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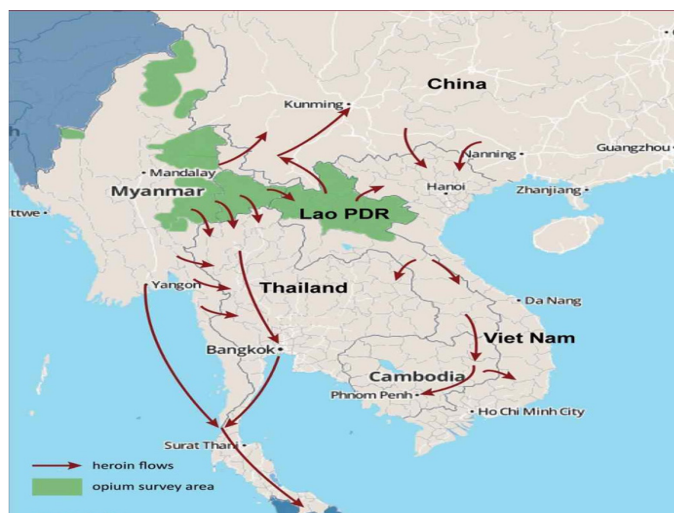
September 2018

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I. LAO PEOPLE'S DEMOCRATIC REPUBLIC

1. General Situation

The Lao PDR is located at the heart of the Mekong sub-region and shares porous land borders with five neighboring countries: Myanmar, Thailand, China, Cambodia and Vietnam. Laos' Bokeo province forms part of the 'Golden Triangle', a well-known drug production and transit area.



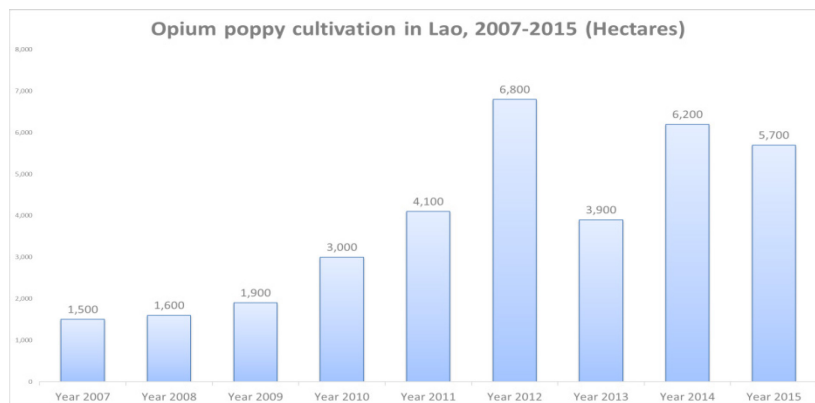
Evidence shows that significant amounts of opium are produced in Lao PDR, often in remote and difficult to access locations. Drug use, and in particular the use of Amphetamine-Type Substances (ATS) or Ya Ba as it is known, which has the greatest number of users, appears to be on the rise. Significant quantities of opiates, ATS and precursors continue to be trafficked through the Lao PDR to neighboring countries, from where some of it is re-exported to markets with higher purchasing power and demand.

Table: Seizure of illicit drugs in Lao PDR from 2008 to 2017

<i>Year</i>	<i>Heroin (Kg)</i>	<i>Opium (Kg)</i>	<i>ATS (tablets, millions)</i>	<i>ICE (Kg)</i>	<i>Cannabis (Kg)</i>	<i>Cocaine (Kg)</i>	<i>Arrested foreigners</i>	<i>Arrest cases</i>
2008	17.5	11.8	1.2	0	805	2	6	222
2009	29.3	49.9	2.3	0	976	0.1	20	473
2010	84.3	86.5	24.5	0	3,521	0	16	581
2011	43.4	63.9	4.6	0	1,617	0	77	1,037
2012	45.0	87.6	10.1	0	2,836	0	41	1,223
2013	287.8	89.7	15.1	26.5	5,484	10.5	44	1,434
2014	181.8	12.8	3.8	19.4	1,233		65	1,868
2015	134.8	51.6	6.3	141.9	3,258		90	2,258
2016	221.04	137.50	2.86	144.6	462,988		85	2,752
2017*	162.3	273.12	1.2	0	4,847		100	2,770

Source: LCDC

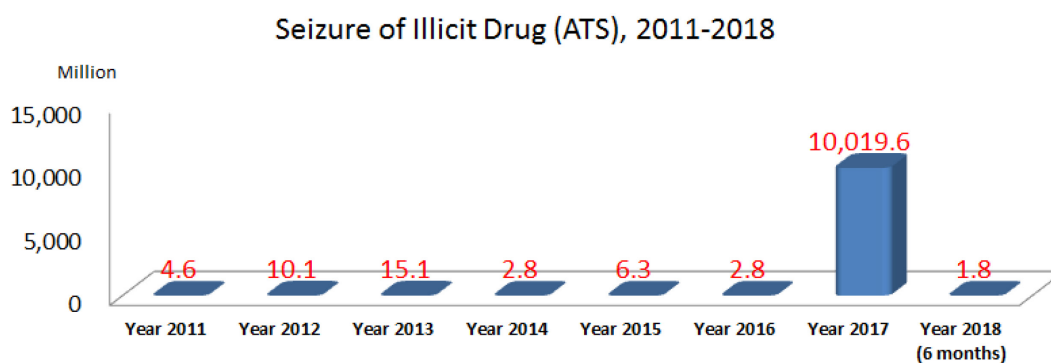
Because the UNODC crop survey could not be funded in 2016 and 2017, the latest available data are from 2015. The 2015 crop survey concluded that opium production in the Lao PDR had stabilized at a high level in 2014 and 2015, and that production was once again reaching levels seen during the peak in early 2000s, in spite of the relatively successful efforts to reduce cultivation that took place between 2007 and 2009. According to the 2015 Opium Crop Survey conducted by the UNODC and the Lao Government and funded by the United States, opium cultivation in 2014 and 2015 was approximately 6,200 hectares and 5,700 hectares respectively. 809 hectares of opium poppies were eradicated in 2015.



Laos' opium poppies are concentrated in the Northeast of the Lao PDR, with over 70 per cent of Laos' opium poppies located in Phongsali (57 per cent) and Houaphan (15 per cent) in 2015. Cultivation was also confirmed in Luang Namtha, Luang Phrabang, Oudomxai, Bokeo and Xiangkhoang.

While the number of hectares under cultivation had doubled over recent years, the return to high production levels was largely due to a significant increase in yield per hectare (UNODC estimates put the increase at between 2.4 and 5 times the yield observed in 2007). Most of the opium grown in the Lao PDR is destined for export and refinement into heroin, with only a small percentage consumed in the Lao PDR, mostly for use in accordance with traditional customs. Prices for Lao opium have also risen sharply, from approximately USD 200 in 2002 to over USD 1,800 in 2015, probably largely in response to the rise in global demand for heroin.

Apart from opium, there is very little data about the production and distribution of other drugs, for which the Lao PDR is considered to be more of a transit country, with a small consumer population. The Lao government sees no evidence of heroin refinement or ATS production in the Lao PDR to date. However, heroin and ATS are both trafficked from Myanmar through the Lao PDR into China, Vietnam, Cambodia, Thailand and then to other markets, including higher-price markets like Japan, Singapore and Australia.



ATS use is thought to be concentrated among Laos' youth population, mostly consumed as Ya Ba, a mixture of methamphetamine and caffeine also popular in Thailand. How much Ya Ba is consumed within the Lao PDR, and by whom, is unknown, although the Lao Government uses an estimate of 40,000 consumers (which is likely to be a conservative figure). There is very little data about patterns of usage or which communities are most affected.

2. National and regional responses

2.1 Lao PDR response

The Lao National Commission on Drug Control and Supervision (LCDC) takes the lead on coordinating the Lao PDR's response to drugs issues, including by working with relevant agencies, such as the Ministry of Public Security and the Ministry of Health. LCDC was transferred from the Prime Minister's office to the Ministry of Public Security in June 2016.

Building on the 2009 – 2015 National Drug Control Master Plan, which aligned with the Lao PDR’s 7th National Socio-Economic Development Plan (2010 - 2015), a new Drug Control Master Plan for the period 2016 to 2020 was approved by the Lao Government in May 2016. The Master Plan, which was prepared with support from UNODC and the US, outlines a series of nine priority areas for the Lao Government between 2016 and 2020, covering:

- Formulation and improvement of legal instruments concerning narcotic problems;
- Data/Information collection and analysis;
- Education/Training/Dissemination of the laws and adverse consequences from drug abuse;
- Treatment and vocational training for drug addicts;
- Alternative development, replacing opium poppy and cannabis cultivation;
- Law enforcement;
- Precursor control, analysis and test of drug use;
- International cooperation; and
- Streamlining the organizational machinery of the national commission for drug control and supervision at central and local level.

The Illicit Drug Sector Working Group (IDSWG) forms part of the National Round Table Process and constitutes the sectoral framework for donor coordination in the counter-narcotics sector in the Lao PDR. The IDSWG is chaired by the LCDC, and co-chaired by the Mini Dublin Group Chair (Australia or Japan on a yearly rotational basis) and UNODC. It includes a broader number of partner countries than the standard mini Dublin Group membership, reflecting the importance of close consultation with regional neighbors on anti-narcotics issues.

2.2 Regional response

In January 2017, the Lao PDR joined other ASEAN Member States in adopting the ASEAN Cooperation Plan to Tackle Illicit Drug Production and Trafficking in the Golden Triangle (2017-2019). The Plan is a concerted effort to solve drug problems in the Golden Triangle, and builds on both the Safe Mekong Joint Operation Project, which commenced in 2013, and the ASEAN Work Plan on Securing Communities Against Illicit Drugs (2016-2025). It consists of six distinct components:

1. Precursor chemicals smuggling interdiction/suppression plan;
2. Suppression of illicit drugs trafficking via land, sea/waterways, air routes plan;
3. Investigation and arrest of major drug producers/traffickers, warrant fugitives, and suppression of drug syndicates plan;
4. Demand reduction, health, and area development promotion plan;
5. Administrative mechanisms development plan; and
6. Seeking cooperation from parties outside the Region plan.

Lao PDR is a signatory to and active participant in The Mekong Memorandum of Understanding (MOU) on Drug Control. The Mekong MOU brings together six countries in East and Southeast Asia – Cambodia, China, Lao PDR, Myanmar, Thailand and Viet Nam – to address the threat of illicit drug production, trafficking and use. As a non-state signatory and the seventh partner to the MOU, the United Nations Office on Drugs and Crime (UNODC) provides secretariat and technical support to the MOU process. In 2017, the Mekong MOU was aligned with the recommendations that came out of the UN General Assembly Special Session on tackling illegal drugs, ensuring a strong emphasis on reducing demand and the impact on health.

Through the Mekong MOU umbrella, Lao PDR received 178 drug precursor and field identification kits and associated capacity building in 2017, together with cross-border cooperation training courses aimed at strengthening drug law enforcement on the border with China. In 2018, 10 sets of frontline drug law enforcement protection equipment and 4 sets of crime scene investigation kits were also provided under the Mekong MOU.

3. Update on counter-narcotics programs supported by development partners

3.1 UNODC

UNODC has continued to work with Luxembourg and the United States to deliver Alternative Development programming in Huapanh province, where supported communities are in the process of transitioning to coffee and establishing a jointly owned cooperative.

UNODC has also worked with the government and the United States on introducing Community Based Treatment Services (CBT) to locations across the country. CBT services have now been established in 28 district hospitals in six provinces.

In December 2017, the UNODC-WCO Container Control Programme established a first Container Control Unit in Lao PDR – in Thanaleng at the Thai-Lao border near Vientiane. The unit is designed to improve profiling of containers in order to select high-risk containers for inspection.

UNODC has also continued its work with the United States and Australia on supporting the Lao government in enhancing cross-border cooperation through a network of 15 Border Liaison Offices in hotspot border locations across the country. The programme targets drugs and precursor chemicals, human trafficking, migrant smuggling, Ozone Depleting Substances (ODS), wildlife and timber, and dumping of hazardous waste.

3.2 United States

The United States continues its work to prevent and treat drug use disorders in the Lao PDR by strengthening the Community Based Treatment (CBT) system. Support will build the capacity of local healthcare professionals on evidence-based treatment and care, provide technical assistance to CBT centers, and expand the use of the Universal Prevention Curriculum.

Through previously provided funding, the United States supports an alternative development project in Houaphan Province, as well as training and limited operational expenses for the Lao drug control police and LCDC.

3.3 Japan

Japan continues to provide annual training courses to Lao Government officials on drug crime control. Japan also supports global and regional activities which cover the Golden Triangle through contribution to UNODC such as the Global SMART (Synthetics Monitoring: Analyses, Reporting and Trends) program.

3.4 Luxembourg

Luxembourg is supporting an alternative development project in Houaphanh Province implemented by UNODC. The project started its implementation in early 2016. A second phase of the project will start in January 2019 – December 2021.

3.5 Australia

The Australian Federal Police (AFP) continues to provide law enforcement training and equipment for Lao police engaged in anti-narcotics and other transnational crimes. Increasing direct operational cooperation in 2017 and 2018 has enhanced the sharing of police intelligence in relation to narcotics exported from Laos to Australia. Australia also supports an ongoing program of capacity building with Lao immigration and customs to strengthen the Lao PDR's border management systems and skills.

3.6 European Union

The European Union (EU) and its Member States have been quite active in the past in providing support through alternative development projects in Northern Laos. The last EU project came to an end in late 2015 but the EU remains fully committed to recognising drug production and use as a primary concern for the country and the region and to adopting a people-centred approach that treats users as victims to support rather than as criminals to convict. The EU closely followed the revision of the newly adopted Penal code and regrets that capital punishment is retained for drug-related offenses. The EU is ready to explore further options for support.

4. Identification of needs for external assistance

Needs identified during the elaboration of the 2016 – 2020 National Drug Control Master Plan remain relevant in 2017. Alternative crop development, which has a good track record of reducing opium production in targeted areas of the Lao PDR, data collection, survey work, and analysis of patterns of supply and demand would all benefit from additional external assistance. Lao anti-narcotics authorities are having difficulty sourcing the USD 60 million they estimate will be required over the five years of the Master Plan (from 2016 – 2020), given the limited interest in the sector by the country's main development partners, both traditional DAC donors and new donors, and the limited Lao Government budget allocations for the sector.

Some of the priority areas for support identified by the Lao PDR in 2017 include the provision of fieldwork vehicles, GPS and surveillance equipment.

5. Mini Dublin Group coordination

On August 6 2018, a field visit was organized for members of the Mini-Dublin group to Somsanga Drug Treatment Centre and the Community Based Treatment unit at Sisatanak District hospital in Vientiane. During the visit, the members of the group were introduced to the two types of drug treatment currently practiced in Lao PDR: In-patient treatment in drug treatment centre, and Out-patient Community Based Treatment (CBT) in district hospitals. Lao PDR has over the past few years initiated an expansion of the CBT model, that is the treatment modality recommended by the United Nations for Amphetamine-Type-Stimulants (ATS). A combined Mini Dublin-IDSWG was held on September 27, 2018.

5.1 Mini Dublin Group's assessment of emerging threats / trends

Enhanced regional transport infrastructure and connectivity following the establishment of the ASEAN Economic Community has only increased the challenges for Lao authorities in combatting narcotics trafficking, production, use, and drug related crime. Protection measures in place at Laos' borders are struggling to keep up with the pace of regional integration in ASEAN. Evidence gathered by UNODC and others shows a strong intersection between the development of economic corridors across the region and an increase in drug-related crime.

Unless drastic measures are taken and funding made available to fulfil the objectives of the Government's ambitious Drug Control Master Plan for 2016-2020, the Lao PDR is likely to see an increase in opium production and further growth in local illicit drug use, making it difficult to realize Laos' aspiration to become a drug-free society by 2030, as stated at the 31 August Mini Dublin Group-IDSWG meeting. In particular, a substantial reduction in opium cultivation through alternative crop development will require significantly more government funding and support from development partners than is now available.

The lack of data available on production and use of narcotics in the Lao PDR, in particular synthetic drug (in particular methamphetamine) and heroin, compounds the ability of the Government and partners to appropriately address the issue.

Reliable data and comprehensive analysis of trends are essential to make effective use of the limited resources available and to better target interventions. There is also an ongoing lack of awareness of risks of ATS use among the youth demographic, and limited access to adequate treatment options. Specific public health messaging is needed to raise awareness. Coordinating law enforcement approaches and health approaches to drug policy remains critical to holistically addressing the issue.

5.2 Mini Dublin Group’s assessment of political will and counter-narcotics initiatives

The Lao Government has shown political will in identifying combating drugs as a high national priority, as illustrated by the adoption of the National Drug Control Master Plan (2016-2020) and by last year’s institutional reform aimed at strengthening coordination of counter narcotic activities across the different parts of the Lao Government. But the ambitious agenda set by the Lao PDR, and the levels of funding identified as necessary to implement the Plan, are undermined by the limited capacities of the Government and the funding available from development partners.

Given donor funding over the previous Master Plan (2009-2015) fell below expectations, there might be value in Laos engaging more closely with neighbors such as China, Thailand and Vietnam that would benefit directly from greater Lao capacity to manage its anti-narcotics challenges.

5.3 Mini Dublin Group’s recommendations for strengthening counter-narcotics initiatives

- **Recommendation 1** – Encourage and support the Lao PDR Government in its efforts to make progress on the nine priorities outlined in the 2016-2020 National Drug Control Master Plan.
- **Recommendation 2** – Encourage and support the Government in its efforts to develop evidence-based treatment programs for drug users (ex. community-based treatment and, for severe drug users, medically-sound systems at treatment centres) and place emphasis on rehabilitation and vocational training. An increase in threshold values of methamphetamine for personal consumption (currently set to 300mg and practiced as three pills) could in this regard be beneficial, as it would allow more users to be channelled to treatment instead of to correctional institutions.

- **Recommendation 3** – Support collection of gender disaggregated data and reporting of statistics on drug law enforcement (arrests, prosecutions and convictions), and drug use and public health. There is limited understanding on drug use patterns and trends in the country, as there has been no drug use survey conducted at a national level, and it hinders development of effective public health responses. In addition, there is no proper mechanism to monitor and follow-up with people who received drug use treatment in the country.
- **Recommendation 4** – Encourage the Lao Government to centrally coordinate intelligence on drug matters, and, whenever possible, exchange this intelligence with regional international law-enforcement partners, including the Dublin Group countries, to ensure they are able to tap into international police intelligence networks and achieve more success against high-level drug smugglers. The strengthening of cross-border communication and cooperation should be prioritised.
- **Recommendation 5** – Enhance knowledge and skills of frontline law enforcement officers, in particular working at border liaison offices, to better investigate and prosecute drug trafficking offences through provision of various trainings, including illicit drug and precursor identification. Donor countries are encouraged to focus capability development support to MPS' Counter Narcotics Division to enhance the capacity of MPS to proactively tackle increasing organised drug trafficking activity.
- **Recommendation 6** – Enhance knowledge and skills of MPS officers responsible for drug forensic matters to enable them to identify various synthetic drugs and precursor chemicals through provision of tools and training. Encourage coordination of effort with partner agencies like Thai ONCB to share resource and specialist technical support in the testing of narcotics and capacity development with MPS.
- **Recommendation 7** – Encourage the Lao Government to enhance and authorise more police to police coordination efforts with neighbouring countries through existing mechanisms to better respond to illicit drug trafficking and production.

II. MYANMAR

1. Place and Date of Meeting of mini-Dublin Group in Myanmar

Japan chaired a mini-Dublin Group meeting in Myanmar on 12 September 2018. The meeting was well attended by representatives of mini-Dublin Group members (alternative Chair Australia; Japan's development agency JICA; United Nations Office of Drugs and Crime (UNODC); representatives from embassies of the European Union, Italy, France, the Netherlands, United States, United Kingdom, and Czech). The Myanmar Police Force (MPF) attended, Thailand (Office of the Narcotics Control Board) and Embassy of Bangladesh attended as observers. UNODC updated participants on Myanmar's narcotic situation, the Myanmar Police Force presented on its work, and embassies updated on activities.

2. General Situation

2.1 Opium and opiates

Myanmar is considered to be the second largest producer of opium in the world, behind Afghanistan. East Asia's illicit opiate industry value is estimated at \$16.3 billion per year, the majority of which is driven from Myanmar opium/heroin. In 1999, the Myanmar Government and local authorities engaged in a 15-year plan to eliminate opium poppy cultivation by 2014. This plan was extended a further five years and will conclude in 2019.

Until 2006, there was a considerable decrease in the total area under opium poppy cultivation in Myanmar. This was a result of efforts to eradicate opium poppy cultivation as well as the imposition by local authorities of an opium ban in the Kokang Special Region in 2003 and the Wa region in June 2005. However, illicit opium poppy cultivation has since increased, although it is still well below the levels reached in the 1990s. After reaching a minimum level in 2006, opium cultivation began to gradually increase again in 2007. According to the UNODC Opium Poppy Survey report¹, the total area under opium poppy cultivation in Myanmar in 2017 was 41,000 hectares; a decrease of 8% with respect to 2014. The 2017 UNODC survey covered the major producing states—Shan and Kachin—which accounted for more than 98% of the national opium poppy cultivation in 2015. The 2017 figure cannot be directly compared with the 2015 estimate (55,500 ha), since the opium poppy growing areas in Chin and Kayah states were not included due to budget constraints. Considering only Shan and Kachin states, a 25% decrease in cultivation was recorded, from 54,500 ha in 2015 to 41,000 in 2017. The resulting estimate of potential opium production in 2017 was 550 metric tonnes. The 2017 production figure does not include the potential production in Chin and Kayah states. When the total opium production in Shan and Kayah states are compared, there is a decrease of 14% from 637 metric tonnes in 2015 to 550 metric tonnes in 2017.

Geographically, opium poppy cultivation still appears to be largely confined to the highland areas of Shan State, with smaller areas of cultivation reported in other states such as Kachin, Kayah and Chin. According to the 2017 UNODC survey, stable governance and good security conditions have a considerable impact on the decision of farmers to cultivate opium poppy. The report titled *“Evidence of Enhancing Resilience to Opium Poppy Cultivation in Shan State – Implications for Alternative Development, Peace and Stability”* is the first of its kind dedicated to Shan State, highlighting reasons farmers engage in the opium economy, as well as some implications for Myanmar’s ongoing peace process. The survey confirmed the importance of opium poppy to the economy of Shan State. About 1 in 10 households in the villages surveyed is directly involved in opium poppy cultivation, with many depending on money earned from poppy for food and basic essentials. The issue of land title is also significant as farmers that own land were found to be less involved in opium poppy cultivation.

¹ UNODC (2015) South-East Asia Opium Survey 2015: Lao PDR, Myanmar

2.2 Amphetamines (ATS)

Countries in East and Southeast Asia have seen an increase in the manufacturing, trafficking and consumption of amphetamine-type stimulants (ATS) with a large volume of ATS being produced in the eastern border areas of Myanmar. The most common type of ATS produced is methamphetamine. In East Asia, the illicit ATS industry value is estimated to be \$15 billion per year.

While methamphetamine continues to be primarily trafficked within regions, significant increases in methamphetamine seizures observed in the past five years would seem to indicate the establishment of new trafficking routes linking previously unconnected regional amphetamine markets.

Methamphetamine trafficking routes to East and Southeast Asia have emerged from several parts of Africa and America. Methamphetamine use continues to be a major problem in large parts of East and Southeast Asia. Information on seizures and use indicate that the market for both forms of methamphetamine (i.e. methamphetamine tablets and crystalline methamphetamine) is expanding.

Myanmar is perceived to be the main country of origin of methamphetamine tablets seized throughout the Mekong region. Reports of methamphetamine tablets originating in Myanmar and seized in China and Thailand indicate that increasing quantities are being trafficked from Myanmar across the shared borders of those countries.

The illicit production of ATS is aided significantly by the use of precursor chemicals which are trafficked into Eastern Myanmar from India and China. Recently, there has been a shift in the production practices for methamphetamine from sourcing chemicals, as well as processed and licit pharmaceutical preparations, to sourcing raw precursor chemicals in bulk.

A significant portion of the ATS pills produced in the eastern border regions of Shan State subsequently are trafficked via various routes directly to Thailand, China and Lao PDR. There is also evidence of new transnational trafficking routes for ATS pills along Myanmar's western border with Bangladesh and India.

With respect to crystalline methamphetamine, there has been a significant increase in production in Myanmar in recent years. In 2018, there was a spike in the production and seizures and a geographic expansion to Malaysia, Indonesia and even Australia.

2.3 Drug Use and Treatment

In Myanmar, there is still high use of both heroin and opium. However, the MPF now considers ATS the primary drug of use. Opiate use has decreased over recent years, a reduction which coincides with a reported increase in the use of methamphetamine pills. Of concern in relation to this reported increase in ATS use is the fact that, like other countries in this region, drug treatment facilities in Myanmar are vastly under-resourced and possess no treatment facilities specifically designed to treat ATS dependency. The National Drug Abuse Prevention and Control Programme of the Ministry of Health and Sports officially published the treatment guidelines for ATS dependence.

2.4 Challenges in Border Areas

As noted above, most domestic opium cultivation, and heroin and ATS production, occurs in Shan State and, particularly, in the eastern areas along the border with China. While the National Ceasefire Agreement (NCA) was signed in October 2015, these border areas, most of which are still controlled by various armed ethnic groups, remain regularly affected by sporadic armed conflict between state and non-state actors, as well as between competing non-state armed groups. The continuing situation of human insecurity that is evident in many areas of Shan State – but specifically along the eastern border – is leading to increases in opium poppy cultivation, ATS production, and illicit drug trafficking. This is, in turn, leading to a further deterioration in the security environment of these areas.

3. Update on Myanmar’s Anti-Drug Strategy

3.1 Changes/Additions to the Counter-Narcotics Institutional Framework

There have been no significant changes to Myanmar’s counter-narcotics institutional framework over the last year.

3.2 Legal/Legislative Changes

The Central Committee for Drug Abuse Control (CCDAC) has finalised a revision of the 1993 Narcotic Drugs and Psychotropic Substances Law (aka. the drug law), switching the emphasis from a punitive approach to drug use to a more public health-centred approach. The amended law was promulgated on 14 February 2018.

The process of reviewing the drug law was accelerated in December 2014 when, on request of the Ministry of Home Affairs (MoHA), UNODC and UNAIDS initiated a collective review of the law. Technical inputs from key stakeholders and international experts were synthesised in a comprehensive report that the UN agencies sent to MoHA and whose suggestions guided the discussions of an intergovernmental workshop organised by CCDAC in late January 2015. Subsequently, a wide-ranging consultation workshop on amending the 1993 drug law was held in Nay Pyi Taw, from 16 to 19 February 2015. The workshop involved a broad range of stakeholders, including senior representatives from the Myanmar Government, parliamentarians, international health and legal experts, INGO/NGOs, drug user networks, development partners, UN agencies and other relevant technical partners.

The revision of the drug law was announced in the media for public comments and comprises the recommendations from the workshop, including the removal of compulsory registration for people who use drugs, a recommendation to transfer programmes for people who use drugs from prison to drug treatment centres, a reduction of penalties for small offenders, and the inclusion of the harm reduction approach in programming.

The final amendment of the 1993 drug law was endorsed by the President on 14 February 2018. Positive changes included in the amendment of the 1993 drug law include: (1) the removal of compulsory registration for drug users; (2) the shift from a criminal approach to a public health approach; (3) alternative options to imprisonment for drug users such as treatment, rehabilitation and community service; (4) recognition of the harm reduction approach; and (5) the shift from an approach centred on eradication to one favouring alternative development.

3.3 The Development of National Drug Control Policy in Myanmar

UNODC has also been providing technical support for the development of a new national drug control policy in Myanmar. The first intergovernmental meeting on the development of the new drug policy was held in September 2016. In the period of October to December 2016, three five-day workshops were held to develop the policy. The workshop discussions focused on the areas of prevention, treatment, and rehabilitation including harm reduction, supply reduction, law enforcement, alternative development, and cross-cutting issues including human rights and gender. The workshop recommendations were further discussed at a national expert review meeting in June 2017.

The second intergovernmental meeting and national consultation of a new national drug policy with all stakeholders including representatives from relevant government agencies, UN agencies, NGOs, CBOs and representatives from Parliament were held in September and November 2017. This new drug policy was launched on 20 February 2018.

The policy falls in line with the outcomes of UNGASS on the world drug problem in 2016 and complies with the three international drug conventions. It is formulated to support the achievement of the Sustainable Development Goals (SDGs). This policy includes five key policy areas: (1) supply reduction and alternative development; (2) demand and harm reduction; (3) international cooperation; (4) research and analysis; and (5) compliance with human rights. The policy presents a comprehensive approach to tackling the drug situation, involving government, non-government and civil society stakeholders. In addition to law enforcement and criminal justice efforts, it includes health and social policy responses, outlining a path to promoting sustainable alternative development for opium farmers, and promoting international cooperation. Major changes in this policy include the adoption of a harm reduction approach to users, and increasing compliance with human rights as a crosscutting issue.

3.4 Assessment on Border Management

As part of activities under UNODC's PATROL Programme (Partnership against Transnational Organised Crime through Regional Organised Law Enforcement), assessments have been conducted in all the five operating border liaison offices (BLO), namely Myawaddy, Kawthaung, Tachileik, Wang Pong and Kyaing Lath. New BLO offices have been suggested. Moreover, jointly with the Government's steering committees, feasibility assessments have been conducted to identify suitable locations for new BLO offices in the northern part of Myanmar bordering Bangladesh. On 27-30 June 2017, the MPF and the UNODC visited the Maungdaw BLO situated in the above-mentioned area.

4. Update on Major Bilateral and Multilateral Counter Narcotics Programmes

4.1 UNODC

The UNODC mandate is to assist Member States to address the salient threats posed by drugs, crime, corruption and terrorism. UNODC addresses rule of law problems by working in the following areas: trafficking, governance and criminal justice. UNODC tackles health and development challenges through its drug demand reduction, HIV-AIDS and sustainable livelihood work.

Current interventions in Myanmar were consolidated into a new UNODC Country Programme for Myanmar (2014-2017). The Country Programme was signed in August 2014, and has been conceptualised based on consultations with Myanmar Government counterparts, civil society, and Member States meeting their needs. The Country Programme initially covers four years—from 2014 to 2017—and has been extended to 31 December 2019. Current Country Programme thematic areas of support include assistance in illicit trafficking and law enforcement, anti-corruption, criminal justice reform, HIV and drug demand reduction and alternative livelihoods for opium poppy growing communities.

4.1.1 Drug Demand Reduction, HIV/AIDS Prevention and Care:

(Demand Reduction) Through a UNODC-WHO joint programme on drug dependence treatment and care, UNODC supports capacity development of treatment service providers from drug dependence treatment units under the Department of Medical Services and the Department of Social Welfare. A training of trainers (ToT) programme on “Substance Misuse Assessment, Brief interventions, Pharmacotherapies & Psychosocial Interventions” was conducted in July 2016 and 30 professional staff from the government were trained.

To better understand the prevalence of different kinds of substance dependence problems as well as the workload, the treatment capacities and modalities of various drug treatment facilities in different parts of the country, the Drug Dependence Treatment Facility Mapping Exercise is in progress and is expected to be finalised in the last quarter of 2018.

(Community-Based Services for People Who Use Drugs (PWUD)) UNODC has developed a guidance document and a training toolkit for providing community-based services for PWUD in the Southeast Asian region which will help promote evidence-based, high-quality, affordable, accessible, and effective services for PWUD/PWID. These documents were translated in Burmese and adapted to local contexts. Currently, the Government of Myanmar is planning to implement community-based services for PWUD in several strategic areas. In order to increase the capacity of the key providers of community-based services for PWUD in Myanmar, UNODC organized capacity-building trainings for them in partnership with CCDAC, the Ministry of Home Affairs, the National Drug Abuse Control Programme, and the Ministry of Health and Sports. Advocacy meetings, pre-assessments and multiplier trainings at the field level in Wutho and Kalay townships in the Sagaing region for the implementation of the community-based services for PWUD have been conducted in 2018.

(Harm Reduction Services for People Who Inject Drugs) In order to create enabling environments for harm reduction services, UNODC provides technical support for the development of by-laws and -rules for the amendment of the 1993 drug law from a punitive to a public health approach.

To follow up on the new drug policy, UNODC supports CCDAC in organizing the dissemination of the new drug policy to key stakeholders, including government agencies, NGOs and CBOs at the state and regional levels, in addition to providing technical support to the development of the National Strategic Plan for a new drug control policy.

Furthermore, UNODC continues to support the creation of enabling environments for harm reduction services for PWID through the establishment of harm-reduction township steering committees for harm reduction services at the township level as well as advocacy meetings with faith-based groups and capacity-building workshops for civil society organizations and PWID-based networks.

(Alternative Development) UNODC supports the development of sustainable livelihood alternatives for opium poppy growing communities in 60 villages in Hopong, Loilen and Ywangan townships of Southern Shan State by addressing the economic root causes of poppy cultivation and the related environmental degradation. Thus, UNODC intervenes in the opium poppy economy with alternative permanent crops and the establishment of farmers' organisations to enable participating farmers to independently cultivate, refine and commercialise high quality products that can be exported to international prime markets. At the same time, UNODC addresses problems of deforestation related to opium poppy cultivation through the implementation of enrichment and reforestation activities which also have positive spill-over effects on livelihoods by protecting water sources and reducing erosion and soil degradation. In addition to focusing on livelihoods and forest dimensions, UNODC has an explicit and crosscutting focus on capacity development to increase national capacities and ensure that the benefits reached are sustainable and can be replicated elsewhere.

As a result of UNODC support, 1103 former opium poppy farmers have started cultivating high quality coffee, tea and avocado, and 1682 hectares of former opium fields have been converted to alternative and sustainable crops.

In addition to this, UNODC supported the establishment of a coffee cooperative in July 2015 which was formally approved by the Cooperative Department in early 2016. The first approximately 4 tonnes of coffee produced with support from the programme were harvested in the December 2016 – April 2017 period and were subsequently sold by the coffee cooperative in the domestic market. The first significant harvest of coffee began in December 2017 and resulted in 18 tonnes of coffee sold in the international market. Based on the agreement signed in December 2017 with an international coffee company, most of this coffee will be sold in the international market under fair trade conditions.

(Research and Survey) UNODC has been carrying out the Myanmar Illicit Crop Monitoring Programme (ICMP) in cooperation with the Myanmar Government since 2003. This programme produces annual opium surveys which provide verifiable estimates on the extent and trends of opium poppy cultivation in Myanmar to national authorities, regional and sub-regional bodies as well as the United Nations and the international community. The survey contributes to establishing a comprehensive crop monitoring system in Myanmar. It builds on the experience acquired in previous years and further strengthens the capacity of the Government to maintain such a system. This annual survey is supported by Japan and the US. An independent area estimation was not part of the survey in 2016. Instead, UNODC expanded the socio-economic analysis of opium cultivation in line with the UN guiding principles on alternative development and the SDGs. The survey report was released in March 2017. The latest opium survey was launched in December 2017.

Additionally, UNODC monitors synthetic drugs through the UNODC Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme, which was launched in September 2008. The overarching objective of the programme is to support Member States make effective evidence-based decisions for designing responses to address the problems associated with illicit synthetic drugs.

4.2 Japan

The Japanese Government has conducted a crop substitution programme for the eradication of opium poppy cultivation and poverty reduction in northern Shan State since 1997, initiating with two-year crop trials and followed by implementing a technical cooperation programme through the Japan International Cooperation Agency (JICA). From April 2005 to March 2011, JICA conducted a project for the comprehensive socio-economic development of Kokang Self-Administered Zone, which totalled about US\$11 million. This project covered infrastructure, agriculture, livelihood improvement, health and education aimed at the mitigation of the critical situation of the people in poverty after eradicating opium poppy cultivation in the Kokang Self-Administered Zone.

To cope with recent gradual increase of poppy re-cultivation, as succeeding alternative development activities in Northern Shan State, JICA and the Ministry of Border Affairs signed the MOU on another five-year technical cooperation project in order to support ex-opium poppy farmers to stabilize their livelihood through strengthening farming skills and diversifying income sources. The project, which targets Kyaukme, Muse and Laukai districts, commenced in March 2014 with five long-term technical experts based in Lashio. Due to security situations in the targeted areas in Northern Shan State, the activities have been mainly taken place in the model village areas located near Lashio since June 2015. From those 20 years of untiring activities in the Northern Shan State, many, experiences and lessons on Alternative Development (AD) have been accumulated. In order to use these accumulated pieces of knowledge in a sustainable manner, the Project has raised AD Trainers who can facilitate alternative development not only in the opium poppy cultivated areas but the regions where sources of income generation are desperately limited. The Project is expecting to train more AD personnel using the AD Trainers to propagate the method of alternative development in the nation, and to prevent the farmers from getting involved with or recurring to opium poppy cultivation in Myanmar.

The Japanese Government also contributed to multilateral agencies, including US\$4.43 million (1996-2007 total) to the UNODC project for drug control and development in the “Wa” Self-Administered Division of the Shan State, and US\$2.80 million (2002-2017 total) to the UNODC project for illicit crop monitoring in Myanmar. The Government of Japan contributed US\$750,000 to WFP Food Assistance for Children and Mothers during the dry season through Protracted Relief and Recovery Operations (PRRO) in northern Shan State in 2009 and approximately US\$5 million to WFP PRRO in Myanmar including Northern Shan State in 2010. The Japanese Government funded in 2009 US\$130,000 to AMDA, a Japanese NGO, for their project for upgrading a rural health centre in Kokang Region.

In recent years, CCDAC officials participated in the Asia-Pacific Operational Drug Enforcement Conference in Tokyo hosted by the National Police Agency of Japan.

4.3 Australia

Australia, through the Australian Federal Police (AFP), continues to support counter-narcotic efforts against organised drug trafficking organisations via direct operational cooperation between AFP and Myanmar Police Force (MPF). Transnational drug trafficking organisations actively target the Golden Triangle Region to exploit porous borders and source narcotics and other related production chemicals. There is a direct nexus between narcotics production/trafficking and throughputs of narcotics in Myanmar to Australia. Australia remains a highly lucrative regional target destination of drug trafficking organisations.

The AFP has increased the provision of direct operational support to MPF Drug Enforcement Division (DED) in the last 12 months in response to MPF increased focus on detecting and disrupting drug trafficking organisations and organised crime. This includes the provision of equipment, training and investigative/intelligence cooperation. Australia notes the significant success of MPF DED in detecting and disrupting major drug trafficking organisations activities in Myanmar and its contribution to coordinated regional efforts against drug trafficking organisations. Australia encourages other MDG partners to actively support MPF efforts to reduce the impact of organised crime and narcotics production/supply.

Australia, through the Australian Border Force (ABF), is also supporting capability development amongst Myanmar's border agencies by providing specialised equipment and technical training in the fields of Intelligence Analysis and Counter Proliferation to the Myanmar Customs and Immigration Departments. ABF provides direct, bilateral support to Myanmar Customs' Port Control Unit at Yangon seaport. This support includes equipment, training and mentoring of officers in the targeting, examination and detection of illicit products and narcotics.

ABF provides maritime security training, technical support and equipment to the MPF Maritime Policing Division. This includes the provision of vessel search and intervention training, intelligence led vessel targeting with a focus on improving regional cooperation. ABF continue to provide the Maritime Policing Division with equipment as part of the overall training package.

ABF has now signed a Memorandum of Understanding for Information Sharing with Myanmar Customs, intended to facilitate the flow of narcotic related information.

Through the aid program, Australia has pledged AUD220 million over 2017-2019 to The Global Fund to Fight AIDS, TB and Malaria, which is providing significant funding for HIV prevention treatment and care in Myanmar, including HIV harm reduction services.

Australia is also contributing to the multi donor Livelihoods and Food Security Trust Fund (LIFT). Australia is the third largest donor to LIFT. Through LIFT approximately US\$500 million has been invested to improve the food and livelihoods security of the poorest and most vulnerable people in Myanmar. Shan State is one of the target regions for LIFT.

Australia is investing in livelihood and rural development research through the Australian Centre for International Agricultural Research (ACIAR). This research will eventually be incorporated into developing future livelihood activities throughout Myanmar.

4.4 United States of America

The United States continues to provide substantial assistance in support of law enforcement, counternarcotic and rule of law activities. In 2017, U.S. assistance in these sectors was approximately \$11 million, and U.S. assistance will likely continue at that level in 2018. In terms of counternarcotic activities specifically, the United States will continue to implement a range of programs that help the Government of Myanmar address both the demand and supply sides of the narcotics problem.

On the demand side, U.S. efforts in the public health, education, and rehabilitation sectors are led by USAID, the Centers for Disease Control (CDC), and the State Department's Bureau of International Narcotics and Law Enforcement (INL). Programming in public health includes components related to harm reduction, demand reduction, and training of health professionals. In education and prevention, programming focuses on partnerships with grassroots and civil society organizations that engage youth populations, community leaders, and education professionals on ways to address drug use, and on implementing public information campaigns. Programming on drug rehabilitation is in a nascent stage. Government of Myanmar partners include the Ministries of Health and Sports; Social Welfare, Relief, and Resettlement; and Education.

On the supply side, U.S. assistance is based on technical assistance and training to law enforcement and justice institutions. The Embassy's Drug Enforcement Administration Country Office engages with the Myanmar Police Force's Drug Enforcement Division (DED) on developing the capacity to interdict and investigate drug production and trafficking networks, complemented by INL's support for sending DED officers for technical training at the U.S. Government's International Law Enforcement Academy in Bangkok. The Embassy's Department of Justice Resident Legal Advisor engages with the Union Attorney General's Office (UAGO) and other criminal justice stakeholders on developing capacity to address transnational organized crime generally, and narcotics trafficking and money laundering specifically. Aside from the DED and UAGO, the United States engages with the Anti-Corruption Commission, Supreme Court, and Financial Intelligence Unit among others.

4.5 European Union

The European Union (EU) has been supporting the activities of UNODC for the eradication of opium poppy cultivation between 2003 and 2015. Originally supposed to be implemented in Pinlaung Township, both projects were relocated to Hopong Township since UNODC was denied the MoU to operate in the proposed target areas. The new area of implementation shows similar needs for assistance.

In 2014, the project revised its strategy in order to offer the farmers a more sustainable income alternative to opium production, e.g. by focusing on creating economies of scale.

Prior to the new approach, beneficiaries have been provided with food crops², cash crops³, livestock⁴, as well as other inputs for agriculture or income generation. This has been complemented with extensive training activities and technical assistance. There has been a substantial improvement amongst the poorest and most vulnerable villages since 2012. None of the households now experience food insecurity for 7 months or more. In 2014, the villagers were asked to assess project contributions to food security. 25% of the villagers answered that the project has contributed to increased food security to “a large extent”. Based on a number of evaluations, UNODC prepared a new strategy for Alternative Development in Myanmar. This strategy is now included in UNODC’s Country Programme for Myanmar (2014-17) that was signed by the Government in August 2014. The new approach has been welcomed by both the farmers in the region and the Myanmar Government, who has closely supported the project. In July 2015, UNODC facilitated the constitution of coffee cooperative named “Green Gold” with 530 members of coffee farming families, in collaboration with the Ministry of Cooperatives, Government of Myanmar. Cooperative membership increased to a total member of 810 (Female 250, Male 560) by the end September 2015. With the project continuing with Finland and German funding, UNODC will continue support the farmers, expanding coffee farms, and supporting the cooperative with post-harvest technology and linking them to the premium quality global coffee market in order to assure longer term and sustainable incomes for farmers.

² Lowland paddy, upland paddy, potato tubers, Elephant foot yam, broad bean, home garden seeds, and more.

³ Coffee, tea, avocado, fruit trees, corn.

⁴ Buffalos, pigs, chickens, fish.

Two projects aiming at reducing injecting drug use and its harmful consequences were implemented in the period 2003-2008. They contributed to decrease the spread of HIV and mitigate the impact of HIV & AIDS in Myanmar by promoting safe behaviour and improved access to comprehensive services, specifically among intravenous drug users.

Finally the EU is also one of the donors contributing to the LIFT fund (since 2009), to the Joint Peace Fund (since 2015) and it has also contributed between 2012 and 2017 to the 3MDG fund.

5. Prioritised Identification of Needs for External Assistance

- Continued and enhanced international cooperation, including the neighbouring countries, and capacity building with Myanmar law enforcement agencies and Mekong Region on counter narcotics.
- Continued programmes on alternate development to improve the livelihood of former poppy cultivating communities, including in newly-developed poppy cultivation areas, and addressing food security issues.
- Continued surveys and research on opium, synthetic drugs and ATS production.
- Treatment and rehabilitation of addicts and former addicts with an emphasis on supporting methadone programs to treat drug addiction.

6. Mini-Dublin Group Assessment of Needs

6.1 Emerging Threats/Trends

Opium poppy cultivation in Myanmar saw continued to see year-on-year increases in cultivation area from 2006 to 2013. Since 2013, cultivation has remained relatively stable. Further, the production and trafficking of other illicit drugs, most notably ATS and its precursors, has continued to increase, with ATS now considered the primary drug of use in Myanmar by the Myanmar Police Force. Continued inaccessibility, due to security reasons, to the main areas where illicit drug crop cultivation and drug production occurs continues to represent a considerable challenge to the anti-narcotics efforts by the Myanmar Government and the international community.

Household food insecurity and its apparent relationship to household engagement or re-engagement with illicit drug cultivation and production is a significant, emerging threat in Myanmar.

Also of concern is the apparent tightening of controls to access for UN agencies and donors providing assistance for former poppy farmers in certain areas. Although this partly reflects ongoing security issues in these areas, members consider that the controls to geographic access may be going beyond what is necessary. The lack of access to these areas, which in some cases do not fall under regular government control, hinders domestic anti-narcotic efforts.

6.2 Political Initiatives

The Myanmar Government continues to publicise their determination to tackle narcotics production through its extended 20-year narcotics elimination plan, and has revised the structure of CCDAC anti-narcotic teams across the country, which has included the creation of 24 new ANTF units.

However, its activities have been hampered by insufficient funds and inaccessibility to many areas where illicit drugs cultivation and production takes place. The successful implementation of the 20 year plan will depend also on the situation in the Special Region border areas, the political will of the new government continuing through the 2015 election, and continued, expanded assistance from the international community.

6.3 Recommendations

- That the joint chairs, Japan and Australia, continue to update the document which outlines current and previous anti-narcotics programs in Myanmar and which can be used as a resource to avoid duplication of effort and identify key gaps.
- That the international community take into account the significant shift toward the production and use of synthetic drugs, specifically methamphetamine, both in Myanmar and the region, when developing programs and engaging with government interlocutors. That shift has serious implications for efforts to curb the supply of illicit drugs, but also requires increased attention to the broad use of, and growing addition to, of methamphetamines throughout Myanmar.

- That the shift to synthetic drug production requires increased scrutiny on the flow of precursor chemicals from China and India into Myanmar, and increased analysis of and attention to the sources of those precursor chemicals.
- That members formally recognize narcotics production and trafficking among the key drivers of the conflicts in Shan State, taking into account of the UNODC record that particular armed groups are directly participating in the manufacture and trans-border smuggling of methamphetamines. The peace process and the production of narcotics are inextricably linked, and engagements on the peace process must take into account the challenges presented by parties to the conflict that are engaged in the drug trade.
- That members urge Myanmar to provide greater transparency to developments in drug production areas in Shan State. Lack of access to those areas by civilian law enforcement institutions inhibits their ability to develop interdiction strategies. Members also urge Myanmar to facilitate access to UN agencies, INGOs, and bilateral donors into areas of illicit drug cultivation and production concern in order to develop programming that helps farmers turn away from growing poppy illicitly. This access would include the timely provision of necessary visas and travel authorisations for international staff.
- That members encourage Myanmar and its neighbours, chiefly China and the other Mekong countries, at the bilateral level and, where appropriate, in multilateral fora to continue to work closely with each other on counter-narcotics strategies.
- That members encourage Myanmar to develop legal tools and investigative processes to tackle narcotics trafficking, and to authorize use of special investigative techniques, such as controlled purchases. Members should consider means of supporting Myanmar law enforcement capacity to conduct complex investigations and prosecute drug trafficking networks and high-ranking narcotics figures.
- That members encourage Myanmar's neighbours to work more closely with the international organisations engaged in counter-narcotics in Myanmar.

- That members seek to strengthen their assistance for alternative development (income substitution, community development, construction of infrastructure) in former poppy-growing areas, recognizing that it is one part of a broader set of strategies to fight narcotics production.
- That members consider increasing support for efforts to address the demand for, and use of, illicit narcotics. This support would include training and development of health, education, and social welfare personnel, and the development of programs that address treating drug users and addicts; educating populations about the dangers of drug use; and provision of rehabilitation services for former drug users. Members should continue support for human resource capacity-building and for scaling up HIV prevention and treatment services (i.e. treatment and care, harm reduction and social reintegration) for people who use drugs in Myanmar, and in particular, people who inject drugs.
- That members continue to support Myanmar in the implementation of its national drug control policy, shifting from a punitive approach to a broader spectrum of activities, including public health and development approaches.
- That members support governments of the Mekong region strengthen and further secure their borders through stronger and more coordinated border liaison offices.
- That members further coordinate with the Myanmar Government to identify illicit money flows from the drug trade and address money laundering. Members should encourage narcotics investigators to work more closely with anti-corruption and financial investigation officials within Myanmar, and with regional international partners. Members should encourage Myanmar to better regulate informal cash remittance systems.
- That members encourage governments of the Mekong region and especially Myanmar's neighbours which have huge chemical industry to coordinate and collaborate the precursor control.
- Members should consider the provision of additional support to Myanmar law enforcement and border agencies to assist in Myanmar's anti-narcotic efforts.

III. CAMBODIA

1. General situation

Transnational organised criminal groups, in particular from Asia, continue to use Cambodia as a transit and destination for methamphetamine and their precursor chemicals as well as other illicit drugs such as heroin. The illicit harvesting and exporting of safrole-rich oils (SRO),⁵ which can be used as a precursor for MDMA, has been significantly reduced, but remains a law enforcement and environmental attention. In 2017 cocaine was trafficked mostly from Europe and South America via Cambodia to the other destinations. The availability and use of methamphetamine in pill and crystalline form continues to expand. In addition, whereas illicit drug use was previously concentrated primarily in urban areas, in recent years it has been expanding into rural areas, in particular in the provinces adjacent to Lao PDR and Thailand.⁶

The number of drug users identified by law enforcement authorities in 2017 was 18,104, which was 12 % less than the figure reported in 2016 (20,621). Crystalline methamphetamine users accounted for 92 % of the total number of identified drug users in 2017 and 7 % of the total were methamphetamine pill users. A total of 13,748 drug users were identified by law enforcement authorities during the first half of 2018.

⁵ Safrole is a substance listed in Table 1 of the United Nations Convention Against Illicit Trafficking in Narcotic Drugs and Psychotropic Substances of 1988, as well as in Cambodia's Drug Law. The International Narcotics Control Board defines safrole-rich oils as being 'any mixtures or natural products containing safrole present in such a way that it can be used or recovered by readily applicable means'. 'Precursors and chemicals frequently used in the illicit manufacture of narcotic drugs and psychotropic substances 2008', International Narcotics Control Board (INCB), Vienna, February 2009.

⁶ Cambodia country report, International Narcotics Control Strategy Report, Bureau of International Narcotics Law Enforcement Affairs (BINLEA), U.S. Department of State (Accessed at <http://www.state.gov/j/inl/rls/nrcrpt/2012/vol1/184098.htm>).

Among the drug users identified in 2017, 14,353 drug users (79.3%) were living in countryside. 15,796 drug addicts received the treatment, which increased by 9.43 percent compared with 2016. Out of them, 8,944 (49.4% of the total number of addicts in 2017) were discharged from the rehabilitation centres, 3,101 (17.1%) were receiving community-based treatment, and 3,751 (20.7%) were detoxified at state and private temporary centres. 2,308 drug users (12.7%) had not received treatment as of 2017⁷.

Table 1: Trend in use of selected drugs in Cambodia, 2011-2017

Drug type	2011	2012	2013	2014	2015	2016	2017
Methamphetamine pills	↑	↑	↑	↑	↑	↑	↓
Crystalline methamphetamine	↑	↑	↑	↑	↑	↑	↑
“Ecstasy” ⁸	↑	↑	●	●	↓	↑	↑
Cannabis herb	↑	●	●	●	↑	↓	↑
Heroin	↓	●	●	●	↑	↑	↑

↑ = Increase, ↓ = Decrease, ↔ = Stable, ● = Not reported

Source(s): DAINAP; Cambodia country presentation, National Authority for Combating Drugs (NACD), NACD presentation at the Global SMART Programme Regional Workshop, Chiang Rai, September 2018; Communication with the NACD September 2014 and March 2015.

The community-based treatment service for drug addicts on the health system has been expanded to 419 places – 2 at national hospitals, 24 at provincial hospitals, 72 at referral hospitals and 321 at health centres. Besides, Cambodia has ten Temporary Centres for Drug Education and Rehabilitation managed by government ministries, the civilian/military police, and NGOs.⁹

⁷ NACD, Report on Outcomes of Drug Control in 2017 and Work Direction for 2018.

⁸ Inverted commas used with the word “ecstasy” denote pills sold as ecstasy but which may not contain MDMA and/or any of its analogues but rather other illicit drugs and/or substances not under international control.

⁹ Official communication with the Ministry of Health, Cambodia, May 2016.

In recent years, significant amounts of various illicit drugs have been seized in Cambodia. In 2017, Cambodian national authorities seized 296.5 kg of drugs including Methamphetamine, Ecstasy, Heroin, Cocaine, Ketamine and Marijuana¹⁰. The number of methamphetamine pills seized in 2017 amounted to 334,400, a 24% decrease compared to the preceding year, yet the second largest figure reported from the country. The amount of crystalline methamphetamine seized in the country in 2017 reached the record high with 80.13 kg, and the first half of 2018 already surpassed the total seized in 2017. This steep increase in seizures of methamphetamine in Cambodia is also observed in neighbouring countries of the country. It is mainly due to a shift of large scale synthetic drug production from China to the Golden Triangle. Though the number of “ecstasy” pills seized in Cambodia remains small compared with elsewhere in the region, it reached 83,544 pills in 2017, which is a remarkable increase over the past 5 years. There was a record amount of “ecstasy” seizure in the country, involved with nearly 100 kg of the drug in August. The drug was shipped from Germany to Cambodia.¹¹

Seizures of safrole-rich oils (SRO), one of the key precursor chemicals used in manufacture of MDMA, have been continuously reported from Cambodia in recent years. For instance, in August 2014, approximately 5,220 kg of SRO buried underground was found by the police in Pursat province, located in the western part of the country next to the Gulf of Thailand.¹² According to several media discourses, approximately 110 litres of SRO were seized in Pursat province in May 2016.¹³

¹⁰ NACD, Report on Outcomes of Drug Control in 2017 and Work Direction for 2018.

¹¹ NACD presentation at the Global SMART Programme Regional Workshop, Chiang Rai, September 2018

¹² Op. cit., NACD, September 2015.

¹³ Khmer Times, “Illegal Oil Leads to Arrests”, May 2016. (Available at <http://www.khmertimeskh.com/news/24716/illegal-oileads-to-arrests/>)

Table 2: Seizures of selected drugs in Cambodia, 2011-2017

Drug type	Measurement	2013	2014	2015	2016	2017
Methamphetamine pills*	pills	173,349.	87,000	265,760	441,624	334,400
Crystalline methamphetamine	kg	32.4	29.0	72.9	66.3	80.1
Ecstasy**	pills	0	10,533	70.0	49,578	83,544
Cannabis herb	kg	168.5	80.6	1,511.5	36.86	116.3
Hashish Oil	kg	n/a	0	1.5	0	n/a
Cocaine	kg	12.9	7.9	5.3	14.04	12.8
Heroin	kg	38.3	1.8	2.5	6.27	22.5
Ketamine	kg	0	0.52	0.015	1.07	6.25

● = Not reported/unspecified amount. * The figures include quantities reported as grams; all of which were converted into estimated pill equivalent at 100 mg per pill. ** The figures include quantities reported as grams; all of which were converted into estimated pill equivalent of 300 mg per pill.

Source(s): DAINAP; Cambodia country presentation, National Authority for Combating Drugs (NACD), NACD presentation at the Global SMART Programme Regional Workshop, Chiang Rai, September 2018; NACD, Report on Outcomes of Drug Control in 2017 and Work Direction for 2018.

A limited amount of ketamine is seized in Cambodia each year compared to its neighbouring countries. For the first time, Cambodia has reported seizures of khat, a plant native to the horn of Africa and the Arabian Peninsula in 2018. Other than ketamine and khat, there has been no seizure of any other new psychoactive substances (NPS). However, considering a number of NPS have been identified in illicit drug markets of neighbouring countries of Cambodia, such as China, Thailand and Viet Nam, Cambodia is not immune from threats posed by other types of NPS.

Seizures of heroin in Cambodia had been relatively small compared to its neighbouring countries, for example 2.5kg in 2015 and 6.3kg in 2016,¹⁴ but, increased and reached 22.5kg in 2017. The amount of cocaine seized in Cambodia in 2017 was 12.8kg, which slightly decreased compared with 2016. A large portion of the cocaine smuggled into Cambodia is reported to be destined for Thailand and other markets in the region, and is smuggled primarily by West African drug trafficking groups.¹⁵

Cambodia has been continuously targeted by transnational drug trafficking groups. In 2017 there were 268 foreign nationals arrested¹⁶. A large proportion of the cases were related to cross-border trafficking between Cambodia and its neighbouring countries such as Lao PDR, Thailand and Viet Nam. Large amounts of methamphetamine (in pill and crystalline form) and heroin manufactured in Myanmar continue to be trafficked into Cambodia through its north-eastern border with Lao PDR.¹⁷ A large portion of the drugs are then often repackaged for further trafficking via overland routes and air passenger couriers to neighbouring countries (primarily Thailand and Viet Nam) and to international markets.¹⁸

Similar to other neighbouring countries in the Mekong region, the retail price of one methamphetamine pill has been decreasing in recent years. For instance, between 2008 and 2014, the average retail price for price of one methamphetamine pill was USD 5, but since 2015 the price has been less than USD 3 per pill. The significant decrease in the retail price of a methamphetamine pill in the country requires a further study, as the purity levels of methamphetamine pills found in the country have been relatively stable over the same period, it might indicate greater availability of methamphetamine pills in the country. The retail price of crystalline methamphetamine (per gram) in the country is USD 20, the second lowest in Southeast Asia, after Myanmar (USD 17).¹⁹

¹⁴ Ibid.

¹⁵ Op. cit. NACD, August 2013.

¹⁶ NACD, Report on Outcomes of Drug Control in 2017 and Work Direction for 2018.

¹⁷ ‘Drug Situation’, NACD 2014.

¹⁸ Op. cit. NACD, February 2014; Op. cit. NACD, August 2014.

¹⁹ DAINAP.

2. Update on Cambodia's anti-drugs strategy and institutional framework

Cambodia signed the United Nations Convention against Transnational Organized Crime (UNTOC) and the three UN Drug Conventions on 7 July 2005. The ratification process was completed in September 2007, when Cambodia acceded to the 1972 Protocol of the 1961 Single Convention on Narcotic Drugs.

Cambodia's previous Law on the Control of Drugs was enacted in 1997, but as the drug situation changed rapidly in Cambodia, lawmakers found that it was inadequate to tackle the scale of the problem. The law was subsequently amended on two occasions in order to make it comply with the mandatory provisions of the UN Conventions. Those amendments still proved insufficient to address the situation and a number of loopholes remained. In January 2012, a new Law on Drug Control was adopted. It introduced new classifications of addictive drugs, defined anti-drug institutions and contained anti-money laundering provisions. It also recognised the right to voluntary access to drug treatment for drug users and acknowledged the role of psychosocial and health care providers in providing assistance to drug users in health structures and in the community.

The Royal Government of Cambodia approved the New National Strategic Plan on Drug Control (2016-2018), continuing from the previous National Planning on Drug Control (2013-2015), which outlined the Government's plan to further implement the drug law. The National Strategic Plan consists of Five Strategies. These include:

1. Drug Demand Reduction
2. Drug Supply Reduction
3. Treatment, Rehabilitation, and Re-Integration
4. Law Enforcement
5. International Cooperation

Law enforcement capacity remains limited in Cambodia. Corruption among a handful of law enforcement officials should be addressed with further efforts to reduce drug trafficking and abuse. The Royal Government of Cambodia has sought to reform and enhance the capacity of law-enforcing institutions. It is working with concerned parties to take a multi-pronged approach to combat the domestic production and distribution of drugs. Cambodia is also seeking to improve the awareness, capacity, commitment, professionalism and accountability of law-enforcing institutions in order to improve implementation of the Law on Drug Control.

Cambodia does not provide drug-related arrest data disaggregated by drug type. Thus, the proportionality of the number of arrests in relation to methamphetamine and other synthetic drugs, compared to the total number of drug-related arrests, is unclear. However, the total number of arrests for drug-related offences in Cambodia increased approximately eighteen-fold from 394 persons in 2008 to 17,795 persons in 2017. While Cambodia does not provide drug-related arrest data disaggregated by drug type, this could be attributable to increase in use of methamphetamine.

Table 3: Drug-related arrests in Cambodia 2008 – 2017

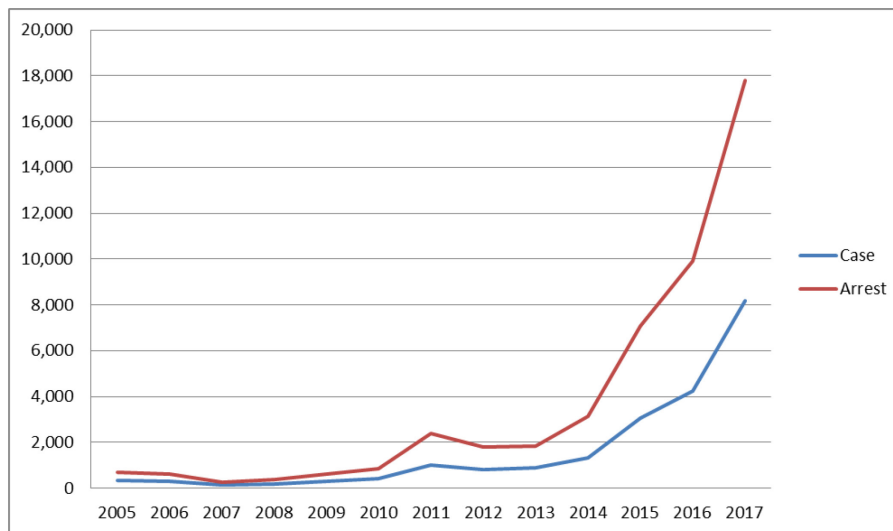


Table 4: Drug-related arrests in Cambodia 2008 – 2017

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Case	198	309	400	1,005	818	889	1,337	3,061	4,246	8,173
Arrest	394	615	864	2,381	1,788	1,830	3,142	7,088	9,933	17,795

Source(s): DAINAP, “Cambodia country presentation”, presented at the Global SMART Programme regional meeting, Beijing, China, 16-17 September, 2015; Country report presented by NACD at the 8th SMART Regional Workshop, Vientiane, Lao PDR, August 2016; NACD “Cambodian Country Report 2017”.

With the growing understanding that focusing on law enforcement and punitive approaches alone cannot control the production, sale and use of drugs, the Royal Government of Cambodia is adopting strategies aimed at reducing demand. The Government has conducted a public awareness campaign through the media and prevention activities in schools and started a community based drug treatment program. Under this program, law enforcement has been enabled to provide a supporting environment allowing differentiation between people who use drugs and drug traffickers.

A Methadone Maintenance Program for opiate users and Needle and Syringe Program have also been implemented by the Ministry of Health with UN technical support and funding from Australia. This has now been transitioned to the health equity fund system, with ongoing funding from Australia, other donors and the Government.

3. Update on major bilateral and multilateral programs

Donor assistance has largely focused on individual donors' strengths and priorities, rather than on a strategic or sector-wide approach. This reflects the different development priorities of donor partner agencies (law enforcement, health, NGOs) involved in delivering the assistance.

3.1 UNODC

(Supply reduction) A recent UNODC survey identified insufficient knowledge among Cambodian authorities about how to reduce the supply of illicit drugs and precursor chemicals at border crossing points. Front-line officers were often unable to accurately distinguish between controlled drugs and precursor chemicals. To increase their capacity and awareness, with the aim of preventing drug, chemical and other forms of trafficking at the border, the Australian Department of Home Affairs (Home Affairs) provided funding to UNODC to assist the Royal Government of Cambodia establish and support twelve Border Liaison Offices (BLOs) in trafficking hot-spots along Cambodia's land borders (5 with Viet Nam, 4 with Thailand and 3 with Lao PDR). The BLOs are a key element of effective border management in the UNODC Regional Program in East and Southeast Asia and the Pacific, which promotes practical "horizontal communication" between co-located law enforcement and regulatory agencies (police, customs, immigrations, forestry, etc.) within and across international borders. Officers at BLOs are provided key skills training, basic equipment and investigative tools, and standard communication protocols to increase border interdictions of trafficked goods and people. The Border Management program is expanding to meet the region's needs to counter emerging forms of transnational organised crime, such as migrant smuggling, trafficking in persons and wildlife trafficking along the Cambodian border and throughout the Greater Mekong Sub-region.

The Container Control Programme (CCP), a partnership between UNODC and the World Customs Organisation (WCO), was initiated in Cambodia in January 2016. The objective of CCP in Cambodia is to establish a multi-agency unit comprised of Customs, Police, CamContol and Port Authority at critical points of entries (sea and air) to intercept controlled drugs and other illicit goods moving in the containerised supply chain. The Programme is building the capacity of law enforcement officers using risk-based profiling of containers and improved information exchange at the national, regional and international level. Initially implemented at Sihanoukville seaport, CCP has been expanded to Phnom Penh International Airport since early 2018. CCP implementation in Cambodia has been supported by the Australian Department of Home Affairs (Home Affairs), the Canadian Border Service Agency (CBSA) and the US Bureau of International Narcotics and Law Enforcement Affairs (INL).

(Demand and Harm Reduction) The Royal Government of Cambodia, with the support of UNODC, has developed the Community Based Treatment (CBTx) program. CBTx provides people with drug use disorders with a voluntary, cost-effective, and rights-based approach to drug treatment and care services in their communities. With strong support from the highest levels of Government, Cambodia is taking the lead in the region, turning away from punitive measures and instead adopting a health and people-centered solution. By using a multi-sectorial approach, one which addresses the varied and context specific circumstances related to drug use, CBTx has led to increased awareness among community members, sensitised law enforcement authorities, improved health and social service delivery, and overall, a more enabling environment for reducing drug use and its consequences. Partner NGOs are key in mobilising people affected by drug use and dependence, facilitating access to treatment, and providing educational outreach, social support and a continuum of care. Trained CBTx medical staff in health centres and referral hospitals offer free or affordable drug counselling and treatment for drug use disorders. By the end of 2017, CBTx provided ongoing treatment for 3,101 people with drug use disorders including dependence. Additionally, the program has provided training to 393 health staff from 2 national hospitals, 96 referral hospitals, 320 health centres and 1 health post, as well as NGOs, to improve understanding of drug use disorder, dependence and treatment options, patient assessment and treatment planning, counselling techniques and pharmacotherapy.

CBTx has facilitated stronger relationships among key national agencies such as the National Authority for Combating Drugs, the Ministry of Health, UNODC and provincial partners including the Provincial Health Department as well as local health and social service providers. Partnerships have been established with law enforcement, which has increased understanding of drug use and CBTx. Specifically, this has encouraged police to address drug dependence as a health concern that requires treatment rather than punitive responses. People who use drugs are now less likely to hide and are more likely to engage with NGOs and local authorities due to a more supportive law enforcement environment at the commune (local government) level. The Royal Government of Cambodia has created a Mental Health and Substance Abuse department within the Ministry of Health - a crucial institutional development - and Phnom Penh has been designated as a new geographical area for the CBTx. Given associated financial and technical resourcing challenges, technical assistance is required to support this effort.

The First National Harm Reduction Strategic plan (2016-2020) is now available after an inclusive development process among key concerned partners with the funding support from DFAT. It includes the expansion of and a more flexible service delivery model particularly Needle and Syringe Program. Costing is currently being finalised. Harm reduction training for law enforcement has been integrated in the Police Academy curriculum in 2014 and is being implemented. The Needle and Syringe Policies and Methadone Maintenance Therapy (MMT) Guidelines and Standard Operating Procedures (SoPs) were adopted to scale up the harm reduction program. Effective transition to sustainable Government ownership and funding for the MMT clinic is an ongoing focus. Furthermore, the Ministry of Health in collaboration with its partners have drafted several key documents to complement the existing Guidelines and SoPs. These include CBTx Guidelines and SoPs and Guidelines for the drug treatment in Rehabilitation Centre. The latter one have been developed by joint effort between MoH and the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSAVY).

3.2 Australia

The Australian Federal Police (AFP) in Cambodia is building the capacity of the Cambodian National Police by continuing to support a dedicated CNP Transnational Crime Team, which has had a number of recent successful anti-drug operations. In addition, the AFP has entered into a joint Strikeforce arrangement (Memorandum of Agreement) with the Cambodian National Police and the General Department of Immigration, to combat methamphetamine (primarily crystal methamphetamine). The AFP travels to most Cambodian provinces to liaise with Provincial Police Commissioners and their Executive in support of their efforts to combat transnational crime, including narcotic trafficking. The AFP remains concerned about the alleged drug-related activities of West African criminal groups as reported by the NACD and is working with CNP on developing the intelligence picture of the Outlaw Motor Cycle Gang (OMCG) transnational crime threat to Cambodia.

Australia, through its Defence Cooperation Program, also continues to support Cambodia's efforts to secure its maritime borders and establish mechanisms to combat drug trafficking, illegal fishing, people smuggling, and threats against its natural environment. Australia was integral in supporting the establishment of the National Committee of Maritime Security (NCMS) in 2009 and has since then, in conjunction with the United States, continued to support the NCMS through professional development training in Australia, command post exercises, formulation of operational orders and directives, and continued logistical support to the NCMS and Royal Cambodian Navy, both in Phnom Penh and at the Naval Base in Ream.

Similarly, the Australian Department of Home Affairs, and the Australian Border Force (ABF), continues to assist Cambodia's border management and law enforcement agencies to address the movement of illicit drugs and precursors in the Mekong region. In 2017, NACD officers participated in vessel search training provided by the ABF for the Safe Mekong Operation member countries. Home Affairs' funding of the UNODC's PATROL programme complements Home Affairs' support for the Safe Mekong Operation initiative. Home Affairs, in conjunction with Canadian counterparts, previously funded the UNODC's Container Control Programme in Cambodia (Home Affairs funding ceased in June 2017) to establish the Port Control Unit (PCU) at Sihanoukville Autonomous Port in May 2017.

Through its Community Policing Initiative (CPI), the Australian Department of Foreign Affairs supports the Cambodian National Police's Department of Administrative Police Post Affairs to reduce demand for drugs in Cambodian communities through preventative education activities that highlight the harmful effects of drugs – particularly methamphetamine.

3.3 European Union

The EU has been funding various programmes involving Cambodia on law enforcement, arms trade, counter-terrorism, countering money laundering and illegal migration. At regional level, the EU is supporting ASEAN on a number of security issues, including border management and migration with INTERPOL. The EU-ASEAN Migration and Border Management Programme II contributed to improve border security across Southeast Asia by addressing transnational crime and strengthening law enforcement networks and cooperation at regional transit hubs. The EU has provided substantial support to the activities of UNODC in South-east Asia in the fields of illicit trafficking of drugs, organised crime, drug use prevention, treatment and care, and alternative livelihood development.

3.4 Germany

Given the current developments in the field of drug (ecstasy) trafficking from Europe to Cambodia where Germany in some cases appears as source or transit country the German Federal Criminal Police Office (Bundeskriminalamt) will support the investigations and cooperation and is revising the necessity of training measures and delivery of equipment for detection of such cases in Cambodia.

3.5 Japan

The Government of Japan (GoJ), together with other donors, continues to support the Global SMART Program to assist with data collection and analysis of drug trends (production, drug trafficking and abuse) in Cambodia. The GoJ provided a short-term training course titled “Control of Drug Offences” under the “Knowledge Co-Creation Program” through the Japan International Cooperation Agency (JICA) from 29 August to 13 September 2018 in Tokyo. From Cambodia, one Deputy Commissioner of the General Commissariat of National Police participated in the training course with 25 other participants at the level of division directors or senior executives of relevant public institutions from Cambodia, Afghanistan, Albania, Bangladesh, Benin, Brazil, Cote d’Ivoire, Egypt, Guinea-Bissau, Indonesia, Jordan, Kenya, Kyrgyz Republic, Lao PDR, Malaysia, Mauritania, Myanmar, Papua New Guinea, Philippines, Samoa, South Africa, Seychelles, Timor-Leste, Ukraine and Viet Nam. In collaboration with the Japanese National Police Agency, the training course was conducted for the following purposes: acquiring knowledge and experiences related to current drug crime situation and effective drug control measures of Japan and participants’ countries; improving investigation capabilities of the participants through sharing of knowledge and working experience in their countries and Japan; and strengthening international investigative cooperation against drug crimes among the participants and their organizations. The GoJ will continue to conduct the same training course from 2019 onward.

Each year, Japan has been hosting the Asia-Pacific Operational Drug Enforcement Conference (ADEC) in Tokyo. This year, the 23rd ADEC was held from 6-8 February, and 30 countries (including Cambodia) and two regions (Macau and Hong Kong), as well as four organisations (ICPO, UNODC, EUROPOL and CARICC) attended. ADEC is a region-wide platform to discuss the latest trends in illicit drugs in the Asia-Pacific region and to share information among relevant agencies on effective measures to counter drug trafficking.

3.6 Sweden

In 2015 Sweden and Cambodia signed a bilateral agreement on Law enforcement cooperation. The main focus of the agreement is on serious crime issues including drug smuggling, human trafficking and people smuggling, money laundering, child abuse and exploitation and cybercrime. The scope of the agreement is exchange of Law enforcement information, exchange of best practices and other forms of assistance and cooperation.

Sweden, through the Global TREATNET programme and the Global Joint UNODC-WHO Programme on Drug Dependence Treatment, has also supported the community-based treatment programme.

3.7 United Kingdom

The United Kingdom continues to work closely with the Royal Government of Cambodia on serious crime issues including drug smuggling, human trafficking and people smuggling, money laundering, and child sexual abuse and exploitation. In February 2014, an important new Memorandum of Understanding (MoU) was signed between the UK's National Crime Agency and the Cambodian General Commissariat of National Police to increase cooperation in the fight against serious crime. Under the scope of cooperation, the MoU supports increased coordinated operations, information sharing and capacity building between the UK and Cambodia on serious crime issues.

3.8 United States of America

The Government of the United States of America is helping Cambodian authorities to address a large range of criminal activity, including drug trafficking, though focused capacity-building programs. Examples include training at the International Law Enforcement Academy (ILEA) in Bangkok, Thailand and on site Border and Seaport Interdiction training provided by the U.S. Department of Homeland Security and U.S. Customs and Border Protection.

4. Progress on implementation of previous recommendations

Past recommendations are being steadily implemented, but challenges still remain. Building on the past recommendations, the participants have agreed on some updated recommendations (see 6.3. *Recommendations* below).

5. Prioritised identification of needs for external assistance

For demand reduction, key impediments include a shortage of technical equipment, inadequate financial support and a lack of human resources for carrying out education programs. For supply reduction, information sources for assisting operations are insufficient. For harm reduction, treatment, rehabilitation, vocational training, and re-integration, the lack of human resources, equipment, capacity and budgets have resulted in a slow roll-out of training and educational programs as part of Community Based Treatment (CBTx) initiative. For the strengthening of law enforcement, the number of officials available to conduct procedural investigations and collect evidence for the court institutions remains limited.

6. Mini-Dublin group assessment of needs

6.1. Emerging threats/trends

- The trafficking and use of illicit drugs remains a significant problem in Cambodia.
- Transnational and Asian drug trafficking groups continue to target Cambodia as a source, transit and destination country for amphetamine-type stimulants (ATS) and other illicit drugs.
- The availability and use of methamphetamine in pill and crystalline form continues to expand.
- Methamphetamine precursor diversion requires more effort across the region.
- The incidence rates for the trafficking and use of cocaine and synthetic opioids are also growing.
- There is a growing need for Community Based Services for drug users to address the domestic demand for drugs.

6.2. Political initiatives

There appears to be strong political will to tackle drug trafficking and production with multiple approaches addressing production, supply and demand. After the adoption of new Law on Drug Control in 2012 as part of the National Strategic Development Plan (NSDP), the Royal Government of Cambodia approved the New Strategic Plan on Drug Control (2013-2015), as noted above. In 2016, the Government plans to: (1) continue to promote drug education and awareness; (2) strengthen Community Based Treatment; (3) promote efficient law enforcement operations; (4) increase cooperation among Ministries and institutions; (5) promote and enhance cooperation with neighbouring countries; including continuously strengthening Border Liaison Offices (BLOs); (6) promote and enhance international cooperation; and (7) strengthen relevant institutions. In 2017, the Royal Government of Cambodia has set up National Counter Illicit Drug Campaign to strengthen using the existing mechanisms by establishing 6 Committees and 3 Sub-Committees in order to promote anti-drug operations.

6.3. Recommendations

Based on the recommendations from Mini-Dublin Group meeting in 2016, some changes were made in 2017 and 2018 (additional text in 2017 and 2018 is in *italics* below).

- The Royal Government of Cambodia (RGC) should revise the 2013 – 2015 National Strategic Plan on Drug Control and draft a new Plan for.
- Donors should look to better harmonise and coordinate their assistance to RGC through increased information sharing and meetings with relevant stakeholders.
- Donors should continue their cooperation with the Cambodian Authorities in regional or international cases of drugs and precursors trafficking by sharing intelligence, providing assistance throughout the investigation and the prosecution; and provide ad hoc training where gaps are identified

- Donors should continue supporting the drugs-related initiatives of RGC and the Cambodian Police Academy either financially, by making experts available, by providing training, by sharing curriculum material, or by providing specialized equipment.
- RGC, with support from relevant partners, should aim to develop procedures and initiatives to implement the Law on Drug Control. This includes development of sub-decrees as per the articles of the Law, and awareness campaigns regarding the law for all stakeholders (including law enforcement, prosecutors, judiciary, and the general public). Consideration should be given to updating the threshold differentiating possession for personal consumption and for drug trafficking
- RGC should further enhance air, land and sea border security to prevent drugs and precursors trafficking into and outside of the country by using the existing infrastructure such as the Border Liaison Offices (BLOs) and the Container Control Unit (CCU) in Sihanoukville
- RGC should include in the core curriculum of the Police Academy the modules on: modern investigation techniques, collection/handling of evidence, forensic methods/techniques, DNA analysis, fingerprints analysis, crime scene analysis, etc. Consideration should be given to the capacity building of police officers, including avoiding corrupt practices by police officers relating drug cases.
- RGC should build on its initial leadership in community based treatment initiatives by dedicating more resources to this effort. With the expansion of methamphetamine use in the country, RGC established 419 centres that provide mental health and substance use services for drug users in 2017. Donors should look at supporting the Royal Government of Cambodia's commitment to community based treatment initiatives, and refer people who use drugs out of the temporary centres to CBTx, and avoid people who are not dependant being sent to the compulsory centres. The Ministry of Health should identify Community Based Treatment (CBTx) as a high priority for donor funding in order to have the best chance of attracting donor funds committed in the health sector.

- The drug situation in Cambodia needs to be better monitored. A national system to collect accurate and reliable data should be created with the input of the different ministries concerned (Ministry of Interior, Ministry of Justice, Ministry of Health, etc.). The statistics generated by the database would help to inform the design of future drug policies and consequently a better response to needs. The development of a national database would provide reliable statistics to monitor the trends in drugs use. Those statistics should also allow a tracking of the situation people who use drugs (how many are being arrested, how many are being sent to compulsory centres, how many are being sent to prisons, how many are referred to Community based treatment).

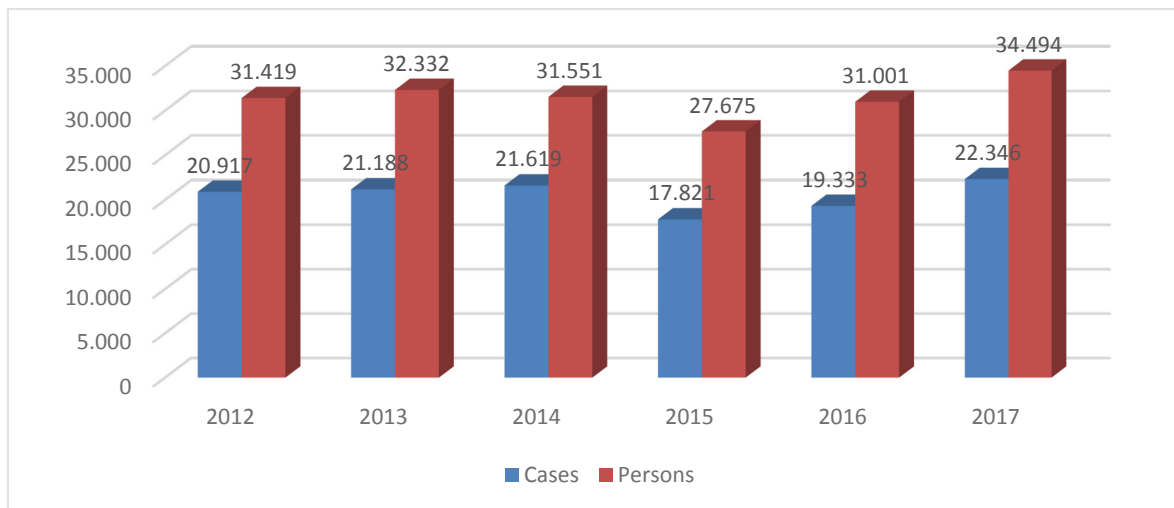
Treatment and health care for people who use drugs should be made available to people who use drugs when they are incarcerated, as stipulated in the 2015 Standard Minimum Rules for the Treatment of Prisoners (the Mandela Rules).

IV. VIETNAM

1. General Situation - Drug trafficking

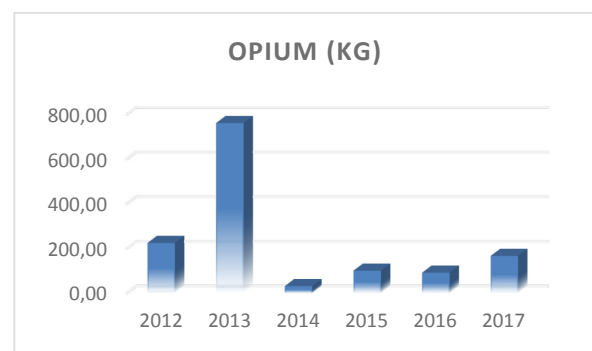
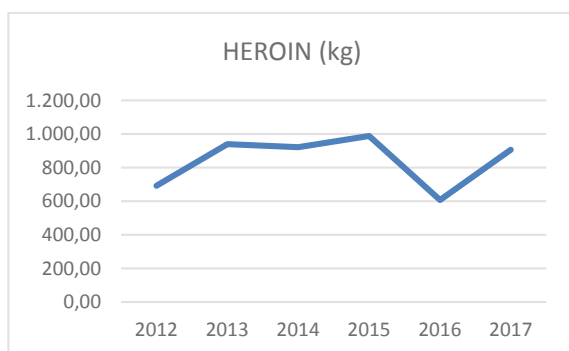
According to the Ministry of Public Security, in 2017 law enforcement agencies identified 22,346 drug related cases and arrested 34,494 drug offenders. These figures keep reflecting an increase in the number of cases and suspects in comparison to previous years.

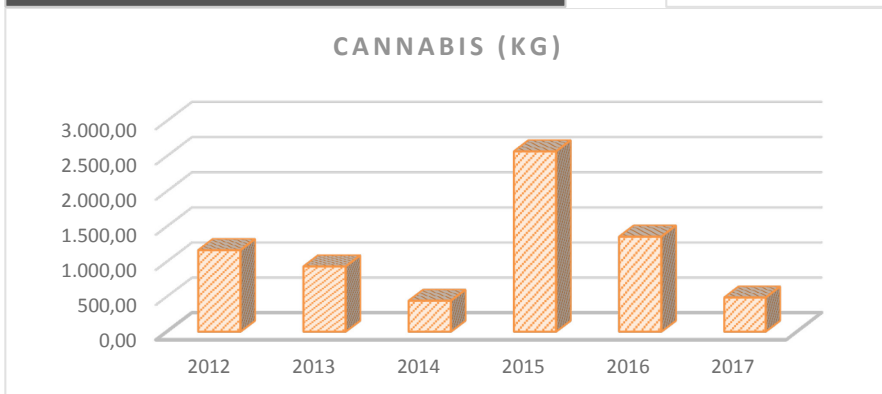
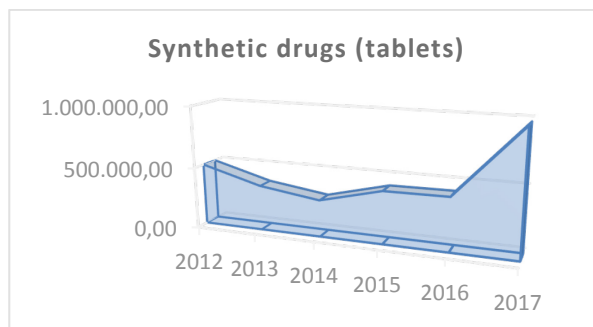
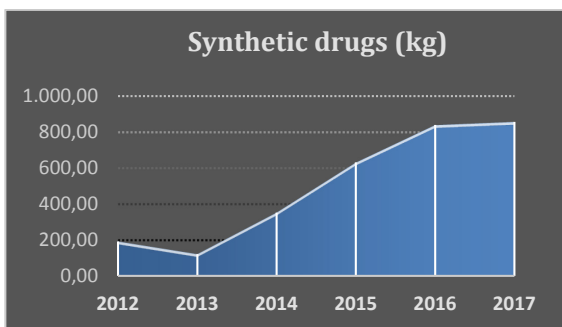
Table 1: Total of drug-related cases for 2012-2017



Regarding narcotic-drug seizures, in 2017, law enforcement forces of Viet Nam seized 906.67 kg of heroin; 167.1 kg of opium; 111.02 kg of raw cannabis; 376.4kg of dried cannabis; 856.9 kg and 979.487 meht tablets; 17.67kg of Ketamine, 108.01 kg of XLR-11. In addition to those, 2.39 kg of cocaine, 5.6 tons of KHAT leaves were seized.

Table 2: Drug seizures by types for 2012-2017





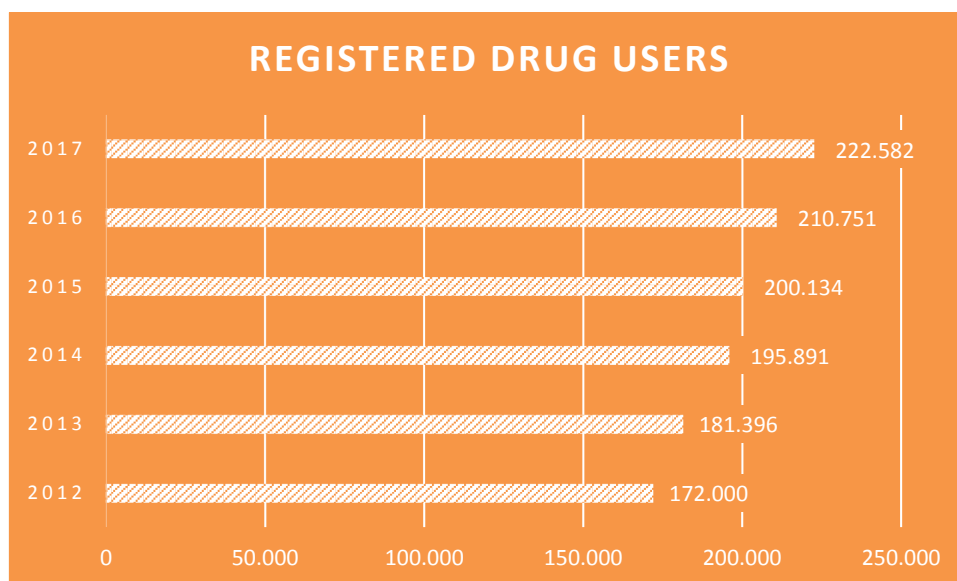
From observation of statistic provided, seizures of cannabis have been going down since 2015 but seizures of synthetic drugs are on the rise. This is also reflecting the trends of seizures and usage for heroin, methamphetamine in the region.

2. Drugs and health

By November 2017, there were 222,582 registered drug users (as reported by the Ministry of Public Security), an increase of nearly 12,000 people compared with 2016. The number of registered drug users have increased in 58 provinces out of the total of 63 provinces. Most of the newly registered drug users are users of synthetic drugs and new psychoactive substances. The statistics reflect a new trend in drug users in Vietnam, where there is a dramatic increase in the number of ATS dependent persons (almost 4 times higher than the proportion of synthetic drugs users in semi 2014 – 14.5%).

The Government estimates that the actual number of drug dependent people is much higher particularly ATS users given the soar of synthetic drugs seizures in 2016, a source of serious concern to the Government of Viet Nam. According to Report no 958/BC-BYT by the Ministry of Health, 9.3% of drug dependent people are living with HIV.

Table 3: Drug users for 2012-2017



With regards to the transformation of the drug rehabilitation centres, according to the Ministry of Labour, Invalids and Social Affairs, by December 2017, in Vietnam there are 132 drug rehabilitation centres, of which 105 are state-run. Among these 105 state-run centres, 6 are only for compulsory drug rehabilitation (3 in Hanoi and 3 in Hochiminh city), 18 are for voluntary and Methadone treatment, 79 are mixed of compulsory, voluntary Methadone treatment, and management of people without stable residential places, and 02 centres are used for drug addicts who do not have permanent residence.

The total number of persons under drug rehabilitation programs is 27,918. Among these persons, 17,488 are participating in the compulsory programs under Courts' Orders, of which 10,422 have no permanent residence (accounting for 59.5%). There are 26 out of 63 provinces which provide voluntary family-based and/or community-based treatment services for 3,566 persons.

By July 2018, 52,677 persons received Methadone Maintenance Therapy in 316 clinics.

3. Update on the country's anti-drugs strategy

The Government approved a 'National Strategy on Drug Control and Prevention in Viet Nam to 2020, with a Vision to 2030'. The newly revised Penal Code and Procedure Criminal Code which has come into effect since mid-2018, regulating drug-related crimes.

Following this, in August 2012, the Prime Minister signed the ‘National Target Program on Drug Prevention and Control – 2012-2015’. The Government also issued a Methadone Decree (Decree 96/2012/ND-CP, on ‘Regulating Substitution Treatment of Opioid Addiction’) providing for the expansion of Vietnam’s MMT program in November 2012. A Law on Administration Violation was approved by the National Assembly on 20 June 2012 and took effect on 1 July 2013. A Court Ordinance establishing court process for sanctioning compulsory treatment to drug dependent people and several Government Decrees guiding the implementation of this Law have also been developed.

On 27 December 2013, the Government approved a ‘Decision on the Drug Rehabilitation Renovation Plan (Renovation Plan) for the period 2013-2020’. The plan aims to diversify drug dependence treatment models, scale up community-based and voluntary treatment centres (including MMT clinics) and gradually reduce the number of drug users held in compulsory treatment centres (“06 centres”). To that end, it introduced a phased approach with specific targets to be achieved in 2014-15 and in 2016-20. The plan sets out the responsibilities of relevant national agencies; for example, to increase professional capacity for better treatment and care of drug dependent people, to establish professional standards in drug treatment and care and to develop sufficient legislative and institutional frameworks to support these efforts. However, the Renovation Plan still foresees a number of 06 centres existing in 2020, which is of serious concern to the UN and development partners.

On July 1st, 2016, the Government issued Decree 90/2016/ND-CP on "Regulating the Substitution Treatment of Opioid Addiction" to revise the Decree 96/2012/ND-CP which was issued in 2012 to meet with the changes in the Vietnam's MMT program. A Law on Administration Violation was approved by the National Assembly on 20 June 2012 and took effect on 1 July 2013.

A Court Ordinance establishing court process for sanctioning compulsory treatment to drug dependent people and several Government Decrees guiding the implementation of this Law have also been developed. On 27 December 2013, the Government approved a ‘Decision on the Drug Rehabilitation Renovation Plan (Renovation Plan) for the period 2013-2020’. The plan aims to diversify drug dependence treatment models, scale up community-based and voluntary treatment centres (including MMT clinics) and gradually reduce the number of drug users held in compulsory treatment centres (“06 centres”). To that end, it introduced a phased approach with specific targets to be achieved in 2014-15 and in 2016-20. The plan sets out the responsibilities of relevant national agencies; for example, to increase professional capacity for better treatment and care of drug dependent people, to establish professional standards in drug treatment and care and to develop sufficient legislative and institutional frameworks to support these efforts. However, the Renovation Plan still foresees a number of 06 centres existing in 2020, which is of serious concern to the UN and development partners.

On April 28th, 2016, the Ministry of Labour, Invalids and Social Affairs issued the Circular No. 04/2016/TT-BLDTBXH on the training program and curriculum for drug addiction treatment. The training plan specifies the basic and advanced training programs for all cadres, officers and workers working in the area of drug treatment and detoxification. The training plan also specifies the structure, volume and content of the knowledge which are used as the foundation to manage the quality of trainings for cadres, officers and workers working in area of drug treatment and detoxification by MOLISA to meet with new addiction treatment objectives and requirements of transforming addiction treatment in current settings. As part of a broader legislative review, the revised Penal Code, Criminal Procedure Code have been approved by the National Assembly recently and have come into effect since 01 January 2018.

4. Update on major bilateral and multilateral counter-narcotics programs

4.1 Australia

The Australian Federal Police (AFP) has offices in Hanoi and Ho Chi Minh City (HCMC) and manages the Vietnam Australia Joint Transnational Crime Centre (HCMC). The AFP is actively involved with the Narcotics Investigations Department of the Vietnamese General Department of Police and supports a range of policy discussions on countering narcotics and identifying emerging transnational crime threats such as Violent Criminal Groups and their involvement in narcotics trafficking. Heroin remains the most trafficked commodity, the amount of methamphetamine is rising steadily but detections of precursor chemicals from Vietnam to Australia have continued a downward trend. Australia remains a market of choice for narcotics trafficking due to the high rate of consumption per capita and significant monetary returns on investment. The major criminal connections between Australia and Vietnam are between the Vietnamese communities in Sydney and Melbourne and those in HCMC, primarily because of the historical links between Vietnamese communities in Australia and southern Vietnam, coupled with direct air and sea cargo routes to Australia. As a result, HCMC acts as a funnel for illicit drugs and/or precursors trafficked from or through Myanmar, Laos, Cambodia and China. Significant joint counter narcotics investigations continue to be conducted, highlighting the effectiveness of the working relationship between the AFP and the Narcotics Investigations Department. Increasingly, other law enforcement agencies are becoming involved in such joint investigations as the transnational links to this crime type extend beyond just Australia and Vietnam. The Death Penalty implications for drug offenders in Vietnam remain problematic for Australian law enforcement given Australia's stance against it. The death penalty hinders more robust intelligence exchange between our countries. Trafficking routes from Laos and Cambodia into Vietnam, especially via Son La and Tay Ninh Province, remain of concern for the AFP and increasing the capacity and capabilities of law enforcement in these areas remains a priority. The laundering of the proceeds of drug trafficking activity (including border controlled substances imported into Australia and as the result of domestic cannabis cultivation by Vietnamese groups in Australia) back to Vietnam is an area the AFP continues to progress with its Vietnamese counterparts. Money Laundering investigations remain problematic ahead of the anticipated amendments to the Penal Code due to come into force in January 2018.

4.2 European Union

The European Union currently has no specific cooperation programs on drugs or crime in Vietnam but maintains liaison contact with the authorities. One of the stated aims of the EU-Vietnam Partnership and Cooperation Agreement, signed in 2012, is collaboration in the areas of combating organised crime, money laundering and illicit drugs, so closer cooperation over the medium term is a possibility. Vietnam was included in the 2009-2012 EU-ASEAN Migration and Border Management Program, created to support the development of an efficient and coherent Integrated Border Management System at selected main border crossing points. One of its main objectives was to facilitate the legal movements of goods and persons, whilst combating transnational crime, illegal migration and people trafficking. The EU also funds targeted health programs empowering populations at higher risk of HIV infection, strengthening HIV care, prevention and treatment in the country. Vietnam is also part of the EU-UNODC Joint Initiative for Supporting Southeast Asian Countries to Counter Terrorism that delivers expertise and training in related activities, including combating transnational organised crime and anti-money laundering.

4.3 France

France has no specific programs on drug-related issues but regularly conducts training sessions, working visits and exchanges on crime-related matters and intends to strengthen its legal cooperation framework with Vietnamese authorities.

4.4 United Kingdom

The UK has strengthened its law enforcement footprint in Vietnam, and has continued to build on existing relationships. UK co-operation with Vietnam is currently very good but organised crime continues to evolve and it is essential that the UK and Vietnam work even more closely to tackle shared threats. To that end, the UK opened a National Crime Agency Liaison Office (NCA) in Hanoi in 2012, covering Vietnam, Cambodia and Laos. This allowed for a more dedicated relationship with the Ministry of Public Security and other facets of law enforcement in Vietnam, which to date has yielded a number of joint operations and successful arrests and prosecutions.

Although there is little intelligence to show that controlled drugs manufactured in, or transiting through, Vietnam are destined for the UK, Vietnamese nationals dominate cannabis cultivation in the UK, with most UK cannabis farms staffed or run by Vietnamese illegal immigrants. The money generated by cannabis cultivation in the UK is estimated to be between GBP 300 million and GBP 800 million per year. Proceeds of Vietnamese-run criminal enterprises are known to be sent back to Vietnam through the use of individual couriers or via legitimate Vietnamese businesses. Moreover, abuse of UK and Vietnam banks, and in particular the accounts of legitimate students, is not uncommon. The laundering of the proceeds of crime generated by the cultivation and distribution of narcotics is a key area of work for NCA. NCA has identified opportunities for joint work with the State Bank of Vietnam's Anti-Money Laundering Department, with whom the NCA will sign an intelligence exchange MOU in 2014. The NCA also actively works with the MPS Economic Crime Command and Vietnam Customs, and is currently looking at other joint initiatives with UNODC. In February 2014 the NCA, with the UNODC, delivered a financial investigation training module to the People's Police Academy of Vietnam, which has now been incorporated into the curriculum for new entrants. Criminal vendettas and rivalry between crime groups involved in cannabis cultivation have also resulted in a number of kidnappings and murders in the UK Vietnamese community. NCA and the UK Human Trafficking Centre work closely with ACPO Forces in England and Wales, with significant operational support from Vietnamese law enforcement, to tackle this criminal threat.

4.5 Japan

There has not been a reported narcotics trafficking case from Vietnam to Japan since 2001. In Japan, most drug trafficking arrests relate to ATS cases. The recent increase in ATS trafficking cases in Vietnam is a trend to which we should pay attention. Japan currently has no specific bilateral cooperation programs on drug-control issues. But the Government of Japan has been promoting "human security" as one of the main pillars of its development aid policy and considers drug control a matter of great importance. It continues to work closely with the Government of Vietnam in efforts to control drugs in collaboration with the UNODC.

4.6 United States of America

U.S. counter-narcotics objectives in Vietnam are aimed at improving cooperation in cross-border, regional, and international enforcement efforts and assisting Vietnam to expand the capacity of its domestic counter-narcotics law enforcement agencies. Operational cooperation between Vietnamese and U.S. authorities has improved, in particular between the Ministry of Public Security Counter-Narcotics Department and the Drug Enforcement Administration (DEA) Hanoi Country Office, but further progress is needed to achieve significant results. The U.S. Government continues to use the International Law Enforcement Academy (ILEA) in Bangkok, in cooperation with the Thai Government, to provide law enforcement training to approximately 100 Vietnamese law enforcement officials each year. The DEA engages in direct cooperation on specific counter-narcotics cases and engages in capacity-building efforts by supporting Vietnamese government participation at international and regional events and conferences, as well as conducting some basic training activities. In addition, the DEA and the Department of Defence Joint Interagency Taskforce - West (JIATF-W) partnered with the MPS Counter-Narcotics Department to construct a joint training facility in Vinh, Vietnam, which was completed in January 2013. DEA and the JIATF-W have since conducted three training seminars with the Ministry of Public Security's Counter-Narcotics Department, in June 2013, September 2013, and August 2104 at the new facility. The seminars provided tactical and emergency medical training to 150 counter narcotics police officers. The Department of Treasury's Office of Technical Assistance is helping Vietnam's Ministry of Finance implement new accounting and financial reporting objectives as part of the International Public Sector Accounting Standards (IPSAS) program. The U.S. Department of State's Export Control and Related Border Security (EXBS) Program supports the comprehensive development of Vietnam's operational capabilities to deter, detect, interdict, investigate, and prosecute illicit transfers of WMD, WMD related items, and conventional arms.

The bulk of EXBS assistance to Vietnam has focused on Interagency Awareness Building, Industry/enterprise outreach and maritime security and law enforcement activities. Vietnam Customs is the dedicated interlocutor for overall strategic trade management assistance and activities must be accordingly through Customs. However, Vietnam Customs is not a ministry-level organization and lacks interagency influence. Vietnam's Ministry of Industry and Trade (MOIT) has also been a significant partner over the past 3 years. EXBS has provided hand-held detection equipment as well as larger scanning equipment to Vietnamese Customs and border guards. EXBS has also provided comprehensive licensing, commodity identification, and enforcement training in two key ports in Vietnam. EXBS has also provided short term advisory assistance through DHS/CBP which has helped build Vietnam Customs' targeting and risk management capabilities. EXBS will continue its activities for Vietnam to promote full adherence to international best practices for export controls and relevant UN Security Council resolutions. Among previous and ongoing assistance, maritime border enforcement / law enforcement and security assistance is a priority for the U.S. Government. The U.S. Coast Guard is the primary implementer for the aforementioned assistance. Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), Vietnam has received approximately \$69 million for implementation in 2014 for a targeted program of health systems strengthening and HIV prevention, care, and treatment among key populations including people who inject drugs (PWID), sex workers, and men who have sex with men (MSM). Injecting drug use plays a significant role in driving HIV transmission. Approximately 45% of all HIV infections in Vietnam are directly associated with injecting drug use. The HIV prevalence rates in the country vary by province with some as high as 60% for this key population. Among its prevention programs, PEPFAR promotes medication assisted therapy, including methadone, an intervention proven to stem the rate of HIV infection among people who use drugs. PEPFAR contributes the majority of support for methadone for over 20,028 patients in 114 clinics in 38 of the 63 provinces (as of mid-September 2014). PEPFAR also supports HIV counselling and testing and community outreach for key populations. Among the 32 provinces supported by PEPFAR, there is a focus on ten provinces where the epidemic is having the greatest impact: Hanoi, Hai Phong, Quang Ninh, Ho Chi Minh City, Can Tho, An Giang, Nghe An, Son La, Lao Cai, and Dien Bien. Through PEPFAR, the U.S. Government also participates in the development and implementation of Vietnam's National Strategy on HIV/AIDS Prevention and Control.

4.7 UNODC

UNODC assistance to Viet Nam is provided through global, regional and national projects:

In the area of illicit trafficking, UNODC has helped enhance national capacities through organization of training courses and provision of equipment to national agencies.

- Under the Border Management Programme (BM), UNODC provided technical supports to help the Government of Viet Nam to build/develop/improve Border Liaison Office (BLO) mechanism through provision of training courses, basic equipment; dissemination of materials; improvement of information and intelligence exchange. Currently, there are 18 BLOs in Viet Nam, including 06 along Viet Nam-Cambodia border, 08 at Viet Nam-Laos border and, 04 at Viet Nam-China border. In coming time, UNODC plans to support Viet Nam to establish 02 more BLOs in Gia Lai and Kien Giang provinces.
- Under the WCO-UNODC Container Control Programme (CCP), UNODC supports the Viet Nam Customs to set up two more Port Control Units (PCU), apart from 2 operational ones in Hai Phong and in Vung Tau, including Da Nang and Ho Chi Minh Cit. These PCUs would be responsible for detecting, deterring and preventing illicit trafficking while facilitating legal trade. Members of those PCUs received various training including theoretical and practical trainings, advanced training on various subjects as drug and precursors CITES, Wastes, STCs. In addition to those, they also took parts in mentoring courses and study tour to other ports in the region. Successes of these 2 operational PCUs have been reflected by number of seizures of contrabands and drugs including 5.6 tons of KHAT leaves, almost 100kg of cannabis by Hai Phong PCU in 2017 and 115 kg of cocaine by Vung Tau PCU in early 2018.

In the area of drug demand reduction and health:

- Under the UNODC/WHO program on Drug Dependence Treatment and Care, the project has successfully carried out the assessment of the Medication-Assisted Recovery Support Program (MARS) in two project provinces (Hoa Binh and Thai Nguyen) which has provided useful insights in the operation of the MARS program as well as important lessons learned and recommendations to the Government. In-depth interviews and focused-group discussions were organized to gather information on the operation of the MARS program in six main areas: (1) effectiveness, (2) efficiency, (3) impact, (4) relevance, (5) partnership and cooperation, and (6) sustainability. Findings from the evaluation are very positive and important lessons learned and recommendations were made to the Ministry of Health and the Government.
- The trainer's manual on "Community-Based Services for People Who Use Drugs in Southeast Asia" was developed, translated into Vietnamese and distributed for use at a larger scale. This is a very useful manual, which provides an introduction to community-based treatment and care services for staff of community-level services and drug treatment clinics. Such staff may not have qualifications in psychology, nursing, medicine or social work but nonetheless play a vital role in delivering essential services to people who use drugs and their families.

- In addition, capacity building activities including the training on International Standards for treatment of drug use disorders and quality assurance tools and the training of national master trainers on community-based treatment services for people who use drugs in South East Asia were organized with participants coming from relevant ministries and agencies including the Ministry of Labour, Invalids and Social Affairs, the Ministry of Health, the Ministry of Public Security, the Office of the Government, the National Assembly, the Ministry of Justice, VUSTA, the Hanoi Medical University, the Central Psychiatric Hospital I, the Bach Mai hospital, the Institute for Psychology Research of Drug Users, representatives from Labour Department, Health Department and Police Department of two provinces of Hoa Binh and Thai Nguyen and Ha Noi city and national master trainers from different provinces respectively. The trainings have also provided opportunities for Vietnamese policy makers, experts, practitioners working in the area of treatment of drug use disorders to understand more about evidence-based international quality standards of drug use disorders treatment and care and how to use the quality assurance tools to improve the quality of drug dependence treatment and care in Vietnam. A pool of qualified national masters trainers was also created, who are now capable of providing further trainings to staff of community-level services and drug treatment clinics.
- Progress of the global programme in Vietnam was also documented through photo materials which aimed at portraying the complex nature of drug use, drug dependence treatment and care and how the global programme can contribute to improve people’s lives. Many quality photos were taken to show the positive impacts that the project interventions have on the patients’ and their families’ lives. These photos were also showcased at the photo exhibition co-hosted by UNODC/WHO and the Vietnam Embassy during the 2018 CND.

5. Prioritised identification of needs for external assistance

Advocacy, policy advice and continued technical assistance are needed to help the Vietnamese government pursue political, social and economic reform. Mini-Dublin Group members may consider supporting:

- Law reform:
 - Updating the Drug Control Law and related legal documents;
- Supply reduction:
 - Improvement of law enforcement capacities on interdiction, investigation as well as information/intelligence collection and sharing on drug related cases;
 - Further priority to precursor chemicals control;
 - Attention should be paid to drug manufactures, including dismantling clandestine laboratories as well as handling precursors, which are found at the crime scenes.
 - Data analysis to identify trends in drug trafficking and seizures;
- Demand reduction:
 - Support relevant government counterparts in addressing the newly emerging ATS use and dependence.
 - Support relevant government counterparts in the area of prevention of drug use and drug use disorders.

6. Mini-Dublin group assessment of needs

Illicit drug trafficking and other types of transnational organised crime have become more complex, with offenders adopting more organized and sophisticated modus operandi.

The production of synthetic drugs in Vietnam, particularly “ice”, has decreased, but the potential for domestic production remains high. In 2013, three laboratories were dismantled in Ha Noi and Ho Chi Minh City, compared to nine labs in 2012.

Heroin is still the dominant drug type in Viet Nam in terms of use and trafficking. The volume of cocaine trafficked into Viet Nam is small but the trafficking of cocaine from South America into Viet Nam showed that criminal syndicates in South America are trying to expand their market into Southeast Asia, including Viet Nam.

7. Recommendations

To the Government of Viet Nam:

- Further strengthen inter-agency coordination and cooperation in implementing action plans and activities under its National Drug Control and Crime Prevention strategies;
- Improve cross-border cooperation activities, including mutual legal assistance, information sharing and cross-border operations;
- Develop new rules and regulations on the treatment of drug dependent people based on the evidence and respect of human rights;

Increase involvement in supporting the Mini-Dublin Group in Viet Nam through information sharing, and keeping the group updated on national initiatives to address illicit drugs issues.