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NOTE

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Subject:	Regional Report on the Near East ¹

State of Israel

1. General situation in the country (Drugs situation in the host country including production, trafficking and demand related issues)

Israel is not a major narcotics producing or trafficking country, but has a significant domestic market for illegal drugs, facing an increasing demand for cocaine, hashish and marijuana, as well as heroin, LSD and ecstasy. Since the end of the Second Lebanon War in 2006, the Jordanian border has become a gate for drug entry into Israel, in particular for heroin, cocaine and hashish.

Transit & Smuggling: Israel is still a transit country into Jordan, Egypt and Saudi-Arabia. Increased smuggling of liquid cocaine from South America into Israel, by smuggling into wine bottles, or absorbed into clothing items.

¹ At the moment of the preparation of the report, no country reports were received from Syria, Kuwait, Yemen and Oman.

The main channels for smuggling drugs are the official land border crossings. Israelis and foreigners are involved in the smuggling of drugs via "air". Some are smuggled by "innocent mules". Arab-Israelis are involved in smuggling drugs through neighbouring countries.

Synthetic drugs

- Use of cannabis and synthetic cannabinoids is on the rise. The Israeli Anti-Drug Authority (IADA) regularly adds new synthetic drugs to Israel's Dangerous Drugs Ordinance, which provides the legislative basis for drug definition, penalties, and related enforcement authorities.
- An increase in "Hydrophone agriculture", home cultivation for commercial purposes.
- An increase in the number of Kiosks (24/7 convenient stores) selling dangerous substances which are not included in the Controlled Substances Act (ex. "Dr. G").

2. Short update on the country's anti-drug strategy

2.1 Legal/legislative changes, including money laundering and chemical precursors

In July 2013, the 'Kiosk Drug' law passed its final reading in the Knesset, expanding the police's authority to confiscate materials suspected as hazardous to public health or safety. The law was introduced following increasing numbers of cases of young people using dangerous substances sold in kiosks.

A Memorandum of Understanding between the European Monitoring Centre for Drug and Drugs Addiction (EMCDDA) and IADA was signed on 4 February 2014 in Jerusalem. A representative from IADA attended the 2nd Reitox week in May. Among relevant sources of expertise of interest, one can mention the New Psychotropic Substances (NPS), for which an Israeli expert participated in the International Forum on NPS organised by the EMCDDA and by NIDA. Israel appointed a national correspondent to the EMCDDA.

United Nations Office on Drugs and Crime (UNODC) Executive Director, Yury Fedotov, signed a Memorandum of Understanding (MoU) in Jerusalem, on the 8th of June 2014, which furthers cooperation between UNODC and Israel in countering drugs and crime.

2.2 An assessment of the government's political will to conduct a comprehensive and resolute anti-drugs policy

Due to the multi-faceted and complex nature of the drug problem, which touches on many different areas and demands the involvement of a variety of government agencies, the Prime Minister of Israel is the Minister responsible for the realization of Drug Control Authority Law. However, in 2009, the parliament approved the government's decision to grant the Minister of Internal Security responsibility over the Israel Anti-Drug Authority.

The State of Israel devotes much effort to the implementation of a comprehensive demand reduction strategy. Coordinated by the Israel Anti-Drug Authority (IADA), in cooperation with relevant ministries such as the Ministry of Health, Ministry of Education, Ministry of Social Affairs and Social Services and other governmental agencies and NGOs, evidence based prevention and treatment programs are implemented throughout the country, targeting the general and at risk populations. IADA also addresses addiction as a chronic health disorder, and aims to provide adequate and accessible treatment and rehabilitation solutions to all drug and alcohol abuse victims.

3. Enumeration of major bilateral and multilateral country national programs (including those that support demand reduction)

In the multi-lateral front, Israel has strong working relations with international organizations working to fight the plague of substance abuse, among them: UNODC, INCB and WHO. Cooperation with our European counterparts: European Council and European Union have also raised to a new level, in particular collaboration with the Pompidou Group and the EMCDDA. At a regional level, cooperation between neighboring countries is essential and necessary in order to control the flow of illicit drugs and crime. A Memorandum of Understanding agreed upon by Israel and the Palestinian Authority in Cairo in 2005 paved the way for information exchange regarding drug demand and supply reduction. Mutual study visits also took place with our Jordanian counterpart.

4. Prioritized identification of needs for external assistance

Israel Anti-Drug Agency works closely with MASHAV - the Center for International Cooperation of the Israeli Ministry of Foreign Affairs, organizing courses for participants from developing countries around the world in Israel, and on-the-spot short term courses, given in the participants' home countries (Africa - Ghana, Senegal, Nigeria, Kenya and Seychelles, South America - Ecuador, and Eurasia - Kazakhstan, Russia and Armenia).

5. Mini-Dublin group assessment of needs

The European Commission's Progress Report in 2011 noted that there had still not been any sustained follow up to the recommendations of the Mini Dublin Group on establishing a central anti-drug unit within the Israeli police. No indications on developments in this field were registered until 2014. However, Israeli authorities made efforts on maintaining accurate records of information exchange with neighboring countries on regular individuals involved in drug trafficking activities.

The Hashemite Kingdom of Jordan

1. General situation in the country

The drugs situation in the Hashemite Kingdom of Jordan is not, at this moment, particularly quite alarming pertaining to abuse. The country is mainly considered a *transit state* for drugs, according to the international criteria. (Cannabis enters Jordan from Syria originated from Lebanon and Afghanistan; Heroin enters Jordan via Turkey and Syria, while the Captagon tablets follow the same route as the heroin. Nowadays, the attention is focused on effectively controlling the extended land borders with the neighboring countries, especially in the desert areas, at the northern borders with Syria and in the south - east borders, with the Kingdom of Saudi Arabia.

More than 95% of the seized quantities of drugs are transit quantities. The final destination of the drugs that enter the Hashemite Kingdom of Jordan are, in the case of Captagon - the Kingdom of Saudi Arabia and other Gulf countries, in the case of Cannabis, and Heroin - Israel, Kingdom of Saudi Arabia and the Arab Republic of Egypt and in the case of Cocaine - Israel and Lebanon.

In the last few years there were seized some quantities arriving from Iraq. This thing did not happen before, being considered a new trend at the level of the Jordanian Authorities. The local authorities from the Hashemite Kingdom of Jordan have a continuous cooperation with the competent authorities within the region and from all over the world, which resulted in seizing drugs quantities in many countries, especially pertaining to controlled delivery cases.

Last year, were conducted 8 controlled deliveries from Jordan to the Kingdom of Saudi Arabia, there were also conducted 3 controlled deliveries in the first half of 2014, two from Jordan to the Kingdom of Saudi Arabia and one from the Hashemite Kingdom of Jordan to Israel.

The Hashemite Kingdom of Jordan has taken measures to increase public awareness of the dangers of drugs, through an effective and active plan in the field. They are visiting students in schools and Universities, lecturing and negotiating the dangers of drugs with the young generation of Jordanians. The Jordanian awareness plan had extended to cover most government institutions, NGO's, correction & rehabilitation centers, and youth clubs of bulk members, and more over reaching every single citizen of our country by talking to them through media.

In 2013, were conducted 68 Anti-Narcotics “supporters courses”, 2519 “awareness lectures”, in different institutions, were also organized 118 visits to the Anti Narcotics Department (AND), 90 fairs in the field, 65 media programs, and 65 press briefings.

Regarding the activities in 2014, these are as follows:

- 79 Anti-Narcotics “supporters’ courses”;
- 2270 awareness lectures in different institutions from the Hashemite Kingdom of Jordan;
- 122 visits organized to the Anti Narcotics Department (AND);
- Participations - 55 fairs in this domain;
- 24 media programs on the drugs issues;
- 46 press briefings on drugs issue;
- 64 profile meetings;
- 42 radio Programs / “NO TO GRUGS”;
- 44 “Drugs Poison Play”.

In 2008, the Hashemite Kingdom of Jordan had declared the establishment of the National Anti Narcotics Council, which includes members from governmental and non-governmental organizations, aiming to take care of the drugs problem in the country. The Council had formulated a comprehensive national strategy in which every entity had been assigned to a specific role in the combating process.

Jordan has two public treatment facilities one of them is affiliated with the Ministry of Health and the other is affiliated with the Public Security Directorate - PSD / Anti-Narcotics Department - AND. It was also expanded the treatment service by building a new larger treatment facility with a bigger capacity, more sports and amusement facilities. This new facility will be enlarged, in order to even take a bigger number of patients.

1.1 Production / Demand

The production and consumption of illicit drugs in the Hashemite Kingdom of Jordan is considered by the local authorities as not particularly alarming to this date and according to the Public Security Department / PSD, the Jordanian institution in charge with this issue. According to the PSD data, there are only small cultivations of Marijuana that are spread geographically all over the Jordanian territory. Around 90% of the seized quantities of drugs are transit quantities. Heroin enters Jordan via Turkey and Syria, marijuana emanating from Lebanon and Afghanistan enter Jordan through Syria, while Ecstasy and Captagon tablets take the same route of heroin.

There have been arrests for drug possession (mainly involving cannabis and heroin), while those arrested for drug-related crimes are predominantly between 18 and 40 years old, belonging to the lower social strata.

It must be noted that the *penalties for possession, use, or trafficking of illegal drugs in Jordan are very strict*: At a minimum, convicted offenders, such as drug dealers and smugglers should expect long jail sentences and heavy fines.

However, according to Jordanian *Law No. 11 / 1988, on Drugs and Psychotropic Substances*, addicts who admit addiction and seek treatment are exempted from these penalties. According to a recent amendment on the Law on Drugs that was signed by the His Majesty King Abdullah II, ratified by the Jordanian Parliament and published at the Official Gazette (2012), first time drug users will be sent to a rehabilitation centre instead of prison.

1.2. Trafficking

Jordan's geographical location between drug producing countries to the north and drug consuming countries to the south and west makes it an ideal transit territory for illicit drug trafficking.

The drugs situation is still under control, bearing in mind the possibility of facing a bigger problem in the future. AND is trying the best (by limited resources), to develop the combating efforts and make them more effective by giving the officers more training and bringing new detection devices to service.

In the same time, they are facing new smuggling trends, and targeting their region with new types of drugs that were not known to abusers before, such as cocaine. Cocaine comes to Jordan from South America via European airports targeting Israel, Lebanon and other countries in the region, last year 2013 there were seized more than 12 kgs of cocaine, up to the 10th of June 2014 were seized (320) kg of cocaine, and up to the 30th of October 319, 15 kg.

On the 18th May 2014, an operation in Aqaba Port resulted in a big seizure of (314) Kg of Cocaine were concealed in seven bags among a load of a container contains 880 bags of plastic granules. That seizure came as a result of following up the information about the intention of Jordanian drug traffickers to smuggle a quantity of cocaine from Colombia to the Gulf of Aqaba by sea through three containers of plastic granules carrying the numbers (TCLUSS390S6, MSKU1294800, MSKU8924990).

The shipper of the three containers is “Coco plastic sas calle 68#7 c-83 Cali”, Colombia by the shipping company "Maersk Line". The Cocaine was found in the container # TCLUSS390S6). The route of the containers was the following: on 23rd March the container departed port of Colombia, on 25th of March reached port of Panama and proceeded to arrive in Spain on 15th of April, the container arrived in Morocco on 24th of April, and later arrived to Jeddah port on 9th May, after that the containers arrived at the port of Aqaba on 18th May 2014.

Also, on the 8th of July 2014, an operation on the desert highway resulted in seizing (79750) narcotic tablets (Captagon), were concealed in a vent at the side road.

On the 8th of July 2014, an operation in Amman city resulted in seizing (84000) narcotic tablets (Captagon), one Jordanian national (Hussein Al Sardieh Dob: 1971), was apprehended in the operation.

On the 9th of July 2014, an operation in Aqaba port resulted in seizing (14.5) kgs. of Heroin, three Jordanian nationals involved (Mohammad Salem Dob: 1980, Suleiman Najjar Dob: 1972 and Yousef Shiha Dob: 1979), were apprehended in the operation.

On the 10th of July 2014, an operation in Amman city resulted in seizing (885800) narcotic tablets (Captagon), six Jordanian nationals involved were apprehended in the operation.

On the 31st of July 2014, an operation in Zarqa county resulted in seizing (146000) narcotic tablets (Captagon) were concealed in a house, the house owner (Rami Abu Haltam Dob: 1979) was apprehended in the operation.

On the 7th of August 2014, searching a suspected package of FedEx in cargo section at Intl. airport resulted in seizing (100) kgs of synthetic hashish, the package was coming from India. One Jordanian national involved (Mamoun Abu Alghanam Dob: 1966) was apprehended.

On the 11th of August 2014, an operation in Mafraq county resulted in seizing (19) kgs of hashish, was concealed placed in a sack in an empty land behind Al Zadari refugees camp.

On the 18th of August 2014, an operation in Al Azraq area resulted in seizing (13.5) kgs of hashish. Two Jordanian nationals involved (Ameen AlJbour Dob: 1974, and Nawaf Alqarb Dob: 1970), were apprehended in the operation.

On the 17th of September 2014, an operation in Amman city resulted in seizing (274000) narcotic tablets (Captagon), two Jordanians, one Yemeni, one Syrian, and one Saudi national involved were apprehended in the operation.

2. Short update / Anti Drug Strategy

2. 1. Participation in International Instruments/ International Cooperation

The Hashemite Kingdom of Jordan is party to the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, to the UN Convention on Psychotropic Substances of 1971 and to the UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988.

The country has ratified all international drug control conventions. It is also a party to the Unified Arab Law and a member of the Interpol, the League of Arab States, and the Organization for Social Defence against Crime and the Pall Arab Bureau for Narcotic Affairs. The Kingdom has been a regular participant in the annual meetings of the Bureau and has been attending the UN's Commission on Narcotic Drugs meetings regularly and responding positively to International Narcotic Control Board requests for reporting.

Jordan continues to remain committed to existing bilateral agreements providing for counter-narcotics cooperation with Syria, Lebanon, Iraq, Saudi Arabia, Turkey, Egypt, Pakistan, Israel, Iran and Hungary. There are also excellent relations between Jordan and the US Drug Enforcement Administration (DEA), Nicosia Country Office based in Cyprus. Finally an agreement is underway between Jordan and Saudi Arabia within the framework of the Arab League operations office for cooperation in preventing and fighting drug smuggling.

Note: During the a meeting, from September 2013, the former Greek Presidency proposed and the Jordanian authorities eagerly accepted, that MS examine the possibility of upgrading their cooperation with Jordan by signing MOU's on exchange of information, which could potentially facilitate the interception of drug traffickers. They are also keen to increase the number of exchange visits, share knowledge, especially concerning prison reform and community based services, in order to raise awareness of the link between drugs and HIV / Aids.

2.2 Jordanian Legal Framework

The basic legislation is Law no. 11 of 1988 on Drugs and Psychotropic substances, as was recently amended, distinguishing between first time users and long term addicts. The amendment provides that first time user be placed in a rehabilitation centers instead of the prison. However, due to a different reading of the term "first time users" between the Ministry of Justice and the Anti-Narcotics Department, an official interpretation is awaited from the Prime Minister's Office.

2.3 Institutional Framework

The control structure in Jordan involves four entities: a) the Anti Narcotics Department (AND), established in 1973 (second in the Arab world after the one in Egypt); which is responsible for coordinating all of Jordan's enforcement efforts against drug trafficking and misuse. Beyond mainstream counter-narcotics work, it participates in the process of treatment of addicts, who are kept in custody in a special quasi judicial, quasi medical rehabilitation facility.

Addicts are treated on the basis of a comprehensive program conducted in cooperation with the Ministry of Health, b) the Desert and Border Police, responsible for patrolling the vast border and desert areas (the length of the Jordanian borders is 1,734 km, distributed as follows: 360 km with Syria, 714km with Saudi Arabia, 180km with Iraq and 480km with Israel and Palestine), c) the General Customs Department, responsible for general customs duties and anti-smuggling patrol work, d) the Jordanian Armed Forces (JAF), which control part of the country's borders.

2.4 Law Enforcement Efforts

For the past eight years the PSD has began utilizing x-ray equipment on larger vehicles at its major border crossings with Syria and Iraq. It has also intensified police and customs training on how to identify and locate concealed drugs. Sniffer dogs are also used in inspections and searches.

2.5 Corruption

The Hashemite Kingdom of Jordan is a party to the UN Convention against Corruption, and has signed, but not yet ratified, the UN Convention against Transnational Organized Crime. In 2006, an Anti-Corruption Commission in Jordan (JACC) was established by Royal Decree, which is run by a board of seven members (including the president appointed by His Majesty the King upon recommendation of the Prime Minister). JACC has investigative and prosecutorial powers and is concerned with sensitizing and raising the awareness of the public at large of the dangerous effects and harmful consequences of corruption on economic, social and political development. As far as its mandate is concerned, JACC is entitled by law to investigate financial and administrative corruption, uncover violations and breaches, gather evidence and information related thereto, initiate investigations and proceed with administrative and legal procedures necessary thereof as well as prosecute all those who are responsible for committing such breaches.

In addition, in 2007 Jordan enacted a comprehensive anti-money laundering law (46/2007), by which the National Committee on Anti-Money Laundering was established. This Committee is chaired by the Governor of the Central Bank of Jordan and has nine members. One of the aforementioned nine members is the head of the Anti- Money Laundering Unit (AMLU), which was created under the same law and is the Government's financial intelligent unit.

The enactment of this law is undoubtedly a very positive development; nevertheless, the competent Jordanian authorities should consider conducting a comprehensive evaluation of Jordan's capabilities in preventing money laundering and enforcing the law, in accordance with international standards and best practices.

3. Enumeration of major bilateral and multilateral CN programs

3.1 Major programs

Jordan has a very close cooperation with the United Nations Office on Drugs and Crime (UNODC) and the European Union (EU), through the following projects:

CEPOL EU-ZOMED II Programme: This program is funded and implemented by the European Union in order to enhance the international cooperation in the field of combating drugs through the organization of several seminars in different countries.

JORJ22- UNODC Project: "Strengthening the community resources in providing drug abuse treatment and rehabilitation for vulnerable groups in Jordan". funded by the Governments of the Netherlands, was implemented by the UNODC Office in Amman in cooperation with the PSD and the Ministry of Health.

XAM/J07 Project: This Regional UNODC project, entitled "Increasing Access to Prevention and Care Services for Drug Use and HIV/AIDS in the Prison Setting" , is implemented by UNODC in cooperation with Jordanian PSD and the Ministry of Health.

TAIEX Cooperation: After the Jordanian side performed a study tour in Spain, they have programmed to receive a reciprocal expert's mission from Spain to Jordan, which will evaluate their needs in the operational field.

LEXPRO: "Program of Capacity Building in the Western Balkans and the Mediterranean Region through Targeted Drug Law Enforcement Exchange".

UNODC launched a new project this year in cooperation with PSDI AND and the Ministry of Health in order to raise drug and HIV / AIDS awareness in prisons across Jordan.

Cooperation with the Pompidou *group/MedNET* which is supported by the European Union. Jordan has been one of the member countries of Pompidou group/MedNET, since 2009. Jordan participates in all MedNET events (seminars, workshops and training courses), aiming to promote cooperation between Mediterranean countries. Presently, the MedNET network is processing a project of data collection in Jordan, in cooperation with the Ministry of Health and the Anti-Narcotics Department. We urged the Jordanian side to expand the data collection to include all social strata as well as women.

3.2 Actions against Drugs (Demand Reduction & Rehabilitation)

The drugs situation in Jordan is perceived by the local authorities as being under control. However they bear in mind that there is a possibility of facing a larger problem in the future. In this context, Jordan continues to take measures to increase public awareness of the danger' of drugs through an active awareness plan. The PSD/ AND conduct seminars and lectures at universities and schools, while they also distribute published material aimed at raising awareness. In addition, the AND's awareness plan also involves cooperation with government institutions, NGO's, correction & rehabilitation centers, youth clubs and of course the media.

More specifically, among the various activities it undertook since the beginning of 2013, the AND has organized 41 anti-narcotics supporters courses, 1657 awareness lectures in different institutions (schools, universities etc), 62 visits, 45 media programs and organized 91 press briefings.

Two public treatment facilities function in Jordan; the National Center for the Rehabilitation of Addicts (NCRA), affiliated to the Ministry of Health and the Police Treatment Center (PTC), operated by the *PSDI* Anti-Narcotics Department. There is also a private treatment Center, operating inside the Al Rashid Hospital in Amman. Two additional floors have being added to the NCRA centre to cater first time users, who will be sent there for rehabilitation.

It should be also reminded that in 2001, the UNODC Regional Office for the Middle East and North Africa launched a project with the view to support the upgrading of treatment and rehabilitation services in Jordan, at which time there was a growing drug problem and a lack of drug demand reduction (DDR) services. The project was the only one of its kind and provided an immediate response to the increasing prevalence of the problem of drug use in the country.

Through this project, UNODC provided funding and technical assistance to the NCRA and the PTC. The staff of these two institutions participated in the activities organized by the UNODC, such as treatment and rehabilitation training courses, management training, workshops and study tours to other countries. With the intention to maintain and strengthen the results achieved under the aforementioned project, the UNODC, ROMENA have taken new initiatives, aimed at encouraging the active involvement of community-based services, in order to ensure a network of programs for treatment and rehabilitation of drug users and prevention of HIV.

In this context, during 2008, UNODC implemented and successfully completed the project "Strengthening the community resources in providing drug abuse treatment and rehabilitation for vulnerable groups" which- as mentioned above- was funded by the Governments of the Netherlands and Sweden. This project has led to positive results in enhancing and improving DDR services in Jordan. These services have been expanded to include a national NGO and primary health centers (PHCs), in which accessible and target group-oriented prevention, community-based and treatment and rehabilitation services are being offered towards vulnerable groups in the community, such as prisoners and marginal groups of the population. Notwithstanding the above, UNODC aims at taking further initiatives to improve Jordan's responses to HIV prevention among high-risk groups, given that community outreach work and peer education targeting injecting drug users (IDUs) for risk reduction interventions and services, are at present unavailable.

4. Place and date of meetings of mini-Dublin Group

The Romanian Ambassador to the Hashemite Kingdom of Jordan, as the coordinator of the Mini-Dublin Group for the Middle East organized, on June the 12th 2014, the first meeting of this informal working group.

The participants - representatives of the diplomatic missions of the Member States of the Mini-Dublin Group in the Hashemite Kingdom of Jordan, the EU Delegation in Amman and the Department of Public Security / AND - analyzed the issue of drug trafficking in the region and from this perspective; they emphasized the importance of inter-state cooperation in combating this phenomenon.

In the same time, all the participants appreciated the activity of the Jordanian institutions which are acting in the field and the good cooperation between the Hashemite authorities and the member states of the Mini-Dublin Group for the Middle East.

5. Prioritized identification of needs for external assistance

The AND has pointed out to this Group that in terms of capacity building assistance, it would welcome the help of the member states of the Group for the equipment of the technical unit, the organizing of training courses for Jordanian anti narcotics officers locally and in countries that have a good experience in dealing with drug trafficking, visits to MS for officers of the Jordanian anti-narcotics department, as well as training in the use of K9 dogs for drug detection and providing the furnishing for the new treatment centre.

6. Mini Dublin Group Assessment of needs

6.1 Emerging threats/trends

Despite the fact that Jordan is not an illicit drugs producer, it has become a main transit country for the organized smuggling of drugs, while recently it has started to also be targeted as transit territory for cocaine trafficked towards Europe, mainly by post. With regard to consumption, there is a clear increasing trend, especially regarding heroin, hashish and Captagon / Ecstasy tablets. As the Group has also pointed out in previous reports, official data understates the number of drug abusers. There is no official information regarding female users as well as the use of drugs, in particular cocaine, among upper classes, since data collection focuses on the lower social strata. The official position is that most drug consumption in the country is concentrated in poor and high populated areas. There is a risk that problems such as alcoholism or use of certain drugs in these areas will not be appropriately addressed unless data collection is improved.

Moreover there were no statistics provided regarding doping since this matter falls under the jurisdiction of the Minister of Health and the relevant figures are unknown.

Given Jordan's position as a significant transit country, the upward trend in consumption figures seems likely to continue.

6.2 Political Initiatives

In 2008, a Higher Council for Drug Awareness was established, which is chaired by the Ministry of Interior and has 24 members. This body's mandate was to set up a general strategy for fighting drugs, which was officially launched in May 2009 under the title "National Strategy to Fight Drugs".

6.3 Recommendations

- a) Following the recent meeting of the Group, it was concluded that it would be helpful to convey to the Jordanian authorities that more thorough and detailed statistics, which will cover all social strata, would be conducive to a better understanding of the drug consumption situation in Jordan.
- b) MS should examine the possibility of signing MOU's related to exchange of information, which potentially could facilitate the Jordanian efforts to interception of drug traffickers.
- c) MS should also examine the possibility of supporting the upgrading of the Jordanian Technical Unit, especially as regards surveillance, which can result to the better protection of under cover Jordanian officers in action. The Jordanian side has acknowledged lack of resources in this respect.
- d) Exchange of visits should also continue.
- e) Priority areas for assistance should also include pnsion reform (health services) as well as community based services.
- f) Finally, Jordan could be assisted m raising awareness, regarding the link between drugs and HIV/AIDS.

ANNEX 1**STATISTICS-ANTI NARCOTICS DEPARTMENT ACTIVITIES FROM 01.01.2014
until 10.06.2014**

Narcotics	Quantities
Heroin	68.781 kg
Hashish	287.783 kg
Marijuana	4932.658 kg
Captagon tablets	18500000 tab.
Cocaine	318.878 kg
Opium	---
Hashish Oil	---
Ecstasy	20

Abusers

	Jordanian	Non Jordanian
Number of Abusers	5070	703
Females Abusers-	54 -	10

Controlled Delivery

(3) controlled delivery cases

2 cases from Jordan to KSA.

1 case from Jordan to Israel.

Awareness

Activity	#
Anti narcotics supporters course	63
Lectures	1241
Visits	71
Pairs	39
Media programs	24
Media briefings	34

Treatment

- (369) Addicts

ANNEX 2

STATISTICS OF NARCOTICS SEIZURES AND SENSITIZATION ACTIVITIES FROM 01.01.2014 TO 30.09.2014

Narcotics	Quantities
Heroin	101, 174 kg
Hashish	453,522 kg
Marijuana	5404,785kg
Captagon tablets	26330928 tab.
Cocaine	319,15 kg

State of Palestine

1. General situation in the country

The main factor facilitating the set-up and operation of drug trafficking networks in the Palestinian Territories is represented by the existence of “grey areas” in law enforcement. This is due to the different status of the tri-partite division of the Territories:

- Area A: full Palestinian civilian and security control
- Area B: Palestinian civilian authority, Israeli security control
- Area C: Israeli civilian and security control

To this is added the situation of the Gaza Strip under de facto Hamas control (no cooperation with Israel).

This overlap of jurisdictions and the necessity of permanent coordination between Palestinian and Israeli law enforcement, sometimes in a difficult security environment, is conducive to the establishment and operation of drug trafficking networks.

Another contributing factor is the existence of the Palestinian refugee camps, inside which regular law enforcement is very difficult, if not virtually impossible.

Regarding East Jerusalem, the data is collected by the Israeli authorities.

The same jurisdictional overlap and difficulty in amassing credible data for the whole of the Territories allows only a very general assessment regarding the dynamics of drug consumption in Palestine.

On the whole, drug use in the Palestinian Territories is rising, due to a combination of the factors mentioned above and social factors (poverty, unemployment, etc). This continues despite the religious, legal, and cultural constraints that prevail in the Palestinian society.

Drugs situation in the host country including production, trafficking and demand related issues.

Heroin, sedative, hypnotics, chemical drugs, hashish, “Spice (sintetique marijuana)”, marijuana and cocaine are the most common used drugs. There has been a significant increase in heroin consumption. Nevertheless, heroin and cocaine are still the less common drugs used. The rate of drug consumption, especially among young and female demographics, has increased.

Users buy the drugs from dealers in Israel, Area C, close to checkpoints or refugee camps. The main smuggling routes are: from Egypt through Sinai to Israel and West Bank for hashish and marijuana; from Allenby (Jordan) and Rafah (Egypt) for ecstasy; Jordan Valley – Dead Sea for cocaine and heroin; north from Lebanon to Israel for hashish.

2. Short update on the country’s anti-drug strategy

A challenge for the Anti Narcotic Department of Palestinian Ministry of Interior is to identify the so called “closed laboratories” that produce chemical drugs and marijuana in West Bank.

Until 2014 the Anti Narcotic Department had no laboratory to test the substances that have been confiscated. After receiving a donation from the Government of Canada, the Department is currently in the process of establishing such a laboratory. All the employees will be specialized in chemical engineering. For the time being the confiscated substances are tested in the laboratories of An Najah and Birzeit Universities.

The PA police and security services have maintained a good level of cooperation with their Israeli counterparts in combating drug trafficking.

2.1 Changes/additions to the country national institutional framework

There is no Palestinian law on drugs and psychotropic substances in force, since the draft law from 2008 has not passed through the Palestinian Legislative Council. Order No. 558/1475 of the IDF, applicable in the West Bank Governorates, concerning illicit drugs, is still in force.

2.2 An assessment of the government's political will to conduct a comprehensive and resolute anti-drugs policy

Tackling psychoactive substances is a declared government priority, addressed by taking a number of actions, including establishing a national early warning system and launching targeted communication campaigns to raise awareness, in coordination with non governmental organizations.

Combating drug trafficking is among the top priorities of Palestinian-Israeli law enforcement cooperation (the other being car theft). This cooperation has continued, despite the tense political and security climate prevalent during 2014.

If the current process of unification of the West Bank and Gaza Strip administrations is successful, an extension of the Palestinian-Israeli law enforcement cooperation is possible.

3.Enumeration of major bilateral and multilateral country national programs (including those that support demand reduction)

Palestine has signed agreements concerning the drug trafficking with: Russia and states of the Arab League.

Reduction of drugs demand. Treatment.

On May 5th 2014, the Ministry of Health of Palestine opened a center in Ramallah for methadone treatment.

On April 30th 2014, the Ministry of Health of Palestine in cooperation with the Government of South Korea started construction of the National Center for Treatment and Rehabilitation in Ramallah. There are 4 more centers for treatment and rehabilitation in East Jerusalem and Jerusalem area.

4. Prioritized identification of needs for external assistance (as expressed by the PA)

- Kit for initial examination of narcotics.
- Completion of the Anti-Narcotics Law Enforcement planning capability and preparation for dismantling drugs smuggling groups, especially in complicated operations.
- Improving the capability in controlled delivery, working undercover, chemical precursors control, dismantling drugs factories, source recruitments and information analyzing.
- Provide necessary technical assistance for the detection of hidden and smuggled drugs.
- Need of improving public awareness and prevention, by training specialized personnel.
- Training and advice about information collecting and analyzing, especially statistics and data from the international reports.
- Providing the PA with the (Go Case) system, to manage the investigation on the drugs-related crimes, and the related training on the information collecting and analyzing using (Go Case) system.
- Support for studies and researches on drugs fighting, and exchanges regarding the regional experiences in the same field.
- Special training on use of the internet by drug trafficking networks, and on related themes such as, analyzing the relation between drugs and terror.
- Basic supplies, such as furniture and office equipments for the Anti-Narcotics Department.
- Vehicles and transportation for the Anti-Narcotics Department.

5. Mini-Dublin group assessment of needs

Anti-narcotics Department police is making a serious effort to ensure the appropriate ability and quality of its work. Officers from the Department are participating at regional and international level courses in order to benefit from foreign expertise and develop the capacity of fighting against drugs. In conclusion, the anti-drug officers would benefit from

STATE OF QATAR

1. General situation in the country

Due to its location, Qatar become a destination country for drug trafficking from Saudi Arabia. Drug import is by air from Lebanon, Jordan and Gulf countries, or through trucks, from Saudi Arabia at the crossing point. This is not surprising as the border checkpoint between Qatar and Saudi Arabia is heavily used, making through checks on every single vehicle very difficult.

Qatar has severe punishments for drug offences, including substantial prison sentences and fines. Provisions of the law on drugs and the penalties for violators:

Article 34 states that anyone exporting or importing drugs or psychotropic substances with the intention of trafficking will face execution or life imprisonment. The person will also be fined between QR300,000 and QR500,000.

Also, under Article 35, those possessing, buying or selling drugs for trade purposes will be jailed for at least 10 years and not more than 20 years, and also face a fine of QR200,000 to QR400,000.

Alcohol consumption is only legal with a valid permit or in a properly licensed club or hotel.

Qatar has seen an increase in illicit amphetamine use in recent years. Despite only having a population of two million people, Qatar had one of the highest rate of amphetamine seizures in the world in the recent years.

According to official informations, 5,000 people in Qatar need proper medication related to drug abuse.

The Permanent Committee for Drugs and Alcohol Affairs was established according to the decree No. (1) for the year 1999 issued by the Council of Ministers. The above decree was amended by the decree No. (12) for the year 2001 in the framework of Arab strategy for combating illegal consumption of drugs and other mental stimulants, which stipulates that, formation of such committees should comprise officials from social affairs, health, media, education and security sectors.

Functions of the Permanent Committee for Drugs and Alcohol Affairs:

- To suggest broad policy for combating, treatment and rehabilitation in the field of illegal consumption of drugs and alcohols.
- To draft necessary plans and programs to execute the common in the above article and follow up of its implementation.
- To prepare awareness programs by publishing printed matters and booklets and to organize lectures and conferences or any other activity that can support the initiative of countering drugs.
- To cooperate with concerned departments to supervise on the treatment and rehabilitation centers.
- To develop and promote cooperation with regional and international establishments and organizations that have relation with the functions of the committee in order to take part in exchanging expertise and information and to convoy with the technical and scientific development in its mission.
- To follow up the implementation of decisions and recommendations issued at national, regional and international level that are concerned with drugs affairs.
- To inspire studies and researches related to drugs.

2. Short update on the country's anti-drug strategy

In 2010 Qatar adopted National Drug Control Strategy 2010-2015 for combating narcotics. Phase 2 of the strategy includes a set of goals that seeks to sustain and develop systematic, balanced ways to reduce the illicit supply and demand for narcotics and psychotropic substances.

In 2013, the Qatar State Security Bureau established a Directorate of Economic Affairs to combat burgeoning economic crimes and public corruption.

The National Anti-Money Laundering and Terrorism Financing Committee (NAMLC) continues to be the government agency charged with AML/CFT policy. It is under the direction of the Deputy Central Bank Governor.

The Qatar Financial Information Unit (QFIU) issued guidelines on suspicious transaction reporting (STR) obligations and conducted outreach and workshops with financial institutions. In 2012, the QFIU launched its “2013-2017 Strategy: Financial Transparency to Promote Stability and Security.” In 2013, the QFIU began implementing eight strategic goals as part of this five-year initiative, focusing on building administrative capacity, technical capacity, promoting QFIU cooperation and coordination with other national authorities, identifying trends and indicators of money laundering and terrorism financing, promoting and monitoring the implementation of controls related to suspicious transaction reporting systems, establishing a suspicious transaction reporting system, building effective relationships with international agencies, and raising awareness of civil society institutions about the role of the QFIU.

3. Enumeration of major bilateral and multilateral country national programs

The Minister of Interior Affairs of Qatar and GCC Secretary General jointly inaugurated the GCC-Criminal Information Centre to Combat Drugs (GCC-CICCD in Doha, 2013, february 7. The GCC-CICCD is the first-of-its-kind centre in the GCC aiming at facilitating the exchange of information and experience in related fields for the benefit of all the countries in the region. Additionally, a specialized course on development of leadership and strategic planning skills in the field of drug combating took place from 3–6.3.2013 at GCC-CICCD. It is noted that large quantities of narcotic substances, including hashish, heroin, cocaine and hallucination pills, and other types of illicit drugs had been seized in joint GCC raids.

KINGDOM OF SAUDI ARABIA

1. General situation in the country

Saudi Arabian society is facing a serious threat which pertains to drug use and trafficking. The problem affects mostly the younger generation and relates partly to social issues such as the high rate of unemployment.

The competent Saudi authorities have recently acknowledged the severity of the problem while demonstrating determination to take serious action for remedying it.

In this respect, they have developed a three-pronged strategy which revolves around:

- launching awareness campaigns (prevention),
- enhancing international cooperation and border controls (suppression)
- treating drug addicts (rehabilitation).

2. Short update on the country's anti-drug strategy

Narcotics Control law differentiates between narcotics smugglers, dealers and users. For the first time offender, punishment is imprisonment, lashing or financial fine or all. For the repeat offenders, punishment is increased and the involved person may be sentenced to death. Narcotics user is jailed for two years and punished according to the judge decision. If the offender is a foreigner, he is deported from the Kingdom. A narcotics use which enrolls in a treatment Program is not questioned, but admitted into a specialized hospital.

Drug trafficking is illegal and punishable by death. In this respect, it should be noted that the recent increase in death executions, was attributed by the Saudi Authorities to cases related to drug trafficking.

The Saudi Arabian Government has also endorsed anti money laundering regulations, which stipulate stiff penalties against offenders. Saudi leadership has repeatedly highlighted linkages between drug trafficking and terrorism financing. Recently, the spokesperson of the Saudi Ministry of the Interior stated that “we are waging a war and it is a war against a new form of terrorism, drug trafficking” and that “The Kingdom has identified drug trafficking as a top national security threat linked to militancy in the region”. However, these links have not been brought into surface thus far.

3. Enumeration of major bilateral and multilateral country national programs (including those that support demand reduction)

The principal Saudi authorities dealing with the issue are the General Directorate for Narcotic Control in the Ministry of Interior, the Customs as well as the National Committee for Combating Drugs.

The General Directorate for Narcotic Control has 105 branches in all the 13 provinces of the country. It also has an international network of liaison officers abroad, including on Pakistan, Turkey (both Ankara and Istanbul), UAE, Jordan, Syria, Egypt, Lebanon, Oman, Yemen, Kuwait, Bahrain, Qatar, Romania, Iran, Indonesia and Sudan.

In April 2009, the Cabinet has decided to create a National Committee for combating drugs, as a new body to coordinate the actions of all related agencies. Its competences include raising awareness of the drug-related perils and supporting the rehabilitation of addicts.

The Consultative Shoura Council has also dealt with the problem, discussing on a national strategy to combat drugs and narcotics. The strategy is comprised of six objectives, including identifying the types of drugs used and developing precautionary measures, treatment and rehabilitation programs.

4. Place and date of meetings of mini-Dublin groups

The next group's meeting will be in the premises of the Romanian Embassy on **25th of November 2014**.

5. Prioritized identification of needs for external assistance

Saudi Arabia has acceded to the main UN Anti-drugs Convention of 1961, 1971 (as amended by the 1972 Protocol) and 1988, as well as to the Convention Against International Organized Crime.

The Saudi Government has signed bilateral agreements on drugs with Yemen, Pakistan, Libya, Turkey, Czech Republic, Iran and Malta. Cooperation on fighting drug trafficking is also included in security agreements as those signed with Germany, France, Italy, Poland while negotiations with other countries are still ongoing. Saudi Arabia also participates in international conferences and seminars aimed at tackling the problem of drug use and trafficking.

The General Directorate of Narcotics Control, in partnership with the United Nations and Naif University for Security Sciences (NAUSS), organized the second regional seminar for combating drugs, and exchange the information, in Riyadh last year. Experts and specialists from 26 countries, including Romania and 5 international organizations participated in the event whose aim was to mobilize international efforts in the field of fight against drug trafficking.

6. Mini-Dublin group assessment of needs

The national strategic plan for anti-drug awareness will be carried out in cooperation with 25 government and private agencies. In the same vein, prince Mohammad bin Fahd bin Abdulaziz Program for Societal Prevention in the Eastern Province aims at spreading of moral values against narcotics and gives emphasis to cultural and sports activities. In 2013, prince Mohammad bin Fahd signed on behalf of the “Princess AL Anoud bin Abdul Aziz Al Jalawi Charity Organization” a cooperation agreement with the General Directorate for Narcotic Control with a view to organizing drug awareness lectures, training courses and workshops.

Also, Jeddah Governor Prince Mishaal bin Majed launched in 2014 a yearlong anti-drug awareness program consisting of seminars, exhibitions at schools and other activities aimed at educating the younger generation about the evils of drug abuse.

The initiatives taken by the Saudi Government demonstrate a new determination to deal with the problem openly. However, the judicial system remains outdated while the rehabilitation system appears not to be very effective as well. The immunization of the country's vast borders from drug smugglers remains a great challenge. In this respect, the eventual completion of the security belt in the northern border is expected to enhance the effectiveness of border controls. Awareness campaigns are deemed to be crucial as far as prevention is concerned. To address the problem properly however, there is a need to put into perspective drug addiction underlying social causes such as the high rate of unemployment, particularly among young people, and youth's disenchantment in general.

Republic of Iraq

1. General situation in the country (Drugs situation in the host country including production, trafficking and demand related issues)

In the recent years, it became seeming that many of the Iraqi young people are using drugs. According to few mass-media articles, it is noticeable when visiting cafés and other leisure places that a significant ratio of the Iraqi youth is addicted. The most frequent drug users are the unemployed youth, usually coming from fragmented families and like everywhere in the world, most of them are starting in order to forget the life sufferings. The actual political, economic and social situation within Iraq led to an intensification of drugs consumption and implicitly demand.

Usually, the drugs used are pills such as medicines/tranquillizers meant to deal with diseases like epilepsy or mental disorders. Some of these dual use medicine/drugs are purchased in the pharmacies. In time, once the request has increased, the traffickers are providing home made products that are even more precarious. Also, taking into consideration the volatility of the Iraqi borders (for the moment, in the context of the measures against ISIL, an assessment of the borders permissiveness is difficult) drugs are trafficked from abroad, from neighboring countries, easily. The main hub for drugs, concerning the local use, is considered to be Baghdad. Also Basrah is considered by the US State Department as a hot place regarding drugs. Many vendors are getting the drugs from the Iraqi capital.

According to an article on the web site Al Monitor, a representative of UNICEF declared that ***almost 10% of the Iraqi youth are using drugs***. Comparing Iraq with neighborhood countries, the production and consumption is narrow.

In order to underline the extent of the drug market in Iraq, the example could be in the following deed of a journalist: *he approached a regular vendor in a market to point to the drug corner and the next step, to convince the sellers of the “bona fides” of the buyer were also easily accomplished.*

There are reports on cannabis being cultivated but no indicators showing the export of it. *In much of the country, use of cannabis and hashish is widespread and generally socially accepted.* According to the Mini-Dublin Group for Middle East evaluation in 2013, opiates, cannabis, cocaine, and synthetic drugs including pharmaceutical drugs are reportedly readily available in Iraq. The synthetic drugs comprise hallucination pills Keptagon, Amphetamine, Baltan, Brazikone. Since the end of the Iran-Iraq war in 1988, there have also been major issues with prescription drugs like Benzhexol and Diazepam. One way of smuggling cross the border is to package them along with normal pharmaceutical products.

Note: It has also been reported that PKK members controlled and taxed cannabis plantations during the 1990s, not only in Turkey but also in the Kurdish regions of northwestern Iran and northern Iraq. Furthermore, much of the cannabis that is smuggled into Iraq from Iran is transported through Iraqi Kurdistan to Turkey and on to Europe. The PKK is also known to be involved in heroin trafficking. (<http://sensiseeds.com/en/blog/cannabis-in-iraq/>).

An Al Jazeera TV show presented images of a significant drugs “seizure”. ***The drugs were found in the bag of an ISIL fighter and looked like heroine or opium.***

Concerning the trafficking matter, Iraq is positioned between the producers’ countries like Afghanistan and the consumer’s countries in the west. The routes mentioned by the 2013 Mini-Dublin Group are still being used according to the press reports, but there are no information available about the way the security situation impacts the drugs trafficking. With the nowadays border volatility within the large swathes of land controlled by ISIL, the likelihood for using a third route through Syria has to be considered, according to the above mentioned press report about ISIL fighters using drugs. Also, it is likely that the route through Iraq to Kuwait is avoided due to the increased security measures taken by the states neighboring Iraq.

According to the US State Department report on the drugs issue in Iraq (2013), the country relatively porous post-conflict borders are poor deterrents to increasing volumes of narcotics trafficking. Methamphetamine and hashish from Iran and fenethylamine pills (*an amphetamine-type stimulant, or ATS*) from Syria are trafficked into Iraq for transshipment to other Middle Eastern countries and for domestic consumption. Heroin and opium originating in Afghanistan are trafficked into the country via Iran, and then onward to international markets through neighboring countries, especially Syria and Turkey.

2. Short update on the country's anti-drug strategy

US State Department/ Bureau of International Narcotics and Law Enforcement Affairs report from March, 2013 mentions:

- The Government of Iraq generally maintains that the country does not have a significant drug abuse or internal trafficking problem. However, some elements of the government increasingly acknowledge expanded activity in both areas. The Ministry of Interior's (MOI) Port of Entry Directorate and Directorate of Border Enforcement and the Ministry of Finance's (MOF) General Directorate of Customs share responsibility for deterring and interdicting contraband across Iraq's borders. The MOF Civil Customs Officers and MOI Customs Police search vehicles crossing into Iraq. However, ***this focus on seizing drug shipments at the borders has rarely been accompanied by further investigation into the sources of the narcotics or by arrests and prosecutions of top leaders of drug trafficking enterprises. The Iraqi Federal Police do not devote significant resources to drug cases.***

- Iraq's drug laws are in need of reform, as the vast majority of laws date from the 1960s and do not reflect advances in law enforcement or treatment. ***Personal use can carry sentences from three- to 15-years' incarceration and trafficking can draw a life sentence or the death penalty.*** Convicted drug users can request treatment in lieu of incarceration, but treatment capacities would be grossly inadequate if this option were routinely implemented. According to the online mass-media, an important hospital in Iraq has only 10 beds that can be used for such cases even though the medical section was design for mental illnesses.

- Iraq does not have interdiction programs specifically targeting drugs. Rather, interdiction efforts are included in routine border control duties. Traffickers have adapted more sophisticated concealment methods in response to more frequent searches of vehicles by border authorities. The government first seized fenethylamine pills in 2009, and seizures have increased substantially each year since. At the beginning of 2012, Iraqi border authorities seized several shipments of heroin exceeding 50 kilograms before they could enter Syria. Law enforcement officials in Basrah contend that the city has become a central entry point and a major distribution center for drugs in Iraq.

Border authorities are seeing an increase in drug seizures, and have some concern terrorists could be turning to increasingly lucrative narcotics trafficking as a revenue stream.

2.1. Changes/additions to the country national institutional framework

Iraqi Ministry of Interior established a Narcotics Central Bureau in 2004:

- Establishment of anti-narcotics offices in police directorates of all governorates;
- Forming in November 2004 of the National Committee for Anti-Narcotics and Mentally Affecting Material as an implementation of the Arab strategy of anti-narcotics issued by the Council of Arab Ministers of Interior. The National Committee comprises the following Ministries: Interior, Health, Labor and Social Affairs, Justice, Education, Human Rights, the Municipality of Baghdad etc.
- Opening new channels for continuity and cooperation concerning anti-narcotics means with the Arab countries through the Arab Bureau for Narcotics and the Regional Bureau for North Africa and Near East in order to participate in relevant conferences and workshops. Cooperation also exists with UNDOC office in Cairo.
- Participation in preparing a code draft on narcotics and mental affecting material with other offices and departments, paving the way for the legislation.
- Following-up the work of narcotic offices like seizing operations, inquiries and investigation with the convicts and the process of destroying the narcotics.
- Formation of central commission for destroying the narcotics.
- Participation of 25 officers in a seminar dealing with narcotics held in Amman by Arab health Organization.
- Participation of 25 officers in a seminar in the United Arab Emirates on international narcotic affair.

- Participation with the Ministry of Health in preparing for the celebration of the World day of anti-narcotics.
- Sharing workshops with the Ministry of Health concerning field studies for the narcotics phenomenon and other mental affecting material in order to proceed with building a data base on fighting narcotics in Iraq.

Iraqi Ministry of Foreign Affairs:

In cooperation with the Ministry of Health, it communicates about the needs and requirements of Iraq, with the United Nations Office on Drugs, Crime and Legal Affairs in Vienna, the UNDOC office in Cairo and with other competent international bodies.

The MFA follows the situation of Iraqi convicts of antinarcotics offences abroad and provides to the MoI and MoH with valuable information which stems from the prosecution of the convicts, especially on trafficking.

2.2 Legal/legislative changes, including money laundering and chemical precursors

The Anti-Money laundering Act of 2004 is still in force. It governs financial institutions and criminalizes money laundering, financing crime, and structuring transactions to avoid legal requirements. The Act calls for the establishment of the Money Laundering Reporting Office.

2.3 An assessment of the government's political will to conduct a comprehensive and resolute ant-drugs policy

Due to the extremely fluid political and security situation in Iraq, having nowadays epic characteristics concerning the ISIL phenomenon, anti-drugs strategies does not constitute a priority of the government. In the strategic priorities and the extended governing program set up by the Iraqi inclusive government from September 2014, there is no reference to the drugs issue. The ambitious social, economic, security and even political measures, if followed, might though have a reduction effect on the local demand.

Note: Iraq still makes extensive use of the death penalty, but it may only be applied to drug trafficking offences if it is shown that the offences were committed in order to fund or abet insurgency. However, there is widespread belief on the part of the Iraqi authorities and media that drug trafficking is inextricably linked to insurgency, and suspected drug traffickers are often accused of having links to terrorist organizations (<http://sensiseeds.com/en/blog/cannabis-in-iraq/>).

3. Enumeration of major bilateral and multilateral CN programs (including those that support demand reduction)

a) Capacity Building Integrated Border Management – CBIBM

The program was implemented between 2007-2009 being funded by Japan and United Nations Country Team Iraq. In January 2009, the Immigration Training Extension Centre (ITEC) was opened in Basrah to allow residential course for 60 students at a time.

b) Integrated Border Management Project – IBM

Promoting active intra-service and inter-agency amongst Iraqi state agencies and ministries involved in border management, at both the national level and the Border Crossing Points in the Basrah region as well as by enhancing common surveillance capabilities for the flow of legal persons and goods through targeted infrastructure upgrade and improved border management training. According to the Mini Dublin Group in 2013, this will be complemented by institutionalizing cooperative data collection, sharing and analysis for the risk management, as well as enabling the rational appropriation of new IBM concepts by the Government of Iraq. The project aimed to establish an Integrated Border Management Model at the Borders in Basrah region which can be replicated at national level.

c) HIV/AIDS Project in Iraq and Inclusions of UNDOC elements on IDUs (Injecting Drugs Users)

IDUs are perceived to be at great risks concerning HIV transmission, considering the permissive conditions for the spread from Iran to Iraq of this phenomenon. Regarding the Iraqi case, no data is available at the official level.

Interventions among IDUs are one of the priorities of the Iraq Trust Fund (*UNDOC has proposed the development of a partnership with the Ministry of Interior to better institutionalize the prevention programs*).

d) The United Nations Office on Drugs and Crime (UNODC) was, in August 2014, in the process of implementing a joint program - currently suspended due to the precarious security situation - with the World Health Organization and the Iraqi Ministry of Health to improve treatment within the very few specialized sections in hospitals.

e) Pursuant to the 2008 U.S.-Iraq Strategic Framework Agreement, the United States continues to fund counter-narcotics assistance programs. U.S. Immigration and Customs Enforcement and Customs and Border Protection officers work with the Iraqi Directorate of Border Enforcement to improve border control. In 2012, CBP officers trained passport police officers on techniques for detecting suspicious behavior, narcotics identification, and luggage examination. Iraqi Civil Customs and Customs Police repeatedly request further counter-narcotics training. At the request of the Iraqi Federal Police, U.S. advisors provided drug identification materials to assist police at checkpoints with identifying bulk shipments.

f) The United States also funds the Iraq Drug Demand Reduction initiative. Working with the Iraqi Ministry of Health, that initiative led to development of a national substance abuse training, research, and treatment center in Baghdad to integrate substance abuse intervention and treatment services into the Iraqi primary health care system. This initiative also helped form the Iraq Community Epidemiology Working Group, which produced the first comprehensive profile on the nature and extent of drug abuse in Iraq.

5. Prioritized identification of needs for external assistance

Assessment: in the special Iraqi's case, in order to reach the second stage that requires specialized assistance such as training of the officers, offering instruments, providing and sharing know-how at the preventing, deterring and combating levels etc., there is an urgent need to address the country's security, ethnic, religious, social, political, economic issues.

6. Mini-Dublin group assessment of needs

6.1. emerging threats/trends

The volatility of the security situation and the implicit collapse of the social stability might be conducive to an increase in the drugs users' proportion. Also, the trafficking related issues might develop accordingly to the evolution of the war situation: increased trafficking in some areas and contracted in others.

6.2. political initiatives

Assessment: in order to increase the prevention measures effect, the traditional and religious leaders (that are already preventing drug abuse by insisting on consequences) should be consulted and involved in the different programs developed.

6.3 recommendations

Iraq's political leadership has not yet acknowledged the country's increasing status as a transit and consumer country for illegal drugs. Iraq needs to provide adequate resources to counter drug trafficking and reduce domestic demand. The Iraqi government should also modernize outdated drug control laws to improve law enforcement, drug abuse prevention and treatment.

UNITED ARAB EMIRATES

1. General situation

By virtue of its position as a cultural and geographical gateway between the East and West, the UAE is not excluded from the extensive drugs black market. Although the United Arab Emirates is not a narcotics producing country, it constitutes a transit point for drugs arriving mainly from Southeastern and Central Asia, with Europe and North America as main destinations. There are several factors that render the UAE a transit point, including its proximity to major drug cultivation regions in Afghanistan and a long (700 kilometers) coastline. High volumes of shipping render UAE ports vulnerable to exploitation by narcotics traffickers and furthermore a number of ports of the UAE have free trade zones where transshipped cargo is not usually subject to the same inspection as goods that enter the country.

It should also be mentioned that Dubai is used as a hub for meetings and consultations by international drug dealers and it is also increasingly used for the laundering of drug related money.

The actual market for hard and soft drugs in the UAE is very low by international standards. The drug consignments which reach the UAE are invariably part of re-export operation coordinated by middle men willing to risk severe penalties under UAE Federal Law.

There is no data available as to the percentage of drugs intended for local use, however, as already pointed out, it would seem that most of the quantities entering the country are being re-exported westwards.

Kinds of drugs consumed in the U.A.E. are mainly cannabis herb and resin, heroin, opium, cocaine, amphetamine type stimulants and methamphetamine (ecstasy). Effective from June 1st 2012, synthetic cannabis (also known as “space”, “spice” or “K2”) became illegal and is included on the UAE’s primary list of banned narcotic drugs and psychotropic substances. While hash and captagon are still common drugs, what is starting to spread is addiction to sedative pills, such as valium and xanax, which have become very popular among women.

Drug abusers are mostly between 20 and 35 years old, but according to the General Director of the National Rehabilitation Center, the age at which people start consuming drugs has decreased from 17 or 19 to 12 or 13. Most of the drug addicts are either unemployed, uneducated or with social problems. Opium seems to be mainly consumed by expatriates (mostly Iranians), whereas heroin and hashish seem to be the choice of U.A.E. nationals (mainly male population, as women make very limited use of drugs).

The Government of the U.A.E. as well as the Rulers of each Emirate are aware of the phenomenon's seriousness and demonstrate a sincere will to fight it, both by adopting restrictive measures and by seeking international co-operation and expertise. The lead agency in the U.A.E. for anti-drug trafficking is the Ministry of Interior's Federal Drug Control Administration, which is tasked with coordinating drug enforcement efforts at a federal level. Also worth mentioning is the existence of a public prosecutor (niyaba) system, which operates under the control of the Ministry of Justice.

The UAE has a zero-tolerance policy towards illegal drug use and drug trafficking is a severe criminal offense. The rate of illegal drug use in the UAE is low by international standards. The most common drug threats are hashish, illegal pharmaceutical drugs, and heroin. Of the pharmaceutical drugs, fenethylamine, a methamphetamine-related drug, may be the most widely-available drug in the Persian Gulf. Additionally, a synthetic drug marketed as "spice," targeted to youth drug users has become a growing problem.

The UAE continues to advance and promote its national drug strategy by intensifying security at airports, land routes, seaports, border crossings, and coastline patrols. The UAE continues educational campaigns, harsh judicial penalties, and rehabilitation to reduce the demand for illegal drugs and normally act swiftly to punish violators. The possession, use, or trafficking of illegal drugs can bring long jail sentences, heavy fines, and even the death penalty if convicted for drug trafficking. Trafficking groups are using the UAE as a collection and distribution point, as opposed to a transit point. They are utilizing more female smugglers from European, Asian, and African nationalities in an attempt to deviate their methods of operation.

It should be noticed that the area of the country mostly affected is that of Dubai, as its strategic location among countries that manufacture these drugs and countries that host them, leads to smugglers and traffickers taking advantage of the Emirate to smuggle or deal drugs and this is due, of course, to the latter's fast development during the previous years.

2. Production/Demand/ Trafficking

As already mentioned, the UAE is not a drugs production country. The demand is mostly focused on drugs such as cannabis, opioids, cocaine and amphetamine type stimulants. Poly-drug abuse and drug abuse in prisons are also reported. In 2011, drug-related cases saw an increase of 17 per cent over 2010, although the amount of seized drugs dropped by 77 per cent. During the same period, 144kg of drugs were seized in Dubai, including 135kg of heroin, 6kg of marijuana and 3 kg of crystal methamphetamine.

Police Officials believe that drug smugglers purposely come to the country to create big drugs markets in the UAE and to increase the number of drugs addicts especially among youngsters.

In any case, Authorities consider that their strict policy has been a very constructive one as the efficient cooperation between the competent authorities of the country has resulted in many arrests and confiscation of drugs substances but mainly has created a feeling of fear between the potential smugglers. It should also be credited that many public awareness campaigns have been launched by governmental and non-governmental organizations.

Significant seizures at various entry points (mainly Dubai, but also Abu Dhabi, Fujairah and other Emirates) by Customs and Police Authorities provide evidence of drug trafficking flows via the U.A.E. Countries of provenance are mainly but not exclusively Afghanistan, Pakistan, Nepal, Iran, Thailand and India.

Traffickers use numerous techniques to conceal the drugs storing them in shipments of fruit, felt-tip pens, airconditioner compressors and inside cars. But the most popular method of smuggling remains inside the human body and Customs officials nickname these smugglers “containers”. In all cases of drugs smuggling cases involving more than one person, there are a dealer, a smuggler, the recipient, someone to store the drugs and someone to oversee importing them. New technology and extensive training of customs inspection officials have led to a significant increase in the detention rate of smuggled heroin in the last years. Those who at one time would have smuggled heroin are turning to alternative means that can be more profitable and carry less of a punishment if caught.

Money laundering linked to drug trafficking constitutes a problem that the government strives to resolve mainly by tightening controls. Most money laundering activities are believed to involve the proceeds of foreign criminal organizations, based outside the U.A.E., with the latter serving primarily as a conduit to international financial markets. The U.A.E. finalized and subsequently enacted its anti-money laundering legislation in 2002 (Federal Law no 4, regarding Criminalization of Money Laundering). In this framework, a financial intelligence unit has been established (Anti-Money Laundering and Suspicious Cases Unit – AMLSCU), which operates as an independent body under the authority of the Governor of the Central Bank.

3. Anti-drugs strategy

3.1. International Institutional framework

The U.A.E. is a party to the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol, to the UN Convention on Psychotropic Substances of 1971 and to the UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. Furthermore, in 2007 the UAE was re-elected as the Asian regional representative to the Commission on Narcotic Drugs (CND).

3.2. National Legal Framework and Anti-drugs Policy

On national level, the basic law dates from 1988 but it has been amended by the Federal Law no 14 of 1995 on the Fight against Drugs and Psychotropic Substances. The said Law provides that prison sentences can be applied to anyone whose urine sample tests are positive to drugs use and not only to the persons arrested in possession of drugs. It provides mandatory death penalty for convicted drug traffickers but the capital penalty has not been applied in recent years.

It should be mentioned that law enforcement on drug use is not always as strict when U.A.E. nationals are involved, as it is when it comes to expatriates/foreigners. Recent examples show that foreigners arrested for trafficking drugs (mainly opium and marijuana) have been sentenced to life imprisonment, while penalties for possessing drugs usually vary from three to four years. Less heavy penalties are likely to be imposed on users who are in possession of small quantities of – “light” - drugs. It is worth mentioning that no relevant data is available for UAE nationals.

Concerning the persons who are arrested in possession of small quantities of drugs substances at the airport of Dubai, as from November of 2008 a Public Prosecutor’s Office has been established at the Airport to handle smuggling, illegal immigration and drug cases and new procedures allowing to deport travelers caught with small quantities of drugs, instead of prosecuting them in Courts, have been put into force. In August 2008, Dubai Customs equipped its agents with a mobile laboratory to help them detect drugs, explosives and radioactive material. This laboratory can identify a sample of suspect material by matching it to a database of more than 60.000 substances in a matter of seconds.

In January 2011 the Minister of Interior and Deputy Prime Minister Sheikh Saif Bin Zayed Al Nahyan has ordered all concerned authorities to evaluate current anti-drug laws and suggest reforms and new methods to punish or treat convicts, especially repeat offenders, such as social and community services. According to the Head of the Abu Dhabi Capital Police, the law should not consider a drug offender a criminal as it currently does. Another major reform would be the creation of a data tracking system that would link clinics across the federation to avoid prescription “shopping”.

It should also be mentioned that in 2010, Dubai Police signed with the Red Crescent Authority an agreement on a drugs awareness program, according to which volunteers will be trained to carry out the awareness program which will target more than 640.000 pupils in 1.200 public schools.

Concerning the awareness programs, the Criminal Investigation Department at Abu Dhabi Police has launched, since 2010, a students' awareness campaign themed : "the drugs are harmful" to educate them about the types of drugs and risks they pose for the individual, his family and the community in general.

4. Drugs for medical purpose

Certain products used for medical purposes/treatment in other parts of the world (i.e. Europe, America, Oceania) are considered in the U.A.E. as narcotic substances, a fact which could eventually result in the arrest of the user as soon as the latter enters the country. The Ministry of Health on its web site informs that "narcotic items...can be brought into the country in exceptional cases and only upon prior permission from the director of medicine and pharmacy control who will assess the individual case". The said guideline applies to medicines brought into the country by foreign visitors, while conditions for the administration of narcotic medication to patients residing in the U.A.E. are set by the Administrative Decree # 68 of 1995.

International drug smugglers are increasingly importing other illegal products such as counterfeit prescription medicines through Dubai. Over the last few years there has been a sharp increase in people smuggling in counterfeit goods, prohibited items such as black market medicine. For this reason, the Ministry of Health met in August 2011 with representatives from Customs Authorities, namely the Dubai Customs Authority and the Marine Ports and Customs Department in Sharjah, to discuss ways of better coordinating their action towards controlling counterfeited drugs and preventing the entrance of violating pharmaceutical items.

5. Rehabilitation of drugs addicts

Federal law no 14/1995 provides also for the establishment of specialized units for the treatment of drug addicts. The said units should be supervised by a committee, comprising representatives from relevant government departments. The law stipulates that abusers who present themselves voluntarily to the police or a rehabilitation center are exempt from the punishment usually imposed in drug offences. An immunity system from prosecution is extended to any drug user willing to turn himself in to police and seek rehabilitation. There are several clinics throughout the country where the addicts can be offered the latest in medical treatment as they strive towards recovery but only two rehabilitation centers. A new drug rehabilitation centre is actually planned for Dubai with the belief that it will provide much needed services for a significant number of addicts. It should also be noted that Dubai Police is operating a follow up program by staying in touch with former drug addicts who have served jail terms to ensure that they do not return to the habit. They also provide former addicts with psychological support as well as aid to reintegrate in society, with a particular focus on securing employment for formed addicts. The program also includes random tests on the former addicts to make sure they remain drug-free.

In January 2011, the Director General of the National Rehabilitation Center announced that the UAE Authorities are studying a project to set up drug rehabilitation centers inside jails to combat drug use among prisoners. These Centers will be the first of their kind in the Gulf region.

6. Needs for external assistance

Recognised regionally as the leading combatant of organized crime, the UAE works closely with the United Nations, Interpol and other federal agencies to thwart the international drug traffickers as well as individual smugglers. As a matter of fact, United Nations Office on Drug and Crime (UNODC) has been offering technical assistance to Dubai Police in the field of drug control and drug law enforcement as well as training of Dubai Police officers in advanced drug law enforcement, surveillance and intelligence-led policing since 2001.

In 2007 Dubai Police and UNODC signed a 1.2 million project, fully funded by the Dubai Police, to combat drug abuse and drug trafficking in the UAE.

The government's sincere will to conduct a comprehensive and effective anti-drugs policy has also been confirmed by the latter's request for the opening of a United Nations Office for Drugs and Crime in Abu Dhabi.

In October 2008, the Minister of Interiors, Lt. General Sheikh Saif Bin Zayed Al Nahyan and Mr. Antonio Maria Costa, the Executive Director of the UNODC signed a cooperation agreement for the establishment of a Sub regional UNODC Office for the Gulf Cooperation Countries in Abu Dhabi in the first quarter of 2011 (officially launched on 15 February 2011). The agreement also envisages greater technological cooperation to prevent and control crimes.

The functioning of such an agency in Abu Dhabi is expected to contribute to the efforts of combating drug trafficking and to the launching of major public awareness campaigns.

In January 2014, in the framework of an enhanced co-operation which aims at strengthening the UAE's responses to the interconnected threats of drugs, crime and terrorism in the region, the Executive Director of the UNODC Mr. Yuri Fedotov visited Abu Dhabi and held meeting with Emirati Senior Officials. He stated that the UAE is positioned both geographically and economically to make a tangible difference in fighting crimes such as in the trafficking of drugs and humans.

During the visit, which took place from 19 to 23 January 2014, Mr. Fedotov also attended a signing ceremony hosted by the Deputy Prime Minister and Minister of Interior of the UAE, Lieutenant General Sheikh Saif bin Zayed Al Nahyan, for the establishment of a strategic partnership between UNODC and Abu Dhabi Police GHQ in the area of forensic science.

As result of international cooperation, within which Dubai police played a key role, the Ficino network for drug-trafficking and money-laundering was dismantled on February 2012.

In recent years several critical initiatives have been developed between UNODC, the UAE and its neighbors in the Gulf. These include:

- The signing of an agreement in 2010 between the UAE's National Rehabilitation Council and UNODC on drug demand reduction and treatment based on a human rights based approach. The formation of this Council has been a critical move given the UAE's position as a drug trans-shipment country from Afghanistan.
- The partnership agreement with the Institute of Naturalisation and Ports which aims to build capacity amongst competent authorities dealing with trafficking in all its forms and to become the region's center of excellence and computer-based training to tackle these crimes.

The lack of data collection and research studies that focus on the region represent a challenge to both treatment and prevention, since what is applicable to countries in the West, where most of the studies on addiction are conducted, often do not apply to the culturally different countries of the Middle East. To address this, the UAE have signed in 2011 a five years agreement with the UNODC to conduct a comprehensive analysis of drug addiction and treatment shortages in the country. Moreover, the UAE plans to create a national database on drug addicts which is expected to help evaluate addiction cases. In this endeavor, the National Rehabilitation Centre (NRC) has teamed up with the UN Office on Drugs and Crime (UNODC).

It should also be mentioned that all the GCC countries elaborate common strategies to fight the drugs plea and they hold annual meetings at directors' level in order to coordinate their efforts. In May 2011, the UAE Minister of Interior and his Bahraini counterpart signed an agreement for the enhancement of security cooperation between the two countries in a series of sectors, including that of drugs.

According to Emirati officials, the UAE is committed to serving as a model of change in the region and an active member of the international community, reaffirming its strong belief that success in the global fight against trafficking in drugs and humans as well as the associated problems of transnational organized crime and money laundering requires interlocking national, regional and international strategies rooted in global cooperation and therefore it continues to welcome direct discussion and collaboration with other Governments and International Organisations.

7. Recommendations/conclusions

A survey dated in November 2010 has found rising concern in the UAE about drug abuse among children leading to calls for the Government to do more to identify and solve the problem. Most of the UAE residents surveyed believe that drug use is on the rise and they blame for that the effects of foreign media such as movies, TV series and music as well as the growing trend of private parties and clubs where drugs are commonly consumed. People also believe that neglect and problems at home as well as poor family relationship played a role as they consider that the main reason that young people started taking drugs was to get the attention of neglectful parents. When asked what the Government should do, 40% suggested better education for young people, from the age of kindergarten, and fewer than one in 10 supported helping addicts reintegrate into society. 17% called for the temptation to be removed altogether by tightening borders and customs control, while 15% wanted harshest punishments. Experts analyzing the survey stated that drug use is definitely increasing because of the attitude of the population and most of the Muslim countries, many do not seek help due to society's negative views of them. They added that people needed to start treating the problem as a medical issue.

The U.A.E. government is aware of the existing problem and demonstrates a sincere will to fight it by acting on every front of its four-pillar strategy: legislation, enforcement, victim support as well as bilateral agreements and international cooperation. According to high officials statements, the UAE is diligent in its drive to put a complete end to all manifestations of drugs addiction as this menace poses multi-faceted threats to society, economy and security and leads to a series of crimes like robbery, assault, exploitation, road accidents, unemployment and family disintegration.

In this framework, it welcomes co-operation with and assistance by third countries and international organizations, an approach which should be further encouraged by enhancing the existing co-operation on the matter, both on bilateral and on multilateral level. Concerning the drug money laundering investigations, there is still space for further improvement of the cooperation between the UAE and the international community.

Concrete action could focus, at a first stage, on encouraging U.A.E. Authorities to provide interested parties with all data at their disposal and to go public with drug related matters. To do so, comprehensive statistics on drug use should be elaborated given that without them the problem is hard to tackle. According to the above said survey, respondents blamed the Government for the lack of data citing its reluctance to engage with negative issues and information. A more open approach would benefit not only the third parties willing to offer assistance but also the state mechanism and the society of the U.A.E. itself. Furthermore, organizing workshops, media campaigns and seminars on the subject would help increase public awareness while strengthened contacts between participating foreign experts and U.A.E. security and health Authorities could improve the latter's capacity in dealing with drug related

LEBANON

1. General situation in the country

Lebanon is not a major source country for illicit drugs, but due to its location it serves as a transit point for narcotics trafficking (including cocaine, heroin and fenethylamine - an amphetamine-type stimulant marketed under the brand name "Captagon") in the Middle East (especially narcotic pills, cocaine and heroine), the Occupied Palestinian Territory (especially heroine), European countries and Australia (especially cocaine, heroine and ephedrine in small quantities).

Traditionally, regions of planting activity exist in the Bekaa Valley in east Lebanon and in northern part of the country. The cultivation mainly of hashish and in smaller areas of opium in the abovementioned regions has become a means of livelihood and profitability of many inhabitants.

It should be noted that those who benefit from the drugs productions are mainly notorious drug families, counting some thousands members who act in a dynamic and concrete, though illegal war. Furthermore, by maintaining links with powerful economical and political actors, it is not likely that the vicious circle will end soon.

Cocaine is imported mostly from Latin America (Venezuela, Colombia, Peru, Bolivia, and mainly Brazil) directly or via Jordan and Gulf countries (Qatar and Oman) or via African countries.

Heroin is imported from Afghanistan through Iran, Turkey and Syria, but increasing quantities of this drug are being processed in the Bekaa Valley. Stimulant drug substances, pills, their precursors and manufacturing machines are imported from China. Tramadol pills are imported from Egypt in small quantities by air. In the field of exportation, hashish produced in Lebanon is mostly sold on the local market. Cases of exchanges between hashish from Lebanon and heroin in Turkey and in the Netherlands have also been reported.

Captagon trafficking is the most commonly illegal – drug related activity addressed by the Authorities. Syrian refugees residing in Lebanon are frequently involved in these illegal activities, a fact that proves the reorganization of criminal activities between Syria and Lebanon because of the crisis and the strengthening of the criminal links between the two countries.

Tourists and international visitors traffic in small quantities of illegal drugs, mostly for personal use, although the extent of this issue remains unknown.

Drug consumption is a growing problem in Lebanon and there are no reliable estimates of the number of drug users in Lebanon. According to the Lebanese authorities, most addicts are between 18 and 25 years old. The most common drug is hashish, but the consumption of heroin, cocaine and synthetic drugs is increasing.

The number of people who inject drugs is estimated at between 2,000 and 4,000 individuals, and about 5.7 per cent of people with HIV in Lebanon are injecting drug users.

2. Short update on the country's anti-drug strategy

Lebanon is a party on the 1961 UN single convention on Narcotic Drugs, the 1971 UN Convention on Psychotropic substances, the 1972 Protocol amending the single Convention and the 1988 UN Convention against illicit Traffic in Narcotic Drugs and Psychotropic Substances.

Lebanon adopted a law on Narcotics, Psychotropic Substances and Precursors in 1998 (law no. 673), amended by law no. 77 of 3 April 1999, which foresees the establishment of various state structures to address the challenges of drug abuse.

The inter-ministerial National Council for Narcotic Affairs, created by law, has been convened only early 2012.

One of the major challenges that the Lebanese authorities are facing in dealing with the drugs problem is the lack of specialized and trained personnel, caused mainly by the rotation system at the law enforcement level.

The Internal Security Forces (ISF) is leading the fight against drugs in Lebanon and they are publishing on a regular basis a report on eradication, seizure and investigations cases on drug use.

Note:

In their latest material, for 2013, ISF reported 2,192 drug-related arrests over the first eight months of 2013, a slight increase from the same period in 2012. The ISF arrested 207 heroin users, 355 cocaine users, 919 cannabis users, and 260 users of various synthetic drugs. During the same period, authorities seized 32 kilograms (kg) of cocaine (up from only 5 kg in 2012); 92 kg of hashish; 16 kg of heroin; 11,700,086 fenethylamine pills; and 57 kg of amphetamine powder. The volume of seized fenethylamine is particularly significant, having increased from only 206,000 pills over the same period in 2012.

The main counternarcotics goal of the Lebanese government remains the eradication of illegally-cultivated drug plants in the Bekaa region, but a difficult security environment and the need for additional logistical support and equipment hamper its effectiveness.

The Government of Lebanon launched an opioid substitution treatment programme at the beginning of 2012. The programme is now fully operational, and since its launch about 700 patients have joined the programme.

Taking in consideration the current political, economical and security situation of Lebanon the anti-drugs policy is not a priority on the agenda of the Lebanese authorities.

3. Enumeration of major bilateral and multilateral country national programs

US authorities have a good collaboration with ISF on drug related issues. In 2012, the United States donated significant resources to Lebanon's counternarcotics unit as part of an ongoing process to help develop the capacities of the ISF and expand its reach, including 10 minibuses for transporting counternarcotics personnel, 13 SUVs for counternarcotics operations, and four large potable water transport vehicles.

French authorities have cooperated with the Lebanese Police in 2013 in the field of prevention, running awareness for the children in Lebanese schools about the danger of addiction and by providing training to the personnel of two rehabilitation centers. In the law enforcement field, French Police provided in 2013 a two week tactical training to ISF Drug Enforcement Bureau officers and one training course on drug laboratory and precursors.

At the EU level, there is an interest for establishing a national drug information system and to foster the exchange of experience on best practices. In 2013, the EU provided some training on basic intervention techniques to the investigative units of the Judicial Police in charge of drug-related crimes among others.

4. Place and date of meeting of mini-Dublin groups

In 2014 it was organized only one mini-Dublin meeting, at the European Union delegation in Beirut, in January.