



INTERNATIONAL NARCOTICS CONTROL
BOARD

2012

PRESS KIT

Annual Report



EMBARGO

Observe release date:
Not to be published
or broadcast before
Tuesday, 5 March 2013,
at 1100 hours (CET)



For information only—not an official document.

EMBARGO:

**5 March 2013,
1100 hours CET**

MESSAGE FROM THE PRESIDENT

Shared responsibility is an essential element of global drug control efforts. INCB stresses the need to uphold the international drug control conventions, if suffering caused by drug abuse and drug-related crime and violence is to be prevented.

In the International Narcotics Control Board Annual Report for 2012, we emphasize the need for shared responsibility in efforts to address the world drug problem, and prevent related suffering. We make a number of recommendations to further improve the application of shared responsibility principles in drug control efforts. Indeed, shared responsibility is a cross-cutting element of virtually all drug-control issues.

We all have a shared responsibility to address drug control—be it at the international, national, community or personal level—and we have to move forward to prevent and reduce the suffering caused by inadequate availability of controlled medicines and by drug abuse, and the negative impacts associated with the illicit drug market.

The drug problem is a truly global problem that necessitates a global solution. This was the driving force in the formulation and adoption of the three international drug control conventions that today form the basis of the international drug control system.

In signing the conventions, Governments recognized the necessity of shared responsibility in drug control. They have committed themselves to meeting their national obligations as laid out in the treaties, with the aim of ensuring adequate availability of the internationally controlled medicines that are so essential in the treatment of pain and illness, including mental and other disorders, but preventing their abuse.

National drug regulatory authorities must have adequate capacity as this is a prerequisite to effectively meeting these obligations at the national level. Governments must ensure that their competent authorities are appropriately resourced and staffed, and INCB calls on Governments and the international community to provide technical assistance in this area, so as to promote effective and sustainable national regulatory control of drugs for licit purposes.

With international trade an inherent aspect of the licit distribution of medicines, global cooperation is essential to ensuring that availability for medical uses is unimpeded and that the substances are not diverted for the purpose of abuse.

INCB welcomes initiatives put forward at the national and regional levels to optimize the pursuit of the objectives set out in the international drug control conventions and encourages States to continue to actively participate in this important dialogue in a spirit of shared responsibility.





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However, INCB warns against initiatives that aim to broaden the use of internationally controlled substances beyond scientific and medical purposes. The limitation of use of internationally controlled substances to scientific and medical purposes is one of the cornerstones of the international drug control framework negotiated and agreed upon by the international community. Disavowing this pledge would not only constitute a violation of the letter of the conventions but would also undermine the humanitarian aims of the drug control system, and constitute a threat to public health and well-being.

Proponents of such ideas have argued that their initiatives would solve problems associated with illicit drug markets. In my foreword to the annual report, I explain why this would not work and how the drug control treaties are the best available tools for addressing the world drug problem, and for protecting humanity from the suffering caused by drug abuse, and the impacts, such as drug-related crime and violence, of trafficking and illicit cultivation and production of drugs.

Raymond Yans

President

International Narcotics Control Board



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SHARED RESPONSIBILITY—KEY TO EFFECTIVE DRUG CONTROL

INCB calls for renewing the spirit of shared responsibility in preventing the suffering caused by inadequate access to medicines, drug abuse, drug trafficking and illicit drug production

Shared responsibility is integral to international drug control efforts and is the key theme of the Annual Report for 2012 of the International Narcotics Control Board (INCB). As INCB President, Raymond Yans, stresses, “Shared responsibility is essential to the global efforts to prevent and reduce the suffering and loss of potential caused by drug abuse, and to reduce the negative impacts, such as crime, violence and corruption, associated with illicit drug markets.”

International cooperation in drug control is based upon the principle of shared responsibility: “it represents a mutual commitment of nations to common goals, and a commitment to complementary policy and joint action, within the framework of the international drug control conventions”, noted the President of INCB. Shared responsibility in the control of international trade in controlled medicines is essential if “people are to have access to medicines for the relief of pain and for the treatment of illness, including mental and other disorders, and if illicit distribution and abuse of these medicines is to be avoided”.

The Report tracks the historical development of the idea of shared responsibility and how it evolved as a principle of international law in the context of drug control from 1912, with the adoption of the 1912 International Opium Convention of The Hague all the way through to the three treaties that today make up the international drug control system.

The INCB Report makes a number of recommendations to Governments and the international community to further efforts in drug control in the context of shared responsibility. These recommendations give due attention to the need for a delicate balance between supply and demand reduction measures, and highlight the importance of prevention, treatment and rehabilitation measures in reducing illicit demand for drugs.

“Shared responsibility in drug control can only be effective when States fully meet their obligations at the national level,” as stressed by the President of INCB. Key to the effectiveness of national drug control is the sustainable capacity of the national regulatory authorities for the control of licit medicines/drugs. The Board, therefore, urges Governments to commit the necessary resources to maintain the capacity of their authorities and urges the international and donor communities to, as appropriate, help deliver technical assistance and support to strengthening the capacity of national competent authorities to ensure adequate availability and rational use of medicines yet prevent their diversion and abuse.



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Unprecedented proliferation and abuse of new psychoactive substances poses a grave risk to public health—INCB calls for decisive action by Governments

New psychoactive substances continue to constitute a growing threat to public health, as evidenced by increased emergency room admissions and calls to poison centres. Often called “designer drugs”, “legal highs” or “herbal highs”, these substances are not under international control but have similar psychoactive effects to controlled drugs. They can also include substances that are not necessarily “new”, but which are increasingly being abused.

The INCB Annual Report for 2012 addresses this issue as a special topic, and outlines the scope of this public health and drug control challenge. In recent years, there has been an unprecedented surge in the abuse of new psychoactive substances. For example, in Europe, the number of notifications of new psychoactive substances of abuse increased from an average of five per year between 2000 and 2005, to almost ten times that number in 2011, representing a new substance being notified almost every week. The total number of such substances on the market has been estimated to be in the order of thousands, posing a significant challenge to public health systems in preventing and dealing with their abuse.

To address this rapidly evolving challenge, Governments have been increasingly adopting various measures to limit the availability of these substances, including by establishing early warning systems, by tightening controls on retailers, by making use of food and medicine safety legislation to remove them from circulation and by resorting to emergency and temporary control measures.

The exchange of information between national Governments, as well as between different institutions at the national level, about new psychoactive substances is crucial, given the globalization of trade and the ease with which these substances are marketed and sold over the Internet. Primary prevention and education remain the key tools in ensuring that people are aware of the potential risks of new psychoactive substances and in deterring the abuse of these substances.

In its Annual Report, INCB encourages Governments to establish mechanisms to monitor the emergence of new psychoactive substances on illicit markets, including through early warning systems, and urges concerted action by States to prevent the manufacture, trafficking and abuse of these substances.

Abuse of prescription drugs: a serious health and social threat in many countries; major efforts required to guarantee availability and rational use of controlled medicines.

More action is needed to promote adequate availability and rational use of narcotic drugs and psychotropic substances that are used in the treatment of pain and illnesses such as epilepsy or attention deficit hyperactivity disorder, as well as mental and other diseases, according to the INCB Annual Report for 2012.



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The principal objective of the international drug control system is to ensure the availability of drugs for the treatment of pain and illness as well as for scientific purposes, yet at the same time prevent their diversion to trafficking and abuse. The INCB Annual Report gives an update on the status of efforts to ensure access to controlled medicines.

Of particular concern is the unabated increase in a number of countries in the already high levels of consumption and abuse of pharmaceutical preparations containing methylphenidate and other substances, used for the treatment of attention deficit hyperactivity disorder (ADHD). The report lists a number of recommendations aimed at addressing the problem, including education of health professionals, tighter controls on storage and distribution, and awareness-raising of the public about the health risks associated with abuse of such substances.

The abuse of prescription drugs has continued to spread in all regions of the world and has increased substantially in recent years in North America, South and South-East Asia, as well as some countries in Europe and South America, representing a serious health and social challenge. The abuse of prescription drugs by injection, increasing the risk of HIV, hepatitis B and hepatitis C infection, is apparent in many countries, particularly in South Asia. More than 6 per cent of secondary school students abused tranquilizers in some South American countries, while the problem of abuse of tranquilizers and sedatives is also seen in other regions and countries.

Abuse of medicines containing narcotic drugs has developed into a major threat to public health in North America and may, according to the Board, be caused partly by widespread availability of such medicines due to unethical practices, including poor prescribing practices. The INCB Annual Report presents a number of steps that Governments can take to address the problem while the Board has called upon Governments to develop effective prevention strategies including through promoting rational use of medicines.

Another major challenge in some countries is associated with medical cannabis schemes, which are permitted by international law under specific conditions set forth in the 1961 Single Convention on Narcotic Drugs. If not adequately regulated, such schemes may contribute to increasing levels of cannabis abuse, i.e. of use for non-medical and non-scientific purposes. INCB elaborates upon this issue in its report.

International community must be proactive in order to counter the diversion of and trafficking in precursor chemicals.

Chemical trafficking organizations have become more resourceful and increasingly adaptive in the ways that they obtain the precursors they need. In order to circumvent effective international precursor controls, traffickers are now more likely to use new or specially designed non-scheduled substances, and/or shift illicit manufacture of drugs of abuse to regions with weaker domestic regulatory and law enforcement capacity.

The INCB Annual Report on Precursors, launched together with the INCB Annual Report for 2012, identifies the gaps that currently exist in the international framework for precursors control. The report shows that new chemicals with little or no legitimate commercial use, such as alpha-phenylacetoacetonitrile (APAAN), are now being obtained throughout Europe and North America



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in large quantities by traffickers in order to illicitly manufacture highly addictive amphetamines. This development follows a similar spread, in North and Central America, of seizures of derivatives of phenylacetic acid, identified by the Board in its 2010 and 2011 reports.

INCB also continues to be concerned about the diversion of large quantities of preparations containing ephedrine for the illicit manufacture of methamphetamine in Asia. Furthermore, the diversion of acetic anhydride from domestic distribution channels which is subsequently smuggled across national borders and into Afghanistan remains the most common method of obtaining that chemical for heroin manufacture. Domestic diversion of potassium permanganate as well as its illicit manufacture for use in the illicit production of cocaine continues in South America.

These problems underline the critical importance of well-functioning domestic controls to ensure the effectiveness of the international system for monitoring trade and preventing the diversion of precursor chemicals. Countries that do not have basic control systems in place may be unable to fulfil their obligations under the 1988 Convention and they and their neighbours are more likely to become targets of organized crime.

Flexible solutions for Governments have already proven effective with the development of the INCB Pre-Export Notification Online (PEN Online) system—the stalwart of the international precursor system for monitoring legitimate trade—in operation since 2006. In March 2012, INCB launched the new Precursors Incident Communication System (PICS). Competent authorities from across the globe can securely share valuable intelligence on chemical trafficking in real-time and more quickly initiate bilateral investigations. PICS together with the PEN Online system and international cooperative activities, such as Project Prism and Project Cohesion, are the most effective tools available to Governments to substantially enhance their precursor control efforts.



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REGIONAL HIGHLIGHTS

AFRICA

The social and political changes in North Africa that began in Egypt, Libya and Tunisia in 2011 and were still ongoing in 2012 have reportedly caused deficiencies in the drug law enforcement capabilities in some of these countries.

Major political changes also took place in Guinea-Bissau and Mali in early 2012, which may affect the fight against drug trafficking in West Africa and elsewhere. While transitional Governments have now been installed in the two countries, the situation remains unstable, in particular in the case of Mali. That is of concern as both Guinea-Bissau, a hub for cocaine trafficking in the sub-region, and Mali, a transit country for cocaine and cannabis resin, have been targeted by international drug traffickers.

While cannabis remains the most widely cultivated, trafficked and abused drug in Africa, new threats have emerged, in particular the illicit manufacture, trafficking and abuse of amphetamine-type stimulants. Until few years ago, illicit manufacture and abuse of methamphetamine appeared to be largely confined to Southern Africa. Methamphetamine manufacture has now emerged in West Africa, notably Nigeria, and there is increasing trafficking in amphetamines through West and East Africa to East and South-East Asia.

There has been an increase in levels of cocaine abuse in West Africa as in recent years the region has emerged as a transit area for narcotics, especially cocaine, from South America to the lucrative European market. Trafficking of heroin to and through East Africa is increasing and has resulted in an increase in levels of heroin abuse, notably in Kenya, Mauritius, Seychelles and the United Republic of Tanzania. Of particular concern is the increasing abuse of heroin by injection in a subregion that is seriously affected by HIV and AIDS.

The abuse of and trafficking in tramadol, a synthetic analgesic not under international control, has become a major concern in Africa.

Lack of reliable data on the extent and nature of drug abuse in Africa poses a challenge in developing prevention, treatment and rehabilitation programmes.



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AMERICAS

Central America and the Caribbean

The Central America and Caribbean region continues to be used as a major transit area for cocaine from South America to the North American market. In general, a decline in seizures of cocaine was seen in 2010, possibly as a result of declining demand in North America. The increasing power of and competition among drug gangs has contributed to raising corruption and homicide rates in the region, especially in Belize, El Salvador, Guatemala and Honduras, the so-called “Northern Quad-angle”, which have been particularly affected by significant levels of drug-related violence.

INCB is concerned about the increasing influence of powerful drug cartels on the “maras” (local gangs in Central America), which have become diversified and internationalized and are now conducting their illicit drug-related activities and trafficking with the support of small- and medium-size cartels. This poses a new challenge to the Governments of the region in tackling illicit drug trafficking and drug-related violence. The destabilizing effects of drug trafficking and their impact on regional security have increased and the region has been affected by links between drug trafficking and increased levels of violence, particularly drug-related violence in the region.

After a decline in recent years, there are indications that trafficking in cocaine through the Caribbean subregion is increasing. Colombian authorities reported that most of their recent seizures pointed to the increasing importance of the Caribbean route as opposed to previous years, when seizures occurred mostly in the Pacific region. It is estimated that about 280 tons of South American cocaine is destined for North America. Much of it travels by way of Central America and the Caribbean, where cocaine abuse is also increasing. Central America also remains a region of concern regarding the abuse of pharmaceutical preparations that contain stimulants.

North America

Despite declining prevalence rates for some drugs, North America remains the biggest illicit drug market in the world, as well as the region reporting the highest drug-related mortality rate. Approximately 1 in every 20 deaths among persons aged 15 to 64 in North America is related to drug abuse.

Prescription drug abuse in North America continues to represent a major threat to public health and remains one of the biggest challenges to the drug control efforts in the region. Given the fact that most users of prescription drugs for non-medical purposes obtained the drugs from a friend or family member, Governments in the region have recognized the need to establish drug disposal programmes including so-called “prescription drug take-back days”. Through initiatives such as these, tons of unneeded pharmaceuticals have been removed from circulation in North America over the past few years.

Drug abuse among Canada’s First Nations communities has remained a major threat to public health in these communities.



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In Mexico, drug-related violence continued to constitute a major threat to public security nationwide. According to figures released by the Government of Mexico, over 60,000 people have been killed as a result of drug-related violence since 2006.

In the United States, voters in Massachusetts approved a ballot initiative which would allow the use of cannabis for “medical purposes” in that State, making it the 18th jurisdiction in the United States to do so. In its Annual Report, the Board reminds Governments that State-sponsored “medical cannabis” schemes must be administered according to the provision set forth in the 1961 Single Convention on Narcotic Drugs as amended by the 1972 Protocol.

Also in the United States, voters in the States of Colorado and Washington approved a ballot initiative which would allow the use of cannabis in these jurisdictions for recreational (i.e. non-medical and non-scientific) use. The INCB Report reiterates that the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, limits the licit use of narcotic drugs including cannabis to medical and scientific purposes. With regard to the ballot initiative in the United States, the Board takes note of a Statement made by the Office of the Attorney General of the United States in December 2012, subsequent to the finalization of its report.

South America

The total area of illicit coca bush cultivation in 2011 significantly decreased in Bolivia (Plurinational State of) (27,200 ha) and slightly increased in Colombia (64,000 ha) and Peru (62,500 ha). The total area under illicit coca bush cultivation in South America in 2011 was estimated at 153,700 ha, indicating a minor decrease from the 154,200 ha reported in 2010.

In March 2012, the Government of Peru approved the National Drug Control Strategy 2012-2016. The Strategy promotes the development of projects and activities supporting integrated and sustainable development in areas where coca bush is grown, control of the drug supply and the prevention and rehabilitation of drug abuse. Its main goals include reduction of the potential production of coca leaf by 30 per cent by 2016.

The large seizures of cannabis in South America are a source of concern, as they might be a sign of a significant increase in the magnitude of cannabis production in the region. In its report, INCB calls upon the Governments of the countries in South America to determine, to the extent possible, the magnitude of and current trends in the illicit cultivation and use of cannabis plants in their territories and to further strengthen their efforts to combat such cultivation.

ASIA

East and South-East Asia

East and South-East Asia continues to have the second largest total area of illicit opium poppy cultivation in the world, representing one-fifth of the global total. Increased illicit cultivation of opium poppy has been reported since 2007 in the Lao People’s Democratic Republic and Myanmar.



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To address the issues in the region, INCB calls upon the Governments of the countries in question, as well as the international community, to take action, in particular in the areas of alternative development and eradication.

An illicit manufacturing hub, East and South-East Asia represents a growing illicit market for amphetamine-type stimulants, especially methamphetamine. Almost half of the global seizures of methamphetamine in 2010 were made in the region, and further increases were reported throughout the region in 2011. Large-scale trafficking of ephedrine and pseudoephedrine, used in the illicit manufacture of amphetamine-type stimulants, continued.

In the region, trafficking in and abuse of prescription drugs and over-the-counter pharmaceutical preparations containing internationally controlled substances is a serious problem. Seizures and abuse of products containing morphine, codeine and benzodiazepines have been reported in the region, with the products having been either smuggled from South Asia, or stolen or obtained from pharmacies with forged prescriptions. In its report, INCB urges Governments to strengthen control measures for trade and distribution of these products. The abuse of new psychoactive substances is also a growing problem, with seizures of such substances reported by a number of countries in the region.

South Asia

Pharmaceutical preparations continue to be diverted from India's pharmaceutical industry and smuggled into countries in South Asia and beyond. The Government of India has recognized the problem and has taken strong measures to combat it.

Drug trafficking and abuse is rising in a number of countries in South Asia. In the Maldives, drug trafficking has shown significant increases in recent years; drug abuse is also rising in Bhutan. In Bangladesh, seizure data suggest that trafficking in and abuse of codeine-based cough syrups, buprenorphine and methamphetamine/caffeine combination tablets ("Yaba") is rising, while trafficking of ephedrine and pseudoephedrine in India appears to be increasing.

Governments across South Asia have taken steps to counter the threat posed by drug trafficking and abuse since the Board's last report. These have included a new national policy and enhanced border security and law enforcement measures in India; new drug control legislation in the Maldives; a new medicines regulation in Bhutan; efforts to eradicate illicit cultivation of opium poppy across the region; a new national drug policy underway in Bangladesh; and efforts to strengthen and professionalize the addiction treatment workforce in Sri Lanka.

West Asia

West Asia continues to have the greatest share of global illicit opium poppy cultivation and illicit opiate production, primarily in Afghanistan. Afghanistan saw a significant rebound in illicit opium poppy cultivation, reaching 154,000 hectares (ha) in 2012, 18 per cent more than the previous year, as half of the 34 provinces continue to cultivate opium poppy. The uncertain security situation



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and political instability prevailing across West Asia provides fertile ground for illicit activities that generate profits for both regional and international criminal networks, resulting in increasing levels of illicit trafficking in drugs and money-laundering.

Demand for various illicit stimulants, such as cocaine and methamphetamine, appears to be increasing in parts of West Asia. Cocaine seizures are occurring with increasing frequency and are of a larger volume, with cocaine seizures increasing by more than 20 times between 2001 and 2010. In 2011, Turkey seized a record 589 kg of cocaine—nearly double the amount seized in 2010—and reported that the number of cocaine seizures had increased dramatically. Seizures of these drugs have steadily increased, and abuse, for example, of methamphetamine in the Islamic Republic of Iran, has also been reported to be on the rise.

Weaknesses in timely information exchange among Governments continue to hinder backtracking investigations to identify the source of chemical diversion in West Asia, in particular in Afghanistan and neighbouring countries. Therefore, to enhance intelligence-sharing, INCB encourages all Member States to communicate all illicit chemical-related incidents through the Board's secure online global communication platform, the Precursors Incident Communication System (PICS).

The prevailing situation across the Arab subregion contributed to the spread of illicit drug trafficking in the Middle East. Saudi Arabia and Jordan continue to be affected by counterfeit "captagon" tablets containing amphetamine. In 2011, the volume of amphetamines (including "captagon") seized in the region amounted to 22 tons, with Saudi Arabia remaining the main country of destination. Abuse of prescription drugs containing psychotropic substances, in particular benzodiazepines and stimulants, has been reported by most of the countries in the region.

EUROPE

The abuse of illicit drugs in Europe has stabilized in recent years, although at a high level. However, the increasing abuse of, as well as illicit manufacture of and trafficking in, new psychoactive substances is a major challenge in West and Central Europe, with a record of 49 new psychoactive substances reported to the European Union early warning system in 2011. The number of Internet sites selling psychoactive products destined for countries of the European Union more than quadrupled from January 2010, to 690 such sites in January 2012. Many Governments are addressing this challenge by placing individual or groups of substances under national control.

A further challenge is polydrug abuse—the consumption of illicit drugs in combination with other drugs, alcohol and non-controlled substances. According to authorities of the Russian Federation, the number of desomorphine users in the country is growing. In 2011, significant increases in new cases of HIV infection based on a high prevalence of HIV among injecting drug users were reported in Bulgaria, Greece and Romania.

Bosnia and Herzegovina is now an important regional hub for trafficking of narcotic drugs. The main trafficking routes pass through Bulgaria, Romania and the former Yugoslav Republic of



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Macedonia to Kosovo¹, then through Montenegro and Serbia to Bosnia and Herzegovina, and from there to Croatia and Slovenia and Western Europe. Cocaine trafficking through ports in Croatia and Greece for shipments to Eastern Europe is increasing.

In the region, an increased number of laboratories used for the illicit manufacture of amphetamines have been detected; some of these sites have had a significant manufacturing capacity. Methamphetamine appears to still be replacing amphetamine in Northern and Western Europe, and the quantity of methamphetamine seized in Northern Europe has increased significantly.

UNODC launched in 2012 a new regional programme for South-Eastern Europe for the period 2012-2015 on “Countering illicit trafficking and organized crime for improved governance, justice and security”. Also in 2012, the Government of Ukraine adopted its National Drug Strategy.

OCEANIA

The levels of abuse and illicit manufacture of amphetamine-type stimulants in Oceania remain among the highest in the world. However, strengthened control in Australia and New Zealand of precursor chemicals used in the manufacture of amphetamine-type stimulants has resulted in more seizures of methamphetamine. Among other countries in the region, especially the Pacific island States, there is a lack of information on the drug trafficking situation, yet in these States there are indications that methamphetamine is available and that levels of abuse among young people are considerable, even in remote areas.

Levels of abuse of cocaine are also increasing in the region, and large seizures have been reported, in particular in Australia. Cocaine traffickers continue to target the illicit drug markets of Australia and New Zealand. The growing abuse of new psychoactive substances is a serious challenge in Australia, with a large number of substances available.

INCB welcomed the decisions by the Governments of Nauru and Niue to accede to the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. However, nine States in the region have yet to become parties to all three of the international drug control conventions. The Board urges the Governments of the States concerned—the Cook Islands, Kiribati, Nauru, Palau, Papua New Guinea, Samoa, Solomon Islands, Tuvalu and Vanuatu—to become parties to all three of the international drug control treaties. The fact that these States are yet to ratify the conventions is a matter of concern, especially in view of apparent increases in trafficking in and illicit manufacture of drugs in the region.

¹All references to Kosovo in the present document and reports of INCB should be understood to be in compliance with Security Council resolution 1244 (1999).



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ABOUT THE INTERNATIONAL NARCOTICS CONTROL BOARD

The International Narcotics Control Board (INCB) is the independent and quasi-judicial body monitoring and promoting the implementation of the United Nations drug control conventions. INCB was established in 1968 in accordance with the Single Convention on Narcotic Drugs, 1961, and had predecessors under the former drug control treaties, dating back to the time of the League of Nations.

INCB consists of 13 members who are elected by the Economic and Social Council (ECOSOC) and who serve in a personal capacity, and not as government representatives.

The functions of INCB are laid down in the three international drug control treaties: the Single Convention on Narcotic Drugs, 1961; the Convention on Psychotropic Substances of 1971; and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. INCB cooperates with Governments to ensure the availability of drugs for medical and scientific uses and to prevent the diversion of drugs from licit sources to illicit channels and abuse. INCB also cooperates with Governments to prevent the diversion of precursor chemicals from licit trade to the illicit manufacture of drugs. INCB identifies weaknesses in national and international control systems and, through its cooperation with Governments, contributes to correcting such situations.

INCB has a secretariat that assists it in the exercise of its treaty-related functions. Based in Vienna, the INCB secretariat is an administrative entity of the United Nations Office on Drugs and Crime but is under the direction of the Board in all substantive matters relating to the exercise of powers and the performance of functions of the Board pursuant to the Conventions.

Based on its activities, INCB publishes an annual report that is submitted to ECOSOC through the Commission on Narcotic Drugs. The report provides a comprehensive overview of the drug control situation in various parts of the world. As an impartial body, INCB tries to identify and predict dangerous trends and suggests necessary measures to be taken. In its Annual Report, the Board makes recommendations to Governments and international organizations for improving the global drug control situation.

INCB also publishes annually a report on precursors and chemicals frequently used in the illicit manufacture of narcotic drugs and psychotropic substances, and technical publications on narcotic drugs and psychotropic substances.

Printed in Austria

V.13-80101—January 2013—600