLEA National Drugs Law Enforcement Agency (Nigeria)

NSB Narcotics Suppression Bureau (Thailand)

OECD Organization for Economic Co-operation and Development

ONCB Office of the Narcotics Control Board (Thailand)

ONDCP National Drug Control Policy (USA)
P-2-P 1-Phenyl-2-propanone (BMK)

PAG Police Advisory Group (New Zealand)

PMK 3,4-Methylenedioxyphenyl-2-propanone (3,4-MDP-2-P)

RMP Royal Malaysian Police

ROSEN UNODC Regional Office for West and Central Africa (Senegal)
SACENDU South African Community Epidemiology Network on Drug Use

SAPS South African Police Service

UAE United Arab Emirates

UNODC United Nations Office on Drugs and Crime

WCO World Customs Organization

Weights and measurements

lt. Litre mg Milligram kg Kilogram

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Explanatory Notes

This report has not been formally edited.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Countries and areas are referred to by the names that were in official use at the time the relevant data were collected.

The following notes describe certain terms, regional designations, data sources and timeframes used throughout this document.

ATS – Amphetamine-type stimulants (ATS) are a group of substances comprised of synthetic stimulants including amphetamine, methamphetamine, methcathinone, and *ecstasy-group substances* (e.g., MDMA and its analogues).

In various sections of this report, amphetamine and methamphetamine are also referred to as amphetamines-group substances. In cases where countries report to UNODC without indicating the specific ATS they are referring to, the term non-specified amphetamines is used. Pills which are marketed to contain an ecstasy-group substance, but may actually contain a variety of other substances, are referred to as 'ecstasy'.

Terms: Since there is some scientific and legal ambiguity about the distinctions between drug 'use', 'misuse' and 'abuse', this report uses the neutral terms, drug 'use' or 'consumption'.

Maps: The boundaries and names shown and the designations used on maps do not imply official endorsement or acceptance by the United Nations. A dotted line represents approximately the line of control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. Disputed boundaries (China/India) are represented by cross hatch due to the difficulty of showing sufficient detail.

Regions: In various sections, this report uses a number of regional designations. These are not official designations. They are defined as follows:

Africa

- Central Africa: Angola, Cameroon, Central African Republic, Chad, Congo, Democratic Republic of Congo, Equatorial Guinea, Gabon and Sao Tome and Principe.
- East Africa: Burundi, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Madagascar, Mauritius, Rwanda, Seychelles, Somalia, Uganda and United Republic of Tanzania.
- North Africa: Algeria, Egypt, Libya, Morocco, South Sudan, Sudan and Tunisia.
- Southern Africa: Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.
- West Africa: Benin, Burkina Faso, Cape Verde, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea, Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone and Togo.

Americas

- Caribbean: Antigua and Barbuda, Bahamas, Barbados, Bermuda, Cuba, Dominica, Dominican Republic, Grenada, Haiti, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines and Trinidad and Tobago.
- Central America: Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama.
- North America: Canada, Mexico and United States of America.

• South America: Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Ecuador, Guyana, Paraguay, Peru, Suriname, Uruguay and Venezuela (Bolivarian Republic of).

<u>Asia</u>

- Central Asia and Transcaucasia: Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan.
- East and South-East Asia: Brunei Darussalam, Cambodia, China (including Hong Kong, Macao and Taiwan Province of China), Democratic People's Republic of Korea, Indonesia, Japan, Lao People's Democratic Republic, Malaysia, Mongolia, Myanmar, Philippines Republic of Korea, Singapore, Thailand, Timor-Leste and Viet Nam.
- Near and Middle East/ South-West Asia: Afghanistan, Bahrain, Iran (Islamic Republic of), Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Pakistan, Qatar, Saudi Arabia, Syrian Arab Republic, the United Arab Emirates, and Yemen.
- South Asia: Bangladesh, Bhutan, India, Maldives, Nepal and Sri Lanka.

Europe

- Eastern Europe: Belarus, Republic of Moldova, Russian Federation and Ukraine.
- South-Eastern Europe: Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Montenegro, Romania, Serbia, the former Yugoslav Republic of Macedonia and Turkey.
- West and Central Europe: Andorra, Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Monaco, Netherlands, Norway, Poland, Portugal, San Marino, Slovakia, Slovenia, Spain, Sweden, Switzerland and United Kingdom of Great Britain and Northern Ireland.

Oceania

 Australia, Fiji, Kiribati, Marshall Islands, Micronesia (Federated States of), Nauru, New Zealand, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu, Vanuatu and small island territories.

Data sources and timeframes – Unless indicated specifically, data contained in this report draws upon official sources as reported in the UNODC Annual Reports Questionnaire (ARQ) by Member States, annual and technical reports of the International Narcotics Control Board (INCB), official government and inter-governmental entities (e.g., Interpol/ICPO, Europol, World Customs Organization, Inter-American Drug Abuse Control Commission of (CICAD)), UNODC Field Office and documentation before the Meetings of Heads of National Law Enforcement Agencies (HONLEA) and the Subcommission on Illicit Traffic and Related Matters in the Near and Middle East, data systems such as the Drug Abuse Information System for Asia and the Pacific (DAINAP) as well as scientific literature.

Data related to seizures of ATS, their precursors and clandestine laboratories are subject to change for a variety of reasons, such as new or late data being added or revisions in data already provided by Member States. Thus, some figures may differ from previously published figures. All data reported herein reflect the most up-to-date and accurate information available at the time of writing.

1 Overview: ATS situation in Africa

Since 2006, fears have been growing that African, particularly West African, countries are being used as trans-shipment points for shipments from Asia of precursor chemicals such as ephedrine and pseudoephedrine, the main chemicals used in the illicit manufacture of amphetamine-type stimulants such as methamphetamine and methcathinone. The final destinations of these chemicals are countries in Central and North America, and to a lesser extent, South Africa. In 2008, the International Narcotics Control Board (INCB) identified Africa as the region with the greatest number of diversions or attempted diversions of ATS precursor chemicals. Target countries of such diversions in recent years include Botswana, Democratic Republic of the Congo, Ethiopia, Nigeria, Togo, Uganda, United Republic of Tanzania and Zambia.

More recently however, evidence that West Africa may be turning into a manufacturing hub for ATS, particularly methamphetamine, is mounting. While awareness has been raised in recent years about West Africa's growing role in illicit trade in heroin and cocaine, little has been written about the growing trade in ATS, particularly methamphetamine. The information deficit about this latest threat to the region is principally due to a general lack of awareness of ATS in the region, and the problem is compounded by inadequate law enforcement systems, as customs and police officers tend to focus on the interception of 'traditional' plant-based drugs. If lack of effective law enforcement systems and border and precursor controls make West Africa an attractive location for the diversion and trafficking of ATS and essential ATS precursor chemicals such as ephedrine and pseudoephedrine, the situation is only made worse when the poor economic and living conditions which exist in many West African countries are taken into account, which have led to further expanding the West African involvement in the heroin and cocaine drugs trade. The same conditions apply to the potential expansion of the illicit ATS trade in the region.

Indeed, there is growing evidence to suggest that criminal organizations involved in trafficking ATS, particularly methamphetamine, exploit West Africa in a similar way to cocaine traffickers and look to avoid effective law enforcement and precursor controls to traffic ATS to other parts of the world, primarily East and South-East Asia. Cases of methamphetamine trafficking from West African countries such as Benin, Cameroon, Côte d'Ivoire, Ghana, Guinea, Nigeria and Senegal to East Asia have been reported since 2008. Currently, the most common destinations for methamphetamine trafficked through Africa appear to be Japan, the Republic of Korea, Malaysia and Thailand. In 2009, Japanese Customs reported that stimulants from Kenya, Lesotho, Nigeria, Uganda, and other African countries had been intercepted for the first time. The trafficking of methamphetamine by African groups has been officially reported by China, Cambodia, Indonesia, Japan, Malaysia, Philippines, Thailand and Viet Nam. Drugs are usually trafficked by air, in fairly small quantities (between 1 and 2 kg) but larger shipments have also been reported. Australia and New Zealand have also reported the increasing role of West African organized crime groups in the trafficking of ATS and ATS precursors to Australia and New Zealand.

¹ UNODC, 2011d.

1.1 Historical role of West Africa in cocaine and heroin markets

West Africa has played a role in the global trade in both licit and illicit psychoactive substances for centuries, and heroin and cocaine have been trafficked through the region for more than a decade. The situation has escalated in recent years with the result that West Africa is now a transit route for a significant portion of the cocaine available on the European market today. An increase in efforts and cooperation to counter the cocaine trade between West African Governments and international organizations may have contributed to the decline in seizures of cocaine in West African countries in recent years (also attributed to a diversification of trafficking routes); however the region remains vulnerable to a resurgence in cocaine trafficking.² Decades of trafficking through the region, as well as other parts of Africa, have had a detrimental effect on the domestic economy and resulted in a perceived increase in the use of cocaine.³

It is imperative that lessons be drawn from cocaine trafficking in West Africa and that the international community works in cooperation with West African Governments to counter the growing ATS trade before it takes a hold and becomes a vital trafficking hub, as has happened in the case of cocaine. The added danger with ATS when compared with heroin and cocaine is that unlike cocaine or heroin, illicit ATS manufacture does not rely on the cultivation of naturally occurring plants such as the coca leaf or opium poppy, and as such, is not limited to certain geographic locations – leaving the possibility that West Africa could be transformed not only into a key transit point in the trafficking of ATS, but has the potential to also become an ATS manufacturing hub. The first evidence of methamphetamine manufacture emerged from Nigeria in 2011.

The underlying problem with assessing the true ATS situation in West Africa and Africa as a whole is the persistent lack of data from the region. Less than 20% of African countries and territories submitted UNODC's Annual Reports Questionnaire (ARQ) for 2010. Reported seizures of both ATS as well as precursors used in the illicit ATS manufacture are practically non-existent, despite continued identified attempts involving African countries to divert precursor chemicals into illicit channels. In fact, in addition to limited national reports and ARQ data from the region, the best measure of the escalating situation appears to be reports coming from countries in East and South-East Asia of the increasing involvement of West African nationals, as well as nationals from other parts of Africa, in trafficking ATS.

² UNODC, 2011b. This resurgence may be happening, as in its 2012 annual report, INCB reported an increasing number of large seizures of cocaine hidden in maritime cargo containers in or en route to West African countries in 2010 and 2011 (INCB, 2012b, paragraph 318).

⁵ According to long-term trends in expert perceptions (UNODC, 2011b). Although data (e.g surveys) from the region indicating prevalence rates are limited, it is estimated that out of a possible 35 tons of cocaine that may have reached West Africa in 2009, 21 tonnes were trafficked to Europe (UNODC, 2011a), meaning the remainder may have been sold and consumed locally in Africa (Klantschnig, G., 2011). INCB also reports increasing levels of abuse of cocaine in some countries affected by such trafficking (INCB, 2012b, paragraph 318).

⁴ Under the United Nations drug control Conventions, Member States are formally required to provide national drug controlrelated information annually to the Secretary-General of the United Nations. The Commission on Narcotic Drugs, the main drugcontrol policy making body in the United Nations, developed the Annual Reports Questionnaire (ARQ) to collect this information.

2 Illicit ATS Manufacture in West Africa

Illicit manufacture of ATS is not new to Africa. South Africa has reported methcathinone manufacture since 2002 and illicit manufacture of methamphetamine since 2004. Egypt has a history of some stimulant manufacture, possibly methamphetamine in a form known locally as *Maxiton Forte*⁵ prior to 2000, as well as one reported case of ecstasy manufacture in 2004 and a case of methamphetamine manufacture in April 2010, when Egyptian authorities discovered and dismantled a laboratory in Alexandria. However, since 2009 evidence is growing to suggest that amphetamine-type stimulants are also being manufactured in West Africa.

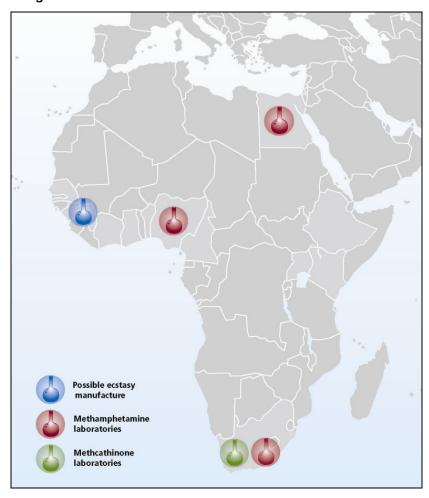


Figure 1: Indication of ATS manufacture in Africa since 2009

Source: UNODC 2011c

⁵ Maxiton Forte is a trade name for a pharmaceutical preparation containing dexamphetamine, which is no longer manufactured. 6 UNODC, 2010 (Segment 26).

2.1 Emerging signs of illicit ATS manufacture in West Africa

July 2009 saw the first indication of possible ATS manufacture from Guinea when authorities announced the discovery of chemicals and large-scale equipment used in the illicit manufacture of ecstasy (MDMA). Teams from UNODC and Interpol assessed multiple facilities housing large-scale equipment, and found large quantities of ecstasy precursors. More than 5,000 litres of sassafras oil and 80 litres of 3,4-Methylenedioxyphenyl-2-propanone (3,4-MDP-2-P) were seized at two different locations, quantities that would have been sufficient to manufacture ecstasy worth over \$ 100 million. Forensic analysis confirmed the presence of MDMA in a high-pressure reaction vessel found at one of the locations (Kissosso). The availability of ecstasy precursors in significant quantities and evidence of prior use of the reaction vessels suggests that there might have been some degree of illicit ecstasy manufacture, which is a worrying development.

In 2010, plans to illicitly manufacture methamphetamine in Liberia came to light, when the United States Government indicted members of a large international cocaine trafficking organization for, *inter alia*, the intent to establish an illicit laboratory for the large-scale manufacture of methamphetamine. Prosecutors alleged that the accused were attempting to build a new West African smuggling route to Europe, and that aside from their attempts to traffic significant quantities of cocaine from Venezuela and Colombia to Liberia,⁷ the group had conspired to bribe officials in order to traffic enough ephedrine to manufacture 20 kg of crystalline methamphetamine every few days, relying on the skills of foreign chemists. According to the unsealed indictment, the methamphetamine would have been destined for markets in the United States and Japan.⁸

In July 2011, Nigeria became the first and, so far, only country in West Africa to officially report illicit methamphetamine manufacture. The National Drug Law Enforcement Agency (NDLEA) seized a methamphetamine laboratory with a reported manufacturing capacity of between 25 and 50 kg per cycle near Lagos, Nigeria's largest city. Nigerian authorities confirmed the recovery of iodine and hypophosphorous acid in undisclosed amounts at the scene, although the source of the chemicals was not reported. None of the most frequently used chemicals in illicit methamphetamine manufacture (ephedrine, pseudoephedrine or 1-Phenyl-2-propanone (P-2-P)) were seized, however, from the type of methamphetamine found (d-isomer), it is possible that the manufacturing route was either ephedrine or pseudoephedrine.

In February 2012, the NDLEA reported the second seizure of a methamphetamine laboratory near Lagos, with an estimated manufacturing capacity of about 25kg per cycle. The laboratory consisted of two sites - the actual manufacturing facility as well as a storage facility for chemicals used in the manufacturing process. One Nigerian and three nationals of Bolivia were reportedly arrested in connection with the seizure. ATS precursor chemicals were discovered at the scene, including 41 kg of ephedrine, as well as other chemicals such as iodine, toluene, acetone, phosphoric acid, hydrochloric acid and sodium hydroxide and laboratory equipment. Almost 5 kg of finished methamphetamine was also reportedly seized, in different physical forms (intermediate, crude, crystallized). The arrest of Bolivian nationals in relation with the seizure might indicate possible cooperation of South American criminal syndicates with African criminal groups with regards to methamphetamine manufacture and trafficking.

In addition to the official reports on manufacturing facilities, methamphetamine laboratories possibly operate or are in the process of being established in other countries in West Africa such as Benin,

⁷ U.S. officials say Colombian and Venezuelan traffickers in recent years have shipped billions of dollars of cocaine to Europe and the U.S. with the help of corrupt officials in African nations such as Sierra Leone, Guinea-Bissau, Togo and Nigeria (Perez, E., 2010)

⁸ UNODC, 2010.

Ghana or Côte d'Ivoire ⁹. There have also been intermittent and unconfirmed reports of mobile amphetamine laboratories in Burkina Faso run by Nigerian criminals; although none have been seized to date. ¹⁰

2.2 Possible role of drug trafficking organizations from Central and South America in ATS trafficking and manufacture in West Africa

The involvement of drug trafficking organizations from Latin America in trafficking drugs to West Africa is not a new phenomenon, as they have been active in cocaine trafficking through West Africa for much of the past decade. About 2004, Colombian groups began experimenting with routing cocaine shipments destined for Europe through West Africa. Due to strong anti-drugs and anti-money-laundering measures taken in other regions of the world, traffickers sought out new routes to avoid shipments from being intercepted. ¹¹ With their inadequate law enforcement mechanisms, poor economic and social conditions, weak rule of law and anti-drug capacities, countries in West Africa provided a transit point for criminal organizations looking to traffic cocaine to Europe, and West Africa quickly became embroiled in the cocaine trade.

In the years that followed, there was a series of very large cocaine seizures intercepted by European navies in or near West Africa, many of which involved 'mother ships' 12 from South America. There were also incidents where modified small aircraft were used as well as a sharp increase in the number of cocaine couriers found on flights from West Africa to Europe. The key trans-shipment hub centred on Guinea-Bissau and Guinea, stretching to Cape Verde, Gambia and Senegal, thus complementing the already existing trafficking hub of the Bight of Benin, which spans from Ghana to Nigeria. Around 2008, cocaine trafficking through West Africa gained international attention, and this heightened awareness, coupled with changes to the countries' law enforcement, political leadership resulted in a substantial reduction in the number and volume of seizures of cocaine in the subregion, including both maritime shipments and commercial air couriers. 13

Reports of involvement of South American nationals in attempts to establish ATS laboratories in Nigeria would appear to correspond with intelligence reports of involvement of drug trafficking organizations in West Africa, which are reportedly setting up and operating methamphetamine laboratories in the subregion and attempting to purchase ATS precursor chemicals such as ephedrine and pseudoephedrine, as well as obtain transportation to Asia. These criminal organizations are reportedly targeting ATS markets in East and South-East Asia (where the number of ATS users is estimated to be as high as 21 million). as well as Australia and New Zealand. Mexican cartels are reportedly gaining a foothold in the subregion and, according to United States Drug Enforcement Administration (DEA), Mexican traffickers are at the very least being used as advisors and possibly being recruited as chemists in the illicit manufacture of methamphetamine.

⁹ ROSEN, 2012.

¹⁰ US Department of State, 2011.

¹¹ GIABA, 2009.

¹² These 'mother ships' were large commercial fishing or freight ships often specially modified for cocaine storage. These ships were met at sea by African vessels with African crews, often with a Latin American 'controller'. The 'mother ships' would then unload cargoes to these smaller vessels, and the cocaine could be stored, repackaged and redirected to European buyers. The ownership of the bulk of the drugs was generally not transferred, however, and remained in hands of the Latin American groups until the drugs reached Europe. In exchange for their services, West Africans were often paid in kind; up to one third of the shipment. This 'commission in kind' was used to feed West African distribution networks in Europe, and also fed the domestic market. (UNODC, 2011a).

¹³ Most of the recently reported seizures of cocaine from container consignments from South America to West Africa had Nigeria or Ghana as their destination. Most of these containers originated in Peru or the Plurinational State of Bolivia (UNODC, 2011a).
¹⁴ DEA. 2012.

¹⁵ UNODC, 2011b.

¹⁶ DEA, 2012

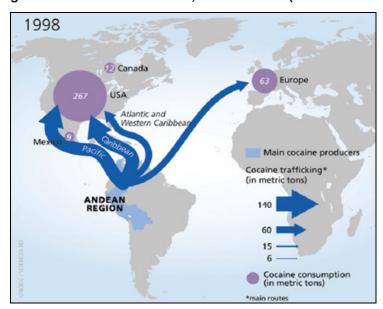
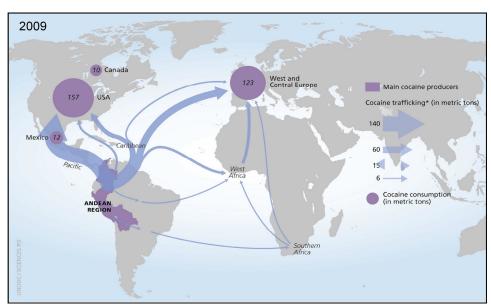


Figure 2: Global cocaine flows, then and now (1998 and 2009)



Source: UNODC 2011a.

2.3 ATS Manufacture in other parts of Africa

In Africa, South Africa has been reporting the largest number of illicit ATS laboratories annually, and illicit methamphetamine manufacture has been on the rise in that country. South Africa is reportedly encountering significant growth in the trafficking and use of drugs and is the biggest drug market within the Southern African Development Community.¹⁷ South Africa is a manufacturing, transit and consumer country for a range of illicit drugs, including ATS, and drugs constitute the largest portion of organized

¹⁷ Member States: Angola, Botswana, Democratic Republic of the Congo, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, Swaziland, Tanzania, Zambia and Zimbabwe

criminal activity. While ecstasy was originally trafficked into the country from either the Netherlands or Belgium, as demand grew, it began being manufactured locally in clandestine laboratories. However, ecstasy use has now reportedly almost disappeared and the most widespread ATS are methcathinone (known locally as "cat") and crystalline methamphetamine (known locally as "tik") both of which are manufactured domestically in illicit laboratories.¹⁸

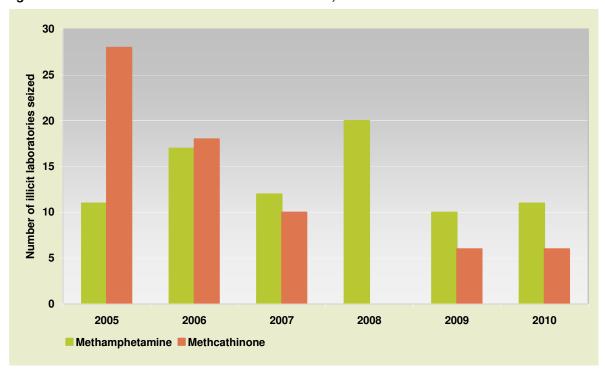


Figure 3: South Africa: seizures of ATS laboratories, 2005-2010

Source: UNODC ARQ /DELTA and South Africa (HONLAF), 2011.

Methcathinone has traditionally been the most widely illicitly manufactured ATS but since 2007, the number of detected methamphetamine laboratories has outpaced those of methcathinone. In 2010, 11 illicit methamphetamine laboratories were seized, up from 10 in 2009, whereas the number of methcathinone laboratories remained stable (six laboratories seized in 2009 and 2010). Most ATS laboratories are small-scale operations, often located in residential areas. South Africa also produces significant quantities of methaqualone, ¹⁹ and the cultivation and trafficking of khat is said to be a growing problem in South Africa.

Aside from sporadic reports of ATS manufacture in Egypt over the past decade, little information is available from other countries in Africa concerning possible ATS activity, making the situation difficult to assess. Less than 20% of African countries and territories submitted an annual reports questionnaire for 2010 and reported seizures of ATS or precursors. Moreover, no African country has ever submitted any seizure information on ATS precursors since 2006.

While synthetic drugs, including methamphetamine and ecstasy, are purportedly making inroads into Morocco, the country neither serves as a known source, nor transit point for diverted methamphetamine precursors.²⁰

¹⁸ South Africa (HONLAF), 2011.

Methaqualone is a sedative-hypnotic often smoked in combination with cannabis.

East Africa appears to be witnessing growth in the trafficking of amphetamine-type stimulants in addition to cannabis, heroin and cocaine, however, there have been no reports of illicit ATS manufacture from countries in East Africa to date. Trafficking in methamphetamine originating in countries in East Africa has been reported by the World Customs Organization in recent years. Since 2009, Kenyan authorities have been reporting significant thefts and/or losses of ephedrine and pseudoephedrine. This possibly indicates that these preparations are diverted towards illicit ATS manufacture, although it is unclear whether manufacture takes place in the country or whether the chemicals are trafficked onwards to other parts of the continent for illicit manufacture elsewhere. Several stopped and lost shipments of ephedrine and pseudoephedrine have been reported to the International Narcotics Control Board; for example, in March 2011, Indian authorities suspended a shipment of 300 kg of ephedrine to an unknown unregistered company in the Sudan.²¹

Central Africa, on the other hand, has not shown major signs of becoming a drug manufacturing or transit zone, possibly due to the limited transportation infrastructure and few international air links. As synthetic drugs can be manufactured anywhere as long as the precursors are available, Central Africa could emerge as an alternate source. The Democratic Republic of the Congo has been the target of diverted precursors: in 2007, seven shipments of pseudoephedrine, totalling 23 tons, were intercepted in that country. ²² Intelligence suggests that precursors are trafficked through the subregion for the manufacture of methamphetamine elsewhere.

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²¹ INCB, 2012b (paragraph 57).

²² INCB, 2009 (paragraph 45).

3 Diversions and seizures of ATS precursor chemicals in Africa

As governments have been strengthening controls over ephedrine and pseudoephedrine in recent years, there has been a shift in trafficking routes to Africa, particularly West Africa, due to its geographical location and the comparably weak precursor control mechanisms. Despite reports by the International Narcotics Control Board (INCB) that attempts to divert ATS precursors into illicit channels occur with increasing frequency, precursor seizures in Africa remain rare. In fact, no African country has submitted reports of seizures of ephedrine and pseudoephedrine to INCB since 2006 and from 2001 and 2006, precursor seizures (mostly of ephedrine) were reported almost exclusively from South Africa.²³

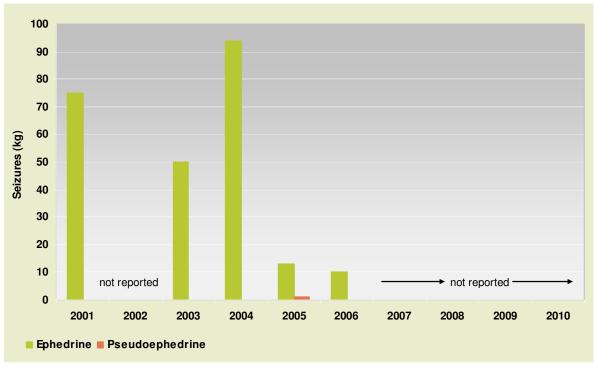


Figure 4: Africa: seizures of ephedrine and pseudoephedrine (kg) reported to INCB, 2001-2010

Source: INCB, 2012b, INCB 2006.

Stopped or suspended shipments of precursors offer some insights on potential methamphetamine manufacture. INCB continues to highlight the risk to African countries, especially in West Africa, of being used by traffickers to obtain precursor chemicals. In 2010, INCB reported stopped shipments of 500 kg and 200 kg of ephedrine to Guinea and Niger, respectively, other destination countries were Central African Republic, Kenya, Madagascar, Nigeria and Togo. Suspended shipments of ephedrine

²³ Côte d'Ivoire and Zambia were the only other two African countries that reported seizures of ephedrine in the period, reporting 61 kg and 1 kg, respectively, in 2001.

or pseudoephedrine to African countries that were suspended for further clarifications with the importing countries totalled more than 5.5 tons and included shipments destined for the Democratic Republic of the Congo, Egypt, Eritrea, Ethiopia, Ghana, Morocco, Nigeria and South Africa.²⁴

Thefts are another possible source of diversion and countries in East Africa have been reporting them. Kenya has been experiencing significant thefts or losses of ephedrine and pseudoephedrine since about 2009. While the precursors were initially reported to have been stolen from the premises of companies that imported them, in more recent incidents convoys transporting the precursors from the airport have been targeted. In November 2010, a 500 kg shipment of ephedrine, destined for Nigeria, was reported missing from an airport warehouse at the international airport of Nairobi. Several other thefts have been reported to have taken place at the airport since late 2010.

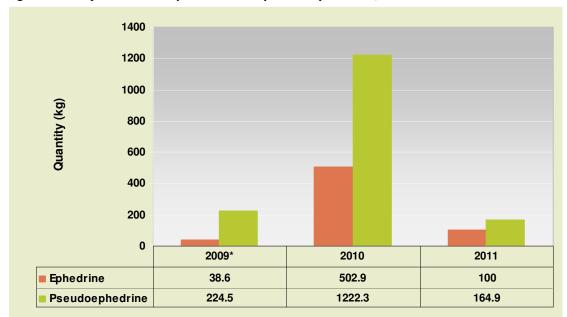


Figure 5: Kenya: thefts of ephedrine and pseudoephedrine, 2009-2011

Source: PPB, 2012.
* 2009 (Sep- Dec only).

From September 2009 to December 2011, 21 thefts were reported to the Pharmacy and Poisons Board of Kenya, peaking in 2010, when about 503 kg of ephedrine and 1,222 kg of pseudoephedrine were reported stolen.²⁷ The average quantity per theft was 107.3 kg, with around half of the thefts involving both ephedrine and pseudoephedrine. Pseudoephedrine was stolen on 16 occasions, with an average theft size of 100.7 kg, while ephedrine was stolen on 15 occasions with an average theft size of 42.8kg. Control measures have been stepped up significantly by adding armed security to the convoys in an attempt to deter such thefts.

The United Republic of Tanzania reported two thefts of 365kg and 61 kg of pseudoephedrine from the premises of two pharmaceutical companies in 2010. ²⁸ Follow-up investigations showed that the chemicals were intended to be diverted towards illicit methamphetamine manufacture. Further thefts were reported in February 2011 (25kg of pseudoephedrine) and in April 2011 (42 kg of ephedrine). ²⁹

²⁴ INCB, 2011a (paragraph 42).

²⁵ INCB, 2012a (paragraph 57).

²⁶ PPB, 2012.

²⁷ PPB, 2012.

²⁸ DCC, 2012.

²⁹ DCC, 2012.

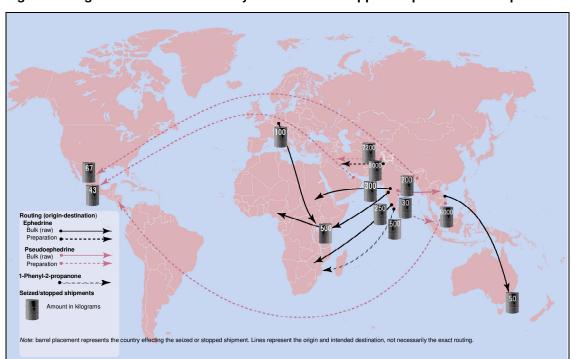


Figure 6: Origin and destination of key seizures and stopped shipments of ATS precursors

Source: INCB 2012a. Map shows seizures and shipments identified in post-Operation Pila communications between November 2010 and July 2011. Operation Pila is an initiative for the identification of patterns of illicit trafficking and diversions of pharmaceutical preparations containing ephedrine and pseudoephedrine.

Trafficking and seizures

West African drug trafficking organizations, mostly from Nigeria and Ghana, were first reported to be engaged in the trafficking and distribution of cocaine in South Africa and, subsequently, in the smuggling of drugs to Europe and Asia. Since mid-2009, these organizations have further diversified their activities to include trafficking of crystalline methamphetamine. In carrying out their activities, drug trafficking organizations from Nigeria and Ghana have established links with other African countries such as Benin, Cameroon, Cote d'Ivoire, Guinea and Senegal. 30 Europol also reports links of West African organized crime groups with Outlaw Motorcycle Gangs and Russian organized crime groups in the trafficking of drugs to destination markets in the European Union. 31

West African trafficking groups have shown a high degree of flexibility in their trafficking routes and their concealment methods. To avoid detection, they have diversified their methods by using couriers from countries outside the region e.g. from Eastern Europe or Asia and by diversifying their trafficking routes.

Overall, ATS annual seizures reported to UNODC from Africa continue to be moderate, ranging between 60 grams to 50 kg. However, they probably do not reflect the real situation of ATS within the region. Many African governments do not have adequate resources to gather intelligence, report intelligence, conduct investigations, and detect smuggling activities. In recent years, the largest quantities of ATS seized have been reported from Burkina Faso, Nigeria and South Africa, with smaller quantities of ATS reported by Benin, Cameroon, Côte d'Ivoire, Egypt, Ethiopia, Ghana, Guinea, Mali, Morocco, Niger, Senegal, Swaziland and Zambia since 2005.

4.1 ATS trafficking within Africa

ATS are transported mainly from Nigeria to several countries in West Africa with traffickers using the land route due to the free movement policy of the Economic Community Of West African States (ECOWAS)³² rather than the air route for transporting ATS within the region. Nigerian groups are also reportedly trafficking amphetamines overland ³³ in Benin.

ATS have also been smuggled by sea. In July 2009, separate shipments of 10 kg crystalline methamphetamine, 10 kg amphetamine and 57 kg ephedrine were seized. All shipments originated in Nigeria and were en route to South Africa. 34

From South Africa, ATS are frequently trafficked to neighbouring countries. At the national level, methamphetamine is regularly seized at Cape Town airport on flights originating from Johannesburg. In February 2010, a South African national was arrested with 14 kg of methamphetamine with an estimated market value of USD 700,000.

³¹ EUROPOL, 2011.

Benin (HONLAF), 2011.

³⁰ DEA, 2012.

³² ECOWAS members: Benin, Burkina Faso, Cape Verde, Côte d'Ivoire, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone and Togo.

4.2 International ATS trafficking from West Africa to East and South-East Asia

4.2.1 Methamphetamine trafficking to East and South- East Asia

Traditionally, methamphetamine for the lucrative Japanese market (where one kg of methamphetamine can be sold for at least 212,600 USD), has been smuggled into the country from China, including Hong Kong and Taiwan Province. In 2009, for the first time, Japanese Customs reported that stimulants from Kenya, Lesotho, Nigeria, Uganda, and other African countries had been intercepted. This increase continued in 2010 when the proportion of seized methamphetamine that was trafficked into the country from Africa increased from 7.4% in 2009 to 36% in the first half of 2010. In 2011, 17.2% of all methamphetamine trafficking cases originated in Africa, mostly from Nigeria. The number of methamphetamine cases associated with West African drug trafficking organizations has increased over the past four years: from 1 offender in 2008 to 12 offenders in 2011.

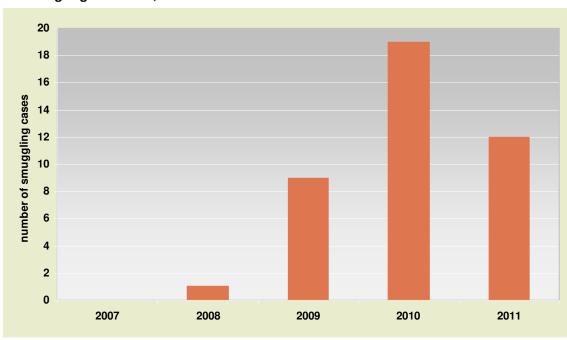


Figure 7: Japan: methamphetamine smuggling cases associated with West African drug trafficking organizations, 2007-2011

Source: NPA, 2012.

Malaysia has also been experiencing a considerable increase in the amounts of methamphetamine seized from African couriers, which has increased almost by a factor of nine, from 11.3 kg in 2010 to 98 kg in 2011.³⁶ The substance is reported to enter the country either in Penang, a State located on the north-western coast of Malaysia, or at the international airports in or close to Kuala Lumpur. Apart from Ghana and Nigeria, embarkation points for African air passenger couriers include Germany, Qatar, South Africa and United Arab Emirates, with Bangkok, Cairo and Damascus being named as transit points.^{37 38}

³⁵ UNODC, 2011c.

³⁶ RMP, 2012

³⁷ NADA and RMP 2011

In line with the increasing seizures of drugs, arrests have also risen in Malaysia. In 2011, a total of 179 Africans were arrested for drug-related offences, compared with 65 arrests in 2010 and 35 arrests in 2009. While most arrestees were Nigerian nationals (152 persons), citizens of 17 other African countries were also arrested, including (in order of magnitude) South Africa, Uganda, United Republic of Tanzania, Chad and Algeria.³⁹

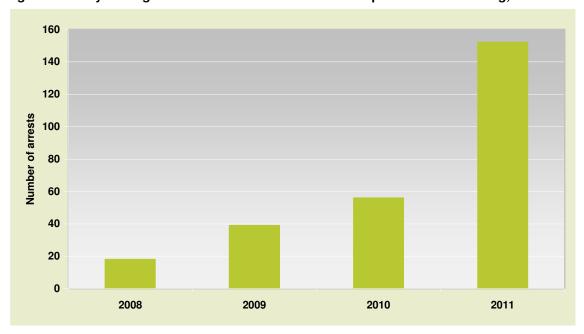


Figure 8: Malaysia: Nigerian couriers arrested for methamphetamine trafficking, 2008-2011

Source: RMP, 2012.

Since 2010, Thailand has been reporting the involvement of West African drug networks in trafficking crystalline methamphetamine. Most of the trafficking is by air passenger couriers, with between 1 and 3 kg of the substance. Key embarkation locations include Benin, Gambia, Mali, Nigeria and Togo in West Africa as well as other African locations such as Ethiopia, Kenya or South Africa.⁴⁰ Thailand is not necessarily the final destination as some methamphetamine is intended for Cambodia and China.

In total, trafficking of methamphetamine by African groups has been officially reported by Cambodia, China, Indonesia, Japan, Malaysia, Philippines, Republic of Korea, Thailand and Viet Nam. In West Africa, Benin, Cameroon, Côte d'Ivoire, Ghana, Guinea, Mali, Senegal and Nigeria have been named as source or transhipment countries of origin of seized methamphetamine.

Other Asian countries have also reported numerous arrests of people associated with African drug trafficking networks for methamphetamine trafficking. African drug couriers have been arrested in Cambodia. China reported that the incidence of foreign traffickers, especially from West Africa, has become increasingly serious in recent years. In the Philippines, 23 foreign nationals associated with African drug trafficking organizations were arrested from January 2010 through June 2011. Viet Nam has reported the arrest of several persons involved with West African drug trafficking organizations. In addition, West African trafficking groups have reportedly used Cambodia as a centre for financial transactions and for the distribution of illicit drugs to Indonesia.

³⁹ RMP, 2012.

⁴⁰ ONCB 2010; ONCB 2011.

⁴¹ UNODC, 2011d.

4.2.2 Trafficking strategies

Methamphetamine is usually trafficked by air passenger couriers. The postal and courier system has also been used. Drugs are either ingested (a technique often referred to as 'body packing'), hidden under loose-fitting clothing, or concealed in luggage items, mostly false-bottom suitcases. Methamphetamine has also been hidden in industrial goods, food items or in cultural objects declared as souvenirs.⁴³

While the overwhelming majority of traffickers are male (between 80 and 90%), law enforcement authorities have also reported the increasing use of women couriers. To prevent possible detection, West African drug trafficking organizations have also used couriers from South-East Asian countries.

4.2.3 Main ATS trafficking routes for methamphetamine from Africa to East and South-East Asia

Trafficking routes from West Africa

Nigeria, by far the largest country in West Africa both in terms of population and surface area, is most frequently cited as origin for ATS trafficking, largely methamphetamine. Common destinations for methamphetamine trafficking out of Nigeria are Japan, Malaysia, Thailand and China. Egypt, France, Germany, Netherlands and Qatar have been used as transit countries for drugs to be smuggled to Japan. Hethamphetamine is largely trafficked by air to destinations in other regions. In 2010, the National Drug Law Enforcement Agency of Nigeria reported seizures of 75 kg of amphetamines at the international airport in Lagos. In 2011, 45 kg of amphetamines were seized at the airport.

Methamphetamine has been trafficked from Benin via Egypt, France, Libya and the United Arab Emirates to Japan. 45 46 Since 2010, methamphetamine seizures have been reported from Benin with almost 5 kg seized in 2010. In 2011, several seizures of methamphetamine were made. In October 2011, for example, a total of 1.8 kg of methamphetamine was hidden in small machine parts in different shipments destined for Australia, Malaysia and the Philippines. 47 In November 2011, 1 kg was seized in engine parts in air cargo, destined for Malaysia. Most methamphetamine was, however, seized from air passenger couriers.



Figure 9: Benin: selected significant methamphetamine seizures in 2011 and 2012

Source: UNODC, 2012 and ROSEN.

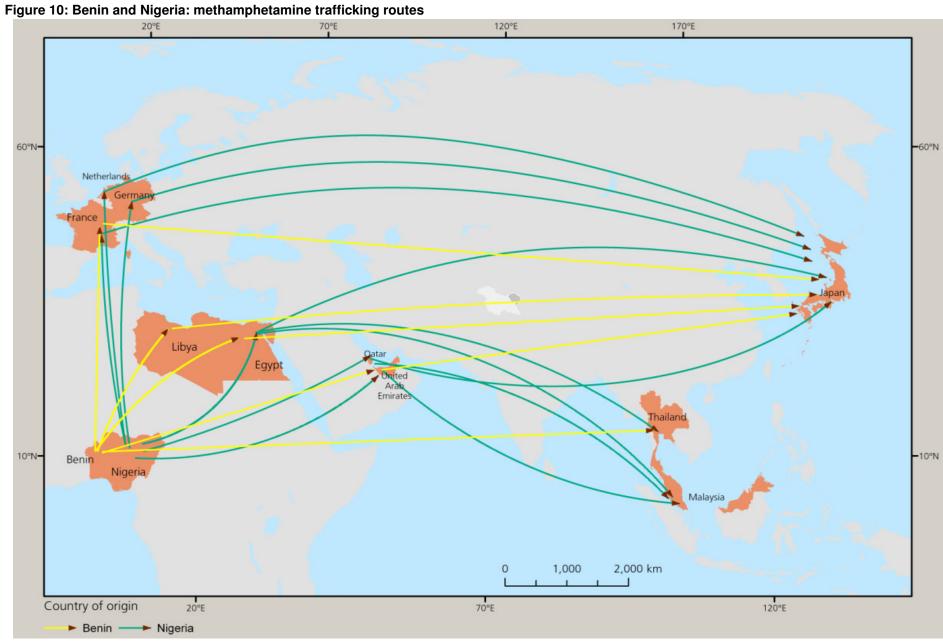
⁴³ Japan Customs, 2010.

⁴⁴ NPA, 2012.

⁴⁵ NPA, 2012.

⁴⁶ NDLEA, 2012c.

⁴⁷ ROSEN, 2011.



Source: NPA, 2012; ONCB, 2012 and RMP, 2012.

Methamphetamine trafficking has also been reported from other ECOWAS countries. Ghana has been the starting point of several shipments of methamphetamine destined for Japan, Malaysia, Singapore and Thailand. In 2010, a total of 24.4 kg methamphetamine was seized in Ghana. In 2011, at least two significant seizures of methamphetamine were made in Accra.

In West Africa, Mali has also emerged as a source country for methamphetamine trafficking. The Republic of Korea reports that, in 2011, 4.2 kg of methamphetamine were smuggled into the country from Mali. ⁴⁹ Another trafficking route from Mali transits Addis Ababa with Bangkok as its final destination.

ATS seizures have increased in Mali over the last two years. Whereas in 2010, law enforcement authorities in Mali seized 2.7 kg of amphetamine, more than 10 kg of methamphetamine were seized from January to November 2011, with large quantities being transited through Mali's capital Bamako. ⁵⁰ While the largest seizure (4kg) was headed for France, the others were intended for countries in South-East Asia. So far, no seizures have been reported in the North of the country although these routes are known to be used by drug trafficking organizations. ⁵¹

Nationals of Côte d'Ivoire, Gambia and Senegal smuggled methamphetamine to Japan in 2010 with routes via Turkey and India; the United Kingdom; Ghana, the United Arab Emirates and Thailand respectively. One methamphetamine seizure has been reported from Togo destined for Kuala Lumpur. In 2011, 1 kg of methamphetamine was seized in Cameroon at Yaoundé Airport, which was bound for Japan via Nigeria. ⁵²

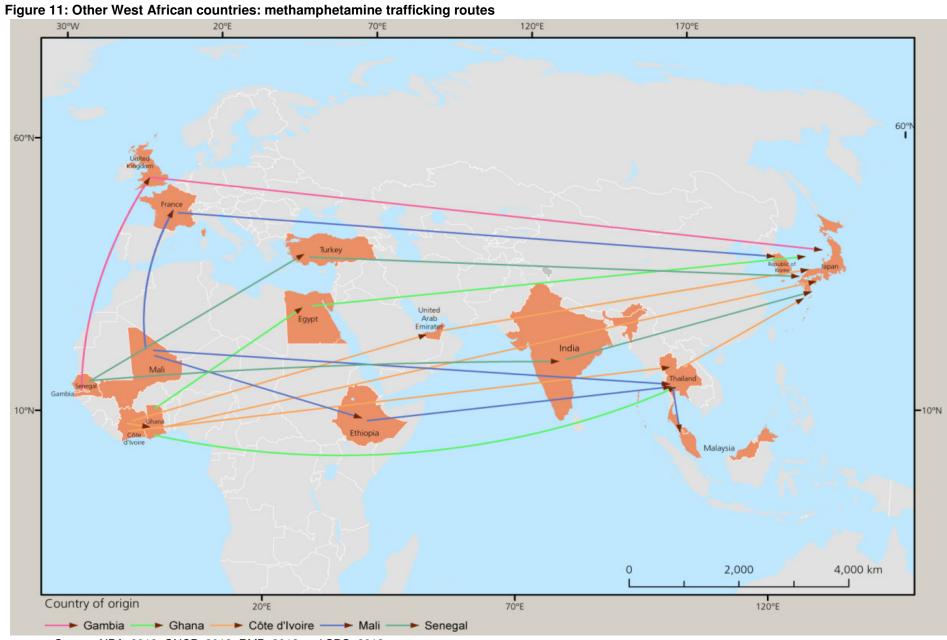
⁴⁸ UNODC DELTA

⁴⁹ SPO, 2012.

⁵⁰ CONSILIUM, 2011.

⁵¹CONSILIUM, 2011.

⁵² CONSILIUM, 2011.



Source: NPA, 2012; ONCB, 2012; RMP, 2012 and SPO, 2012.

Trafficking routes from other African countries

South Africa is increasingly being used in the international illicit drug business system as transit-, manufacturing-, and supply country for precursor chemicals and ATS. The country's excellent financial, transportation (including direct air links with South America, Asia and Europe) and communications facilities provide crime syndicates with ample opportunities for regional and international illicit drug trafficking. In recent years, methamphetamine from South Africa has been smuggled to the Asia-Pacific region, in particular Japan and Korea. ⁵³ In late 2010, a Malaysian woman was arrested with 1.2 kg of methamphetamine at Cape Town International Airport en route to Kuala Lumpur, Malaysia. The drugs were concealed under the inner linings of her suitcase. Intelligence information by the South African Police Service indicates that West African syndicates mostly recruit young women for the smuggling activities.

Although still far below the level of seizures in 2006 when more than 10,000 pills were seized, there was a sharp increase in ecstasy seizures in Egypt in 2010, reaching 2,015 pills compared to just 76 pills seized in 2009. In addition, the World Customs Organization reported a large seizure of 1.3 million ecstasy pills in Saudi Arabia in 2009 from a vessel originating in Egypt, demonstrating Egypt's potentially significant role as a departure country for ATS shipments to the Middle East.⁵⁴

Methamphetamine from Addis Ababa is predominantly smuggled to Malaysia transiting Bangkok. There have also been recent reports of methamphetamine being seized in Ethiopia in 2009 (1.2 kg) and 2011 (2 kg).

⁵³ South Africa (HONLAF), 2011.

⁵⁴ The seizure was made by Saudi Arabian Customs at Dhuba seaport. The drugs had been concealed on board the vessel which arrived from Egypt (WCO, 2010).

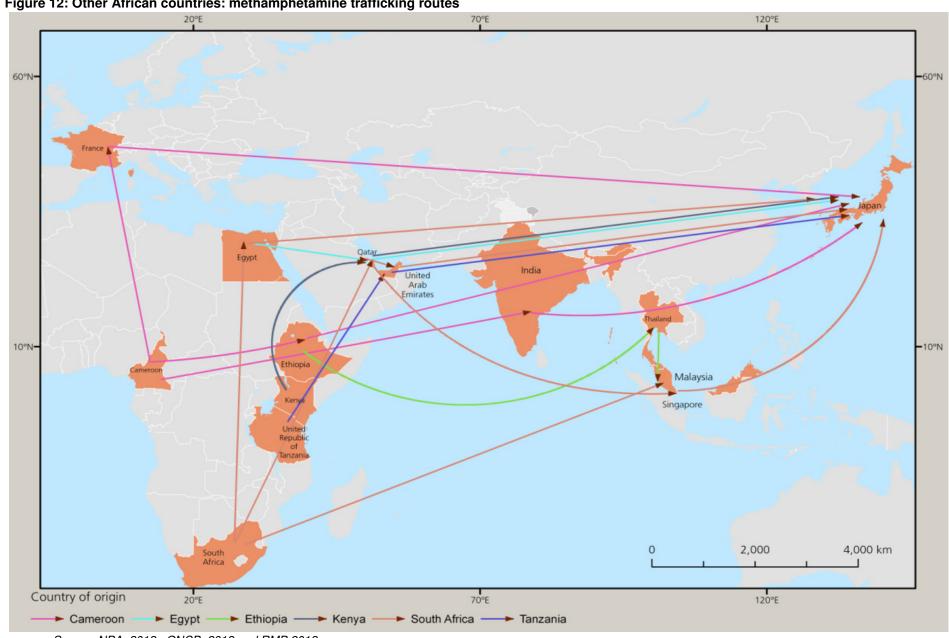


Figure 12: Other African countries: methamphetamine trafficking routes

Source: NPA, 2012; ONCB, 2012 and RMP 2012.

4.3 International ATS trafficking from Africa to Oceania

Since 2010, West African groups, particularly Nigerians, are reportedly involved in the trafficking of methamphetamine to New Zealand, and authorities have confirmed that the involvement of such groups continued to be identified in incidents in 2011.⁵⁵ The *modus operandi* of smuggling methamphetamine to New Zealand happens usually in multiple smaller consignments.⁵⁶

The Australian Crime Commission lists South Africa and Zambia among the main points of embarkation for ATS shipments seized in Australia. Seizures from these two countries accounted for about 20% of the total amount of ATS detected at the Australian border in 2008/2009. In 2009 and 2010, by weight, South Africa was the most prominent point of embarkation, accounting for 28% of attempted importations totalling more than 500 g, before China (including Hong Kong) and some cases were reported from Zambia (see Figure 14). In Australia, notable seizures in 2009 and 2010 include 17 kg of crystalline methamphetamine, which were detected in air cargo from South Africa.

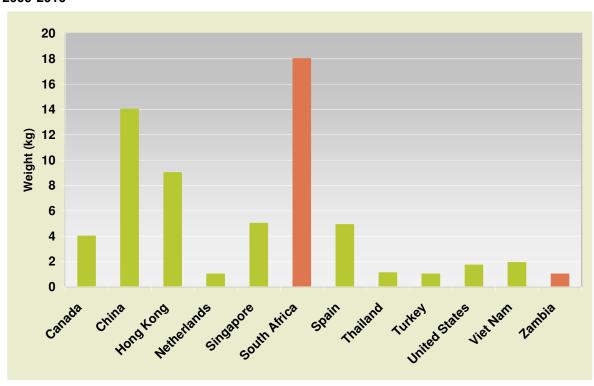


Figure 13: Embarkation points for ATS (excluding MDMA) seizures of more than 500 grams, 2009-2010

Source: Australian Customs and Border Protection Service, ACC, 2011.

 $^{^{55}}$ New Zealand (HONLAP), 2011 and UNODC ARQ.

⁵⁶ PAG, 2011.

⁵⁷ Methamphetamine was detected on 27 March 2009 in large metal rollers, consigned as air cargo from South Africa to Sydney, while amphetamine was detected on 26 August 2008 in plastic bottles in parcel post from Zambia to Sydney (ACC, 2010). ⁵⁸ ACC, 2011.

5 ATS use

The increase in ATS trafficking and emergence of manufacture in West Africa and the rest of the continent also has health implications. Use of amphetamines has already been reported in several West African countries, even among school-aged children. However, Nigeria is the only country in West Africa where UNODC has established an annual prevalence rate of amphetamines at 1.4%, based on the results of a household survey reported to UNODC in 2008. This would mean that amphetamines use there would be higher than amphetamines use in South Africa, currently thought of as the most established ATS market in Africa, higher than in most European countries and comparable to use levels in countries in Asia where illicit trafficking, manufacture and use of ATS has a long tradition.

Burkina Faso, Niger and Nigeria have also reported that ATS is among the primary drugs of abuse of people receiving treatment. Burkina Faso, Côte d'Ivoire, Egypt, Ghana, Kenya, Nigeria, Senegal, Sierra Leone and several other African countries have reported ATS use in recent years. The question is not whether the emerging trafficking of methamphetamine and the possibility for manufacture in the region will lead to greater use among the local populations, but to what degree.

6 East Africa: The next targets for illicit ATS activity?

Kenya

East Africa has witnessed tremendous growth in trafficking of cannabis, heroin, cocaine and ATS into and through the region. A rising problem is the theft of ephedrine and pseudoephedrine which are chemicals that can be used to manufacture methamphetamine. Twenty-one thefts were reported to the Pharmacy and Poisons Board between September 2009 and December 2011 with a total amount of 2,253 kg, which could have been used to manufacture over 1,500 kg methamphetamine. On average, around 100 kg of pseudoephedrine and 43 kg of ephedrine were stolen either from the premises of companies that imported the substance, from the convoys and more recently directly from the airports.

While there have been no reports of illicit ATS manufacture from the country, Kenyan couriers have been arrested in some countries in South-East Asia, for example, in Malaysia. In the Philippines, two Kenyan women were arrested in June and September both trying to smuggle crystalline methamphetamine to Manila and Cebu. Before 2011 neither the Philippine Drug Enforcement Agency nor any other law enforcement authority in the Philippines had ever arrested Kenyan nationals in relation to drug trafficking.

Addressing ATS trafficking in Kenya represents a major challenge due to the country's geographical location. For centuries traditional drug trafficking routes between South Asia and East Africa have been exploited by traffickers. Kenya's coastline on the Indian Ocean is used as a port of entry for east and central Africa and at the northern border with Somalia controls and police presence is very weak, which makes it relatively easy for drug syndicates to operate without being detected.⁵⁹

According to the National Alcohol and Drug Abuse Report 2011 of the National Campaign against Drug Abuse Authority, the lifetime use of amphetamines and mandrax (methaqualone) in secondary school in Nairobi is 2.6%.⁶⁰

Ethiopia

Ethiopia is located in a very strategic geographical area and has links to major routes for international trade both from the East and South-East Asia to South America, Europe and most African countries. Ethiopian authorities report that their country is gravely affected by transit traffic of drugs and that the country remains vulnerable to the trafficking due to poor control in ports of entry and exit.⁶¹ Authorities in Asia often report that seizures of ATS originating from Benin, Gambia, Mali, Nigeria and Togo transited via Ethiopia to the Asian continent.⁶²

A recent government report indicated that first-time seizures of methamphetamine took place in the country in 2009 and 2011, with seizures of 1.2 kg and 2 kg ⁶³ respectively. This is an indicator that methamphetamine is, at the very least, being trafficked through the country.

⁵⁹ US Department of State, 2011.

⁶⁰ NACADA, 2011

⁶¹ Ethiopia (HONLAF), 2011.

⁶² ONCB, 2012.

⁶³ Ethiopia (HONLAF), 2011.

Ethiopia has also become one of the many countries targeted by traffickers to obtain precursor chemicals by diversions or attempted diversions of ATS precursor chemicals. The International Narcotics Control Board reports that several shipments of ephedrine or pseudoephedrine to various African countries that were suspended for further clarifications included shipments destined for Ethiopia. 64

⁶⁴ INCB, 2011a (paragraph 42).

7 Options for Response

The report has shown that West Africa has become a starting point for methamphetamine destined for East and South-East Asia as well as a location for manufacturing methamphetamine. Demand for ATS, particularly methamphetamine, in many regions of the world, high prices of the drug in the target countries and very low manufacturing costs, might lead to a further increase in manufacturing and trafficking activity not only from West Africa but potentially from the African region as a whole.

A response to this challenge has to be as comprehensive as possible and address all aspects of the problem. The journey towards a better understanding of the ATS phenomenon starts with raising awareness and there is a need to increase awareness in West Africa about the illicit manufacture and trafficking of ATS.

The fact that most ATS seizures originating from West Africa were uncovered in the final destination indicates that there is a need for better information on the ATS phenomenon in the region. Seizures are not regularly reported from many affected countries, information on the sources of methamphetamine and ATS precursors is often unavailable. Investments in ATS information systems should be made with a view to obtaining timely and actionable information with detail at the national or regional level. The resulting evidence base will serve as a foundation for improved understanding and effective assessment of the ATS situation and the patterns and distribution of their use. Such information will also be useful to Governments in planning effective operational interventions and other responses to the ATS problem.

Investigation of illicit manufacturing activity is crucial. Once ATS laboratories are dismantled, the evidence must be thoroughly investigated and analysed. Methods, chemicals and equipment used for clandestine manufacture, the purities of drugs or other intermediate products found at the site can provide invaluable information for advancing the investigation and facilitating an effective response to the problem. Information on these issues needs to be shared in a timely matter among all concerned drug law enforcement authorities within the country as well as across national borders.

Closer cooperation on precursor control is essential. ATS precursors such as ephedrine or pseudoephedrine are trafficked across various regions to be diverted into illicit methamphetamine manufacture. Legislation to address trafficking of ATS and their precursors often does not exist or is not fully implemented. More can be done to prevent diversion and the international community, including UNODC and INCB, have an important role to play in this regard.

Enhancing law enforcement capacities is another area that can be strengthened. Many countries in West Africa are affected by the lack of adequate technical equipment and well-trained personnel to operate and maintain it. Drug and precursors detection equipment will facilitate the discovery of ATS shipments or diverted precursors. The systematic use of drug and precursor identification kits will enable the identification of the substances trafficked. Properly conducted and supervised sample collection, transport and storage, strict maintenance of the chain of custody process is also vital.

Accurate information on the nature of drugs, such as identity and purity, as well as of the precursor chemicals and alternative substances used for their manufacture are essential in providing evidence based data to support operations of police and customs and for intelligence purposes. In this regard, the complexity of ATS presents additional challenges for forensic laboratories in the region. To address these challenges, the capacity of national laboratories needs to be enhanced to enable the generation and exchange of reliable scientific data nationally and regionally, which meets internationally accepted standards.

Research on the use of ATS is also essential. Information on trends and patterns of ATS use, the social, economic, health and cultural dimensions are needed in order to determine appropriate treatment methods. Rehabilitation programmes targeting ATS users have to be set up in order to address their problematic use in an appropriate manner.

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