



UNODC

United Nations Office on Drugs and Crime

**Simultaneous
launches: Vienna
and Bangkok**

AMPHETAMINES AND ECSTASY

2011 Global ATS Assessment

13 Sep 2011



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- 1. Background**
- 2. The Big Picture**
- 3. Global trends**
- 4. Regional trends – E/SE Asia**
- 5. Effective responses**



The international drug control system

1. Based on 3 treaties: 1961, 1971, 1988
2. Objectives:
 1. Protect public health
 2. Ensure controlled availability for medical / scientific purposes
 3. Restrict non-medical drug use
3. Near-universal adherence
4. Collective will of governments
5. Re-validated: 1998 (Gen. Assembly) and 2009 (CND)



Role of UNODC

1. Member States determine and approve our work programme
2. Provide reliable trend analysis (latest triennial SMART Global Report in 2008)
3. Promote norms, laws and conventions
4. Provide technical assistance
5. Promote regional cooperation
6. Advocacy on international drug control system



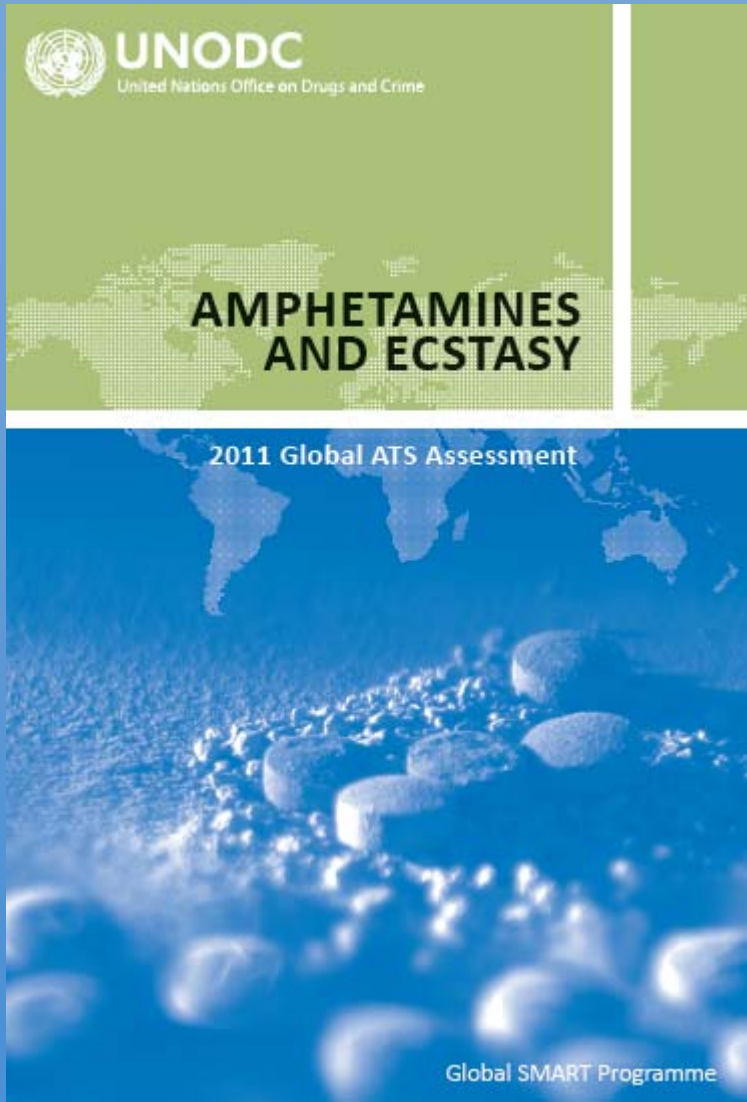
S – synthetics

M – monitoring:

A – analyses,

R – reporting and

T – trends



Funding support for SMART



- Australia



- Canada



- Japan



- Republic of Korea



- New Zealand



- Thailand



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The Big Picture

“Containment” has worked during past decade

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

WARNING SIGNS

- **SE Asia: resurgence of opium cultivation**
- **SE Asia: soaring production, trafficking, use of ATS**



What are Amphetamine-Type Stimulants (ATS)?

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



*Tableted
methamphetamine
(Yaba)*



DEMAND: ATS attraction

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



SUPPLY dynamics

- Unlike plant-based drugs, can be manufactured anywhere
- Variety of precursor chemicals
- Labs close to markets
- No longer a “cottage” industry – links to TOC groups



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Global trends

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



1. New manufacturing areas

- **South-East Asia:** Indonesia, Malaysia, Cambodia
- **Middle East:** Islamic Republic of Iran
- **Central / South America:** Argentina, Belize, Brazil, Guatemala, Nicaragua and Suriname
- **Europe:** Austria, Belarus, Lithuania, Netherlands, Poland, Portugal
- **Africa...**

1. New manufacturing areas

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

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

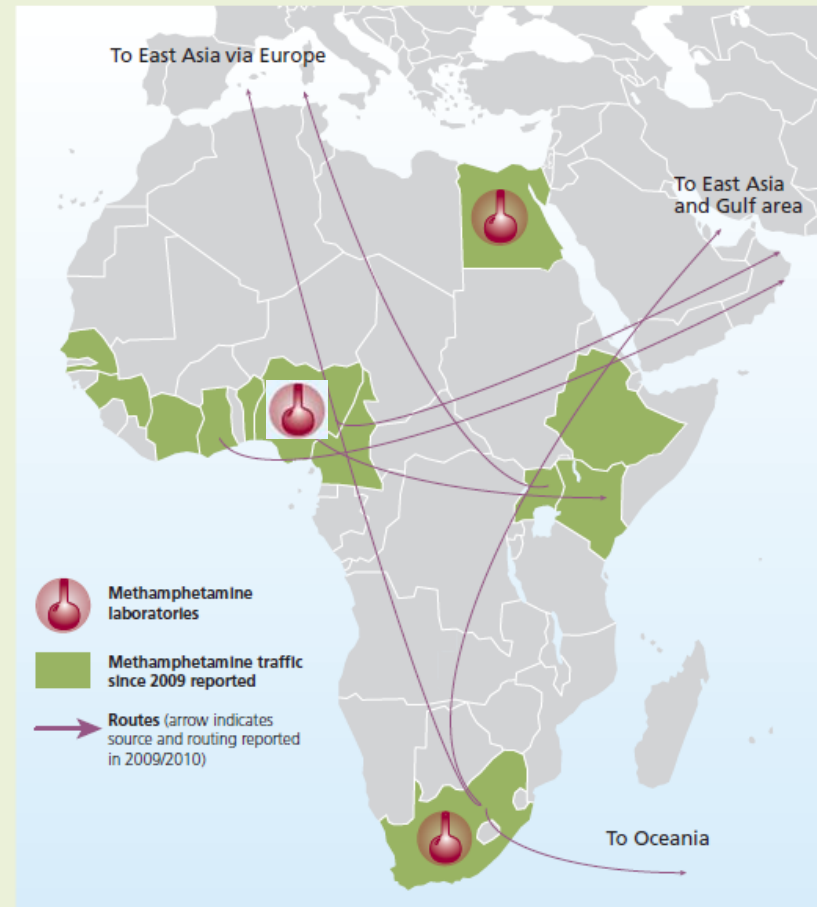


Source: NDLEA Official Communication, 2011



1. New manufacturing areas

Trafficking routes of methamphetamine in Africa



Source: UNODC, 2011a



2. New ATS trafficking routes

- **Via the Mekong River**: now a key route for trafficking methamphetamine produced in the Golden Triangle
- **From West and East Africa**: methamphetamine by air via couriers
- **From the Islamic Republic of Iran**: to Turkey by land, then trafficked by air to East and South-East Asia



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Importance of ATS in SE Asia

- **ATS: main illicit drugs threat in East and South-East Asia**
- **E / SE Asia = 1/2 world's meth seizures**
- **E / SE Asia = 1/2 world's ATS users**

Drug of choice: ATS in SE Asia

Methamphetamine pills					
Cambodia	China	Lao PDR	Myanmar	Thailand	Viet Nam
2	2	1	3	1	3
Ecstasy					
Cambodia	China	Lao PDR	Myanmar	Thailand	Viet Nam
•	3	•	•	9	3
Crystalline methamphetamine					
Cambodia	China	Lao PDR	Myanmar	Thailand	Viet Nam
1	2	•	•	7	3

• = Not reported

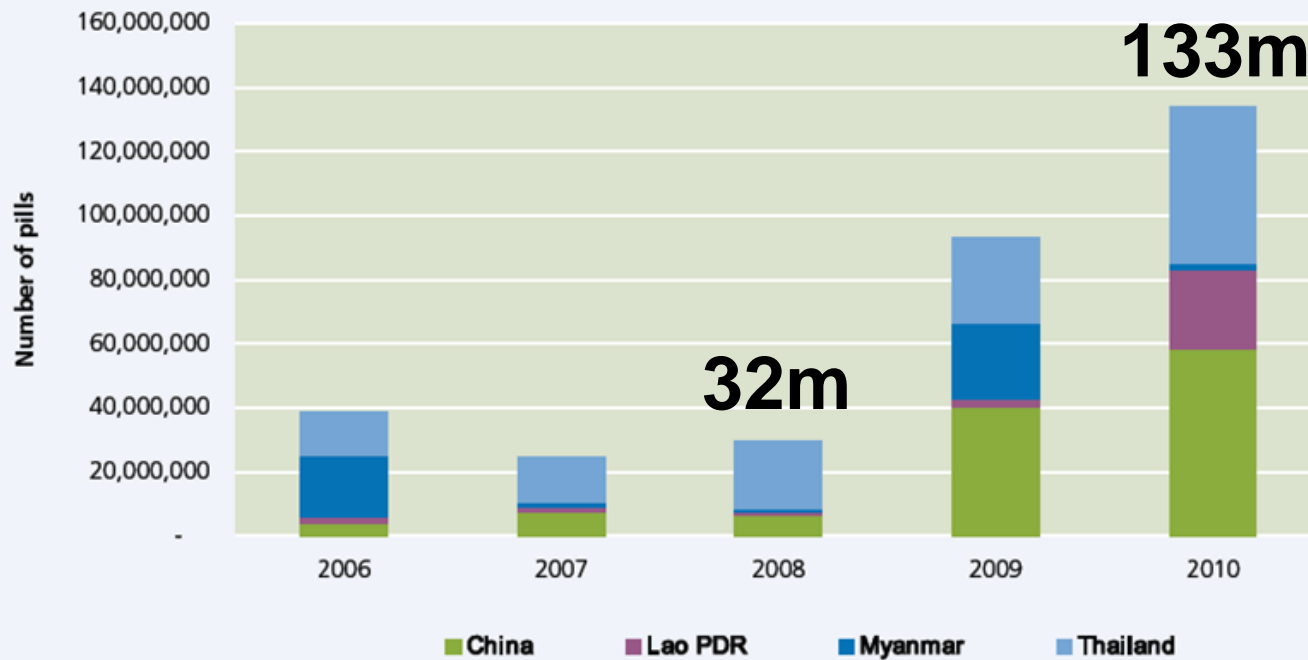
Source: DAINAP

= 80% treatment admissions



1. Expanding ATS Markets

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



Source: DAINAP

1. Expanding ATS markets

	<u>2005</u>	<u>2009</u>
ATS labs busted in E/SE Asia	49	458



Meth pill press seized
outside of Bangkok –
Sep 2011
Source: The Nation

1. Expanding ATS markets

“Traditional” producers

- China
- Myanmar
- Philippines



Emerging producers

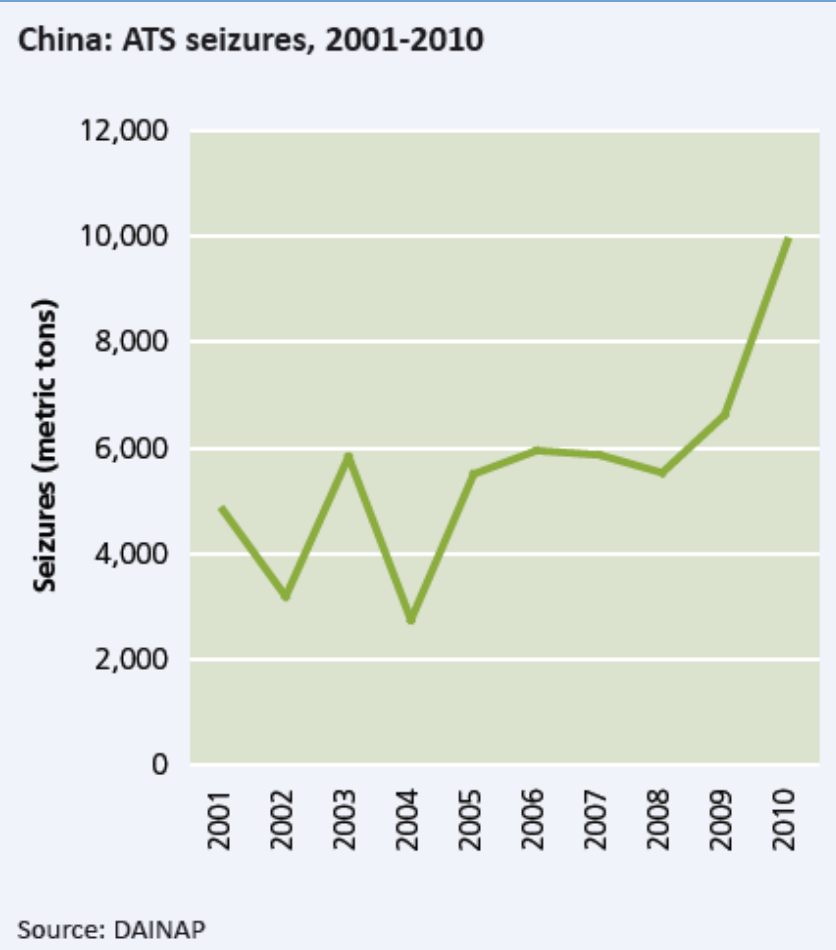
- Indonesia (crystal + “E”)
- Malaysia
- Cambodia





1. Expanding ATS markets

CHINA

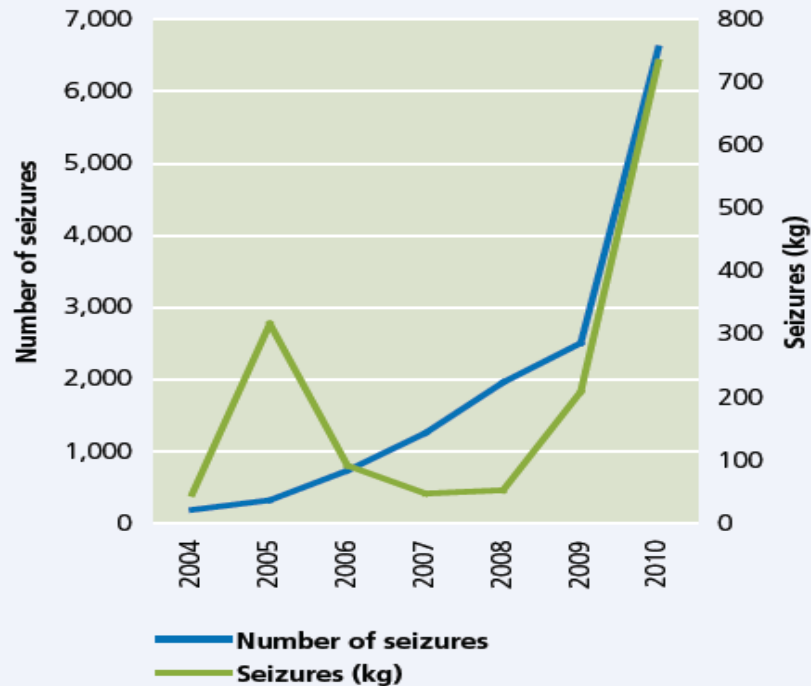




1. Expanding ATS markets

THAILAND

Thailand: seizures of crystalline methamphetamine, 2004-2010



Source: DAINAP



2. Crystal Meth

- Thailand seizures: 47 kg (2007) – 773 kg (2010)
- Thailand treatment: 843 (2009) – 2019 (2010)
- Viet Nam: “significant increase in use since 2008”
- Main drug of use in: Brunei, Cambodia, Japan, ROK, Philippines

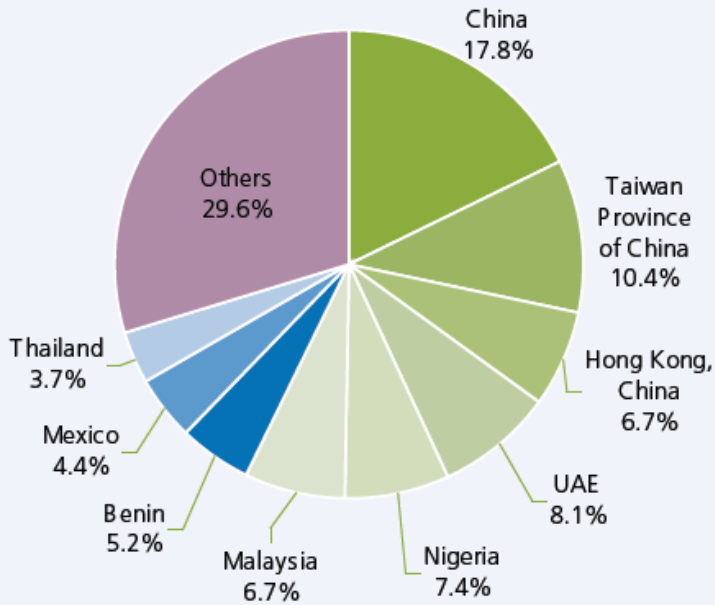




3. Inter-regional trafficking by TOC groups

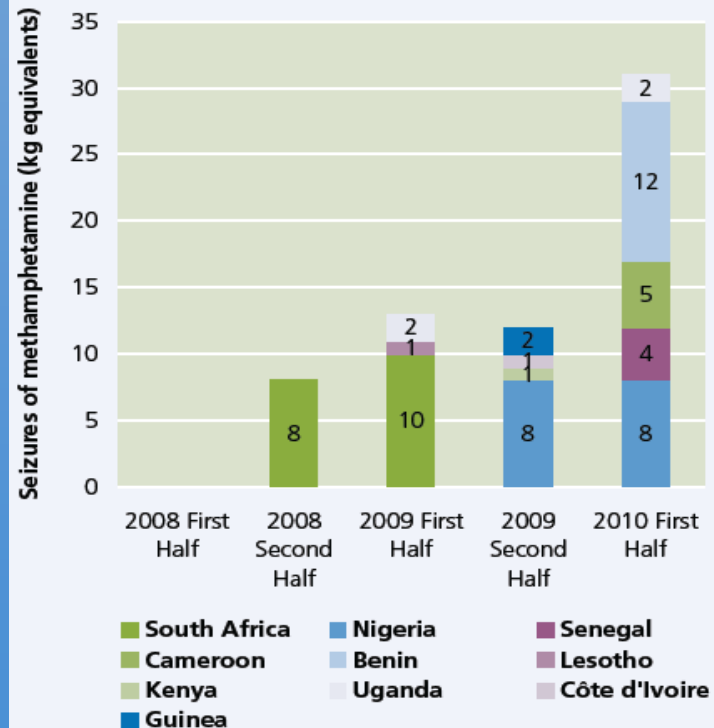
Case Study: JAPAN

Sources of methamphetamine trafficking to Japan, 2010



Source: JNPA, 2011

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



Source: JCITAC, 2010



3. Inter-regional trafficking by TOC groups

AFRICAN TOC groups

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

3. Inter-regional trafficking by TOC groups

IRANIAN TOC groups

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



4. Shifting trends in precursor trafficking

Pharmaceutical seizures

(millions of pseudo-ephedrine tablets)

	2008	2009	2010
Cambodia	0	0	19.5
Myanmar	9.8	9.4	4.4
Thailand	0.7	1.9	33.0

Source: DAINAP, ONCB

4. Shifting trends in precursor trafficking

Stricter controls
over bulk
precursors

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

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



Source: CCDAC, 2009



5. Injecting use – methamphetamine

- Thailand:
 - 2nd most common mode of administration for crystal meth
 - 3rd most common mode for meth pills
- Japan: primary mode of administration for crystal meth
- New Zealand: meth = most commonly injected drug



5. Injecting use – methamphetamine



Cambodia

- First report: 2007



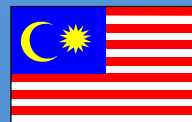
Indonesia

- First report: 2007



Lao PDR:

- First report: 2008



Malaysia

- First report: 2009



Thailand:

- First report: 2009



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EFFECTIVE STRATEGIC RESPONSES

1. Continue to collect data/knowledge
2. Evidence-based prevention and treatment
3. Harm reduction for people who inject drugs
4. Law enforcement
5. Regional LE/prosecutorial cooperation



**“It takes a network
to defeat a
network”**



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Global SMART
Programme

Thank you

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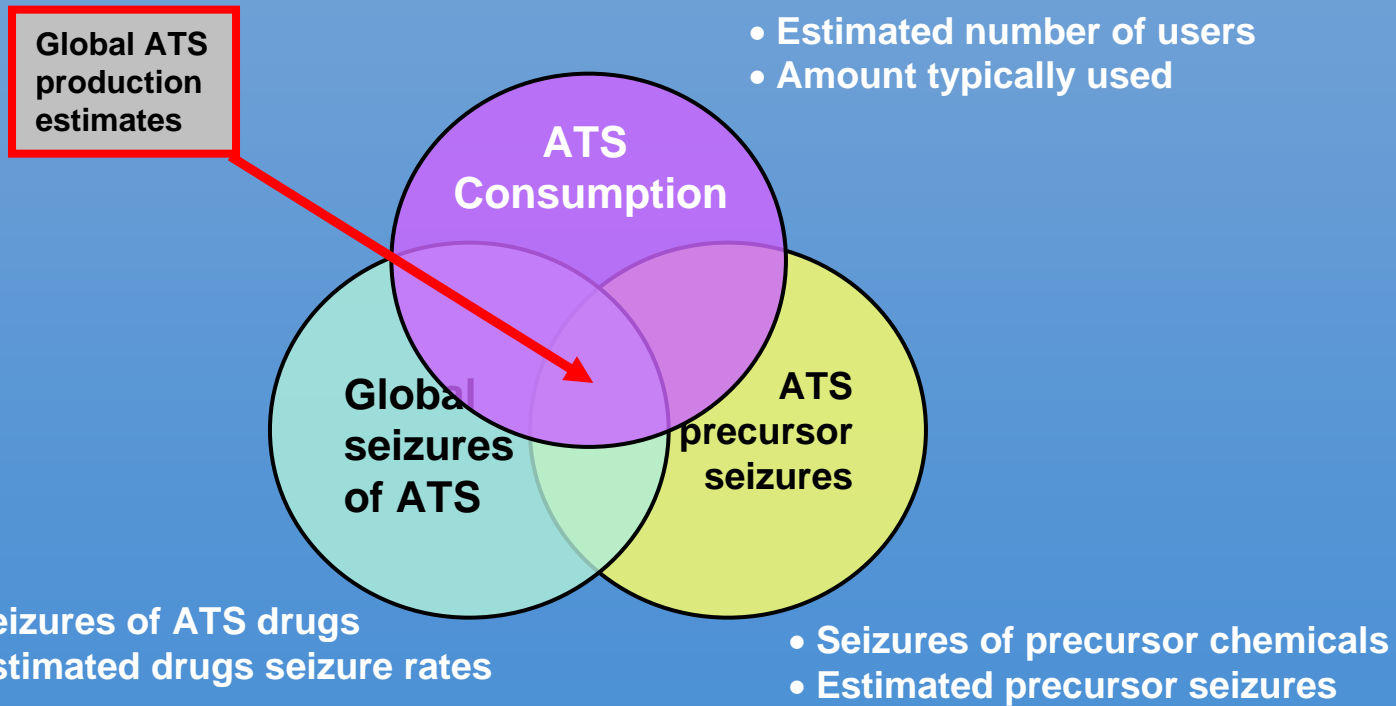
More sources for ATS information:

www.unodc.org

www.apaic.org



How we arrive at global ATS estimates



Main health risks

Effects are a function of dose and frequency of use

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



ATS: unique characteristics

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