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#### **NOTE**

From:	Japanese Regional Chair of the Dublin Group
To:	Delegations
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Subject:	Regional Report on South Asia

# **Regional Report on South Asia: September 2016**

## 1. Cambodia

## 1.1. Place and date of mini Dublin group meeting

The mini Dublin group meeting was held at the Embassy of Japan in Phnom Penh, Cambodia on 14 September 2016, with participants from the Royal Government of Cambodia (National Authority for Combatting Drugs), UNODC regional office, and diplomatic missions of Australia, Japan, Sweden, the United States and the European Union. The present updated report was shared with other MDG partners after the meeting.

#### 1.2. General situation

Transnational organised criminal groups, in particular from Asia and West Africa, continue to use Cambodia as a transit and destination for amphetamine-type stimulants (ATS) and their precursor chemicals as well as other illicit drugs such as cocaine and heroin. The illicit harvesting and exporting of safrole-rich oils (SRO), which can be used as a precursor for MDMA, has been significantly reduced, but remains a law enforcement and environmental concern.

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.<sup>2</sup>

The Royal Government of Cambodia estimates there are between 13,000 and 28,000 drug users in the country. Approximately one fourth of drug users live in Phnom Penh. Of the total number of drug users in 2012, approximately 81.3% used crystalline methamphetamine, 46.0% used methamphetamine pills and 5.4% used ecstasy (10.5% used cannabis and 7.1% used heroin). The estimated number of injecting drug users in Cambodia in 2012 was 1,300.

13234/16 JV/np 2 DGD 2C **EN** 

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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.

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).

<sup>&#</sup>x27;National Population Size Estimation, HIV Related Risk Behaviors and HIV Prevalence among the People Who Used Drugs in Cambodia in 2012', National Authority for Combating Drugs (NACD) and the National Center for HIV/AIDS, Dermatology and STD (NCHADS), Phnom Penh, March 2014.

<sup>&</sup>lt;sup>4</sup> Ibid.

Table 1: Trend in use of selected drugs in Cambodia, 2010-2015

Drug type	2011	2012	2013	2014	2015
Methamphetamine pills	1	1	1	1	1
Crystalline methamphetamine	1	1	1	1	1
"Ecstasy",5	1	1	•	•	1
Cannabis herb	1	•	•	•	1
Heroin	1	•	•	•	1

 $\uparrow$  = Increase,  $\downarrow$  = Decrease,  $\leftrightarrow$  = Stable,  $\bullet$  = Not reported

Source(s): DAINAP; Official communication with the National Authority for Combating Drugs (NACD); Cambodia country presentation, National Authority for Combating Drugs (NACD), NACD presentation at the Global SMART Programme Regional Workshop, Jakarta, 28-29 August 2013; Communication with the NACD September 2014 and March 2015.

Cambodia has ten Temporary Centres for Drug Education and Rehabilitation managed by government ministries, the civilian/military police, and NGOs. In 2015, a total of 7,753 drug users were admitted to 199 treatment and rehabilitation centres, most of whom used crystalline methamphetamine (75%) and methamphetamine pills (15%). The majority (82%) of drug users at the centres were aged 18 to 35 years. In comparison, a total of 1,162 drug users were admitted to treatment and rehabilitation services at the centres in 2012, most of whom used crystalline methamphetamine (74%) and methamphetamine pills (15%).

13234/16 JV/np 3
DGD 2C EN

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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.

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

Cambodia country presentation, NACD, presented at the Global SMART Programme regional meeting, Beijing, China, 16-17
September 2015.

Cambodia country presentation, NACD, presented at the Global SMART Programme Regional Workshop, Jakarta, 28-29 August 2013.

Having reported significant amounts of crystalline methamphetamine in recent years, Cambodian national authorities seized 72.8 kg of the drug in 2015, the largest amount ever reported from the country. The number of methamphetamine pills seized in 2015 amounted to approximately 265,760 pills, more than 200 % increase compared to the previous year (87,000 pills). These steep increases were largely due to a single trafficking case with 38.2 kg of crystalline methamphetamine and 170,030 methamphetamine pills, all of which originated from the Golden Triangle. In addition, several successful recent cases reported from NACD indicate seizures of methamphetamine in 2016 will remain at high levels. For instance, a total of 100,000 methamphetamine pills were seized in February 2016. The number of "ecstasy" pills seized in Cambodia remains small compared with elsewhere in the region. Seizures of "ecstasy" in 2015 were 70 pills, the smallest amount over the last five years. <sup>10</sup>

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13234/16 JV/np 4
DGD 2C **EN** 

Country report presented by NACD at the 7<sup>th</sup> SMART Regional Workshop, Beijing, China, September 2016.

Cambodia country presentation, NACD, presented at the Global SMART Programme regional meeting, Yangon, Myanmar, 20-21 August 2014.

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. According to several media discourses, approximately 110 litres of SRO were seized in Pursat province in May 2016. 12

Table2: Seizures of selected drugs in Cambodia, 2011-2015

Drug type	Measur	2011	2012 2013		2014	2015	
Methamphetamine pills*	pills	238,994.0	112,723.0	173,349.0	87,000	265,760.0	
Crystalline methamphetamine	kg	19.1	33.5	32.4	29.0	72.9	
Ecstasy**	pills	7,855.0	1,373.0	0	10,533	70.0	
Cannabis herb	kg	210.2	2.4	168.5	80.6	1,511.5	
Hashish Oil	kg	n/a	n/a	n/a	0	1.5	
Cocaine	kg	1.1	41.0	12.9	7.9	5.3	
Heroin	kg	2.1	0.3	38.3	1.8	2.5	

• = 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.

13234/16 JV/np DGD 2C

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Op. cit., NACD, September 2015.

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

Source(s): DAINAP; 'Brief Operation Results of Cambodia Law Enforcement in Combating Drugs 2012', NACD 2013; NACD, August 2014. Official communication with NACD September 2014 and September 2015; Country report presented by NACD at the 8<sup>th</sup> SMART Regional Workshop, Vientiane, Lao PDR, August 2016.

A limited amount of ketamine is seized in Cambodia each year. In 2015, slightly more than 100 g of ketamine were seized in the country. <sup>13</sup> Cambodia has not reported the use or seizures 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.

Heroin use in Cambodia is limited and there has been no significant change observed in the heroin market in the country. According to NACD, three per cent of the Cambodian nationals received drug treatment in 2014 reported to have used heroin. At the same time, seizures of heroin in Cambodia have been relatively small compared to its neighbouring countries, as only approximately 2.5 kg of heroin were seized in the country in 2015.<sup>14</sup>

During the last three years, record amounts of cocaine have been seized in Cambodia, with 5.3 kg seized in 2015, 7.9 kg in 2014, 12.9 kg seized in 2013 and 41 kg seized in 2012, the highest total ever reported in Cambodia. 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.<sup>15</sup>

Cambodia has been continuously targeted by transnational drug trafficking groups. In 2014, there were 129 foreign national arrestees from 52 cases. 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. <sup>16</sup> 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. <sup>17</sup>

13234/16 JV/np 6
DGD 2C **EN** 

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Country report presented by NACD at the 8th SMART Regional Workshop, Vientiane, Lao PDR, August 2016.

<sup>14</sup> Ibid.

Op. cit. NACD, August 2013.

<sup>&#</sup>x27;Drug Situation', NACD 2014.

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

The street retail price of one methamphetamine pill has remained relatively stable from 2008 to 2014, at around USD 5. However, in 2015, the average retail price of one methamphetamine pill has decreased to around USD 2.5. <sup>18</sup> 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. Data on the wholesale price of 1kg of crystalline methamphetamine in 2015 is USD 30,000 – 35,000, a significant decrease similar to the methamphetamine pill price trend. For instance, in 2011 and 2012, NACD reported the average wholesale price of 1 kg of crystalline methamphetamine was around USD 60,000.<sup>19</sup>

Methamphetamine pills samples analysed in 2015 were found to contain an average purity of 2-23% methamphetamine compared with 14-19% methamphetamine in 2010, while crystalline methamphetamine samples had purities ranging from about 1-90% in 2015.<sup>20</sup>

# 1.3. 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.

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13234/16 JV/np 7 DGD<sub>2</sub>C EN

<sup>18</sup> Country report presented by NACD at the 8th SMART Regional Workshop, Vientiane, Lao PDR, August 2016.

<sup>19</sup> Ibid.

Ibid.

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.

In 2013, the Royal Government of Cambodia approved the New National Strategic Plan on Drug Control (2013-2015), which outlined the Government's plan to further implement the drug law. The National Strategic Plan consists of 5 Strategies, 7 Strategic Measures, 35 Programs, and 103 Activities.

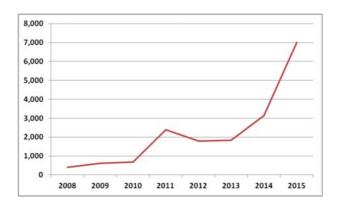
The 5 priority strategies include:

- 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 7,008 persons in 2015. 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 – 2015



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.

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 heroin users and needle exchange program has 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.

### 1.4. 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.

### **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, UNODC has assisted the Royal Government of Cambodia in establishing and supporting 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.

(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 2013, CBTx provided ongoing treatment for over 1,200 people who use drugs. Additionally, the program has provided training to 170 health staff from four provincial referral hospitals and 15 health centres, as well as NGOs, to improve understanding of drug 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.

13234/16 JV/np 11 DGD 2C **EN**  The First National Harm Reduction Strategic plan (2015-17) is now available after an inclusive development process. It includes the expansion of and a more flexible service delivery model. Costing is currently being finalised. Harm reduction training for law enforcement has been integrated in the Police Academy curriculum and is being implemented. The Needle and Syringe Policy and Methadone Maintenance Therapy (MMT) Standard Operating policy 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.

#### 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. The AFP has now provided surveillance equipment to Cambodian National Police in most provinces. In addition, 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.

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.

In addition to its law enforcement and security cooperation, Australia also helped to reduce the spread of HIV related to injecting drug use through the HIV/AIDS Asia Regional Program (HAARP). HAARP operated for nearly six years and had some major achievements, including supporting the first methadone maintenance program in Cambodia, integrating needle and syringe programs into the broader health system and improving law enforcement responses to injecting drug use with a focus on reducing HIV transmission. The first national harm reduction training curriculum for law enforcement officials funded by HAARP is owned by the Royal Government of Cambodia and integrated into training programs at Police Academic and other police schools throughout the country. HAARP handed over responsibility for these activities to the Royal Government of Cambodia in December 2014.

# European Union

The EU is funding various programmes in Cambodia related to law enforcement, 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. The EU is also supporting practical initiatives to deepen dialogue and explore the ASEAN region's capacity building needs in a number of fields, including drugs, arms smuggling, cybersecurity and cybercrime, and transnational organised crime. The EU provides 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. Although at the moment, the EU does not fund in Cambodia actions specifically targeted at drugs, the Delegation would appreciate to participate in the group meetings on this topic.

### Germany

Given the minor criminal connections between Germany and Cambodia and the low requirement of cooperation in the field of combating international drug trafficking, no actions or measures are planned at this stage by the German Federal Criminal Police Office (Bundeskriminalamt).

#### 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 "Knowledge Co-Creation Program" through the Japan International Cooperation Agency (JICA) from 28 August to 14 September 2016 in Tokyo. From Cambodia, one Chief of the Legislation Office under the Legislation, Education, and Rehabilitation Department at the NACD participated in the training course, and 16 other participants at the level of division directors or senior executives of relevant public institutions joined from Benin, Indonesia, Jordan, Kenya, Lao PDR, Mexico, the Philippines, Sudan, Tajikistan, and Viet Nam. In collaboration with the Japanese National Police Agency, the training course was conducted for the following purposes: sharing knowledge and experiences related to the prevention of cross-border smuggling and to enhanced control of drug offences; improving investigation capabilities of the participants through the sharing of their acquired knowledge and working experience; and strengthening international networking among the participants and their organizations. The GoJ will continue to conduct the same training course from 2017 onward.

Each year, Japan has hosted the Asia-Pacific Operational Drug Enforcement Conference (ADEC) in Tokyo. This year, the 21st ADEC was held from 16-18 February, and 29 countries (including Cambodia) and two regions (Macau and Hong Kong), as well as three organisations (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.

## 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 information, tracking and identification of persons.

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.

## **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.

# United States of America

The Government of the United States of America is helping Cambodian authorities to address a range of criminal activity, including drug trafficking, though focused capacity-building programs. Examples include training funded by the U.S. Joint Interagency Task Force-West (JIATF-West) for the Royal Cambodian Navy and the National Committee for Maritime Security to improve ship maintenance and vessel boarding procedures. JIATF-West also helps train Cambodian officials and private bank representatives on financial investigative techniques.

## 1.5. 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 1.7.3. *Recommendations* below).

#### 1.6. 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.

## 1.7. Mini-Dublin group assessment of needs

## 1.7.1. 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. A large and growing majority of persons arrested for drug-related offences or persons submitted for drug treatment involve methamphetamine.
- The amount of crystalline methamphetamine seized in Cambodia in 2015 was the largest ever reported from the country.

#### 1.7.2. 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.

#### 1.7.3. Recommendations

Building on the past recommendations which have been implemented steadily and taking into account the update described in the present report, the participants have agreed on the following recommendations:

- The Royal Government of Cambodia (RGC) should revise the 2013 2015 National
   Strategic Plan on Drug Control and draft a new Plan for 2017 2020
- 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 the Royal Government of Cambodia 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.
- 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 240 centres that provide mental health services for drug users in 2014. 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).

## 2. Lao People's Democratic Republic

#### 2.1. 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. Drug policy in the Lao PDR has to tackle three separate, albeit overlapping problems. The first is that the country has again become a significant producer of opium. The second is that drug use, and in particular the use of Amphetamine-Type Substances (ATS) or ya ba as it is known, appears to be on the rise.

The third main problem is that 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. Enhanced regional transport infrastructure and connectivity towards the establishment of the ASEAN Economic Community will increase the challenges for Lao authorities in combatting narcotics trafficking, production, use, and drug-related crime.

Table: Seizure of illicit drugs from 2008 to 2016

Year	Heroin	Opium	ATS	ICE	Cannabis	Cocaine	Arrested	Arrest
	(Kg)	(Kg)	(tablets,	(Kg)	(Kg)	(Kg)	foreigners	cases
			millions)					
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	125.7	16.4	1.4	23	214		32	1,148

Source: LCDC (early 6 months for 2016)

The UNODC's 2015 crop survey considers opium production in the Lao PDR to have stabilized at a high level in 2014 and 2015. Production is 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. While the number of hectares under cultivation has doubled over the last five years, the return to high production levels is 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.

Apart from opium, there is very little data about the production and distribution of other drugs in the Lao PDR. The Lao PDR is considered to be a transit country for drugs other than opium, 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. Ya ba is associated with negative physical and mental health outcomes for consumers who use the drug regularly. 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.

The Lao Government has continued to invest in in-patient drug treatment centers as its primary response to treatment for ATS use; a total of 12 centers are operational and further two are under construction and expected to be completed in the near future. Furthermore, two private centers are operational. While the new centers might help releive overcrowding, there is a clear need to introduce and expand evidence-based treatment modalities, including Community Based Treatment (CBT). CBT has been piloted in Vientiane since 2012, and is in the process of being expanded to 12 new locations.

The UNODC considers opium poppy cultivation in the Lao PDR to have stabilized at a high level. 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. The 2015 figure of 5,700 hectares has a 95% confidence interval of 3,900 to 7,600 hectares. 809 hectares of opium poppies were eradicated in 2015. The opium survey will not be conducted in 2016 and is not planned for 2017, as there is no available funding.

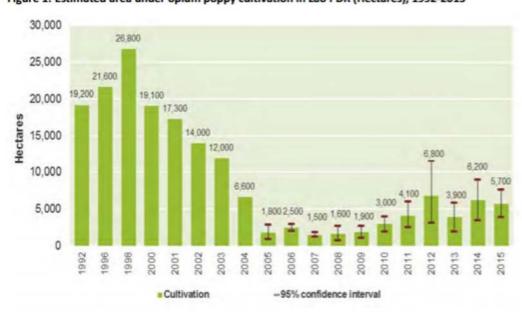


Figure 1: Estimated area under opium poppy cultivation in Lao PDR (Hectares), 1992-2015

Sources: 1990-1991, 1993-1995: US Department of State; 1992, 1996-1999: UNODC; since 2000: National Illicit Crop Monitoring System supported by UNODC.

Opium poppy cultivation was confirmed in seven provinces located in the mountainous regions in the northern Lao PDR; Phongsali, Houaphan, Luang Namtha, Luang Phrabang, Oudomxai, Bokeo and Xiangkhoang. In 2014, the province of Xayaburi was included in the survey but omitted in 2015 as no evidence of poppy cultivation was found in that Province. Geographically, 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.

UNODC's survey points to a significant increase in the opium yield per hectare over the last 10 years. UNODC was not able to carry out yield tests as part of the crop survey between 2008 and 2013, so used a baseline yield of 6 kg of per hectare of poppies for this period (equivalent to the yield as surveyed in 2007). The 2014 and 2015 surveys showed an increase in yield to between 14.7 and 30.6 kg of opium per hectare. This means that while total hectare production in the Lao PDR has fallen since the peak in the late 1990s and early 2000s, production taken on a ton basis is now returning to levels seen during that period. In addition, 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.

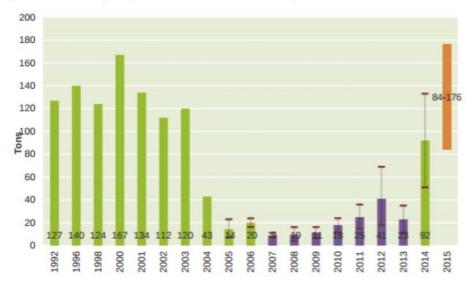


Figure 2: Potential opium production, Lao PDR, 1992-2015 (Tons)

Confidence intervals reflect uncertainty of area estimates only. Due to the absence of yield surveys, 2007 estimates have been used for the years 2008-2013 (in purple). The 2015 estimate has been updated with a new yield survey (in orange).

2,200
2,000
1,800
1,400
1,400
1,000
800
600
400
200
2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

Figure 6: Opium prices, Lao PDR, 2002 to 2015 (United States dollars per kilogram)

Source: LCDC.

## 2.2. Changes to the country's institutional counter-narcotics programs

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 has traditionally sorted under the Prime Minister's office, but was in June 2016 transferred to the Ministry of Public Security. At the time of reporting, the practical consequences of this transfer are still under discussion.

LCDC took the lead drafting and implementing the 2009 - 2015 National Drug Control Master Plan. This plan, originally designed to run from 2009 - 2013, was extended by two years to bring it in line with the 7th National Socio-Economic Development Plan (2010 - 2015).

To continue these efforts to combat the problems associated with illicit drug use, LCDC has drafted a new Drug Control Master Plan for the period 2016 to 2020 with support from UNODC and the US, and the Master Plan was approved by the Lao Government in May 2016. The Master Plan outlines a series of nine priority areas the Lao PDR Government will focus on over the next five years, including:

- 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.

### 2.3. Update on major bilateral and multilateral counter-narcotics programs

The Illicit Drug Sector Working Group (IDSWG) forms part of the broader Round Table Process and sectorial framework for donor coordination 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. The IDSWG met most recently on 13 November 2015, at which time recent developments and donor support to the sector were reviewed. The following activities have been undertaken since mid-2015.

### **United States**

The US is continuing its work on CBT in Vientiane and Bolikhamxay Provinces, which will also assess the extent and trends of ATS use in these two provinces. The CBT centres are being expanded to a total of 12 locations. The US also supported the UNODC opium survey, which was released in December 2015. It has expanded its alternative development project in Houaphan Province. The project started its implementation in early 2015. The US will continue to support training for the Lao drug control police and provide funding for LCDC's operational expenses. It is also training prevention specialists in providing drug and alcohol services in the Lao PDR.

### 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 Lao PDR through contribution to UNODC such as the Global SMART (Synthetics Monitoring: Analyses, Reporting and Trends) program.

## Luxembourg

Luxembourg is supporting an alternative development project in Houaphanh Province, Northern the Lao PDR. The project started its implementation early 2015.

### Australia

Australia continues to provide law enforcement training and equipment for Lao police engaged in anti-narcotics and other transnational crimes, and an ongoing program of capacity building with Lao immigration and customs to strengthen the Lao PDR's border management systems and skills.

#### **UNODC**

In country, UNODC worked with Luxembourg and the US to deliver alternative development projects in Houaphan Province. UNODC also worked with the US government to undertake the 2015 opium crop survey, and is extending CBT in Vientiane Capital and the provinces of Vientiane and Bolikhamxay.

#### 2.4. Identification of needs for external assistance

In the 2016 – 2020 National Drug Control Master Plan, one of the main focuses will be on alternative development, which has achieved results in reducing opium production in targeted areas of the Lao PDR. Another area of particular need is data collection and survey work to better understand drug use in the Lao PDR and patterns of supply and demand. The UNODC crop survey has been a valuable tool in tracking opium production, is not funded in 2016 and will therefore not be conducted.

In total, LCDC is seeking funding of USD 60 million for the five years of the Master Plan from 2016 – 2020. LCDC did not provide a detailed breakdown of this funding and was unclear what contribution the Lao Government would make towards the projects. This reflects a tendency towards relying on donor funding for counter-narcotics activities in the Lao PDR. Given few donors have identified this sector as a priority, the Lao PDR Government will struggle to attract the funding levels sufficient to achieve its goals by 2020.

### 2.5. Mini Dublin Group coordination

### 2.5.1. Emerging threats / trends

There are four major trends that point to future challenges for the Lao PDR in combating the harms of illegal drugs. Recent data from UNODC shows that the success in eliminating opium production in many regions of the Lao PDR during the mid-2000s has been short-lived. Unless action is taken, the Lao PDR is likely to see a continuation of high levels of opium production, or possibly an increase in production. This is compounded because the Lao Government has demonstrated limited capacity to undertake alternative development work without the assistance of external partners. While some alternative development programs have been successful, a substantial reduction of opium cultivation will require significantly more support from development partners than is now on offer.

Second, there is a lack of awareness of risks of ATS use among the youth demographic, as well as limited access to adequate treatment options. The impacts on health and crime rates are damaging to Lao PDR's development agenda. The Lao Government's efforts in law enforcement have seen a rise in arrests and prosecutions for drug offences, although this increase has been mostly at the street-dealer level. The government acknowledges that it should focus on using its law enforcement resources more strategically to target high-level criminals within the drug trade.

Third, with the establishment of the ASEAN Economic Community and increased infrastructure connectivity, there will be greater opportunities for black market traffickers to transport goods across ASEAN countries. This is likely to complicate law enforcement efforts to combat the drug trade. There is a strong imperative for the Lao PDR to work with its immediate and regional neighbors to share intelligence and cooperate on law enforcement responses, as well as to strengthen links between Southeast Asia's economic integration agenda and it's security agenda.

Forth, following the Governmental institution reforms in the beginning of 2016, there is a possibility that coordination mechanism between the Lao Government and development partners will be changed and it might takes time that a new structure will function. Although LCDC under the Ministry of Public Security is expected to continue to lead this sector within the framework of the Round Table Process, further close coordination efforts with Lao related authorities could be required to realize the new 5-year Master Plan.

#### 2.5.2. Political will and counter-narcotics initiatives

The Lao Government has shown political will in identifying combating drugs as a high national priority. The new National Drug Control Master Plan is a welcome development in the Lao PDR's policy response to these issues. It seeks to build on the successes of the previous master plan, using an evidence-based approach. The recent institutional reform of LCDC in the Lao Government is also considered as one of the messages of the Lao Government to streamline related authorities for strengthening counter narcotic activities as mentioned in the Master Plan. At the same time, coordinating law enforcement approaches and health approaches to drug policy will be a key challenge for the new institutional structure.

Included in the Master Plan is a request for increased donor assistance across nine priority areas. The Master Plan is a commendable first step to outlining which areas it most needs assistance, but it will be important to see joint commitment by the Lao Government to delivering projects under these nine priorities. Given donor funding over the previous 2009 - 2015 Master Plan fell below expectations, there will need to be an ongoing dialogue between the Lao Government and the donor community to ensure projects outlined in the Master Plan are feasible, prioritized effectively and have the highest chance of success. The Lao PDR would also do well to engage more closely with 'new donors', including neighbors such as China, Thailand and Vietnam that would benefit directly from greater Lao capacity to manage its anti-narcotics challenges.

In general, a lack of government funding for health interventions and counter-narcotics activities hampers the Lao PDR's capacity to respond to the problems associated with illicit drugs, a particular challenge given Lao PDR's Least Developed Country status. The lack of allocated budget funding and capacity limitations are major constraints on the ability of the Lao Government agencies to meet the objectives of the national master plan.

One area that shows potential for success is in the Lao Government's increased efforts to work effectively with its neighbors on law enforcement initiatives. The Lao PDR is already working closely with China, Thailand and Myanmar on the Safe Mekong Joint Operation initiative, which has seen some arrests of higher-level operators in the drug trade. Regular bilateral and trilateral consultations with these neighbors, as well as Vietnam, provide a basis for ongoing cooperation. It would be helpful if Vietnam were more fully included in the Safe Mekong Joint Operation initiative.

#### 2.5.3. Recommendations

The Mini Dublin Group in the Lao PDR considers the Lao Government is making progress in outlining its anti-drug priorities through the new National Drug Control Master Plan 2016 - 2020. The Mini Dublin Group makes the following recommendations:

- Encourage and support the Government in its efforts to make progress on the nine priorities outlined in the new National Drug Control Master Plan 2016 2020, including considering options for supporting activities outlined in the Master Plan.
- Continue to encourage and support the Government in its efforts to develop evidence-based addiction treatment programs for ATS users (e.g. community-based treatment and, for addicts, medically-sound systems at treatment centers) and place emphasis on rehabilitation and vocational training.
- Support collection of data and reporting of statistics on drug law enforcement, including
  arrests, prosecutions and convictions, as well as gender-disaggregated figures. It would also
  be beneficial to continue the annual opium survey.
- Encourage the Lao Government to centrally coordinate intelligence on drug matters, and,
  wherever 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.
- Continue to encourage the Government to abolish the death penalty for drug related crimes.
   As well as human rights concerns, the current situation serves to actually diminish Laos' ability to combat drug crimes, because some countries in the region (i.e. Australia) have limitations on their ability to share intelligence in a case that might attract capital punishment.

- Encourage the Lao Government to make a joint commitment to funding and delivering the activities outlined in the new Master Plan and measure success based on clear milestones. Given donor funding over the previous 2009 2015 Master Plan fell below expectations, there will need to be an ongoing dialogue between the Lao Government and the donor community to ensure projects outlined in the Master Plan are feasible, prioritised effectively and have the highest chance of success.
- Encourage partner agencies to deliver capacity building training on drug control in Lao language and outside of regional centres.
- Ensure the new institutional structure for drug control clearly outlining roles and
  responsibilities for LCDC and the Ministry of Public and Security, and also ensure a
  coordinated approach to drug policy that connects and aligns law enforcement approaches
  with health-based approaches.

### 3. Myanmar

# 3.1. Place and date of meeting of mini-Dublin Group in Myanmar

The last mini-Dublin Group meeting in Myanmar was held in 2014. The members shared the narcotic situation updates by UNODC, and discussed the planned and on-going projects of each donor. Members continue to exchange information by email. The next mini-Dublin Group meeting in Myanmar will be held in October 18<sup>th</sup>, 2016. The members will share the updates on projects of each donor and update criminal issues as well as new governments approach.

### 3.2. General situation

## 3.2.1. 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 has now been 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 Wa region in June 2005 and in the Kokang Special Region in 2003. 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 report<sup>21</sup>, the total area under opium poppy cultivation in Myanmar in 2015 was 55,500 hectares; a decrease of 4% with respect to 2014. This figure represents the second year of stabilisation in the area under opium poppy cultivation following consecutive year-on-year increases since the low of 21,600 hectares in 2006. Estimated yields led to an estimated opium production of 647 tons in 2015. This was slightly less than in 2014 (673 tons) and also smaller than at any point between 1996 and 2001 when, overall, large amounts of opium were produced in Myanmar.

In addition to the increases in production between 2007 and 2013, it is important to note the sophistication in cultivation. The farmers use irrigated fields and fertilizers to increase productivity, while planting in lowland paddy and using intercropping, such as with beans, and multi-stage planting to mitigate eradication.

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 2015 UNODC survey, poppy is mainly cultivated for economic reasons, with an average of 46% of the headmen of poppy-growing villages reporting that farmers cultivate opium in order to make more (or easy) income, while 40% specified that farmers do not cultivate opium to make more money *per se*, but rather to be able to cover family expenses as a result of poverty or lack of "livelihood assistance". Few respondents cited non-income-related reasons for cultivating opium poppy, such as poppy growing being a "traditional activity" (4%), or other income-related reasons such as earning "money in short period of time" (4%) or poppy being "easier to sell than other crops" (2%).

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13234/16 JV/np 32 DGD 2C **EN** 

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

### 3.2.2 Amphetamines (ATS)

Countries in East and South East Asia have seen an increase in the manufacturing, trafficking and consumption of amphetamine-type stimulants (ATS) with a large volume of these ATS being produced in the eastern border areas of Myanmar. The most common type of ATS produced is methamphetamine. East Asia illicit ATS industry value is estimated at \$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 South-East Asia have emerged from several parts of Africa and America. Methamphetamine use continues to be a major problem in large parts of East and South-East Asia. Information on seizures and use indicate that the market for both forms of methamphetamine (methamphetamine tablets and crystalline methamphetamine) is expanding.

Myanmar is perceived to be the main country of origin for 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. <sup>22</sup>

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 from processed, 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 evidence also of new transnational trafficking routes for this ATS along Myanmar's western border with Bangladesh and India.

13234/16 JV/np 33
DGD 2C EN

UNODC (2015) World Drug Report. P71.

With respect to crystalline methamphetamine, there has been a significant increase in its production in recent years, with a spike in the production and seizure in the 2015 calendar year. Official seizure statistics for 2015 related to ATS production also included 1.27 MT of pseudoephedrine, 111.94 kg of ephedrine, and 9.93 MT of caffeine powder. Burmese police also seized 49.95 million ATS tablets, 10,639 liters of precursor chemicals, and 2.26 MT of crystal methamphetamine during the reporting period.<sup>23</sup>

## 3.2.3. Drug use and treatment

The prevalence of the use of all three drugs: opium, heroin and ATS, was higher in 2013 than in 2012, with the greatest difference observed in ATS prevalence.<sup>24</sup> A UNODC survey in poppy growing regions in Myanmar reported that past-month prevalence of amphetamine- type stimulant (ATS) use tripled between 2012 and 2014<sup>25</sup>. While this survey is not representative for the general population, it likely indicates an increase in the use of methamphetamine tablets.

In Myanmar, heroin and opium maintain high usage rates, though the Myanmar Police Force 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. However, the National Drug Abuse Prevention and Control Programme of the Ministry of Health and Sports is finalizing the treatment guidelines for ATS dependence which will be available soon.

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13234/16 JV/np 34
DGD 2C EN

Info from INCSR website

UNODC (2013) Patterns and Trends of Amphetamine-Type Stimulants (ATS) and Other Drugs - Challenges for Asia and the Pacific 2013

UNODC (2015) Patterns and Trends of Amphetamine-Type Stimulants (ATS) and Other Drugs - Challenges for Asia and the Pacific 2015

### 3.2.4. Challenges in border areas

As noted above, most domestic opium cultivation, and heroin and ATS production, occurs in Shan State and, in particular, 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 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 further deterioration in the security environment of these areas. Therefore, unless the underlying security factors are addressed and resolved, Myanmar authorities will find it difficult, if not impossible, to achieve their stated goal of eliminating illicit drug production by 2019. In late August and early September 2016, the 2016 Panglong Peace Conference was held in Nay Pyi Taw. A first landmark effort of the new government's efforts to address the challenges in border areas, the conference was attended by eighteen ethnic insurgent groups. No resolutions were reached during the summit, but more talks are expected to follow.

# 3.3. Update on Myanmar's anti-drug strategy

### 3.3.1. Changes/additions to the counter-narcotic institutional framework

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

### 3.3.2. Legal/Legislative changes including money laundering

The Central Committee for Drug Abuse Control (CCDAC) has finalised a revision of the Narcotic Drugs and Psychotropic Substances Law of 1993. The revised law has not yet been passed by the parliament and is currently with the Union Attorney General's Office.

13234/16 JV/np 35 DGD 2C **EN**  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 synthesized 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. Following this, a wide-ranging consultation workshop on amending the 1993 'Narcotic Drugs and Psychotropic Substances Law' (the 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 of the Myanmar Government, parliamentarians, international health and legal experts, INGO/NGOs, drug user networks, development partners, UN agencies and other relevant technical partners.

The draft version of the law presented at the end of the workshop included 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 <sup>26</sup>.

### 3.3.3. Assessment of Myanmar's anti-narcotics strategy

The Myanmar Government is implementing a three phase, 20-year drug control plan (1999-2019) aimed at a drug-free country by 2019. In the first phase, the main priorities were assigned to the eradication of opium poppy cultivation. The remaining phases will see the Government set priorities on: the rehabilitation of illicit drug users; the establishment of further special anti-narcotic task force units; local participation in the implementation of the drug control process; and, cooperation with international organisations. The drug control plan addresses 51 townships covering 55,112 square miles and a population of approximately 3.8 million inhabitants.

Myanmar authorities achieved a significant decrease in opium cultivation in the first and second phases of the programme. More recently, however, cultivation has again begun to increase. In 2015, the total area under opium poppy cultivation in Myanmar was 55,500 hectares. This figure represents the second year of stabilization in the area under opium poppy cultivation after consecutive year-on-year increases since the low of 21,600 hectares in 2006 (UNODC, SE Asia Opium Survey, 2015).

13234/16 JV/np 36
DGD 2C **E.N** 

UNODC (2015) Myanmar website.

The Central Committee of Drug Abuse Control (CCDAC) is chaired by the Minister of Home Affairs and with the Chief of the Myanmar Police Force sitting as a Joint Secretary, the CCDAC serves as the country's main drug control body, coordinating all drug enforcement efforts in Myanmar. CCDAC coordinates law-enforcement activities of the Myanmar Police Force, the Customs Department and other relevant authorities, and consists of a number of thematic work committees (crop substitution; livestock breeding; medical treatment; rehabilitation; youth education; law enforcement; administration of seized narcotic drugs; international relations; control of precursor chemicals; effective settlement of narcotic drug cases, and others).

The Drug Enforcement Division (DED) is the operational arm of the CCDAC within the Myanmar Police Force and is responsible for the implementation of CCDAC policies and coordinates with other departments both domestically and internationally on drug related matters.

The CCDAC and DED work closely with law enforcement agencies in the region, as well as with the US Drug Enforcement Agency and the Australian Federal Police. The DED's narcotic drug suppression operations take place through Anti-Narcotics Task Forces (ANTFs).

Being party to a number of bilateral and multilateral agreements on counter-narcotics cooperation in the region, Myanmar cooperates with other countries in information sharing and other activities for the elimination of drugs. However, as the State budget for counter-narcotic activities is limited, international cooperation for the training of Myanmar officials and alternative development is crucial to achieve progress in combating illicit narcotics production.

### 3.3.4. Assessment of the Myanmar Police Force

In February 2015, UNODC launched jointly with the Chief of Police 'an Overview of Policing in Myanmar and Recommendations for Reform' - a comprehensive study on the Myanmar Police Force and "A Road Map for reform". The study was undertaken to better understand operational mandates and challenges together with legal and reform debates surrounding police and civilian law enforcement in Myanmar. It aims to identify priorities and assistance needs. The Government of Myanmar and the Myanmar Police Force partnered with UNODC and took ownership of this process, actively participating in the extensive research and dialogue. Prior to finalizing, the road map was submitted to Myanmar Police Force headquarters for a final review. The recommendations of the road map have therefore been the result of a comprehensive, nationally-owned process.

The Road Map for Reform includes 23 recommendations for near, medium and long term goals. These 23 recommendations are placed under 5 themes: 1) Legal Frameworks, strategies and policy guidelines 2) Oversight and accountability mechanisms 3) From Force to Service – Community policing, 4) Recruitment and Training 5) Resources.

As a direct follow-up to the report, a second assessment was conducted on 'Review of the Myanmar Police Training System and Recommendations for Improvement'. It documents the findings of a three months review conducted jointly by the Myanmar Police Force and UNODC and builds on the findings of the previous report, focusing specifically on the recommendations on training made in the first report namely (1) upgrade training schools and curricula; (2) include human rights training as a core subject; (3) provide training in criminal evidence gathering and investigation; and (4) improve incentives for Myanmar Police Force personnel to undertake training roles.

The assessment seeks to identify the Myanmar Police Force's priority training needs with a view to strengthening the police reform process in Myanmar, by enhancing the police's capacity to help Myanmar counter important crime challenges. Based on the research described in the previous chapters, the Myanmar Police Force's priority training needs fall into the following four categories:

- Training policy and management;
- Instructor selection, training and benefits;
- Curricula development; and
- Creating a "learning friendly environment"

### 3.3.5. Assessment on border management

As part of activities under UNODC's PATROL Programme (Partnership against Transnational Organized Crime through Regional Organized Law Enforcement), assessments have been conducted in all of the five operating Border Liaison Offices (BLO), namely Myawaddy, Kawthaung, Tachileik, Wang Pong and Kyaing Lath. In addition, new BLO offices have been suggested jointly with the Government's Steering Committees and feasibility assessments have been conducted to identify suitable locations for new BLO offices in the northern part of Myanmar sharing borders to Bangladesh.

### 3.4. Update on major bilateral and multilateral counter narcotics programmes

### **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 have been 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<sup>st</sup> of December 2018. 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 growing communities.

# 《Drug Demand Reduction, HIV/AIDS prevention and care》

(National Drug Use Survey)UNODC is implementing a National Drug Use Survey in close collaboration with the government counterparts, mainly the Central Committee for Drug Abuse Control under Ministry of Home Affairs. The purpose of the study is to enhance the capacity of the Government of Myanmar to provide modern and adequate drug prevention treatment and rehabilitation interventions by increasing situational awareness through the availability of accurate data on drug use in Myanmar. A National Steering Committee and a Technical Committee for this study were formed with relevant government agencies as well as related UN and national nongovernment organizations. The survey was recently approved by the Ethical Review Committee, and data collection and analysis will be conducted in the last quarter of 2016 and first quarter of 2017 respectively. The report is expected to be finalised and published by the end of second quarter of 2017.

(**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 Department of Social Welfare. A training of trainers (ToT) program on "Substance Misuse Assessment, Brief interventions, Pharmacotherapies & Psychosocial Interventions" was conducted in July 2016 and 30 professional staffs from the government were trained.

To better understand the prevalence of different kinds of substance dependence problems as well as the workload and 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 by the end of first quarter of 2017.

(Harm reduction Services for People who inject drugs) In order to create enabling environments for harm reduction services, UNODC has provided technical support for the amendment of 1993 Narcotic Drugs and Psychotropic Substances law from punitive to public health approach. Furthermore, UNODC supports the creation of enabling environments for harm reduction services for people who inject drugs (PWID) through the establishment of harm reduction township steering committees for harm reduction services at township level as well as advocacy meetings with faith based groups and capacity building workshops for civil society organisations and PWID based networks.

(Alternative Development) UNODC supports the development of sustainable livelihood alternatives for opium growing communities in 58 villages in Hopong, Loilen and Pinlon townships of southern Shan State by addressing the economic root causes of poppy cultivation and related environmental degradation. Thus, UNODC intervenes in the opium poppy economy with alternative permanent crops and establishment of farmers' organizations to enable participating farmers to independently cultivate, refine and commercialize 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, 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, a total of 1,265 former poppy farmers have started implementation of high quality coffee and tea plantations, and 356 hectares of former opium fields have been converted to alternative and sustainable crops. The area continues to expand, and it is expected that an additional 419.4 hectares of alternative crops will be implemented before the end of 2016 including 415.4 hectares of coffee and 4 hectares of tea.

In addition to this, UNODC has supported the establishment of a coffee cooperative in July 2015 which was formally approved by the Cooperative Department in early 2016. The first significant harvest of coffee is expected for December 2017.

# 《Capacity building of the Law Enforcement》

As part of the national 'Conference on Basic Police Investigation Curricula Development and Adaptation' and based on the recommendations from the UNODC Needs Assessment, the Myanmar Police Force has agreed to receive support from UNODC to upgrade their training content and to develop and include modules on information gathering and development of criminal intelligence, gathering and presenting of evidence and interviewing of witnesses, victims and suspects for junior, mid-, and senior ranks into the currently used training curricula.

The US funded programme aims to sustainably build capacity for the Myanmar Police Force to prevent and investigate crime and effectively respond to national and transnational crime threats such as drug production and drug trafficking. The modules also include crucial basics for front line officers to investigate on drugs such as information on drugs and precursor identification, gathering and preservation of evidence, searching of vehicles, and interviewing of suspects.

As part of UNODC's PATROL programme, different workshops have taken place such as the Tri-Border Communication and Cooperation Training between Myanmar, Lao PDR, and Thailand in September 2016.

## 《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 establish 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 United States. The 2015 Opium Poppy Survey report was released in December 2015.

Additionally, UNODC also 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 to make effective evidence-based decisions for designing responses to address the problems associated with illicit synthetic drugs.

## 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 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 a new 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 experts based in Lashio. Due to security situations in Northern Shan State, the activities have been mainly conducted at the model village areas located near Lashio since June 2015. To enable currently developed models to be applied to the project targeted areas, capacity development trainings are provided for government officials working for the areas.

The Japanese Government contributed 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\$2.65 million (2002-2016 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.

### **United Nations World Food Program (WFP)**

In 2016, WFP continues to provide food-by-prescription support to people living with HIV (PLHIV) and tuberculosis (TB) clients from the most vulnerable and food-insecure communities in Bago, Kachin, Magway, Mon, Nay Pyi Taw, Shan, Wa and Yangon through its sub-offices in Malamyine, Myitkyina, Lashio, Nay Pyi Taw, Pakkoku, Pang Kham and country office in Yangon. A total of 12,600 PLHIV and TB clients receiving antiretroviral therapy (ART) and/or Direct Observed Treatment short course (DOTs/Plus) are assisted in partnership with the National TB and AIDS programmes of the Ministry of Health as well as Asian Harm Reduction Network (AHRN), Aide Medicale Internationale (AMI), International Organization for Migration (IOM), Medical Action Myanmar (MAM), Malteser International, and World Health Organisation. Above all, WFP's food-by-prescription support complements health promotions, harm reduction services and psycho-social support counselling provided exclusively for (former) injection drug users by AHRN in Shan and Kachin States, where prevalence of drug use has been substantially higher.

# **《Background》**

WFP started its intervention in Kokang region at the request of the government to provide emergency food assistance after stepping up dramatic poppy eradication efforts, which had severely affected livelihoods of the poppy farmers. From 2003 to 2007, in cooperation with UNODC and other partners, WFP provided food assistance to the ex-poppy farmers to alleviate the negative impacts brought by the opium eradication and enhance their resilience and coping capacity. In February 2012, WFP's partnership with UNODC resumed to assist ex-poppy farmers with general food distribution in 45 villages in central Ho Pone and Pin Laung Townships in southern Shan State, where farmers' poppy fields had been destroyed. Although the Government requested WFP to extend its support to another severely affected 10 villages in Pekon and Pin Laung townships in southern Shan State, an emergency food security assessment, jointly undertaken by WFP and UNODC in June 2012 to determine the extent to which household food security status was impacted by the poppy eradication intervention, demonstrated contrary. The main findings indicated that the food security situation of the affected communities was stable and no immediate assistance was deemed necessary. The majority of the impacted households had sufficient income for their basic food needs while few households were reportedly forced to purchase food on credit or borrow from friends and relatives. Nevertheless, WFP closely monitored the affected communities for their resilience and if required, to respond quickly. In 2013, WFP continued its assistance to the expoppy farmers through assets creation activities such as pond renovation, water supply system, which increase the agricultural production in the water-scarce and hilly mountain areas and at the same time generate an alternative income source for the farmers. After 10 years since the inception of partnership with WFP in 2003, UNODC discontinued the joint food security project for ex-poppy farmers, who were no longer considered direct beneficiaries in the context of anti-drug efforts, in mid-2013. From 2012 to mid-2013, WFP food assistance in partnership with UNODC reached over 16,500 people with 766 metric tonnes of food in Shan State.

Under the current Protracted Relief and Recovery Operation, WFP reached 12,477 PLHIV/TB clients in 2014 and 12,916 beneficiaries in 2015. In January 2016, WFP in partnership with the National TB programme expanded its geographical scope to support Multi-drugs Resistant TB clients in all administrative areas in Myanmar.

13234/16 JV/np 44
DGD 2C EN

#### Australia

Australia, through the Australian Federal Police (AFP), continues to support counter-narcotic efforts in Myanmar, through police-to-police cooperation with a specific focus in Shan State. In 2007, Australia supported the establishment of a Drug Crime Centre within the CCDAC, which included the installation of a Case Management and Intelligence System (CMIS). In 2015, Australia provided additional funding to upgrade CMIS as well as delivering training to Myanmar law enforcement agencies on 'Anti-money laundering, Counter Terrorism Financing and Criminal Asset Confiscation'.

Australia, through the Australian Border Force (ABF), is also supporting capability development amongst Myanmar's border agencies by providing maritime security training, technical expertise and equipment to the MPF and specialist technical training to Myanmar Customs and Immigration departments. Australia continues to provide donor level and local support to the UNODC's Container Control Program and Border Liaison Office Program (Patrol 2).

A renewed focus is on the exchange of information between counterpart agencies on high risk border commodities such as narcotics, with a Memorandum of Understanding for Information Sharing being drafted between ABF and Myanmar Customs.

Australia contributed approximately AUD 42 million to counter HIV/AIDS in Myanmar through the 3 MDG Fund between 2012 and 2016. The Fund is supporting HIV harm reduction projects in Shan, Kachin and Mon states, and Mandalay, Sagaing and Yangon regions.

Australia has also contributed AUD200 million between 2014 and 2016 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 Livelihoods and Food Security Trust Fund (LIFT). LIFT is funded by Australia, Denmark, the European Union, France, Ireland, Italy, the Netherlands, New Zealand, Sweden, Switzerland, the United Kingdom and the United States of America. Australia is the third largest donor to LIFT. Through LIFT approximately US\$200 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 AUD12 million 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.

#### United States of America

The United States supports counter narcotics efforts in Myanmar through funding of approximately \$2 million USD from the U.S. Department of State, International Narcotics and Law Enforcement (INL) Bureau for drug demand reduction, interdiction, and law enforcement capacity building. In addition to INL programming, the Drug Enforcement Administration (DEA) supports counter narcotics efforts in Myanmar through cooperation with the Central Committee for Drug Abuse Control/Myanmar Police Force-Drug Enforcement Division.

INL counter narcotics programming supports the following drug demand reduction activities: i) a comprehensive country-wide drug user survey to be conducted by UNODC; ii) the first Myanmar Drug Demand Reduction Stakeholders Conference, co-organized by UNODC, WHO, Colombo Plan and CCDAC/DED and the Ministry of Health; iii) and training for drug treatment providers in cooperation with the Colombo Plan. INL counter narcotics programming supports the following drug interdiction activities: i) annual UNODC Opium Surveys and ii) capacity building activities for counter narcotics law enforcement officials, including trainings, workshops, study tours, and exchanges at the International Law Enforcement Academy in Bangkok, Thailand.

The goals of these programs include: i) enhancing Myanmar's drug demand reductions services; ii) reducing the amount of poppy cultivated and opium produced; and iii) strengthening Myanmar's counter narcotics law enforcement to combat narcotics trafficking.

#### European Union

The European Union (EU) has been supporting the activities of UNODC since 2003.

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.

The EU has also supported two food security and crop substitution projects in Southern Shan State for the eradication of opium poppy cultivation and poverty reduction implemented by UNODC. The projects terminated in September 2015 although UNODC intervention in the region continues. 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.

The EU/UNODC projects have been operational for almost five years<sup>27</sup>. 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 crops<sup>28</sup>, cash crops<sup>29</sup>, livestock<sup>30</sup>, 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 under 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.

13234/16 JV/np 47
DGD 2C EN

The Actions 164014 and 164033 have the same objectives, outcomes, outputs and activities. The principal difference between the two Actions is geographical. Action 164014 is implemented in three village tracts (as described in 1.7) and Action 164033 is implemented in two other village tracts in the same township. The two Actions are in practice being implemented together as a single programme. The reason that these Actions exist as two separate entities is because they receive funding from two different EU contracts. As a result, for administrative purposes, the two Actions will be presented as two separate (but largely identical) projects.

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

<sup>&</sup>lt;sup>29</sup> Coffee, tea, avocado, fruit trees, corn.

Buffalos, pigs, chickens, fish.

The EU is also one of the donors contributing to the LIFT fund and to the 3MDG.

#### 3.5. Prioritised identification of needs for external assistance

- Continued and enhanced international cooperation and capacity building with Myanmar law enforcement agencies on counter narcotics.
- Addressing food security issues, including the provision of food and development assistance for former poppy farmers facing serious food shortages.
- Continued programmes to improve the livelihood of former poppy cultivating communities including in newly-developed poppy cultivation areas.
- Continued surveys and research on opium and ATS production.
- Treatment and rehabilitation of addicts and former addicts with an emphasis on supporting methadone programs to treat drug addiction.

## 3.6. Mini-Dublin Group assessment of needs

# 3.6.1. 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 antinarcotics 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.

13234/16 JV/np 48
DGD 2C EN

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.

#### 3.6.2. 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.

#### 3.6.3. 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, and that a draft of this document be available for comment at the next mini-Dublin Group meeting.
- That the completed report of the Myanmar mini-Dublin Group committee be forwarded to the Myanmar Government.
- That members urge Myanmar to provide greater access to UN agencies and INGOs into areas of illicit drug cultivation and production concern in order to provide assistance to opium poppy farmers, including through the timely provision of necessary visas and travel authorisations for international staff.
- That members encourage Myanmar and its neighbours, chiefly China, India and Thailand, 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'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 poppygrowing areas, concentrating support in centres of opium production in southern and eastern Shan State. Other donor countries should be encouraged to look at strengthening their assistance in these areas.
- That members continue to support the provision of emergency assistance for the immediate needs of former poppy growers facing the loss of their primary income.
- That members continue support for building human resources capacity and to scale up HIV
  prevention and treatment services for people who use drugs in Myanmar, and in particular,
  people who inject drugs.
- That members remain alert to the impact of recent and future political developments on counter-narcotics efforts, particularly in Shan State.

## 4. Vietnam

## 4.1. General situation

In Viet Nam, illicit drug trafficking is becoming more and more complicated and on a rising trend. Vietnam has been becoming a destination and significant transit for trafficking of illicit drugs and their precursor chemicals to international markets. A large volume of illicit drugs trafficked into and through Vietnam, over the past few years, was trafficked mainly on land and air routes from neighbouring countries, which partly destined to other countries. Trafficking of illicit drugs, both inbound and outbound, precursor chemicals via international airports in Vietnam, by West African drug syndicates remain of concern.

- Land route: heroine was trafficked across the border, whereas methamphetamine and pharmaceutical substances were smuggled back into Vietnam. Along the northern borderlines, law enforcement forces continuously detected many cases of illegal transport in large quantity of heroin and synthetic drugs in crystal and tablet forms crossing the border.
- Air route: types of drugs smuggled primarily were mainly crystal methamphetamine and cocaine.

  Detected cases of drug trafficking in large quantity up to hundred blocks of heroin and hundred thousands of ATS tablets were also recorded locally.
- Modus operands: drugs were concealed in trucks, rice sacks or in soft drink cans to elude the control by authority; traffickers made use of flavour policies on investment and export/import to illegal transport drugs in large quantity.

Heroine remained the primary drug of use. Meanwhile, ATS use continues to be on a rise, especially among young population in major cities. Crystalline methamphetamine use became increasingly widespread and a number of new psychoactive substances have emerged on the illicit ATS market.

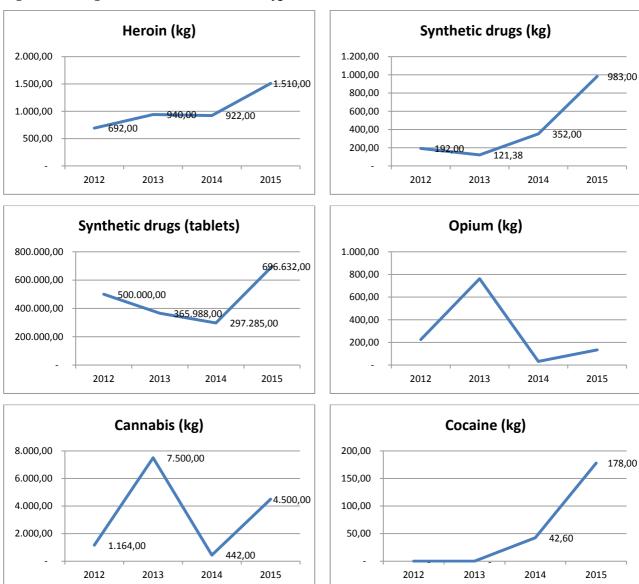
# 4.1.1. Drug trafficking

As the most recent reports by the Ministry of Public Security of Viet Nam, drug seizure were on significant rise in all types of drugs, particularly, seizure of cocaine emerged since 2014 where no seize of this type happened in 2012 and 2013.

Figure 1: Drug seizures from 2012 to 2015.

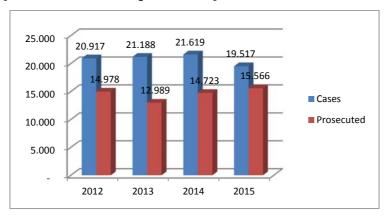
	2012	2013	2014	2015
Heroin (kg)	692.00	940.00	922.00	1,510.00
Synthetic drugs (kg)	192.00	121.38	352.00	983.00
Synthetic drugs (tablets)	500,000.00	365,988.00	297,285.00	696,632.00
Opium	225.00	762.00	32.00	133.80
Cannabis	1,164.00	7,500.00	442.00	4,500.00
Cocaine	-	-	42.60	178.00

Figure 2: Drug seizures increased in all types in 2015



Although number of cases detected in 2015 decreased, however, number of cases prosecuted increased in 2015 compared to three previous years of 2012, 2013 and 2014.

Figure 3: Number of cases detected and prosecuted from 2012 to 2015



# 4.1.2. Drugs and health

As of end of 2015, there were 200,134 registered drug dependent people (reported by the Ministry of Public Security). Among of those, male users accounted for 96% and female users were 4%. In term of age, under 16 years old accounted for 2.2%, 16-30: 47.8% and above 30: 50%.

Figure 4: Drug users increased from 2012 to 2015

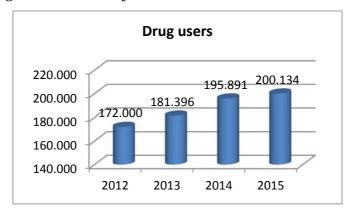


Figure 5: Portion of drug users in gender in 2015

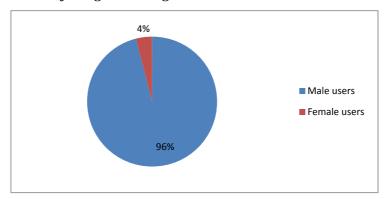
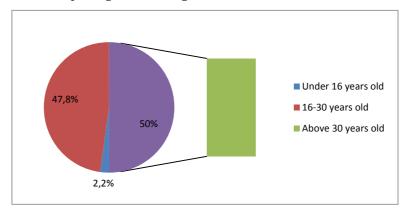


Figure 6: Portion of drug users in age in 2015



Injecting drug use (IDU) is widespread and highly correlates with heroin use. IDU is the major cause of HIV transmission in Vietnam. In 2013, the estimated HIV zero-prevalence among IDUs was 10.3%, a decrease compared to 2012 (11.6%)<sup>31</sup>.

According to the Vietnam Administration for AIDS Control (VAAC), there were 227,154 people living with HIV/AIDS in the country by December 2015<sup>32</sup>. The HIV epidemic remains highly concentrated, with the highest prevalence among men who inject drugs (10.3%).

By March 2016, there were 244 Methadone Maintenance Therapy (MMT) clinics in 57 provinces/cities with 44,479 people receiving treatment<sup>33</sup>.

# 4.1.3. Cultivation of narcotic containing plants

In 2015, 18.5 ha of narcotics plants were eradicated in Viet Nam. Of which, 17.5 hectares of opium poppy were cultivated in 03 Northern mountainous provinces and 01 hectare of cannabis are grown scattily with small scale in provinces of Northern provinces, Central highlands and Mekong Delta. This showed a decreased in comparison to same period of 2012 with 35.5 ha of opium poppy and 5.7 ha of cannabis.

13234/16 JV/np 55
DGD 2C EN

Ministry of Health report on the Results of the National Sentinel Surveillance 2013.

Report of the Vietnam Administration for AIDS Control (VAAC) of the Ministry of Health at the National Conference "Reviewing the HIV/AIDS Prevention and Control Activities 2015".

Ministry of Health, Vietnam AIDS Administration and Control, Harm Reduction Unit, Monthly Report, March 2016.

# 4.2. 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' in June 2011. Following this, in August 2012, the Prime Minister signed the 'National Target Program on Drug Prevention and Control – 2012-2015'. 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 centers (including MMT clinics) and gradually reduce the number of drug users held in compulsory treatment centers ("06 centers"). 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 centers 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 new Penal Code, Criminal Procedure Code have been approved by the National Assembly, unfortunately, there were some chapters/articles still under revisions, therefore, the new Codes will come into effect in coming time.

# 4.3. Update on major bilateral and multilateral counter-narcotics programs

### 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. 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 Outlaw Motorcycle Gangs and their involvement in narcotics trafficking. Heroin remains the most trafficked commodity, the amount of methamphetamine is steady 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 conception 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 into Vietnam, especially via Son La Province, remain of concern for the AFP and increasing the capacity and capabilities of law enforcement in these areas has been identified as a priority. A multi-agency visit should be arranged as an initial step. 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.

# 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.

#### 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.

# **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.

13234/16 59 JV/np DGD<sub>2</sub>C

## 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.

# 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 counternarcotics 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.

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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.

### **UNODC**

UNODC assistance to Viet Nam is provided through global, regional and national projects. The UNODC's Country Program for Viet Nam was signed by the Government of Viet Nam in August 2013. The Programme sets out priorities for cooperation with the Government from 2012-2017 under five sub-programmes:

- Transnational organised crime and illicit trafficking;
- Corruption and anti-money laundering;
- Counter terrorism;
- Criminal justice; and
- Drug demand reduction and HIV/AIDS.

In the area of illicit trafficking, UNODC has helped enhance national capacities through organization of training courses, legal review and provision of office equipment to national agencies. This support has included training courses on anti-smuggling for frontline officers as well as the provision of office and communication equipment under the Border Management Programme, also known as Partnership Against Transnational Crime through Regional Organized Law Enforcement (PATROL) project. In coming time, this programme would support drug and precursors test kits and provide training on how to use these kits to each BLOs.

Under the WCO-UNODC Container Control Programme (CCP), UNODC has supported the Viet Nam Customs to set up two Port Control Units (PCU): one in Hai Phong and one in Vung Tau. 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 CITES, Wastes, STCs. In addition to those, they also took parts in mentoring courses and study tour to other ports in the region.

Through a dedicated program against money laundering, including training on basic investigative techniques, money laundering and financial investigation, the UNODC has helped to increase the capacity of the MPS's Economic Police Department to identify, investigate and prosecute economic crimes and follow the financial flows from organized crime. The UNODC has supported the Government's consultation process for the formulation of National Strategies and Target Programs on drug control and crime prevention, and the National Program against Human Trafficking addressing drugs, crime and illicit trafficking in persons. These documents set priorities for national action against drugs and crime, including establishing robust law enforcement measures, fostering cross border cooperation, addressing newly emerging crimes such as environmental and cybercrime, and strengthening community-based treatment of drug users as an alternative to compulsory treatment. The UNODC aims to address the impact of drug dependence on individuals, families and communities, through diversification of evidence-based, voluntary, drug treatment and care services in communities. UNODC support focussed on the following areas: (1) Capacity building for the substance use disorder workforce by enhancing their knowledge, skills and competency level through the provision of solid foundational understanding of the science of addiction and latest information on evidence-based practices in treatment and intervention as well as by establishing a pool of national master trainers on Universal Treatment Curriculum (UTC) who will later deliver echo trainings to other practitioners in the area of substance use disorders; (2) Improvement of quality of drug dependence treatment and care services particularly through the establishment and operation of the medication assisted recovery support (MARS) program at the Methadone Maintenance Therapy Clinics; and (3) Collection of data and information on substance use disorder treatment facilities nationwide for better planning, monitoring and evaluation. The UNODC is also implementing a project on addressing HIV/AIDS among injecting drug users, including in prisons, and is considering piloting MMT in prisons. Further information on these projects is available upon request.

#### 4.4. 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. Public administration and judicial reform processes in particular need to be promoted, to ensure protection of rights and access to justice for Vietnam's most vulnerable and disadvantaged people.

Mini-Dublin Group members may consider supporting:

- Development of drug law enforcement agencies' interdiction, investigation, and intelligence collection and sharing capabilities in relation to serious criminal trafficking cases;
- Improving drug analysis for forensic agencies to analyse all types of drugs, including impurity profiling and precursors;
- Data analysis to identify trends in drug abuse and seizures;
- Drug prevention activities, with an adequate focus on synthetic drugs;
- Diversification of services for drug users at the provincial level and phasing out of compulsory treatment through closure of 06 centres;
- Capacity building for the substance use disorder treatment and care professional workforce to improve the quality of drug treatment and care services and
- HIV prevention and other harm minimisation measures for injecting drug users, including methadone maintenance therapy.

## 4.5. 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. 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 increasing.

#### 4.6. 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 and international partners in Viet Nam through information sharing, and keeping the group updated on national initiatives to address illicit drugs issues.

13234/16 JV/np 64 DGD<sub>2</sub>C