

22 February 2008

ENGLISH ONLY

Commission on Narcotic Drugs**Fifty-first session**

Vienna, 10-14 March 2008

Item 3 of the provisional agenda*

Thematic debate on the follow-up to the twentieth special session of the General Assembly: general overview and progress achieved by Governments in meeting the goals and targets for the years 2003 and 2008 set out in the Political Declaration adopted by the Assembly at its twentieth special session**Complementary drug-related data and expertise to support the global assessment by Member States of the implementation of the declarations and measures adopted by the General Assembly at its twentieth special session****Report by East African Community*****Summary*

Pursuant to Commission on Narcotic Drugs resolutions 49/1 “Collection and use of complementary drug-related data and expertise to support the global assessment by Member States of the implementation of the declarations and measures adopted by the General Assembly at its twentieth special session” and 50/12 “Measures to meet the goal of establishing by 2009 the progress achieved in implementing the declarations and measures adopted by the General Assembly at its twentieth special session”, intergovernmental organizations active in the field of international drug control were invited to submit regionally consolidated comparative analyses of the current situation and trends in various areas of drug control in their fields of action with that prevailing in the period 1998-2000. Organizations were also invited to present the actions and changes that had taken place in their regions or fields of action in relation to the implementation of the goals and targets set in the Political Declaration and the measures to enhance international

* E/CN.7/2008/1.

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cooperation to counter the world drug problem, and related action plans, adopted at the twentieth special session of the General Assembly, 8 to 10 June 1998 (A/RES/S-20/2, A/RES/S-20/3 and A/RES/S-20/4).

Several organizations provided information in response to the above request. In addition, UNODC also received unprocessed data from a number of organizations.¹ Where relevant, this information was used to complement the data provided by Member States through the Biennial Reports Questionnaire (BRQ) and reflected in the fifth report of the Executive Director on the world drug problem (E/CN.7/2008/2 and Addenda 1 to 6).

The report of the East African Community contains information on the trafficking of drugs in the region over the period 1998-2008.

¹ ASEAN and China Cooperative Operations in Response to Dangerous Drugs (ACCORD); Caribbean Financial Action Task Force (CFATF); South-American Financial Action Task Force (GAFISUD); South-Caucasus Anti-Drug Programme (SCAD) and the Joint United Nations Programme on HIV/AIDS (UNAIDS).

1.0 Introduction

The East African Community is one of the eight regional economic groupings in Africa that brings together five countries in the Eastern Africa region namely Burundi, Kenya, Rwanda, the United Republic of Tanzania and Uganda. The grouping was established in 1999. Article 124 (5) of the Treaty for the Establishment of the East African Community, identifies Drug Trafficking as one of the areas for regional cooperation within the Peace and security sector. The provisions of the Treaty are further elaborated under Goal Number 5 of the East African Community Regional Strategy for Peace and Security on Implementation of the EAC Protocol to Combat Illicit Drug Trafficking; setting out the specific strategies to be adopted. These have further been provided with a legal domicile in the 2001 EAC Protocol on Combating Illicit Drug Trafficking in the East African Region including a Plan of Action for its implementation, ratified by all the Partner States.

The five Partner States have all, at global level, ratified the UN Convention on Psychotropic Substances of 1961 as amended by the 1972 Protocol and the UN Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances 1988. Further the five Partner States have all established specific institutional structures to address drug trafficking within their law enforcement infrastructure and enacted appropriate legislation.

2.0 Prevalence

Statistical information available indicates prevalence in trafficking of the following drugs in the region:

2.1 Cannabis Sativa (Bang)

Cannabis sativa is widely grown, consumed and trafficked in the East African Community Region. It is also trafficked to Europe and North America. The enabling weather coupled by the ease of transport within the region as well as wide consumption, hence ready market has substantially contributed to its trafficking. Whereas Eastern Uganda has recorded the highest production, the other Partner States still contribute significantly to its cultivation and hence trafficking. Long porous borders along with free movement within Lake Victoria can be cited among the facilitating factors.

2.2 Heroin

Although heroin is the second to cannabis in terms of trafficking in the region, it is the first in the class of hard drugs. The source remains principally the Far East notably Iran, Pakistan and Afghanistan. Initial trends were indicative of the use of East Africa, and in particular Nairobi as a transit point to others in Europe and North America and in recent times China as an emerging market, but this has over time changed with substantial consumption and demand in the local market.

2.3 Cocaine

Cocaine is rare in East Africa. However the recovery of over one ton in Kenya in 2004 gave an indication of the intended use of Eastern Africa by South American

cartels of the as a transit point for repackaging drugs destined for the European Market.

2.3 Mandrax

The demand for Mandrax in Southern Africa has in recent years led to the establishment of illicit manufacturing plants in the region. Within the last eight years two plants have been uncovered in Kenya and one in Tanzania specifically manufacturing drugs for the South African market. There are also cases of finished products being transited through the region.

2.4 Amphetamine-Type Stimulants

Though not common, measures are already being taken to ensure that they do not find their way into the regional market.

2.5 Cannabis Resin

Prevalent in Tanzania mostly trafficked in from outside.

On the overall Kenya and Tanzania are the preferred target transit points for drugs followed by the other Partner States. Its position as a regional communication hub, expatriate population, economic infrastructure and local demand may all be contributory factors in this regard.

3.0 Modes of Trafficking

As already indicated, by and large drugs trafficked through East Africa are intended for other Markets. This does not in any way imply that the local demand is non-existent. It is on the contrary, growing.

Cannabis sativa is mainly trafficked within the region to satisfy regional demand. However there have been indications that bang destined for Comoros and the Seychelles is also trafficked through Kenya and Tanzania taking advantage of the poorly policed Indian Ocean coastline.

The hard drugs, principally heroin originate from Asia and are transported by couriers who either conceal them in false bottomed suitcases, human cadavers, motor vehicle spares, domestic electronic equipments, and shoes. Body concealment however remains the principle mode of trafficking. However the recent trend has indicated reversion to the old modes of concealment as part of the frequent evolution of techniques employed by traffickers.

West Africans comprise a significant proportion of traffickers. However there has been an increase in the involvement of the citizens of the EAC States either covertly or overtly through use of forged travel documents. Women, remain the favourite targets for courier recruiters. Also detected in the recent past is the use of Europeans by African cartels as couriers for drugs destined for the European market from the East African Region. However more alarming are recent reports of East Africans trafficking drugs directly from Iran and other countries to China.

4.0 Trends/seizures

Over the last eight years, stringent measures have been put in place to detect and interdict trafficking activities. As a result a marked increase in seizures has been recorded. These are summarized in the table below:

<i>Type of Drug</i>	<i>Seizure (kg)</i>	
	<i>1998-2000</i>	<i>2001-2008</i>
Heroin	70.76	358.199
Cocaine	7.354	1 198.896
Cannabis and derivatives	23 146.135	2 447 716.095

The data above, while projecting an increasing trend in trafficking and possibly consumption of drugs also indicates the impact of law enforcement efforts hence a substantial increase in seizure. It is instructive to note that within the corresponding period large quantities of cannabis plant were cleared from hundreds of acres of land through joint efforts in the region.

5.0 Measures in place

A number of interdiction measures have been adopted by the EAC States to address the problem of drug trafficking. These include:

- Institutional measures: establishment of anti-narcotic units in the Police infrastructure with specific mandate on fighting illicit drug trafficking and consumption. Some countries have gone further to create institutions dedicated to advocacy and awareness creation on drugs as a demand reduction strategy (NACADA in Kenya and Drug Control Commission in Tanzania).
- Legal Measures: appropriate laws have been put in place in all Partner States to specifically address drug trafficking and consumption with the exception of Burundi, which penalizes such crimes against the Penal Code. Further EAC Protocol on Drug Trafficking has been acceded to by all EAC Partner States detailing collective action on Drugs.
- Political Measures: acceding to the regional protocol along with the legislation and practical support to anti-narcotics entities is a demonstration of political commitment by the Partner States to fight the vice.

6.0 Constraints/challenges

Whereas a lot of effort has been invested in measures to interdict illicit drug use and trafficking, these are not without challenges. These include:

- Limited technical and physical capacity: the paucity of resources to facilitate acquisition of up-to-date equipment as well as development of appropriate technical capacity have all stood in the way of effective anti-drug measures, including consumption and trafficking. International support in this regard will be appreciated, particularly those targeting collective use facilities and knowledge management infrastructure.

- Legal constraints: whereas the region has a collective Protocol to combat drug trafficking, enforcement shortcomings are manifested through variations in penalties across Partner States which does not augur well for collective action. There is urgent need for legislation harmonization in the region.
- Institutional constraints: prevalence of corruption, coordination shortcomings among various institutions engaged in anti-drug activities and limitations.
- Knowledge Management constraints: limited information sharing across and within the region among agencies all constrain anti-drug trafficking and consumption efforts.
- Treatment and rehabilitation facilities: inadequacy in rehabilitation capacity continues limiting efforts to turn around drug addicts.

7.0 Conclusion

It is evident that whereas substantial progress has been made in the fight against illicit trafficking and consumption of drugs in the region, international support in the form of capacity enhancement in profiling, monitoring, detection, intelligence gathering and vital forensic equipment is necessary to stay ahead of drug cartels. The question of socio-economic dimensions of drugs also needs to be accorded due attention through measures such as alternative livelihoods, alternative crops, awareness creation and other poverty alleviation measures.
