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"In fact, then, the “co-operative international effort” in this matter extends much beyond the area of actual ratifications.” – Opium Traffic Section, Secretariat of the League of Nations, Geneva, 1937.

This remark by the Secretariat of the League of Nations in a “Historical and Technical Study” of a then new international drug control Convention applies to any international treaty. In the field of international drug control and crime prevention, Governments have collectively endeavoured to employ different mechanisms to secure practical means for international co-operation.

This year will witness some major events in the region.

The Eleventh United Nations Congress on Crime Prevention and Criminal Justice takes place in Bangkok, Thailand, in April. The Senior Officials Meeting of the six countries of the Greater Mekong Sub-region that signed the Memorandum of Understanding (MOU) on drug control, followed by its Ministerial-level meeting, will take place in Siemreap, Cambodia, in May. The Second Congress for the ASEAN and China Cooperative Operations in Response to Dangerous Drugs (ACCORD) will be held in Beijing, China, in September. In addition, a number of other regional events at the working level continue to take place, some new and some recurrent.

The UNODC Regional Centre for East Asia and the Pacific continues to take an issue- and result-oriented approach, focusing on cross sectoral and inter-regional linkages. In doing so, the Regional Centre would utilize potential opportunities to address a priority need for integrated approaches toward international drug control and crime prevention in its work with drug control authorities, with segments of international events, with various partners through project activities, including civil society. We aim at systematic approaches in assisting, and working with, Governments in drug law enforcement, demand reduction, sustainable alternative development replacing illicit drug crops, and in taking measures against transnational organized crime, trafficking in human beings, corruption, and terrorism.

Such issues require varying degrees and different types of interventions, which are often interlinked.

I would like to reiterate a multi-agency approach through appropriate “networking” between international bodies, competent national authorities and, also importantly, with civil society. This year, we intend particularly to focus on, among others, networking with, and among, civil society in various sectors of our work, in addition to governmental agencies.

For that reason, we have chosen ‘networking’ as the thematic focus for this issue of the Eastern Horizons: “Networking to Make a Difference”. Together, we hope to register concrete footsteps in making a difference in our various fields of work.

Akira Fujino
Representative
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Bangkok
Networking is probably one of the reasons why the Yayasan Cinta Anak Bangsa (YCAB) has achieved so much since it was established in 1999. It would almost be impossible to promote a drug-free lifestyle in a vast and varied country such as Indonesia, without the support from various sectors. The need for networking is, and always will be, essential to us.

‘Network’ is an interesting word comprising of net and work. The word ‘net’ is defined as “knitted together for a meaningful purpose” while ‘network’ is defined as a “complex system of lines that cross” or alternatively “a connected system”. The similarity of the meanings of these words in the context of YCAB’s work is astounding.

How does this relate to drug prevention?

Imagine a fisherman who works together with other fisher folks to catch fish to feed their families. An expert fisherman can have a few catch. However, if he works with others, there would be more catch.

Instead of catching fish, YCAB tries to capture the hearts and minds of young people so that they could remain free from drugs. By capturing young hearts, we can better protect the youth from drugs, HIV/AIDS, and other sexually transmitted diseases (STDs) which are all dangers besetting a youthful life.

Fishermen often use different types of net to catch various fish species.

In YCAB’s experience, it is very important to first capture the hearts of stakeholders. Most of the people I have met in my work are parents. The issue of drug abuse and HIV/AIDS is something that all responsible parents should think about as their children grow up. YCAB works closely with parents to help them help their children.

YCAB also wants to capture the interest of civil society. In doing so, it uses a different net. Without civil society support, YCAB would have no funding from the private sector, no government approval for its programmes, and no support from international organizations.

Networking is working together and finding the leverage that can be mutually beneficial to all parties concerned. To successfully work with the private sector, one must realize that this sector is profit-oriented. It would be naive to expect companies to simply give away hard earned money with nothing in exchange.

How can the private sector profit in drug prevention?

The key to work with donors/sponsors is to find the right leverage! Something should be profitable for both parties. In our experience, YCAB capitalizes on advertising to encourage corporate sponsors to get involved. Often, YCAB displays the logos of companies during mass campaigns, prints these in the newsletter, helping them receive recognition and gain a reputation as a socially responsible organization.

YCAB offers value. Displaying company logos on the backdrop of our campaigns has a great promotion value. Usually, there will be at least 1,000 to 5,000 people present during these events.
The quarterly newsletter, ‘Lentera,’ with a circulation of 10,000 copies is a good way to promote sponsors as the publication is distributed to 27 countries. In our experience, getting cash without any means of an ‘exchange value deal’ is difficult. Nowadays, ‘chipping in’ is even more popular instead of just one person or institution shouldering all costs. Usually, both parties equally share in the costs.

Fishing requires a good net. In the case of YCAB, the net consists of good track record, responsible performance, professionalism, and integrity. An organization’s track record, professionalism, and its reputation is the result of hard independent work. This is crucial to show the organization’s persistence, consistency, and commitment in putting words into actions. Performance and integrity is all about doing the job responsibly and with total transparency, complete documentation, and timely reporting of results.

Networking as ‘a complete system of lines that cross’ in drug prevention, is the connection between donors to volunteers, from local government to international agencies, from individual experts to international networks, schools, communities, businesses, religious centres, all working together for a common cause. Identification of the stakeholders and getting them involved into the network, and finding the right leverage or “the crossing lines” are all crucial for the long-term development and scaling up of our programmes.

Networking as staying connected in the system is the need for all the ingredients of the network to be ‘glued’ together in order to stay connected: having common grounds and the accepted means to deal with the issue at hand, the understanding of the political situation, distribution of power and the international interests – all crucial to maintain the cohesiveness of the network.

This is networking – the YCAB way.

Veronica Colondam is married with three children: Philmon Samuel, Adellene Odelia, and Joseph Ian. Her husband, Pieter Tanuri, is a local businessman.

“Drug problems are family problems. I believe parents share at least 50 percent of the guilt if one of their children uses drugs. As a mother of three, I want to share my concerns about the pressures my children will one day face and rally people to do something today for the sake of our children’s future.

Let us work together to educate the youth about the dangers of drug abuse, find meaning in life by giving meaning to the lives of others, marshal the resources and the power of civil society to bring changes.”
The Swedish International Institute of the IOGT-NTO movement has started cooperation with new partners in Southeast Asia on a regional information, action and networking project to counter drug abuse. Called the Regional Information and Action Networking for Drug Abuse Control (RIAN DAC), the programme has two components: drug control in communes and villages managed by the villagers themselves and a media programme for the youth.

The regional programme is funded by the Swedish International Development Cooperation Agency (SIDA). The Community-Based Drug Abuse Control (CBDAC) Project, is working with communities that have drug problems and engaging the whole community in drug prevention. The Media Programme is a drug information packet using media to activate and involve youth in schools and universities, as well as teachers, parents and authorities in drug prevention activities.

**Community-Based Drug Abuse Control (CBDAC)**

CBDAC started in 1996 in northern Thailand as a small project covering six villages of different ethnic minorities. In 1999-2001, the pilot project RIAN CBDAC was carried out in the Mae Hong Son province, situated in the border areas between Thailand, Myanmar and Lao PDR, in northeast Thailand.
with support from the German Agency for Technical Co-operation (GTZ). The project started with the serious drug problems in the province and aimed to increase people’s influence over their own lives by engaging them in drug preventive work.

Experiences and lessons learned from the pilot project have been documented and during 2002 and 2003, the network has grown like a social mobilization movement and nearby communities became interested to be part of it. Today, the network includes 123 villages.

The experiences of the residents in the mountain villages and the knowledge generated by the project management and field staff, including materials and methods, will be used as a model for the implementation of similar projects in Cambodia and Viet Nam. The strength of the project in Mae Hong Son is the local networking among the villagers, characterized as strong and supportive of each other.

Today, most of villages in the network are free from drugs. When a drug-related problem occurs, villages take action at an early stage. The project and the network are ready to share information and resources and work with other organizations in the region through its Project Manager, Mr. Naret Songkrawsook (naret@-raindac.org or naret@iogt-riandac.org).

CBDAC Thailand and the Mae Hong Son Hill Tribe Network is being supported by SIDA in consolidating its experiences in networking in the region and the results of its action research. The project will document the results and the knowledge accumulated about their culture and traditions as a factor in solving drug-related problems.

CBDAC Cambodia will be implemented by the Punleu Komar Kampuchea Organization, in cooperation with the National Authority for Combating Drugs. It has selected one commune and nine villages for the first phase of the project.

CBDAC Viet Nam will be implemented by the Department for Social Evils Prevention under the Ministry of Labour, Invalids and Social Affairs. The People’s Committee at the district and commune levels will implement the project in two communes and nine villages.

**Media Programme Viet Nam**

The media component has been developed to a model from experiences in Viet Nam. The IOGT-NTO movement, IOGT Viet Nam, the Ministry of Education and Training (MoET), BHD Co., Ltd. (a media corporation), Association of Theatrical Artists (ATA), VTV (Viet Nam TV) and Voice of Viet Nam (state-owned television and radio) have run a project with drug information for youth via national media since 2001. A total of 52 TV programmes of “Stolen Moments” have been recorded at universities in Viet Nam. The programmes feature drug information, interactive theatre, celebrities (role models), and quizzes on drug issues. Every programme has been followed up in a radio programme.
In the second phase of the project, IOGT Viet Nam has trained and equipped a mobile youth team to follow up the programmes. This team shows programmes from the series and provide discussions around their contents.

The media project in Viet Nam has reached an estimated 5.6 million people. Responses have been sent to the radio for follow-up, and positive comments have been received. The project has also created good links between movie actors and actresses that otherwise seldom cooperate. There have been requests from Cambodia and Lao PDR for the same project.

The media model is focusing on pupils and students in primary, high school, university levels and consists of three main components: TV-programme which combines forum theatre, quiz/game show, and performance by famous national artists to attract the youth and effectively communicate information.

The model will be used for implementation in Cambodia and Lao PDR.

**Media Cambodia**

The project has selected two main partners for the media project implementation in Cambodia: Khmer Youth Association for the youth mobile teams and the Women’s Media Centre for the radio programmes. Discussions are ongoing with the national TV-channel TVK on the television shows.

**Media Laos**

A pre-study has been carried out in Lao PDR in December 2004 and an initial meeting with important stakeholders was held in Vientiane in March 2005. The Lao National Commission for Drug Control and Supervision will play a coordinating role. Implementing partner is the Participatory Development Training Centre. Other organizations will be involved in the implementation of the project such as the Lao National Radio, Ministry of Education, and the United Nations Office on Drugs and Crime. A training on the media model and experiences from Viet Nam will be held in Hanoi in May.

**Networking and information sharing**

Learning and sharing from each other in both CBDAC and the Media Programme remains to be the core strategy of RIAN DAC. Using CBDAC and Media Programme as models, best practices could be implemented and lessons learned and shared. Duplicating a model per se may not work in other areas. The steps, methods, and tools used and employed may need to be adjusted in other situations.

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Countries Express Need for Continued Cross Border Cooperation

By Songsatit Kittikhunwatchana
UNODC Regional Centre

Expectations on regional cooperation, role of the United Nations Office on Drugs and Crime (UNODC) Regional Centre for East Asia and the Pacific, national governments, and counterparts highlighted the discussions of 31 senior drug law enforcement officials involved with cross border cooperation related to the Border Liaison Office (BLO) mechanism. In a brainstorming workshop held in Pattaya, Thailand, 26-28 January 2005, the participants pointed out how they perceived the future of regional cross border cooperation.

The country representatives stressed that future successful cooperation develops on improved communication between counterparts and the establishment and continuation of trusting and open working relationships. While communication between many BLO counterparts was good, more could be done in some BLOs. All participants were keen to see information exchanged quickly and relayed to the right people.

Several participants linked enhanced cooperation with an expansion in the role and the increase in number of BLOs. The chances of further successes and future cooperation would be enhanced if more BLOs were established in areas recently identified as prone to cross border trafficking. Some participants stated that presently there is too much staff turnover within several countries resulting in disruptions and affected the ability of counterparts to develop trusting relationships.

Role of UNODC

Participants expressed the need for UNODC’s continued ‘coordinating role’, ensuring multilateral cooperation, helping carry out appropriate training of BLO staff, organizing regional meetings, fostering communication between countries and informing them of the latest drug trends and providing a ‘central’ information-sharing mechanism.

The country representatives also viewed UNODC’s informal evaluation role and suggesting areas for improvement. Countries mentioned the important civic awareness function that UNODC carries out. This was especially important when garnering support for BLOs from national governments. Participants expressed the opinion that the future success of BLOs was, to some extent, dependent upon UNODC continuing to carry out an ‘advisory’ and ‘civic awareness’ role.

Role of national governments

Participants were of the opinion that the financial and technical support of national governments would help ensure the future effectiveness of BLOs.

They emphasized the need for their respective governments to coordinate at a national level with their counterparts. Important policy issues impacting upon relations with other countries must be resolved nationally. Likewise, domestic penal laws, international conventions and other legal agreements relevant to countering drug trafficking, and the operation of BLOs, can only be negotiated at a national level. The participants expressed and recognized the need for civic awareness in promoting anti-drug messages. A determined anti-drug approach will result in increased community support for BLOs.

Role of counterparts

The country representatives expected their counterpart BLOs to be helpful, competent and efficient. They expected to see BLOs manned by well-trained officers responsive to requests for information and open to sharing intelligence.

The need for increased joint operations among several BLOs was highlighted.
BLOs: Problems & Opportunities

There continues to be numerous large drug seizures throughout the sub-region as a result of cross border cooperation between border liaison offices (BLOs). Most of these seizures involved amphetamine type stimulants. The number of officers receiving computer-based training on drug law enforcement continues to increase. New BLOs have been established in various countries in the latter half of 2004 while several countries have formulated plans to establish new BLOs within their borders. Countries continue to hold bilateral and trilateral meetings with counterparts and conduct study visits to neighboring BLOs. Joint investigations have been carried out between majority of BLOs.

Problems

- The frequent turnover of staff in several BLOs created difficulties in fostering trusting working relationships.
- BLO staff have difficulties with cross border travel. Often, travel across borders cannot be organized in a timely fashion with counterparts or achieved with sufficient personal security guarantees. In some countries, BLOs are located far from their counterparts on the other side of the border. This makes frequent travel between BLOs difficult.
- Language differences in several regions impede the prompt exchange of information and obstruct the establishment of trusting working relationships between counterparts.
- Many BLOs lack sufficient financial support from their own national governments; some are not well-equipped with operational equipment.

Opportunities

- Trusting and open relationship can only be established by increased interaction between and among counterparts. This could be achieved with a simple and inexpensive communication system to overcome language differences. The ability to communicate freely among counterparts with the right level of authority and competence need to be achieved.
- More research needs to be carried out on any potential expansion of BLOs into airports and seaports.
- It is necessary to achieve a low level of staff turnover. Turnover is often due to promotions, operational requirements, or a desire by individuals to work elsewhere. There is difficulty in retaining staff at BLOs because of its remote location, often far from the capital city.
- Emphasis must be placed on ensuring greater cross BLO assistance within countries. It is desirable that staff from established BLOs exchange their experiences with new BLO staff and spend time with them. The same type of equipment and resources should be used across BLOs.
The discovery and dismantling of the clandestine laboratory in Mandaue City in Cebu Province, the Philippines on 14 September 2004 is a case of partnership at work.

The operation was covered by Case Operation Plan Red Crystal with Philippine Drug Enforcement Agency (PDEA), Philippine National Police (PNP), Drug Enforcement Administration (DEA) Manila Country Office and Hong Kong SAR Country Office, Hong Kong SAR Customs and Excise Department, Royal Malaysian Police (RMP), Anti-Smuggling Bureau of China and Macau SAR Judiciary Police as partners. This operation showed how law enforcement principles are applied in multi-jurisdictional operations.

The operating units followed two techniques that were found very effective in locating clandestine laboratories in the Philippines. These are to follow the chemists and the chemicals.

From December 2003 to August 2004, PDEA had been monitoring bulk purchases of acetone and hydrogen gas, both essential chemicals in the production of “shabu” in Cebu City in Central Philippines. Confirmation on the presence of a clandestine laboratory in Central Philippines came from a PDEA informant who revealed the shipment of palladium chloride from Hong Kong SAR which was sent through a courier service on two occasions in August and September 2004.

Surveillance operations during the delivery of the palladium chloride in Cebu City led to the identification of the operator of the clandestine laboratory. Weeks of surveillance on the alleged operator led the investigators to a possible clandestine laboratory in Umapad and in Paknaan, both in Mandaue City, Cebu Province.

On 24 September 2004, a search warrant was obtained from a judge in Quezon City and served on the same day by agents of PDEA and PNP with the assistance of DEA Manila Country Office. As a result, 11 persons of different nationalities were arrested. Additionally, 550 litres of liquid methamphetamine hydrochloride, 675 kilograms of chloroephedrine, chemicals, and equipment were seized.

Investigation revealed a well-funded drug manufacturing organization, which has been the subject of monitoring by DEA, Hong Kong SAR Office, and Hong Kong SAR Customs and Excise Department upon request of PDEA since the early part of 2003. The drug leader was later arrested by the Hong Kong SAR Customs and Excise Department on 29 September 2004 while attempting to return to Macau SAR. Found in the leader’s possession were illegal drugs, US$90,100 and HK$124,189 cash and bank accounts in Hong Kong SAR, Macau SAR, and China totaling HK$11 million.

Parallel investigation by US DEA, Hong Kong SAR Customs and Excise Department, Royal Malaysian Police, Macau SAR Judiciary Police, and Singapore Narcotics Bureau were held. Notable were the prompt actions by the PDEA partner agencies in support of the Philippine case.

- US DEA was part of the operation every step of the way providing intelligence, equipment, liaison assistance as well as sharing its expertise in clandestine laboratory operations. It also acted as the communication link among participating agencies.

- The Hong Kong SAR Customs and Excise Department arrested the suspect and recovered pieces of evidence material to the Philippine case. The
Phosphate and Hong Kong SAR Governments are now working to extradite the suspect to the Philippines and seize his assets in three jurisdictions in the region. It must be noted that the Philippines and Hong Kong SAR have existing extradition and mutual assistance treaties that make transfer of fugitives and sharing of evidence possible.

- The Royal Malaysian Police arrested two females associated with one of the suspects in the Mandaue City laboratory.
- The Macau SAR Judiciary Police is helping the Philippines investigate the assets and bank accounts of the main suspect.
- The Singapore Narcotics Bureau sent two clandestine laboratory experts who helped in processing the laboratory.

The experiences of PDEA in many joint operations with other countries validate the principles such as: laying the legal basis and groundwork for cooperation, proactively targeting transnational drug groups, working with partners to overcome national limitations and tight coordination among cooperating parties involved. These are not new principles. They are basic law enforcement principles that are updated to suit the needs of the new environment drug law enforcement officers are working in.

PDEA Experience

The Philippine drug situation can be better understood if it is taken in the context of the overall drug situation in East and Southeast Asia, which experience the problem of amphetamine type stimulants (ATS).

One important indicator of the seriousness of the problem is the number of dismantled methamphetamine clandestine laboratories in the region. In its 2004 World Drug Report, the United Nations Office on Drugs and Crime (UNODC) informed that the largest number of methamphetamine clandestine laboratories dismantled in East and South East Asia in 2002 were recorded by China (13), Myanmar (4) and the Philippines (4). The number however showed a big drop compared to the previous year (44 in China, 10 in Thailand, 5 in Myanmar, 3 in the Philippines, and 1 in the Republic of Korea).

In 2003 and 2004, the Philippines dismantled 22 methamphetamine hydrochloride clandestine laboratories.

Overall seizures of amphetamine (combined methamphetamine and amphetamine and excluding ecstasy) have shown a clear concentration in East and South East Asia, accounting for 14,124 kilograms or 64% of the global seizures of methamphetamine for 2002.

Traffic Shabu

The smuggling of big shipments usually occur in the vast and relatively unguarded shorelines of the country. “Shabu” enters the Philippines mainly through the international seaports and the vast expanse of the Philippine coastlines. Philippine international airports, and the main and parcel services, also account for some smaller volume seizures.

The use of the Port of Manila, trafficking 158 kilograms of shabu in two different occasions in 1999 as well as the 296 kilograms and 69 kilograms seizures in February and October 2004, respectively, showed the inclination of the drug syndicates to use the ports as a major avenue for trafficking dangerous drugs. The recent seizure of 1,064 kilograms of ephedrine concealed in drums labeled as stable bleaching powder at the Manila International Container Port in November 2003 and the seizure of shabu manufacturing equipment after the shipment left the port area in October 2003, showed that even precursors and clandestine laboratory equipment are being illegally imported through the international ports.

Major drug shipments intercepted by law enforcement authorities for 2001 were the 503 kilograms of shabu seized in Real, Quezon in October and the seizure of 350 kilograms in San Narciso, Zambales in November. There has been no big volume seizure of dangerous drugs through the shorelines since then.

**Philippine Drug-related Initiatives with International Organizations**

- Signing of the Memorandum of Understanding on Combating Transnational Crimes with the Australian Federal Police
- Signing of the Memorandum of Understanding on Combating Maritime Drug Trafficking with the Japan Coast Guard and Memorandum of Understanding on Assistance on Drug Control Programme with the Japan International Cooperation Agency
- Active participation in the annual International Drug Enforcement Conference, wherein the Philippines is now the Chair of the Far East Working Group; Asia-Pacific Operational Drug Enforcement Conference; Anti-Drug Liaison Officials’ Meeting for International Cooperation; and the International Narcotics Control Board, and the United Nations Office on Drugs and Crime
- Bilateral treaties on extradition and mutual legal assistance with other countries
- Capability enhancement and training with partner agencies
The Royal Government of the Kingdom of Cambodia ratified all three international drug control Conventions (1961, 1971 and 1988) in early April 2005. This major step forward in Cambodia’s regional and international commitment to the control of drugs comes as one of the principal outputs of the United Nations Office on Drugs and Crime (UNODC) national capacity building, “Strengthening the Secretariat of the National Authority for Combating Drugs (NACD) and the National Drug Control Programme of Cambodia,” which is executed by the UNODC Regional Centre for East Asia and the Pacific through its project office in Phnom Penh.

The process of actively seeking ratification of each of the three Conventions began in late 2002 when the Secretary-General of NACD, H.E. Lt. Gen. Teng Savong, decided that a concerted effort was required to bring Cambodia into line with most of its regional and global partners in the fight against illicit drug trafficking and to clearly demonstrate to the international community that the Government of Cambodia was serious about combating such activities. This followed ongoing advocacy initiatives by the UNODC Project in Cambodia, as well as those in the diplomatic corps.

However, the process of ratification was caught up in political difficulties experienced after the national elections in Cambodia of July 2003 that resulted in the National Assembly not being able to meet for almost one full year. The Assembly plays the key role in reviewing all aspects of each of the three Conventions and then voting on whether to accept them into law. This was finally accomplished on 25 February 2005, followed by a further review by the Cambodian Senate on 16 March 2005.

The final step to ratify all three Conventions took place on 5 April 2005, when His Majesty King Norodom Sihamoni formally signed the official papers that adopted all three Conventions into Cambodian law. A standard notification letter from the Royal Government to the United Nations Secretary-General Kofi Annan, is now nearing completion so as to allow Cambodia to be internationally recognized as a state party to each of the three Conventions.

The next steps include technical support from UNODC and other experts in the region and beyond to assist Cambodian institutions to adhere to all aspects of each of the three Conventions. Such work will be undertaken as part of the newly completed five-year drug control master plan for the country developed by NACD with the support of the UNODC national capacity building project.
UNODC and UNIDO Ink Agreement on Drug Trafficking

Recognizing the complementary relationship between industrial development, drug control and crime prevention as vehicles for poverty alleviation, enhancement of human security, economic growth and sustainable development, the United Nations Industrial Development Organization (UNIDO) and the United Nations Office on Drugs and Crime (UNODC) signed a Memorandum of Understanding (MOU) laying the groundwork for a new partnership between the two agencies.

Antonio Maria Costa, UNODC Executive Director, and Carlos Magariños, UNIDO Director-General signed MOU for joint programmes in alternative livelihood and crime prevention in Afghanistan, Colombia, Lao PDR, Morocco and Nigeria. Through MOU, joint work to promote preventive measures against corruption and corporate social responsibility will be implemented, including initiatives for an ecologically safe disposal of chemicals.

UNIDO aims to improve economic development of small- and medium-sized business enterprises, to assist agricultural development in the private sector, and to eliminate corruption to improve industrial performance. For UNIDO, this cooperation agreement is a new one in the series of strategic partnerships in the United Nations Reform context, following those already concluded with the World Trade Organization (WTO) and the United Nations Development Programme (UNDP).

The main focus of UNODC will be improving disposal of seized narcotics, and ensuring that the methods of disposal adhere to UNODC’s sustainable livelihood policies. UNODC will also work to improve the efficiency of criminal justice systems in developing countries. Both organizations will work together to improve technical research and analysis and to better control the disposal of chemicals locally and globally.

Officials of Drug Control Authorities Prepare Project Documents

Participants of the six-day project management design and training workshop held in December 2004 applied the skills they have acquired during the consultative project formulation workshop held in Kunming, Yunan, China, 1-4 February 2005. The project formulation workshop was hosted by the Chinese Government in support of the Memorandum of Understanding (MOU) on Partnership in East Asia and the Pacific.

While the United Nations Office on Drugs and Crime (UNODC) Regional Centre for East Asia and the Pacific has conducted project management design and training workshops in the past, this was the first time that drug control personnel from Cambodia, the People’s Republic of China, Thailand, Viet Nam and Myanmar had the opportunity to apply the skills and knowledge they have learned in a previous workshop.

The workshop in Kunming enabled the participants to do consultative hands-on experience drafting of the project documents based on the project ideas prioritized and endorsed by the Senior Officials Committee.

The workshop participants prepared the project documents on “Improving access for young people with ATS abuse to effective treatment, and “Enhancement of the judicial sector on law enforcement capacity, mutual legal assistance and subregional cooperation in East Asia.” The project documents will be presented for approval by the MOU participating governments during its meeting in Siemreap, Cambodia in May.
As a result of a 2004 survey of ACCORD web site users, a new and improved web site will be launched in May 2005. The upgraded ACCORD web site combines the most useful features from the old site with new and improved services. These include:

- **ACCORD Monitoring**: Up-to-date information from all 11 ACCORD countries under the four pillars of the Plan of Action—Civic Awareness, Demand Reduction, Law Enforcement, and Alternative Development.
- **Information Centre**: Resources related to regional drug control, a regional calendar of events and weekly press summaries with up-to-date news stories from throughout the region.
- **ACCORD Resources**: A one-stop location for information on ACCORD reports and publications, the Business Plan and the status of the ACCORD Account.
Pre-Congress Working Meeting in Siemreap

In preparation for the Second ACCORD International Congress to be hosted by the People’s Republic of China, 6-7 September 2005, a pre-Congress working meeting will take place in Siemreap, Cambodia, 15-16 May. National delegations representing the ACCORD countries as well as experts from throughout South East Asia will update the ACCORD Plan of Action to better reflect the needs of the region. New goals and targets will be identified under all four pillars of the Plan – Civic Awareness, Demand Reduction, Law Enforcement, and Alternative Development and discussions will focus on priority areas for interventions. The updated Plan of Action for the region will be presented at the Second ACCORD International Congress later in the year.

Regional Drug Abuse Information Network Launched

Two projects of the United Nations Office on Drugs and Crime (UNODC) Regional Centre for East and the Pacific have joined to create a sophisticated on-line regional data collection and sharing mechanism. Building upon previous national and regional data collection efforts by the Regional Cooperative Mechanism to Monitor and Execute the ACCORD Plan of Action and Improving ATS Data and Information Systems projects, a workshop was held in Bangkok, 4-5 May as a follow up to the regional data collection meeting organized in January 2005 and hosted by Agensi Dadah Kebangsaan (ADK) in Putrajaya, Malaysia.

At the Bangkok workshop, participants from all 11 ACCORD countries (ASEAN + China) were trained on the new Drug Abuse Information Network for Asia and the Pacific (DAINAP), the on-line national/regional drug data collection and sharing network.

DAINAP is expected to significantly increase and streamline national drug data collection and serve as a platform for true up-to-date information exchange from throughout the region and beyond. Data collected through the network will be presented at the ACCORD Second International Congress in China in September 2005.

Facilitating regional drug data and information exchange is in-line with the goals of the ACCORD Plan of Action and mirrors UNODC’s Executive Director Antonio Maria Costa’s closing remarks at the 48th Session of the Commission on Narcotic Drugs: “Without data, the international community cannot understand or respond to the world drug problem.”

2004 Task Force Consolidated Report Available

The Consolidated Report: ACCORD Task Force Meetings 2004 presents the proceedings from all four 2004 ACCORD Task Force meetings. The report includes all national presentations and a complete listing of all prioritized projects. It is available for download through the ACCORD web site. To obtain a hard copy, please contact the ACCORD Regional Cooperative Mechanism Project, UNODC Regional Centre for East Asia and the Pacific, Bangkok, Thailand.
UNODC Establishes Drug Data Collection and Sharing Information Network

A single internet-based process known as the Drug Abuse Information Network for Asia and the Pacific (DAINAP) was recently developed resulting from the merger of regional data collection activities for the United Nations Office on Drugs and Crime (UNODC) Regional Cooperative Mechanism to Monitor and Execute the ACCORD Plan of Action and the Improving ATS (Amphetamine-type Stimulants) Data and Information Systems projects. This is being done to improve both the efficiency of drug data collection and the speed and quality of data being collected in the region.

With DAINAP, a new data collection form was designed to include the information currently being collected from both ACCORD and the ATS projects. The new form was presented to focal points, which include the ASEAN countries and China, at the Regional Data Collection Work Group meeting held in Putrajaya, Malaysia, 26-28 January 2005.

A work plan of activities and a timetable was developed for the implementation of DAINAP which covers a field test of the data collection form and a training programme. The status of DAINAP and the importance of its output to national and regional public health and safety will be presented at the Second ACCORD International Congress scheduled in September 2005.

In addition to the development of a data collection form, periodicity of data entry needs to be established based on availability of information at the reporting sites. Training on the information process, including concepts, definitions and technology needs, would be provided to the countries. The basic operation of the surveillance network and the salient role that its output represents in directing national and regional drug abuse policy will also be done through the network.

While the focus initially will be on the countries currently participating in ACCORD and the ATS Data and Information Systems projects, DAINAP aims to develop surveillance and reporting processes that could eventually accommodate additional countries covered by the UNODC Regional Centre.

The network is expected to result in the development of a system that will enhance overall regional drug abuse epidemiologic surveillance and, through it, the capability for identification of current trends and emerging patterns of abuse, characterization of vulnerable behavior and risk factors, identification of actual and potential health and social consequences, provision of practical information for the development of treatment and preventive intervention strategies, contribute to the generation of scientific research hypotheses.
The Changing Face of Drug Abuse in Myanmar

By Nikolas Win Myint
UNODC Country Office, Myanmar
Experience has shown that drug abuse increases in areas of production and along trafficking routes. The number of officially registered drug abusers in Myanmar stands at about 70,000 people – a low number considering the country’s population of almost 50 million. Despite this relatively low number, the United Nations Office on Drugs and Crime (UNODC) estimates show that 300,000 people may abuse illicit drugs in Myanmar. The difference may be due to the fact that a substantial number of drug abusers hesitate to undergo treatment since this requires registering as a drug addict with the government and the associated fear of prosecution in case of relapse. At the same time, addicts who fail to register for treatment face penalties, including imprisonment.

Illicit opium production in Myanmar is the second largest in the world. Clandestine manufacture of methamphetamine also takes place in the country. As drug abuse increases in areas of production and along trafficking routes, UNODC Myanmar focuses not just on supply reduction, but on demand reduction as well.

Considering the 300,000 potential addicts, the overall level of drug abuse remains relatively low compared with other countries in the region. However, there are two worrying trends in Myanmar: an increasing shift from traditional opium-smoking towards injecting heroin, and a rise in ATS abuse, especially among youth.

Opiate addicts are by far the biggest group of drug abusers. About 85% of registered drug abusers are opiate addicts, with 40% registered for opium abuse and 45% for heroin abuse.

The Joint United Nations Programme on HIV/AIDS (UNAIDS), World Health Organization (WHO) and UNODC estimate that between 30,000 and 130,000 people are injecting drug users. This is a serious concern as many drug users are unaware of the dangers of sharing needles. Overall, 26% of officially reported HIV cases are attributed to injecting drug use, one of the highest rates worldwide.

The rise in ATS consumption among the youth is another concern. A survey on drug abuse in schools conducted in 2002, indicated that the most commonly abused drug in schools was cough syrup, followed by diazepam, cannabis, ATS, and opioids. The study also showed that ATS was perceived to have a much less dangerous effect than heroin. Given its reputation as a “party drug,” it is particularly the younger population that is at risk of falling prey to the dangers of ATS abuse.

In response to these trends, Myanmar has stepped up its responses to drug abuse as part of the government’s 15-year drug eradication plan which began in 1999. Today, the government operates several drug treatment centres throughout the country, with detoxification treatments for about ten weeks. In addition, the Department of Social Welfare operates a number of rehabilitation centres for ex-addicts. However, the relapse rates of both voluntary and obligatory treatment are high: 60% to 70% of patients relapse within a month of discharge.

A continued focus on preventing abuse and addiction in the first place thus remains essential. Beyond supporting activities in this area, UNODC is also piloting new types of treatment that focus on rehabilitation and that actively involve the families of addicts and their communities. Through advocacy for new types of treatment and by demonstrating their effectiveness, UNODC is working to develop and support more effective treatment for drug abusers in Myanmar.
The Government of the Lao PDR is well on its way to eradicate opium cultivation by the end of 2005. This will remove 5 tons of heroin from the international drug market. It also means that thousands of villagers are provided the opportunity to get out of the poverty trap caused by opium.

Lao PDR is the third highest illicit opium producing country in the world. It is also one of the world’s least developed countries. According to the Human Development Index for 2004, Lao PDR ranked 143rd out of 173 countries. Poverty is a central issue, and poverty alleviation in the mountainous northern provinces is not possible without addressing the opium issue.

Seven years ago, the United Nations International Drug Control Programme, now the United Nations Office on Drugs and Crime (UNODC) annual opium survey showed that about 27,000 hectares were being used for opium poppy cultivation in the country’s ten northern provinces. Over 70,000 households were involved in more than 2,000 villages. Out of the total yield of 120 tons, 70 tons or almost 60% was being consumed domestically.

In 1998, the total number of addicts reached over 62,000 people - almost one addict per household. These households gradually became poorer as their fields, livestock, and assets shortly disappeared into the opium pipe. Thus, without detoxification, development initiatives by the village itself or by outsiders will have little impact.

Opium addiction rates for Lao PDR were among the highest in the world, surpassed only by the Islamic Republic of Iran and Pakistan. As a consequence of smoking opium themselves, and of low farm gate prices, the opium poppy cultivators usually only obtained a limited portion of their income from their crop. Contrary to common beliefs, villages in Lao PDR where opium cultivation is present have an overall household income which is 6-7% lower than that of their non-opium growing counterparts.

Opium addicts are heavy burdens for their families who must work to provide the opium supply, leaving little time for the children and agricultural activities.

According to the 2004 opium survey, the area used for opium poppy cultivation has decreased to 6,600 ha in 850 villages. Addiction has decreased and today, Lao PDR hosts 28,000 addicts. These numbers are reported to decrease further in 2005.

For most communities that have received assistance as part of the balanced approach to opium elimination, the story is a happy one.

The balanced approach to opium elimination propagated by UNODC, the Lao Government, and its partners over the years, have shown that these
Aisaeng is a small village inhabited by and belonging to the Lahu ethnic minority in the Long District of Luang Namtha province. The village is located on a mountainous slope overlooking a valley. It is 15 km from the Myanmar border and is in the heart of “The Golden Triangle.”

Looking at the village today, it is difficult to imagine that every household had at least one opium addict three years ago. They had no land as this was rented out to larger neighbouring villages of the Akha minority who grew opium poppies in the fields. The villagers, mainly women, would labour on the fields of their Akha neighbours in exchange for opium and rice. They led difficult lives, leaving their homes before sunrise to work for opium to give their husbands. They would be beaten if they did not return to their homes on time or there was not enough food on the table.

The addicts, who were predominantly men, were too weak to work so the children would collect firewood and food in the forest. Life was an endless cycle of addiction, conflict, and misery.

Today, with the help of UNODC-assisted initiatives, the village has undergone community-based detoxification, reclaimed their agricultural fields, and villagers are gradually improving their livelihoods. The villagers happily report that they feel stronger and healthier.

Many of the wives said that their husbands are stronger now and don’t smell bad.

Despite these happy faces, life in this village was not totally new. One of the poorest households is that of Mr. Posaeng (not his real name) who make people believe he no longer smokes opium. His wife has undergone her second detoxification and nursing their tenth child. The other children pound rice, salt and chili—all they have for a meal. The wife laments that the family does not have enough rice during the year. The children usually go to the forest to collect bamboo shoots and taro. Mr. Posaeng rarely leaves the house because of his addiction except on a few occasions when he labour for opium. The household’s survival practically depends on the older children.

Today, only one third of the affected communities are reached by development initiatives.

Aisaeng Village is representative of the majority of former opium-growing villages in northern Lao PDR. Opium elimination has helped the village attain a higher degree of food security, health and safety. Yet, the sustainability of the successful opium poppy elimination lies in the commitment of the international community in supporting the programmes for the elimination of poverty and drug addiction in these former opium poppy growing areas.

The destination of opium in a highland village

Nowadays, most of the opium is consumed within a village itself. About one fourth is usually left for exchange or sale outside the village, a part of which will eventually leave Lao PDR to be consumed abroad.

Most addicts started to take opium as medicine to relieve common ailments such as coughs, diarrhea, aches, and pains. In these cases, it is mixed with aspirin powder. For relieving headaches, a ball of opium is placed on the temple after pricking it with a needle. In fact, whenever a disease cannot be cured by spiritual rites conducted by the shaman, priest, or traditional medicine man, opium is used to relieve the symptoms. Addiction soon follows. Women who work in the fields during the three-week opium poppy harvest period come home to feed their families with their hands impregnated with opium—also contributing to the spread of addiction in the household.

Exchange of surplus opium takes place with traders from the Myanmar and China border areas. Although exchange also takes place during the harvest period, lowland women come to the fields and sell ready made meals, cakes and sweets paid for by opium instead of cash. This opium is then used to pay the opium poppy growers some weeks or months later when they provide agricultural labour in the lowland villages. The system makes it extremely difficult for highland villagers to break free from their own addiction.
Addictive Drugs in the Klong Toey Slum Communities ...

For How Long Will the Demand Ease?

by Prateep Ungsongtham Hata
Secretary General
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The policy of the Royal Thai Government, led by Prime Ministe Thaksin Shinawatra, to solve the illicit drug problems was a declaration of a war against drugs.

From February to October 2003, a total of 24,944 drug dealers were arrested and a total of 43,783 people involved in illegal drugs trading stopped their activities and turned themselves into the police. Of this number, 31,472 received remedial training under the “Klong Karn Tham Kwam Dee Peu Pandin” programme (“Doing the Right Thing for Our Nation” programme). The Special Affairs Division, Bureau of Policy and Strategy, Office of the Permanent Secretary announced that a total of 325,541 drug addicts reported to the police.

There is also a total of 167,443 prisoners in jail. According to a report of the Department of Corrections, so far, the courts have sentenced 128,048 of these prisoners, of whom 80,040 were punished for drug-related offences.

During the three-month crackdown in the war against drugs, there were 2,598 reported murder cases all over Thailand. Of this number, 1,329 deaths were related to illegal drugs. Of this total, 72 people were killed by the police (figures from Independent News Network).

In Bangkok, the Klong Toey slum was designated as a target area for the drug cleanup. This congested area harboured drug addicts, while drug dealers brought drugs there to hide for later distribution throughout the city.

Poverty and drugs

Wherever there is tension and poverty, drugs are usually present. The Klong Toey slum communities are the home of workers who provide labour for meagre incomes. They live on land belonging to the Port Authority of Thailand (PAT). For more than 50 years, slum residents have worked at PAT, providing a cheap and steady labour supply.

Due to poverty, slum dwellers have to struggle to survive in the urban society, having to contend with insufficient services, including clean water, electricity, walkways, drainage, garbage collection, and education for their children. In addition, children and young people in the communities lack playing fields and other recreational opportunities.

From a very young age, children are exposed to alcohol, cigarettes, gambling, and addictive drugs. Poor people, lacking education and living in tense conditions, are easily susceptible to becoming victims of illegal drugs. When they start to become addicted, they need to find money to buy more drugs, and eventually they become drug dealers themselves. Thus, in the slum communities, there are small drug dealers who are also users, and their number has increased rapidly.

Community residents in the fight against drugs

When drug usage became widespread after the slump of the Thai economy in 1997, methamphetamines replaced heroin, as the latter was too expensive for drug users to afford. Drug sellers then targeted teenagers as a market for methamphetamine. Addicted teenagers began selling drugs themselves. Anyone who walked into the slum was invited to try drugs, until residents said drugs were being sold like candy.

For some slum community residents, a problem like drug addiction is karma and cannot be solved. Some are vigilant about not letting their children become drug addicts. However, their children’s friends have a lot of influence on them. Many parents have to work long hours to support their family and have no time for their children, and eventually lose them to the drug trade.

Concerned community residents have tried to fight the problem by informing police officials about the drug dealers in their neighborhood. However, they saw no results from their actions.
because the police officials demanded evidence. In addition, some people who informed the police soon found themselves harmed by the drug dealers.

The joint efforts of the communities to fight addictive drugs in the slums resulted from a small non-government organization bringing community residents together to talk about their problems. They looked at ways of preventing their children from becoming drug addicts or, if anyone had a child that was addicted, they would help them take their child for treatment.

Youth camps for recreation and education, are useful to encourage young people to get involved in positive activities, such as sports and music, inspiring them to say no to drugs. Adults also help support activities, which can begin with small groups and gradually expand. There are increasing numbers of community residents who were apprehensive and dare not participate, but are now taking action. They are not afraid to speak to government officials and ask them questions, and request assistance.

In times when Thailand had a government with no interest in solving drug problems, requests for assistance from government agencies were not successful. However, community residents still struggled to improve the situation, despite the lack of support. Sometimes good police officials helped in a straightforward and sincere manner. Drug dealers were arrested because people in the communities trusted the police officials and provided information. Work carried out jointly between government officials and community residents was so successful that many communities were proclaimed to be drug-free zones with no drug users. However, the work carried out in the communities faltered when the good officials were relocated, and not long after the drug trade returned to spread once again.

Solving drug problems could be compared to clapping hands. For an applause to be heard, there needs to be many people clapping together. Solving drug problems requires that the government sector and the people seriously join hands together in developing plans, putting them into action, and evaluating the results.

Government control

During the years 2002-2004 when the Royal Thai Government committed to suppress illicit drugs, a structure was set up for the Bangkok Metropolitan Administration (BMA) to be leading the fight against drugs, with the heads of different districts as secondary centres. Border patrol police worked with local police officials and community residents were called upon to make statements requesting assistance in solving drug problems. Government work was characterized as thought up by the government and done by the government. People in the communities were seen only as supporters and no consideration was given to the participation of the public sector.

In Klong Toey, 1,316 drug dealers were arrested and 22 were killed. Drug users were taken to military camps to quit drugs. Addictive drugs were reduced - in Klong Toey slum, there was a reduction of 50-70%. However, there is no basis for believing that addictive drugs will not return because building the strength of the communities is fundamental to solving drug problems, and this has not really been done.

Furthermore, the use of violent measures cannot permanently solve the drug problems. It is building awareness of a person’s responsibility towards society and other human beings that is likely to be more beneficial in the long term. The government has to expedite the development of human resources before addictive drugs return to flourish again in the communities. Or does the government want to announce a continuous, unending war against drugs in Thailand?

UNODC

Conducting activities to help the public in the past, the Duang Prateep Foundation received financial support from the United Nations. In 1998, the United Nations International Drug Control Programme (now the United Nations Office on Drugs and Crime) supported the project, "Klong Toey Slum Young Development Project" with a budget of Baht 993,160. In 2003, for the World Anti-drug Day campaign on 26 June, the United Nations provided a budget of Baht 200,000 for a campaign against drugs.
The Cambodian Children and Handicap Development Organization (CCHDO)

CCHDO organized drug awareness sessions for 633 villagers from four villages in Poi Pet commune of Banteay Meanhey Province and for five primary schools covering 6,000 pupils. Discussions during the training included: drug abuse situation in Cambodia, classification of drugs and their effects, social problems caused by drug abuse, ways to cope with drug problems, roles of family members, parents and communities, and drug control law.

During the sessions, participants had the opportunity to discuss the social impacts of illicit drugs. Drug abusers in the communities and their families were invited to attend the sessions and were provided information on the immediate-and-long-term effects of drug abuse. The participants also received advice on coping mechanisms for the spread of drug abuse in their communities.

Established in 1997, CCHDO has been working towards the elimination of child labor exploitation by providing access to educational and vocational training opportunities to child laborers, exploited children and their families, including awareness raising and education on drug issues.

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DAPC Japan Supports Drug Prevention Education Efforts

By Jamnan Panpatama
UNODC Regional Centre

The Association to Protect Population from Drugs and Opium (APPDO)

APPDO in Mongolia received a grant to support a project, “Drug Free Mongolia.” The project aims to discourage and prevent high school and university students as well as out-of-school youth from using drugs; raise public awareness on the health consequences of drug abuse; and develop outreach and peer group education programme, information, and counseling for drug abusers.

The project, started in early 2003, is implemented through a series of training of trainer workshops on drug abuse prevention for teachers and social workers from high schools in Ulaanbaatar, Darkhan, and Erdenet cities. The trained participants will provide knowledge on drug prevention to more than 28,000 high school students in the three cities. The project also launched a peer education training of 140 university students which resulted in 3,500 students receiving information on drug prevention from the trained peer educators. Further, the project developed a teachers’ manual on drug prevention which would be used in various schools.

The project also provided drug prevention training for 100 out-of-school children and conducted peer education to provide outreach and counseling services as well as educational materials to current and former drug abusers.

Information, education, and communication materials were also provided by the project, including four leaflets and a newsletter: “We must live in a drug free world,” “How to prevent our adolescents from drug addiction,” “Do we need to be at risk?”, “Drugs and HIV,” and the “Just say no” newsletter.

Results of an annual survey on drug abuse among 1,000 students in Mongolia from 1999 to 2000 showed that drug sales and abuse among students were on the rise.

Considering the growing number of drug abusers in Mongolia, the number of vulnerable young people reached by the project is limited. Joint efforts are needed in drug prevention to develop life skills and to protect them from drug abuse. Sharing information on drugs would be beneficial for the prevention of drug abuse and drug-related HIV/AIDS transmission.

Established in 1999, APPDO has operated a wide range of activities that promote health, education, human rights and social welfare.

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The Drug Abuse Prevention Centre (DAPC)

DAPC, based in Tokyo, awards a grant annually to NGOs in developing countries working on drug demand reduction. The grant allows NGOs to carry out projects which are selected among the best initiatives to mobilize civil society against drugs.

DAPC was established on 1 June 1987, after receiving the approval of the Japanese Cabinet on 23 January 1987.

The prevention of drug abuse requires not only the reinforcement of conventional law enforcement activities against illegal trafficking, but also the intensification and promotion of prevention and awareness campaigns. DAPC was established to encourage drug abuse prevention activities within both the public and private sectors.

Since 1994, DAPC has been running a nationwide fund-raising campaign in Japan’s cities, soliciting money in the streets, as well as from the private sector and civil society at large.

The DAPC’s contribution to UNODC is used for grants, ranging from US$ 5,000 to US$ 20,000, supporting NGOs in developing countries in Latin America and the Caribbean, Africa, Asia and Eastern Europe in their grassroots activities in drug abuse prevention. So far, more than 300 grants have been provided to NGOs in over 90 countries.

Over the past decade, DAPC has raised more than US$ 3.5 million in support of UNODC’s work.

Family Planning Training and Sex Education - Not for Adults Only

As part of its AIDS education and awareness programme, the Population and Community Development Association (PDA) of Thailand is implementing a training on “Family Planning, HIV/AIDS Awareness and Sex Education for Teenagers” through camping.

Recently, a three-day AIDS awareness training camp was undertaken for 20 schools in Bangkok, Nakhon Ratchasima, and Chonburi Provinces. Eight students and two teachers represented each school.

The training methods employed were similar to those used in camping. The young participants were encouraged to analyze the AIDS situation, the causes and effects of its spread.

The learning sessions were fun filled, paying attention to participants’ own interests.

According to PDA, the project aims to enhance the knowledge of students and teachers on AIDS prevention and to train them how to transfer their knowledge in the schools through their school teaching methods. The camp attendants were provided with sex education and AIDS awareness through interactive four stations: “Miracles of life” which explains sex in human beings and how one’s life is created; “Think before you do it” emphasizing safe sex; “Who determines?” presenting a case study of a young girl with pre-marriage sex and “Imagination of love” which demonstrates the skills of denial of having sex, use of contraceptives, and the consequences of having sex.

The participants exchanged ideas and discussed AIDS and sex frankly. A mobile van with books and educational materials on sex education and HIV/AIDS was also part of the camp’s design.

In June 2005, PDA plans to launch a new series of similar training programmes with additional curriculum on life skills and drug prevention. This training will cover 36 schools in Bangkok, Pitsanulok and Nakhon Ratchasima.

PDA is one of the non-governmental organizations in Thailand actively responding to the spread of HIV and AIDS. For further information, contact Ms. Urai Homthawee, Manager of Urban Health & Resource Development Bureau, PDA, e-mail: urb@pda.or.th; www.pda.or.th.
In 2004, the Drug Abuse Prevention Centre (DAPC)/United Nations Office on Drugs and Crime (UNODC) Non-Government Organizations (NGO) Grant Scheme provided funds to the Community Addiction Recovery and Education (CARE) Project, a demand reduction project aimed at refugees and displaced persons from Myanmar. In January 2005, CARE Project was named DARE (Drug and Alcohol Recovery and Education) Network to better reflect the multi-ethnic and cooperative community approach in its work.

DARE Network implements a prevention education programme which is determined by the community, considering its culture and organizational set-up.

The non-medical, cultural and holistic treatment of drug addicts and alcoholics is the core of the DARE Network Programme which considers the treatment needs of the community including advanced trainings in acupuncture and counselling. Quality control of treatment standards are monitored and corrected as necessary, to ensure the safety of the detoxing addicts. As a result, the working teams in the communities are strengthened and workers build their confidence. Communities recognize the effectiveness of the treatment programmes and refer more addicts to the DARE Network treatment centres.

DARE is presently developing and designing a relapse prevention programme, a key for sustainability. Community planning for vocational, spiritual, physical health, and peer support for recovering addicts is also being pursued. It is necessary to involve the community by supporting community-based activities that contribute to relapse prevention.

Since addiction is a family and community problem, DARE focuses training and treatment activities on women and the role of families in the recovery process. DARE works directly with established women’s organizations, setting up

By Pam Rogers

Drug and Alcohol Recovery and Education (DARE) Network

Thailand
Historically, the extent of drug use in the South East Asian region is well known, particularly in the “Golden Triangle” where China, Myanmar and Lao PDR intersect.

The drug trade is central to Myanmar’s economy, as it is one of the biggest producers of opium, heroin and methamphetamine in the world. According to the Burma Border Consortium (BBC), population residing in the Thailand/Myanmar border is about 1,280,000 persons who are illegal (migrant) workers. BBC also estimates that 151,808 persons live in refugee camps.

Inside the refugee camps, illegal drugs are a minimal problem, but alcohol abuse rises up to 80%. Drug abuse still exists depending on location and accessibility by drug dealers.

In a survey of recent migrants to Thailand, estimates of addiction rates in the ethnic areas of Myanmar range from 40 – 85% of the total population. One reason for this occurrence is the social and economic system of the country where drugs and alcohol are readily available.

The HIV/AIDS education initiative has only recently been introduced, usually in urban settings or refugee camps. Mental health issues, including depression, post traumatic stress disorders, and dissociative disorders, continue to be observed in refugee camps and communities in the Thailand/Myanmar border.

The DARE Network Programme’s priorities to strengthen communities, change attitudes and beliefs, and create a cohesive, widespread, and accessible drug demand reduction programme throughout all the ethnic communities on the Thailand/Myanmar border represent a way in which communities can work together across ethnic lines.

Through the project, 17 DARE network teams were set up in refugee camps, migrant villages, and the Mae Tao Clinic in Mae Sot. Each community’s environment is unique, especially in the level of freedom of movement by the people in the camp and the availability of resources.
The number of Cambodians using illicit drugs has been rapidly increasing since the mid-1990’s. The use of dangerous energy-enhancing substances, such as methamphetamine (known as ‘yaba’ in Cambodia, ‘speed’ in some industrialized countries) and heroin, is rapidly increasing in the towns and cities of the country and is now spreading into agricultural areas. To date, there are no official reports of HIV among injecting drug users (IDUs).

However, results of assessments conducted in the past year showed that there is now direct evidence that a potential exists for an emerging epidemic of HIV linked to illicit drug use through unsafe injecting practices and possibly risky sexual behaviour. The emergence of such evidence and the easy availability of cheap illicit drugs, together with a national population of which 60% are under the age of 25 years, coupled with Asia’s highest HIV prevalence rate, are all factors that demand a quick response.

Evidence gathered by a range of government agencies, United Nations organizations, non-governmental organizations (NGOs) and others show that injecting drug use (IDU) is rapidly increasing, especially in Phnom Penh. Assessments by experienced NGOs working in Phnom Penh show that IDU among children/youth living on the streets rose dramatically from 0.6% in 2000 to 9.8% in 2004. Between January and September 2004, about 37% of IDUs among street youth tested in Phnom Penh were HIV positive. Based on regional models, such a situation within this subgroup will have significant medium-term effects with an increased prevalence in the general population. A rapid assessment conducted by the Secretariat of the National Authority for Combating Drugs (NACD), the Cambodian Government’s drug control management agency and the United Nations Office on Drugs and Crime (UNODC) in mid-2002 found that 4% of all illicit drug users were IDUs, with the figure rising to 12% by late-2003.

A recent rapid assessment by World Health Organization (WHO)/Joint United Nations Programme on HIV/AIDS (UNAIDS), the US Centre for Disease Control and Prevention (CDC), in coordination with NACD and the National Centre for HIV/AIDS, Dermatology and STD’s (NCHADS), reported that IDUs in Phnom Penh almost always share injecting equipment, thereby, are highly vulnerable to contracting HIV infection. In addition, evidence shows that IDUs are selling their blood for money to purchase narcotics. This has great relevance for public health since it carries the risk that HIV and other blood-borne infections contracted through the sharing of unclean needles and syringes may be passed on to recipients of blood transfusion. The financial costs of HIV contaminated and other blood-borne viruses is significant.

Evidence has also showed how illicit drug use is putting an increasing number of young people at risk of contracting HIV/AIDS through unsafe sexual behaviour. Over half of IDUs interviewed in Phnom Penh said that they used illicit drugs in conjunction with sexual activities. The same survey noted that most of the respondents, “reported that they had sexual relations with multiple partners”, and that, “sexual connections crossed group boundaries, e.g., non-IDUs had sexual partners who were IDUs.”

Sex workers reported that they had clients who were both IDUs and non-IDUs. Some males reported having sex with both males and females. Both injecting and non-injecting illicit drug users reported in the WHO study said that they engaged in group sex with irregular condom usage. The report also stated that service providers and policy makers stressed the lack of knowledge about drugs and HIV-related issues among the population, indicating that behavior change to reduce HIV risk factors is unlikely without external inputs to raise awareness of illicit drug-related HIV/AIDS transmission.
A UNODC/UNAIDS/CDC coordinated study with NACD and the National AIDS Authority (NAA) and the Ministry of Social Affairs, in Koh Kong, Phnom Penh and Poipet reported that an assessment of casino workers, beer promotion girls, and garment factory workers, shows that on average, almost 40% of over 3,000 respondents were not aware of the risks of HIV transmission through illicit drug use11.

The health, social and economic consequences of IDU and HIV infection linked to the sharing of injection equipment have already had a major impact in South East and East Asia, including China12. When all risk factors are combined, there is every likelihood that economic development and the poverty reduction strategies of the Cambodian Government will be severely undermined. Yet, it is not late for Cambodia to take action to stop this socio-economic threat to development and national security.

There is a window of opportunity for preventive action to be taken through a collaborative effort of all concerned governmental and non-governmental agencies to reduce the risk of potential transmission of HIV through IDU as well as the less publicized route of HIV transmission through unsafe sexual practices related to drug use. To prevent the further spread of HIV among vulnerable populations, it is recommended to increase the availability, accessibility and acceptability of the comprehensive approaches to reduce HIV/AIDS vulnerability from drug abuse. This includes outreach, access to condoms, drug abuse test, options and referrals, voluntary counselling and testing (VCT), and AIDS test and counseling, needles and syringe programmes. An increase in information and sustained utilization of services included in the comprehensive approach activities especially outreach programmes will provide significant protection to larger numbers of vulnerable sub-populations in Cambodia. A fully functional drug abuse treatment and rehabilitation service needs to become operational for all sectors of the population to contribute to reducing both illicit drug use and HIV transmission.

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Windows of Opportunity for a Comprehensive Approach to Reduce HIV/AIDS Vulnerability from Drug abuse

For vulnerable populations

- Cross-train outreach workers from multiple organizations in referral services
- Implement a 100% condom programme for vulnerable populations targeting IDUs, ATS users, indirect sex workers, men who have sex with men (MSMs), and street children
- Expand and increase access to VCT for emerging vulnerable populations taking into account their needs

Services for injecting drug users

- Train and hire ATS users as outreach workers
- Provide education related to a range of high risk-injection practices to outreach workers
- Expand outreach to pharmacies to provide user-friendly and affordable syringes
- Train outreach workers to participate in directly observed, anti-retroviral programmes for vulnerable populations
- Hire outreach workers who are, or have been sex workers
- Train sexually transmitted disease (STD) clinic providers who may provide services to sex workers
- Provide education, supplies and referrals

Blood safety

- Ensure NGOs working with vulnerable populations are familiar with site-specific protocols for blood donation
- Review pre-donation screening procedures
- Ensure training is provided to blood counselors
- Develop a network of trained blood donor recruiters
- Assist families in locating low risk replacement donors
- Hire a drug user (former or current) to work in blood donor centres and liaise with NGOs and the drug-user community
- Monitor the practices of blood collection agencies
- Plan to use blood collection facilities to provide services for drug users on a periodic basis

Surveillance, monitoring and evaluation

- Develop protocols for expanding sentinel surveillance
- Conduct rapid assessments in other areas of Cambodia to obtain data about risk patterns of vulnerable populations and better understand their care and treatment needs
- Develop indicators to monitor/evaluate the impact of programmes
- Use new sampling techniques to estimate the size of hidden and vulnerable populations

Policy modifications

- Review policies and priority strategies for HIV/AIDS prevention and control to include drug-using populations
- Review comprehensively policy and planning at related ministries including health, social affairs, education and interior (law enforcement)

Capacity building

- Employ persons trained in rapid assessment to train others to carry out rapid assessments in other areas
- Advocate for employing persons trained in rapid assessment to conduct seminars for the ministries working with vulnerable populations
- Plan seminars on qualitative methods
- Train governmental and NGO health and social personnel in quality service provision to illicit drug users including outreach and access to treatment and rehabilitation as well as law enforcement to facilitate a human-rights based approach to drug control
HIV/AIDS and Drug Abuse: Looking Forward in Thailand

By Sonia Bezziccheri and Patrick Brenny
UNODC Regional Centre and UNAIDS Thailand, respectively

South East Asia continues to experience rapid and expanding HIV/AIDS and injecting drug use epidemics. HIV/AIDS prevalence among injecting drug users (IDUs) reaches 70% and beyond in specific areas in the region. However, service coverage is limited to only 1% of IDUs although 60% of them are required to change their behaviour in order to modify the course of the HIV/AIDS epidemic.

Clearly, massive scaling up of effective responses is especially encouraged by governments and international agencies as they continue to express serious concerns for the drug abuse driven HIV/AIDS pandemic.

Much of the current spread of HIV/AIDS in the countries of South East Asia is attributed to injecting drug use (IDU) and transactional sex. Sexual transmission of HIV infection from IDUs to their sexual partners is a prominent feature of the expanding epidemic in the region.

Transmission of HIV infection happens in custodial settings such as juvenile detention centres, prisons and compulsory drug treatment centres which have shown concerning trends through high risk behaviours as documented by international research. Sex among men, tattooing, rape and violence, as well as drug abuse, have proven to be effective transmission routes for the spread of HIV and other blood-borne diseases such as Hepatitis.

Thailand and Cambodia have implemented 100% condom campaigns in the late 1990s and have successfully slowed down the epidemic especially among commercial sex workers, their partners, and clients. However, drug abusers and especially IDUs were not explicitly targeted by such campaigns and hence continued to show high prevalence rates of HIV infection. In Thailand, HIV prevalence among IDUs is still at 35 to 50% - the vulnerable population with the highest prevalence in the Kingdom.

In Thailand, the project has successfully reactivated the national task force on drugs and HIV/AIDS under the leadership of the Bureau of Acquired Immune Deficiency Syndrome (AIDS), Tuberculosis (TB) and Sexually Transmitted Infection (STI), in partnership with UNAIDS Thailand, the United Nations Theme Group on HIV/AIDS of Thailand, the World Health Organization, as well as civil society groups and stakeholder representatives such as the Thai Drug Users Network and the Thai AIDS Treatment Action Group.

Gaining momentum from the International AIDS Conference held in July 2004 in Bangkok, as well as the commitment of Thailand Prime Minister Thaksin Shinawatra to treat drug abusers as patients rather than criminals, the Thailand working group on drugs and HIV/AIDS has followed through on its commitments to implement the integrated workplan developed with support from UNODC and other partners. The workplan includes activities and coordinated inputs of United Nations agencies and focuses on issues of situation assessment, policy clarity (for the comprehensive HIV/AIDS prevention approach from drug abuse), advocacy for public support on drugs and HIV/AIDS responses, national guidelines for drug substitution treatment, operational guidelines and studies re-
lated to outreach services, and drug-related HIV infection among prison populations for adults and juveniles.

The prison agenda in particular has been a good example of national authorities rapidly seizing opportunities to collaborate with external partners and thus attracting additional international partnership and support. The UNAIDS Programme Acceleration Fund (PAF) for Thailand – a mechanism at country level to facilitate the implementation of the United Nations Implementation Support Plan (UNISP) 2005–2006 has supported, as per Thailand’s national workplan on drugs and HIV/AIDS, five different proposals on various aspects of comprehensive HIV/AIDS prevention from drug abuse among juvenile detainees and adult prisoners as well as outreach activities.

With the new UNODC project on Strengthening Comprehensive HIV/AIDS Prevention and Care Among Drug Users and in Prison Settings, an opportunity exists for continuing the work initiated by Thailand’s Department of Corrections and Department of Juvenile Detention and Observation through the national task force on drugs and HIV/AIDS.

This project strategically plans to build upon the sound political and operational structure of the national working groups established by the regional project on Reducing HIV Vulnerability from Drug Abuse.

The new project plans to expand partnerships of such national mechanisms to include the Ministry of Justice, in order to effectively address HIV/AIDS-related risks and vulnerabilities in custodial settings including prisons, juvenile detention centres, and compulsory drug treatment centres.

It will also assist countries to expand their efforts through the existing national working groups to provide more effective prevention and treatment responses in compulsory drug abuse treatment and rehabilitation facilities; develop a comprehensive approach to HIV/AIDS prevention programmes in custodial settings; and introduce and adapt community policing models for improved cooperation of the public security sector with community-based programmes for the alleviation of HIV vulnerability from drug abuse.

With the continued rise of the HIV/AIDS epidemic in South East Asia, the high prevalence of HIV infection among IDUs, the vulnerability of AIDS victims to incarceration and stigmatization, this project will progressively minimize the impact of HIV/AIDS and drug abuse epidemics in Thailand and South East Asia.

For more information on the accomplishments of the UNODC regional project on Reducing HIV/AIDS Vulnerability from Drug Abuse, visit: http://www.unodc.un.or.th/drugsandhiv/publications.htm

Strengthening Comprehensive HIV/AIDS Prevention and Care Among Drug Users and in Prison Settings

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The international drug control treaties require the International Narcotics Control Board (INCB) to prepare an Annual Report on its work. The Annual Report contains an analysis of the drug control situation, draws attention to gaps and weaknesses in national control and in treaty compliance and recommends improvements at both national and international levels. The reports are based on information provided by governments and international bodies to INCB. The Annual Report is supplemented by detailed technical reports on narcotic drugs, psychotropic substances and on precursor chemicals which can be used in the illicit manufacture of such drugs.

In this issue, Eastern Horizons presents some of the main themes of the 2004 INCB Report.

**The integration of supply and demand strategies**

At first, they seem to be different activities: drugs are manufactured, trafficked and sold on the illicit market by one group of people and bought and abused by another. In fact, however, illicit drug supply and demand are two dimensions of a single problem. In order to tackle the problem effectively, both dimensions have to be addressed. If only part of the problem is addressed, then the best that can be achieved is a partial solution. Demand and supply reduction programmes yield limited results when implemented in isolation.

In practical terms, this means that even significant successes in curtailing drug supply will not have long-term effects on the overall drug situation – new sources will simply emerge to meet the continuing demand for illicit drugs. Real progress can only be achieved if there is a reduction of demand for illicit drugs.

The recognition that both efforts to reduce demand and supply - a balanced approach - are required, has been the central principle of international drug control. However, balanced strategies continue to treat demand and supply as separate issues.

INCB therefore urges Governments to move beyond the balanced approach towards an integrated approach that is characterized by genuine cooperation between government agencies, civil society organizations and local communities. Governments should strive to develop and implement integrated strategies which combine components of supply and demand reduction in multidisciplinary programmes.

The report makes several recommendations on how Governments can move beyond the balanced approach.
One of the recommendations is for Governments to create a central national authority, with a balanced representation of supply and demand reduction agencies, to coordinate efforts and to decide on the distribution of financial and other resources among those responsible for providing health, law enforcement, criminal justice, education and social services.

**The situation in Afghanistan**

INCB continues to be seriously concerned about the overall drug control situation in Afghanistan which appears to be steadily deteriorating. Opium poppy cultivation further expanded in 2004 and now takes place in almost all provinces in the country and involves an increasing number of farmers. Illicit manufacture of and trafficking in heroin has gained ground. Moreover, pharmaceutical products can be obtained without prescription from unregulated pharmacies, retail outlets and roadside stalls. Most of the products are adulterated, out of date and unregistered and are illicitly manufactured and smuggled into Afghanistan. The unlimited and uncontrolled availability of both narcotic drugs and psychotropic substances has contributed to a significant increase of drug abuse, with an increasing use of injection as a mode of administering illicit drugs. The situation calls for a swift response.

The Board was heartened by the fact that the President of Afghanistan has committed himself to address the drug problem which is a severe threat to the young democracy and the stability and economic recovery of the country as a whole. The international community and the United Nations Office on Drugs and Crime (UNODC) supports Afghanistan in its efforts. However, ultimately, it is the responsibility of the Government of Afghanistan to fulfill its commitments under the international drug control treaties and to ensure that its people are protected from the scourge of drugs.

**Internet pharmacies**

Several billions of doses of medicines are sold illicitly on the Internet every year, posing potentially fatal health risks to consumers. Unlicensed Internet pharmacies routinely sell pharmaceutical preparations containing internationally controlled substances without the required prescriptions.

The substances sold have a high potential of abuse. They include oxycodone, a potent opioid similar to heroin (often called “hillbilly heroin” in the United States), stimulants such as amphetamine, benzodiazepines (e.g., valium) and other potentially fatal substances such as fentanyl and secobarbital. Unlicensed Internet pharmacies require no prescriptions from their customers and they will sell the drug to anyone, including children. In the United States, Internet pharmacies have already become a major source of drugs for children and adolescents.

Significant quantities of internationally controlled drugs have been seized in almost all parts of the world. Nevertheless some countries seem to be unconcerned by this type of drug trafficking.

Internet pharmacies illicitly selling internationally controlled substances are acting in contravention of international and national legislations. They are also subjecting customers to serious health risks by indiscriminately selling them substances with high abuse potential. The Internet has become a means for illicit drug trafficking. The Board calls on Governments to cooperate with the pharmaceutical industry and Internet service providers in order to bring this trafficking to an end.

**Change in Dutch cannabis policy**

With changing policy, the Dutch Government itself informed INCB of an interministerial policy paper on cannabis which acknowledges that “cannabis is not harmless”, neither for the abusers nor for the community. The paper also stresses the importance of strengthening “measures against street dealing, drug tourism and cannabis cultivation.” It is also acknowledged that coffee shops are “not blameless” in the maintenance of the illicit drug trade and that they have the potential to discredit the drug policy. The Government intends to reduce the number of coffee shops located near schools and in border areas.

The Dutch Government announces its intention to implement an action plan that discourages cannabis abuse, which will include specific drug prevention campaigns aimed at high-

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“The demand for drugs stimulates supply and in turn, the availability of drugs creates demand as more people become dependent upon them. It is all too easy for Governments’ actions against the drug problem to focus on just one element of the problem, supply. While this may produce results, even dramatic results, in the short-term, with large seizures of illicit drugs, it does not and cannot have a long-term effect because new sources soon materialize to meet continuing demand. Unfortunately, there are no quick ways of reducing demand, which requires sustained preventive interventions. It is therefore essential that comprehensive strategies are developed, combining action on both supply and demand. Then and only then will there be permanent improvement in drug abuse problems.”

Hamid Ghodse
President of the International Narcotics Control Board
risk groups. An annual mass media anti-drug campaign will be launched over a period of three years, specifically targeting young people between the ages of 12 and 18.

Progress in curbing diversion of key chemicals

The INCB report highlights progress that has been achieved in preventing diversion of chemicals needed in the illicit manufacture of drugs. Over the past two years, Government actions against the diversion of chemicals have resulted in more than 430 cases of seizures, attempted diversions and actual diversions. Some of these cases have led to the dismantling of clandestine laboratories and trafficking networks and the arrest of traffickers.

To achieve further progress, INCB calls on Governments to increase the sharing of real-time information on seizures and diversions of precursors which are key chemicals used in the manufacture of cocaine, heroin, and amphetamine-type stimulants.

A weak link in international drug control

INCB calls on African Governments to give higher priority to addressing the drug problem in their countries and on the international community to provide appropriate assistance and support to States in the region.

African countries have limited institutional and technical capacity to deal with the drug issue in a comprehensive manner and this has negatively affected the implementation of drug control strategies.

Africa, particularly Morocco, is a major source of cannabis found in illicit markets in the region. Trafficking has also increased. Drug abuse is also on the rise: the fact that injecting drug abuse of heroin is increasingly reported in countries in Eastern and Southern Africa could have serious ramifications for the spread of HIV/AIDS.

The INCB annual report for 2004 also provides a global overview of the current drug control situation, presenting some of the major developments in drug abuse and trafficking and measures by Governments to implement the international drug control treaties.

For more information, please visit: http://www.incb.org
The absence of accurate data and the clandestine nature of human trafficking make it difficult to accurately assess the nature and extent of the problem. Yet, it has been established that human trafficking is on the rise in Vietnam.

According to the United Nations Office on Drugs and Crime (UNODC) human trafficking database established in Vienna, Vietnam ranks “high” as a country of origin for human trafficking. In addition, people are trafficked from poor rural areas to urban areas.

Two main destinations have so far emerged: People’s Republic of China and Cambodia. Other countries of destination in the region include Thailand, Singapore, Malaysia, Indonesia, Republic of Korea, Taiwan, and Hong Kong SAR. Trafficking to the UK, France and Germany has recently risen significantly.


The project recently conducted an external final evaluation, which made the following conclusions:

“Results were achieved due to the adoption of a ‘best practice’ model of project development and implementation. The features of the model are:

(a) A well-targeted project design conceptualized at a local level and collaboratively developed with the beneficiary country/region (with guidance from Vienna);
(b) A receptive and enthusiastic government;
(c) A comfortable timeframe within which to implement the project;
(d) Outside of administrative and preliminary activities, timing of elements is independent of each other; eliminating a purely sequential process where succeeding elements are dependent on preceding elements being completed;
(e) Selection of the right partner-agency/Ministry/Department within the host government;
(f) The identification and selection of the right National Coordinator;
(g) The presence of an appropriately skilled (i.e., with a criminal justice background – through qualifications/experience/training) Country/Field Office Programme Manager for local supervision of the project and advice to the National Coordinator;
(h) Ongoing monitoring and evaluation; and
(i) Appropriate backstopping for the Country/Field Office by the Regional Desk, and appropriate backstopping for both by the Anti-Human Trafficking Unit (UNODC Vienna).”

One of the major recommendations was the development of a second phase of the project. The UNODC Country Office, Viet Nam, and the Government of Viet Nam has almost finalized the second phase project document. The second phase aims at strengthening the capacity of the central coordination office and specialized anti-human trafficking units within the police, developing a legal assessment report on existing Vietnamese legislation in the light of the United Nations Smuggling Protocol, modifying and expanding upon existing training materials (which will be included in the training curricula at the Police Academy, Prosecution College, Border Army Academy and Court College), conducting training sessions, conducting international activities to increase cooperation with key-countries in the region and improving existing techniques and procedures on human trafficking case investigation, prosecution and trial.

The second phase of the project is expected to commence in September 2005, fully funded by the Australian Department of Immigration and Multicultural and Indigenous Affairs.

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Enhancing International Joint Operations: The Philippine Experience

By Rodolfo N. Caisip and Ager P. Ontog, Jr.
Deputy Director General for Operations and Director, Intelligence and Investigations Service, respectively Philippine Drug Enforcement Agency

The past two years ushered legal and structural reforms in the Philippine drug control system resulting in a change in the way the Government perceived the drug problem. The enactment of Republic Act No. 9165 (The Comprehensive Dangerous Drugs Act of 2002) reorganized the Dangerous Drugs Board (DDB), giving it broader powers. It abolished various units/agencies of government with concurrent jurisdictions over drug cases and established a single mission agency, the Philippine Drug Enforcement Agency (PDEA), which is mandated to enforce the new law.

Republic Act No. 9165 also authorized PDEA to use investigative techniques enabling it to cooperate effectively with the international law enforcement community in the common effort against transnational drug syndicates and trafficking of illegal drugs in the region.

The determination of the Government to solve the drug problem is explicit in the Government’s “Vision of A Drug-Free Philippines by the Year 2010.”

The Philippine drug environment

Three major drugs of abuse dominate the Philippines. The first is methamphetamine hydrochloride commonly known as “shabu” which is the main drug of abuse. The second is cannabis or marijuana and the third is methylenedioxymethamphetamine (MDMA) or ecstasy, which is popular among the affluent sector. A fourth drug called ketamine is slowly emerging as an alternative to the more popular drugs.

The volume of seized ephedrine coincided with increased methamphetamine clandestine laboratory activities in the country starting in 2001.

Processing shabu

In the early 1990s, law enforcement agencies in the Philippines believed that all the shabu used in the country were illegally imported from sources in the region. However, in 1997 and 1999, two huge clandestine laboratories were discovered in Angeles City and Cagayan Province. The discovery of the clandestine laboratories indicated the change in the classification of the Philippines from a shabu consumer to shabu producer and consumer. Since then, 30 more shabu clandestine laboratories were dismantled in the next five years.

In 2002, four clandestine laboratories were dismantled by law enforcement authorities that netted 803 kilograms of shabu, essential chemicals, and equipment all worth about P4 billion.

In 2004, shabu laboratories have been dismantled and seized were 2,057.21 kilograms of shabu. A total of P12.29 billion worth of methamphetamine hydrochloride, precursors and essential chemicals, and laboratory equipment were confiscated.

Using shabu

The Philippine Dangerous Drugs Board Survey in 1999 estimated that there were around 1.8 million regular users and 1.6 million occasional users of dangerous drugs in the country. Compared with other countries in the region, the Philippines ranked second to Thailand in the prevalence of drug abuse as percentage of the population aged 15-64. Others with less serious drug abuse problems were Macau SAR, Taiwan, Indonesia, Japan, Republic of Korea, and Brunei.

In 2003, the country’s rehabilitation centres reported a total of 7,113 admissions reflecting a very substantial increase of 45% compared with the number of admissions in the previous year. This is due to the increasing number of drug dependents who have availed of the “voluntary rehabilitation submission programme.” Statistics from the rehabilitation centres show the following trends:
● Majority of patients are in the 20-29 age group.

● The ratio of male users to female users is 11:1.

● Shabu is the most popular drug of choice with 87% of the patients using it.

● There is a significant number of patients who reported abusing glue and legitimate cough and cold preparations.

● There were also patients who reported abusing the anesthetic “Nubain”.

Laying the groundwork for cooperation

The United States, Australia, Japan, and the countries comprising ASEAN have been the traditional partners of the Philippines in drug control. The country continues to enjoy a high level of cooperation with them.

Noteworthy, is the very high level of cooperation and confidence shared by PDEA and the Office of the National Narcotics Control Commission (ONNC) of China in the field of joint operations on illegal drugs.

Beginning with the signing of a Memorandum of Understanding on Drug Control between the Minister of the Interior and Local Government of the Philippines and the Minister of Public Safety of the People’s Republic of China in 2001, the Philippines and China have moved from diplomacy to actual joint operations within two years with the seizure of clandestine laboratory equipment in October 2003 and 296 kilograms of shabu in February 2004.

The Philippines also maintains strong linkages with other countries and regional/international organizations.

Proactively targeting transnational drug organizations

Drug enforcement agencies in the region are proactively targeting transnational and drug groups engaged in manufacturing and trafficking illegal drugs. Several fora have been established to enhance cooperation, such as the following: International Drug Enforcement Conference Far East Working Group of which the PDEA Director General is the current chairman; Asia-Pacific Operational Drug Enforcement Conference; the Anti-Drug Liaison Officials’ Meeting for International Cooperation; and the Heads of National Drug Law Enforcement Agencies.

Other multilateral conferences with Australia, China, Fiji, Hong Kong SAR, Japan, Malaysia, New Zealand and the United States were held to enhance operational coordination in dismantling illicit drug organizations.

As a result of tighter and closer coordination and sharing of intelligence, drug enforcement agencies are now able to monitor activities of financiers, the so-called roving chemists, and traffickers of precursors and essential chemicals.

Overcoming national limitations through international cooperation

Countries are subject to limitations in their drug enforcement operations as dictated by its municipal law, budget, expertise and capabilities. International cooperation solves many of these obstacles to effective drug enforcement.

A case in point is the limitation set by the Republic Act 4200, a Philippine law that makes it illegal for law enforcement agencies to conduct electronic surveillance of persons except for crimes against the national security of the State. It is difficult for agencies to conduct anti-drug operations without it.

Photo by PDEA

The PDEA successes in dismantling clandestine laboratories could not have been possible without intelligence from electronic surveillance.

This information is obtained from sources outside the country with more favourable legal environments. For example, PDEA and the Australian Federal Police (AFP) are collaborating in one test case involving trafficking of 1.5 tons of pseudoephedrine in March 2004 using evidence legally obtained through electronic surveillance outside the Philippines.

Running multi-jurisdictional operations

The speed of communication, the ease of travel and computerization of financial transactions, among others, make it very difficult for law enforcement agencies to catch up with the activities of established drug organizations. These factors also necessitate tight coordination among law enforcement partners running multi-jurisdictional operations. Towards this end, the following experiences were found helpful in some of the operations participated in by PDEA:

● Presence of multi-jurisdictional plans that specify the responsibilities of each participating agency, contact points, funding sources, timing of the neutralization phase, and even media releases;

● Designation of a lead agency which may be based on agency capability, capacity to fund the operation, centre of activity of the drug group, gravity of impossible penalties for the violation and consensus of the partners;

● Recognition of the need to collect intelligence products that are admissible as evidence at the very start of the investigation. Intelligence per se has limited value in dismantling drug groups but an intelligence product which can be used as evidence has great value in permanently disabling the drug group;

● Sharing of expertise and resources from counterpart agencies such as the Drug Enforcement Administration (DEA) and AFP account for many success stories in the region such as the busting of the Lam Drug Group in Fiji, Malaysia and Hong Kong SAR. The New Zealand Police also helped in processing the clandestine laboratory. The Philippines is supported by DEA, AFP and the International Law Enforcement Academies (ILEA) in training personnel on clandestine laboratory safety and processing; and

● Ability of countries in the region to conclude extradition and mutual legal assistance treaties with one another, as necessitated by the transnational nature of the drug problem.
Value Yourself… Make Healthy Choices

This is the 2005 campaign slogan for the International Day against Drug Abuse and Illicit Trafficking which is celebrated every 26 June. The slogan is also presented in Spanish, French, Russian, Arabic and Chinese.

Every year, the United Nations Office on Drugs and Crime (UNODC) selects a theme and launches a year-long campaign. The campaign aims to send out a message of self-respect and esteem. UNODC urges young people to consider the health-related reasons why they should stay away from drugs or stop using them. “Healthy choices” are linked to healthy lifestyles: sports, music, school, volunteering, and other positive activities.

In 1987, the General Assembly decided to observe 26 June as the International Day against Drug Abuse and Illicit Trafficking as an expression of its determination to strengthen action and cooperation to achieve the goal of an international society free of drug abuse.

Civil society organizations are particularly involved in relating their activities to the celebration. Every year, thousands of people around the world are mobilized through UNODC’s field offices network to celebrate the day.

Past Themes

1998: Youth Uniting to Prevent Drug Abuse
1999: Music against Drugs
2000: Facing Reality: Denial, Corruption and Violence
2001: Sports against Drugs
2002: Substance Abuse and HIV/AIDS
2003: Let’s talk about Drugs
2004: Drugs: Treatment Works
Japan Assists in Community-based Drug Treatment and Rehabilitation

The Government of Japan is providing US$1.176 million to finance the project, “Drug abuse counseling, treatment and rehabilitation services” which will be implemented by the United Nations Office on Drugs and Crime in Cambodia. The assistance is provided through the Trust Fund for Human Security.

The three-year project aims to develop the capacity of Government and non government organizations (NGOs) staff to provide community-based treatment and rehabilitation services to the victims of illicit drug use.

The project aims at focusing on families and communities under the threats of increasing drug addiction as well as rising transmission of HIV/AIDS and other blood-borne diseases through needle sharing and lack of preventive knowledge. Target areas for the project are Phnom Penh, Battambang and Poipet where drug abuse is seriously prevalent. The project includes setting up counseling, treatment and rehabilitation centres as model interventions; training counselors to implement models/new protocols; and implementing counseling, treatment, and rehabilitation.

The project is expected to reduce drug abuse among street children, sex workers, fishers, van drivers, young soldiers, etc. and improve the capacity of Cambodia healthcare services, both at the governmental and non-governmental levels, and also to empower and improve the lives of people in the targeted communities.

The Trust Fund for Human Security was established in the United Nations Secretariat in March 1999 through the initiative of the Government of Japan with total contributions of US$ 256 million up to the present. The Trust Fund has assisted projects of the United Nations agencies and programmes that address various threats to human life, livelihood and dignity, from the perspective of human security.

The development of mechanisms by which the individual can successfully reintegrate into their family, community and mainstream Cambodian society will result in significant socio-economic savings in social, health, judicial and law enforcement services, as well as reducing drug-related crime, domestic violence, HIV/AIDS transmission, unemployment and the destruction of family values as integral components in the human security of the individual and the society within which they benefit and contribute.

Best practices from countries in the region will be used to develop the capacity of NGOs with experience in drug abuse and health-related programming, together with specialist government entities, to establish and provide coordinated, community-based drug abuse counseling, treatment and rehabilitation services to people abusing drugs in Cambodia as part of the first national drug control master plan coordinated by the National Authority for Combating Drugs (NACD).

Australia Provides New Grant for Alternative Development

The Australian Government, through the Australian Agency for International Development (AusAID) has approved a A$ 500,000 funding for a regional project on alternative development (AD) to eliminate opium poppy production.

In an exchange of letters between AusAID and the United Nations Office on Drugs and Crime (UNODC), the regional project will be implemented by the UNODC Regional Centre for East Asia and the Pacific in the Mekong Basin Sub-region (Cambodia, China-Yunnan Province, Lao PDR, Myanmar, Thailand, and Viet Nam). The regional collaboration on community-based AD to eliminate opium poppy production in Southeast Asia aims to contribute to opium eradication in the region. Specifically, the project will strengthen AD efforts among the Memorandum of Understanding (MOU) signatory countries through increasing collaboration and cross border cooperation on AD and improving national capacities and information sharing among AD agencies and projects.

The project intends to strengthen regional cooperation and establish institutional linkages to share innovative approaches and best practices on participatory AD and illicit crop elimination.

From 2000-2003, the Australian Government provided a US$ 315,000 grant to support the Alternative Development Cooperation in East Asia which covered five countries, e.g., China, Lao PDR, Myanmar, Thailand, and Viet Nam. As a result of this project, countries increased their commitments to AD and undertook joint efforts and collaborative actions in eliminating opium production in the region. National agencies in these countries also established networks for capacity building, and sharing information and good practices for AD. The five countries appreciate and thank the Australian Government for the new grant on AD which is hoped to foster more concerted efforts on opium reduction in the region. Further, improved institutional and human resource capacities to plan and manage participatory community-based AD are expected to be developed.

The AD project directly supports the UNODC Operational Priorities under the key themes on sustainable development and best practices.
United Nations Secretary-General Lays Out Strategy to Combat Terrorism

The United Nations Secretary-General Kofi Annan presented a five-point strategy for the United Nations to fight terrorism: dissuading the disaffected from choosing the tactic, denying terrorists the means to carry out attacks, deterring state support, developing state preventive capacity, and defending human rights in the struggle against the scourge.

Outlining what he called the “five D’s” at the closing of the International Summit on Democracy, Terrorism and Security in Madrid, he announced the creation of an implementation task force under his office to ensure that all parts of the United Nations system play their roles in handling terrorism and related issues.

Dealing with each of the five D’s in detail, Mr. Annan said all sectors of society must play their part in dissuading disaffected groups who choose terrorism because they think its tactics are effective and people in whose name they claim to act will approve.

“Not only political leaders, but civil society and religious leaders should clearly denounce terrorist tactics as criminal and inexcusable,” he declared.

He called for a comprehensive convention outlawing terrorism in all its forms and said the right to resist occupation cannot include the right to deliberately kill or maim civilians.

He stressed that the high-level panel he set up to study global threats and recommend changes in the international system calls for a definition of terrorism “which would make it clear that any action constitutes terrorism if it is intended to cause death or serious bodily harm to civilians and non-combatants, with the purpose of intimidating a population or compelling a Government or international organization to do or abstain from doing an act.”

Turning to the second “D” – denying terrorists their means – Mr. Annan noted that the United Nations had already made important contributions, including the Convention on the Suppression of Financing of Terrorism and travel bans. But more effective action is needed against money-laundering and in the “most vital” area of denying terrorists access to nuclear weapons.

On deterring countries from supporting terrorist groups, Mr. Annan noted that the United Nations had not shrunken from confronting such states and the Security Council had repeatedly applied sanctions.

On the fourth “D” – developing state capacity to prevent terrorism – he called for international aid for poor countries that genuinely cannot afford to build the capacity they need, stressing that good governance was decisive for development and underlyng the work of the United Nations Electoral Assistance Division in helping countries vote – often a turning point in their history, as recently in Afghanistan, the Palestinian territories, Iraq and Burundi.

On the last “D” – defending human rights – Mr. Annan emphasized that the United Nations must continue to insist that in the fight against terrorism, it cannot compromise on its core values: the rule of law, protection of civilians, mutual respect between people of different faiths and cultures, and peaceful resolution of conflict.
Mr. Dammann, German, joined the UNODC Regional Centre as Senior Programme Management Officer effective 12 April 2005 after serving for several years as chief of the Anti-Human Trafficking Unit at UNODC Headquarters in Vienna. Mr Dammann joined the United Nations in 1986 where he started out with the United Nations International Drug Control Programme. He then worked on criminal justice reform, including the development and implementation of United Nations criminal justice standards, and serviced the Commission on Crime Prevention and Criminal Justice. He was in charge of the coordination of technical assistance activities in Asia, Africa and South-Eastern Europe, including on issues related to post-conflict reconstruction. Prior to joining the United Nations, he worked in the area of international litigation with a corporate law firm, as Associate to the Dean of the Frankfurter Law School, and as a lecturer of the Frankfurt University of Social Work. Mr. Dammann holds a law degree from the State of Hesse/Germany and a degree of doctor juris from the Goethe University Frankfurt/Germany.

Ms. Inciong, Filipino, joined the UNODC Regional Centre as Project Coordinator (Promotion of Public Awareness on the Dangers of Drugs in East Asia) effective 16 December 2004. Prior to joining UNODC, she was National Information Officer of the United Nations Information Centre (Philippines) and Technical Officer (Public Awareness) for the GEF/UNDP/IMO Regional Programme on Partnerships in Environmental Management for the Seas of East Asia. She holds a Bachelor of Science Degree in Development Communication (major in development journalism) and a Master of Science Degree in Development Communication (cognate in Community Development) both from the University of the Philippines Los Baños. She has served as Public Awareness Manager of the International Rice Research Institute; Publicity Officer of the Australian Agency for International Development (Manila); Information and Editorial Assistant of the ESCAP/UNDP Regional Network for Agricultural Machinery; Training Associate, Research Assistant, and Instructor at the University of the Philippines Los Baños.

Ms. Peacock, Australian, commenced her internship with the UNODC Regional Centre’s Law Enforcement Division in January 2005. Prior to the internship, she spent a year and a half in Dublin working as a prosecution lawyer specifically on murder and rape trials. Previously, she has spent time working for Legal Aid and a state intelligence agency. She holds a science and post graduate law degree and Masters in human rights and criminal law. She is currently writing a report analyzing civil remedies open to victims of human trafficking. Her other profession is teaching yoga.

Mr. Virayodhin, Thai, joined the UNODC Regional Centre for East Asia and the Pacific as office driver in December 2004. Prior to joining UNODC, he served as operations manager and receptionist/visa assistant at a local tour operator and the Embassy of Finland in Bangkok, respectively. Mr. Virayodhin holds a bachelor’s degree in business administration from the Ramkhamkheng University/Thailand.

**UNODC Regional Centre Planning Workshop**

The staff of the UNODC Regional Centre for East Asia and the Pacific held its annual work planning workshop from 6 to 9 March 2005 in Hua Hin, Thailand. The workshop aimed to develop the centre’s workplan for 2005-2006, considering regional and country needs and donor interest in the areas of drug supply reduction/law enforcement and alternative development; demand reduction, including HIV/AIDS; and transnational organized crime and money laundering, human trafficking, corruption, and terrorism.
Amoy, September 25, 1922, (No. 50 Confidential.) … It appears that some time ago, more, at any rate, than three or four months, a consignment of morphia, smuggled from Germany overland to Vladivostok, arrived in Shanghai. The cost of the drug was 100,000 dollars and the owners are a combine consisting of M. T., Q. Z., Y. G. and T. C. The first three are Filipinos and Senators in the Philippine Islands; the Fourth is a Chinese citizen. The leader in the combine is Q. Z., who has recently visited the United States of America as one of the delegates to negotiate independence for the Philippine Islands. The morphia was originally intended to be smuggled into the Philippine Islands, where the price is said to be about 2,000 dollars per 1b. as against 450 dollars per 1b. in Shanghai, but owing to strong political opposition to Q. Z. the risk at present considered too great and the morphie remains in Shanghai deposited in a foreign hotel s kept by a French citizen. … – Letter from the British Consul in Amoy to the British Legation, Peking [Beijing].

This confidential communication cites the source as an informant who obtained the information from a friend to whom the Chinese citizen named owes “a considerable sum of money.” The same person was stated to be in similar difficulties with an American-Japanese citizen resident in Manila, to whom he likewise owed money in connection with a deal in rice (see paragraph below on China Daily News). While available information would not allow independent verification of the statement made, it at least shows that different nationals of a number of countries were involved in just one case of drug smuggling.

What complicated the matter further was the fact that there were numerous source countries from which drugs (opium, morphine, heroin or cocaine) were obtained and eventually smuggled to China. For instance, upon receipt of an inquiry from the United Kingdom, which had been concerned with the discrepancies between its export data and Japan’s import figures, the Japanese authorities cited nine countries as the exporters of the above drugs to Japan in 1921 alone. Furthermore, transhipment was common and, therefore, those exporting countries were often not the original source countries, making it difficult to identify the actual sources of diversion into illicit traffic.

At the time, “diversion” of drugs from licit channels into illicit traffic, “smuggling”, often involved routes through Japan into China. A letter from the British Legation to the Inspector-General of the Chinese Maritime Custom in 1922 notes:

“… a very large number of Japanese are engaged in this illicit traffic, and that an effective control of the distribution of the drugs by the firms which are licensed by the Japanese Government to deal in them will be the only means of putting a stop to this traffic. The Opium Advisory Committee of the League of Nations have recommended that very close cooperation should be established between the Chinese Maritime Customs and the Japanese authorities, so that in all cases of seizures of morphine coming from Japan, the morphine may be tracked back to its sources and the necessary measures taken by the Japanese authorities.”

Another letter from the British Legation in 1922 points out that the Opium Advisory Committee in a report to the Council of the League of Nations concluded that “Japan has recently been importing morphine far in excess of the normal legitimate requirements of the country and that little doubt exists that much of this morphine has found its way into China.” The letter continues:

“The Japanese representative admitted the existence of such smuggling and gave positive assurances of the Governments’ intention to do all in their power to stop the traffic, in which endeavour they desired the close co-operation of the exporting countries …”

It is noteworthy that the League of Nations, at such an early stage in history, already played a key role in international drug control. It is also interesting to note that at the time when licensing requirements were not in place [which were later codified into the 1925 International Opium Convention], “tracking back” the seized substance to its sources was an essential means of control. This was a measure required decades later in 1990’s against the diversion and smuggling of precursor chemicals, which are used in illicit drug manufacture. Such substances are controlled under the 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, which, however, does not provide for mandatory licensing requirements for such substances. “Back-tracking” of seized chemicals is a major component of, for instance, Operation Topaz, an international
operation launched in 1990’s to control acetic anhydride, a critical chemical which traffickers must have in clandestinely making heroin.

While a number of drugs, often morphine, were trafficked then, what was the drug actually preferred and what was the mode of administration at that time? A letter from the Consul of Chefoo to the British Legation, Beijing, in 1922 notes:

“Various kinds of pills containing morphia in greater or less quantities are sold openly in every street in Chefoo. Of those addicted to the drug, the number taking these pills is far in excess of those who take it hypodermically.”

The letter quotes an interesting remark by a doctor: “My impression is that the consumption of morphine has fallen off rather than increased in the last two or three years. The use of the morphine needle is not thoroughly understood, and its use has been constantly followed by abscesses due to imperfect cleansing of the needle.” The letter further notes that “the infection which the use of the needle so frequently produces is probably one of the reasons why pills are preferred to injections. … In any case, morphine has only come into use as a substitute for opium, and the latter is still preferred to any other form of drug.”

Nearly a decade later in 1930, the situation remained the same. The North China Daily of 16 October 1930 (pictured) reports on a strongly-worded petition submitted to the Central Government by the National Anti-Opium Association, “demanding that prompt action should be taken for the suppression of poppy growing and opium smuggling and for the abolition of special opium tax bureaux which have been established in Hunan and Hupeh and which have tended to encourage the use of opium.” The main reason why opium smuggling continued at that time was reportedly because the local authorities collect special opium taxes and gave protection to smugglers.

The North China Daily cites a report by the Hankow Bureau of Social Affairs, which showed that, of the 13,017 shops of that city, no fewer than 764 were engaged in the opium trade or conducting opium dens. Of the total of 62,721 shop employees, there were no fewer than 3,056 in the employ of opium shops. In contrast, there were only 536 rice shops and 2,698 rice shop employees. The paper reports on the remark of the National Anti-Opium Association:

“As rice in the principal food of the people, is it not amazing that the number of rice shops and the number of employees in rice shops should be less than the number of opium shops and their employees? There is no other city in the world where such a state of affairs prevails ...”

The National Anti-Opium Association’s petition described a story on how the opium trade was carried on in Hunan. Some 45 merchants of that province, having paid the special opium tax shipped a large quantity of the drug to another place, where, however, it was detained by the district magistrate. The owners then purportedly tried to regain the opium by notifying the Provincial Government and charging the magistrate concerned. When that effort failed, they asked the Central Opium Suppression Commission to order the magistrate to hand back the drug. While the story does not say what happened to the opium in the end, it reports the National Anti-Opium Association’s remarks:

“Persons engaged in opium smuggling should, when arrested, be dealt with very severely and it is really amazing … that the Hunan smugglers should have the nerve to ask the Central Opium Suppression Commission, which is charged with the duty of suppressing opium, to return their drug when they know that their actions are contrary to the law.”

The North China Daily article further speaks of the military involvement at the time and of the consequences. Upon receipt of numerous petitions to suppress opium poppy cultivation, the central Government in China reportedly issued instructions to the provincial authorities to deal with the matters, which in turn issued orders to the district magistrates. The latter, however, reportedly always replied that they were “powerless because the poppy is grown under the protection of the military.” The article notes:

“Government orders for the suppression of poppy planting during the past few years have been held in ridicule and they are no longer enforced. Nearly all Government troops in Szechuan, Yunnan and Kueichow collect taxes from farmers who plant poppy instead of rice. And because the farmers of Shensi, Honan and Kansu are doing the same thing, no rice is grown and famine conditions have resulted.”

Such was the situation that existed in the Far East in the 1920’s, eventually leading to the international treaty law in drug control which evolved over the past century.

References

1 United Kingdom Public Record Office, [F 3548/504/10] Enclosure 1 in No. 1, F.O.371 8026, no. 52.
2 United Kingdom, France, Germany, Belgium, Switzerland, Netherlands, Denmark, Turkey and the United States. Letter, dated 7 October 1922, from the Director of the Commercial Bureau, Japan, to the British Embassy. Ibid no.58.
3 United Kingdom Public Record Office, [F 3191/504/10], F.O. 371 8026 no.3.
4 Ibid., no.5.
5 United Kingdom Public Record Office, [F 3429/504/10] Enclosure 7 in No. 1, F.O.371 8026 no.35.

Author’s Note: Texts in italics were reproduced verbatim. Names of individuals are withheld.
Criteria for the awarding of grants

Activities
Grants may be awarded for activities in developing countries that fall within the general sphere of demand reduction. Although preference will be given to proposals in the field of prevention and education, treatment and rehabilitation activities will not be excluded.

Proposals relating to the subject of the legalization of certain drugs, establishment of databases and information systems and for needle-exchange schemes will not be considered for funding. Furthermore, funds will not normally be given to support travel, meetings, conferences or similar gatherings.

Grants may be awarded either for self-contained activities or for activities that are a component of a larger project.

NGOs
Applicants should be national NGOs from developing countries. Only bona fide NGOs will be considered (not commercial operations).

Size of Awards
Awards will not exceed US$ 20,000 and proposals should normally be for amounts of not less than US$ 5,000.

Obligations of grant recipients

NGOs benefiting from the DAPC scheme will be required to submit a comprehensive report, both narrative and financial (Forms B and C), on completion of the activities financed by the grant. All grants awarded through UNODC are subject to audit in accordance with standard United Nations procedures. For this purpose, records of expenditures (such as invoices, purchase orders and payroll records) must be kept for a period of three years following the completion of activities. Full information on the conditions governing the awarding of grants will be sent out to each recipient organization once an award has been approved.

The information provided by the recipients will form the basis of reports submitted by UNODC to DAPC, Tokyo, on the activities and NGOs supported by the DAPC grants. Beneficiary NGOs should submit photographs of activities and/or participants together with their reports, as well as examples of other advocacy materials that may have been produced using the grant, such as pamphlets, bumper stickers, and t-shirts. These may be used in further fundraising campaigns.

For further information, please contact

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