The international drug control system


2. Objectives:
   1. Protect public health
   2. Ensure controlled availability for medical / scientific purposes
   3. Restrict non-medical drug use

3. Near-universal adherence

4. Collective will of governments

5. Re-validated: 1998 (Gen. Assembly) and 2009 (CND)
Role of UNODC

1. Member States determine and approve our work programme
3. Promote norms, laws and conventions
4. Provide technical assistance
5. Promote regional cooperation
6. Advocacy on international drug control system
S – synthetics
M – monitoring:
A – analyses,
R – reporting and
T – trends
Funding support for SMART

- Australia
- Canada
- Japan
- Republic of Korea
- New Zealand
- Thailand
1. Background

2. The Big Picture

3. Global trends

4. Regional trends – E/SE Asia

5. Effective responses
"Containment” has worked during past decade

- Number of users level at 4.5% adult population
- Opiate cultivation declines globally
- Coca/cocaine declines globally
- Cultivation is limited to a few countries
- ATS use stabilizes across globe

**WARNING SIGNS**

- SE Asia: resurgence of opium cultivation
- SE Asia: soaring production, trafficking, use of ATS
What are Amphetamine-Type Stimulants (ATS)?

- Amphetamine
- Methamphetamine
- Ecstasy-group substances (MDMA and its analogues)
- Methcathinone

Tableted methamphetamine (Yaba)
DEMAND: ATS attraction

- Affordable
- Perceived to enhance performance and communication
- Perceived as not being very harmful
- Associated with a modern and dynamic lifestyle – occupational use
- No stigma from “injecting” or “smoking”
SUPPLY dynamics

• Unlike plant-based drugs, can be manufactured anywhere
• Variety of precursor chemicals
• Labs close to markets
• No longer a “cottage” industry – links to TOC groups
1. Background
2. The Big Picture
3. Global trends
4. Regional trends – E/SE Asia
5. Effective responses
Global trends

- After cannabis – #2 most widely used illicit drug globally
- 14-57 million people aged 15-64 used ATS in 2009-2010
- = 0.3% - 1.3% population
1. New manufacturing areas

- **South-East Asia**: Indonesia, Malaysia, Cambodia

- **Middle East**: Islamic Republic of Iran

- **Central / South America**: Argentina, Belize, Brazil, Guatemala, Nicaragua and Suriname

- **Europe**: Austria, Belarus, Lithuania, Netherlands, Poland, Portugal

- **Africa**...
1. New manufacturing areas

- West Africa being drawn into ATS trade
  - GUINEA: 2009 - evidence of possible ATS manufacture discovered
  - LIBERIA: 2010 - large-scale ATS manufacturing facility attempted
  - NIGERIA: June 2011 – meth lab

In June 2011, the National Drug Law Enforcement Agency of Nigeria (NDLEA) seized an illicit methamphetamine laboratory on the outskirts of Lagos – the first evidence of methamphetamine manufacture in Nigeria. The laboratory had an estimated capacity of 160 kg - 200 kg of crystalline methamphetamine per week.

Source: NDLEA Official Communication, 2011
1. New manufacturing areas

![Map of trafficking routes of methamphetamine in Africa](Source: UNODC, 2011a)
2. New ATS trafficking routes

- **Via the Mekong River**: now a key route for trafficking methamphetamine produced in the Golden Triangle

- **From West and East Africa**: methamphetamine by air via couriers

- **From the Islamic Republic of Iran**: to Turkey by land, then trafficked by air to East and South-East Asia
1. Background
2. The Big Picture
3. Global trends
4. Regional trends – E/SE Asia
5. Effective responses
Importance of ATS in SE Asia

- ATS: main illicit drugs threat in East and South-East Asia
- E / SE Asia = ½ world’s meth seizures
- E / SE Asia = ½ world’s ATS users
Drug of choice: ATS in SE Asia

<table>
<thead>
<tr>
<th></th>
<th>Cambodia</th>
<th>China</th>
<th>Lao PDR</th>
<th>Myanmar</th>
<th>Thailand</th>
<th>Viet Nam</th>
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</thead>
<tbody>
<tr>
<td>Methamphetamine pills</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
</tr>
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<table>
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<tbody>
<tr>
<td>Ecstasy</td>
<td>•</td>
<td>3</td>
<td>•</td>
<td>•</td>
<td>9</td>
<td>3</td>
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<th>Myanmar</th>
<th>Thailand</th>
<th>Viet Nam</th>
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</thead>
<tbody>
<tr>
<td>Crystalline methamphetamine</td>
<td>1</td>
<td>2</td>
<td>•</td>
<td>•</td>
<td>7</td>
<td>3</td>
</tr>
</tbody>
</table>

● = Not reported

= 80% treatment admissions
1. Expanding ATS Markets

Combined methamphetamine pill seizures in China, Lao People’s Democratic Republic, Myanmar and Thailand

Source: DAINAP
1. Expanding ATS markets

ATS labs busted in E/SE Asia

<table>
<thead>
<tr>
<th>Year</th>
<th>2005</th>
<th>2009</th>
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<tbody>
<tr>
<td>Labs</td>
<td>49</td>
<td>458</td>
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</tbody>
</table>

Meth pill press seized outside of Bangkok – Sep 2011
Source: The Nation
1. Expanding ATS markets

“Traditional” producers
- China
- Myanmar
- Philippines

Emerging producers
- Indonesia (crystal + “E”)
- Malaysia
- Cambodia

Main source for SE Asia
Precursors from China, India, Thailand
1. Expanding ATS markets

China: ATS seizures, 2001-2010

Source: DAINAP
1. Expanding ATS markets

THAILAND

Thailand: seizures of crystalline methamphetamine, 2004-2010

Source: DAINAP
2. Crystal Meth

- Viet Nam: “significant increase in use since 2008”
- Main drug of use in: Brunei, Cambodia, Japan, ROK, Philippines
3. Inter-regional trafficking by TOC groups

Case Study: JAPAN

**Sources of methamphetamine trafficking to Japan, 2010**
- China: 17.8%
- Taiwan Province of China: 10.4%
- Hong Kong, China: 6.7%
- UAE: 8.1%
- Malaysia: 6.7%
- Benin: 5.2%
- Mexico: 4.4%
- Thailand: 3.7%
- Others: 29.6%

**Seizures of methamphetamine in Japan by African country of origin, 2008-2010**

- 2008 First Half: 8 kg
- 2008 Second Half: 10 kg
- 2009 First Half: 2 kg
- 2009 Second Half: 8 kg
- 2010 First Half: 2 kg

Source: JNPA, 2011

Source: JCTTAC, 2010
3. Inter-regional trafficking by TOC groups

AFRICAN TOC groups

• Hitherto traffic primarily cocaine and heroin
• Diversifying into the region’s lucrative meth trade
• Trends:
  • multi-kilo
  • transported by air hidden in luggage
• Couriers transit via West Asia, East Africa and Europe
• Main destinations: Japan, ROK, Malaysia, Thailand
3. Inter-regional trafficking by TOC groups

**IRANIAN TOC groups**

- Turkey: ATS by land – then by air to East and South-East Asia
- Iranian TOC couriers arrested – Azerbaijan, Indonesia, Japan, Malaysia, Sri Lanka, Philippines, Thailand, and Uzbekistan
  - Thailand – 2009: 8 couriers with **27 kg** crystal meth
  - Thailand – 2010: 79 couriers with **109 kg** crystal meth
4. Shifting trends in precursor trafficking

Pharmaceutical seizures
(millions of pseudo-ephedrine tablets)

<table>
<thead>
<tr>
<th>Country</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
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<tbody>
<tr>
<td>Cambodia</td>
<td>0</td>
<td>0</td>
<td>19.5</td>
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<tr>
<td>Myanmar</td>
<td>9.8</td>
<td>9.4</td>
<td>4.4</td>
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<tr>
<td>Thailand</td>
<td>0.7</td>
<td>1.9</td>
<td>33.0</td>
</tr>
</tbody>
</table>

Source: DAINAP, ONCB
4. Shifting trends in precursor trafficking

Stricter controls over bulk precursors

Shift from bulk ephedrine to pharmaceutical (nasal decongestant) preparations + P-2-P

Myanmar: bottles of ephedrine-containing nasal drops seized in Special Region 1 (Kokang)

Source: CCDAC, 2009
5. Injecting use – methamphetamine

- **Thailand:**
  - 2nd most common mode of administration for crystal meth
  - 3rd most common mode for meth pills

- **Japan:** primary mode of administration for crystal meth

- **New Zealand:** meth = most commonly injected drug
## 5. Injecting use – methamphetamine

<table>
<thead>
<tr>
<th>Country</th>
<th>First report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>2007</td>
</tr>
<tr>
<td>Indonesia</td>
<td>2007</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>2008</td>
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<tr>
<td>Malaysia</td>
<td>2009</td>
</tr>
<tr>
<td>Thailand</td>
<td>2009</td>
</tr>
</tbody>
</table>

Source: DAINAP
1. Background
2. The Big Picture
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4. Regional trends – E/SE Asia
5. Effective responses
EFFECTIVE STRATEGIC RESPONSES

1. Continue to collect data/knowledge
2. Evidence-based prevention and treatment
3. Harm reduction for people who inject drugs
4. Law enforcement
5. Regional LE/prosecutorial cooperation
“It takes a network to defeat a network”
Thank you

globalsmart@unodc.org

More sources for ATS information:

www.unodc.org
www.apaic.org
How we arrive at global ATS estimates

- Seizures of ATS drugs
- Estimated drugs seizure rates
- Seizures of precursor chemicals
- Estimated precursor seizures
- Estimated number of users
- Amount typically used

Global ATS production estimates

Global seizures of ATS

ATS Consumption

ATS precursor seizures
Main health risks

Effects are a function of dose and frequency of use

- Risks associated with injecting ATS and sexual risk taking
- Mental health – paranoid reactions, hallucinations, anxiety, depression, psychosis
- Agitation, aggression, violence and crime
- Sleep and nutritional disorders
- Skin disorders and oral health problems
- Memory and cognitive impairment
- Premature delivery and low birth weight
- Child neglect and abuse, domestic violence
- Relationship and family disruption
- Polydrug use, dependence
- Cardiac, neurologic and pulmonary disorders
ATS: unique characteristics

• Unlike plant-based drugs – can be manufactured anywhere
• Can be manufactured from a large variety of precursor chemicals
• Needs little knowledge of chemistry
• Labs can be located close to markets – reduce risk of seizure
• No longer a purely “cottage” industry
• High profit – Low risk – manufactured and marketed by TOC groups
• Hitherto “ignored” – focus on heroin and cocaine
• Threat to health – treatment admissions