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Asia and the Pacific

Global SMART Programme

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Patterns and Trends of Amphetamine-Type Stimulants and Other Drugs: Asia and the Pacific 2011

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The Global SMART Programme

UNODC launched the Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme in September 2008. The Programme seeks to enhance the capacity of Member States and authorities in priority regions, to generate, manage, analyse and report synthetic drug information, and to apply this scientific evidence-based knowledge in the design of policies and programmes. The Global SMART Programme is being implemented in a gradual phased manner, with East Asia being the first focus priority region.

This annual report is the third regional situation assessment for East and South-East Asia put forward under the Global SMART Programme. It forms one of the essential key steps in providing consolidated up-to-date analysis, based on the information shared by the member countries. It is hoped that the information on drug trends presented in this report will

make a practical contribution to addressing the significant threat posed by the illicit ATS manufacture, trafficking and use in the East and South-East Asia region, and place policy-makers in a better position to evaluate the drug situation, and to make informed decisions on intervention and prevention strategies.

This report provides an overview of the ATS situation in the region. It outlines several key issues and emerging threats throughout the region and their implications for the neighbouring regions. While the data presented point towards the increased efforts by the countries in the region to tackle the ATS problem, they also highlight the need for continued and joint efforts, both at the national as well as regional levels. It is hoped that this report and the forthcoming national and regional updates will increase understanding of the ATS problem and in designing effective strategies to combat it.

Abbreviations

ACC	Australian Crime Commission
ACCORD	ASEAN and China Cooperative Operations in Response to Dangerous Drugs
ADK	National Anti-Drugs Agency (Malaysia)
ADLOMICO	Anti-Drug Liaison Officials' Meeting for International Cooperation
AFP	Australian Federal Police
AFSN	The Asian Forensic Sciences Network
AGCMEO	Singapore Attorney General's Chambers and Managing for Excellence Office
AIC	Australian Institute of Criminology
AIDS	Acquired Immune-Deficiency Syndrome
AIHW	Australian Institute of Health and Welfare
ANCD	Australian National Council on Drugs
ANF	Anti-Narcotics Force (Pakistan)
APAIC	Asia Pacific Amphetamine-Type Stimulants Information Centre
ARQ	Annual Reports Questionnaire
ASEAN	Association of South-East Asian Nations
ATS	Amphetamine-type stimulants
Bk-MBDB	Butylone, also known as β -keto-N-methylbezodioxolylpropylamine
BKN	Narcotics Control Bureau (Brunei Darussalam)
BNN	National Narcotics Board (Indonesia)
BMK	Benzyl methyl ketone (P-2-P)
BZP	Benzylpiperazine
CCDAC	Central Committee for Drug Abuse Control (Myanmar)
CDCP	Centers for Disease Control and Prevention (United States)
CECVT	Centre for Education, Correction and Vocational Training
CID	Criminal Investigation Division Directorate (Indonesia)
CNB	Central Narcotics Bureau (Singapore)
CNP	Cambodian National Police
CRDA	The Central Registry of Drug Abuse (Hong Kong, China)
CSI	Criminal Scientific Institute of Vietnam
DAINAP	Drug Abuse Information Network for Asia and the Pacific
DDB	Dangerous Drugs Board (Philippines)
DEA	Drug Enforcement Administration (USA)
DNC	Department of Narcotics Control (Bangladesh)
DOCMJHR	Directorate of Corrections, Ministry of Justice and Human Rights (Indonesia)
DRC	Drug Rehabilitation Center
DUMA	Drug Use Monitoring System (Australia)
DXM	Dextromethorphan
EDRS	Ecstasy and related Drugs Reporting System (Australia)
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
ESR	Institute of Environmental Science and Research (New Zealand)
GBL	Gamma-butyrolactone
GHb	Gamma-hydroxybutyrate
GMS	Greater Mekong Subregion (comprises Cambodia, Lao PDR, Myanmar, Thailand, Viet Nam as well as Yunnan and Guangxi provinces in China)
HIV	Human Immunodeficiency Virus
HKNB	Narcotics Bureau, Hong Kong Police
HONLAP	Heads of National Drug Law Enforcement Agencies, Asia and the Pacific
HONLEA	Heads of National Drug Law Enforcement Agencies
IDMS	Illicit Drug Monitoring System (New Zealand)

IDRS	Illicit Drug Reporting System (Australia)
IDUs	Injecting drug users
IFS	Institute of Forensic Science (Viet Nam)
INCB	International Narcotics Control Board
INCSR	International Narcotics Control Strategy Report
INP	Indonesian National Police
Interpol/ICPO	International Criminal Police Organization
JCITC	Japan Customs Intelligence and Targeting Centre
JWH-018	1-pentyl-3-(1-naphthoyl)indole
KFDA	Korean Food and Drug Administration
LCDC	Lao National Commission on Drug Control and Supervision
LSD	Lysergic acid diethylamide
MBDB	N-Methyl-1-(3,4-methylenedioxyphenyl)-2-butanamine
mCPP	m-chlorophenylpiperazine
MCRP	Mitsampan Community Research Project (Thailand)
MDA	3,4-Methylenedioxyamphetamine (tenamfetamine)
MDE	3,4-Methylenedioxyethylamphetamine
MDMA	3,4-Methylenedioxymethamphetamine
MOH	Ministry of Health
MOHNZ	Ministry of Health (New Zealand)
MOLHW	Ministry of Health, Labour and Welfare (Japan)
MOLISA	Ministry of Labour, Invalids and Social Affairs (Viet Nam)
MPS	Ministry of Public Security (Viet Nam)
NAC	National AIDS Commission (Indonesia)
NACD	National Authority for Combating Drugs (Cambodia)
NADA	National Anti-Drug Agency (Malaysia)
NAPAC	National AIDS Prevention and Alleviation Committee (Thailand)
NCB	Narcotics Control Bureau (Brunei Darussalam)
NCCA	National Committee for the Control of AIDS (Lao PDR)
NCHADS	National Center for HIV/AIDS, Dermatology and STIs for Cambodia
NDARC	National Drug and Alcohol Research Centre (Australia)
NDCLEU	Narcotic Drugs Control Law Enforcement Unit (Nepal)
NDDCB	National Dangerous Drugs Control Board (Sri Lanka)
NDIB	National Drug Intelligence Bureau (New Zealand)
NDSHS	National Drug Strategy Household Survey (Thailand)
NGO	Non-governmental organization
NNB	National Narcotics Board Indonesia
NNCC	National Narcotics Control Commission (China)
NPA	National Police Agency (Japan)
NSB	Narcotics Suppression Bureau, Royal Thai Police
NZG	New Zealand Government
OCO	Oceania Customs Organisation
OECD	Organization for Economic Co-operation and Development
ONCB	Office of the Narcotics Control Board (Thailand)
P-2-P	1-Phenyl-2-propanone (BMK)
PAG	Policy Advisory Group (New Zealand)
PCDC	Provincial Committee for Drug Control (Lao PDR)
PDARN	Pacific Drug and Alcohol Research Network
PDEA	Philippine Drug Enforcement Agency
PDR	Lao People's Democratic Republic
PIFS	Pacific Island Forum Secretariat
PMK	3,4-Methylenedioxyphenyl-2-propanone (3,4-MDP-2-P)

PNAC	Philippine National AIDS Council
RMP	Royal Malaysian Police
SACP	Substance Abuse Control Project (Myanmar)
SAR	Special Administrative Region
SMART	Global Synthetics Monitoring: Analyses, Reporting and Trends
SODC	Standing Office on Drug and Crime (formerly Standing Office on Drugs Control) (Viet Nam)
SPO	Supreme Prosecutors' Office (Korea)
SRO	Safrole-rich oils
STI	Sexually transmitted infections
TFMPP	3-trifluoromethylphenyl-piperazine
UAE	United Arab Emirates
UN	United Nations
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNGASS	United Nations General Assembly Special Session
UNODC	United Nations Office on Drugs and Crime
USD	United States dollar
USDOJ	United States Department of Justice
VMOH	Vanuatu Ministry of Health
WHO	World Health Organization
2C-B	4-Bromo-2,5-dimethoxyphenethylamine (Nexus)
2C-D	2,5-dimethoxy-4-methyl-phenethylamine
2C-T-2	4-Ethylthio-2,5-dimethoxyphenethylamine
4-MEC	4-methylethcathinone
4-MMC	4-methylmethcathinone

Weights and Measurements

g	gram
kg	kilogramme
lt.	litre
mg.	milligramme
ml.	millilitre
mt	metric ton

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Notes to the Reader

This report has not been formally edited.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Countries and areas are referred to by the names that were in official use at the time the relevant data were collected.

The following notes describe certain terms, regional designations, data sources and timeframes used throughout this document.

ATS – Amphetamine-type stimulants (ATS) are a group of substances comprised of synthetic stimulants including amphetamine, methamphetamine, methcathinone, and ecstasy-group substances (e.g., MDMA and its analogues).

In various sections of this report, amphetamine and methamphetamine are also referred to as amphetamines-group substances. In cases where countries report to UNODC without indicating the specific ATS they are referring to, the term non-specified amphetamines is used. Tablets which are marketed to contain an ecstasy-group substance, but may actually contain a variety of other substances, are referred to as ‘ecstasy’.

Data sources – The data contained in the national reports section of this publication were obtained primarily through DAINAP.

Drug use ranking and trends – The national trend tables of drugs used in the past year are based on informed decisions by government experts ranking the drugs of highest use prevalence or of greatest national concern, the perceived trend in use of those drugs, and the perceived street availability of those drugs during 2010 or the latest year available. While it should be noted that this information represents an expert opinion that may not necessarily be grounded in empirical research, certain trends are often known by experts in the field long before these facts are revealed by quantitative data or survey results. Trends and drug use rankings are independent, therefore, an upward trend in the use of a particular drug does not necessarily result in an upward change and vice versa.

Data time-frame – Drug trend data contained in this report cover the 2006-2010 period, except in instances where a longer historical timeframe is necessary to provide a clear explanation of particular drug trends. Data are subject to change for a variety of reasons, such as new or late data being added or revisions in data already provided by Member States. Thus, some figures may differ from previously published figures. All data reported herein reflect the most up-to-date and accurate information available at the time of writing.

Symbols – In the tables throughout this report in which a ‘rank’ is given, the numeration begins with 1 (one) which denotes the most common drug, and the highest number in the series represents the least common. In addition, arrows indicate an increase or

Several of the most popular ATS street names

Crystalline methamphetamine – yaba or yama chakk (injectable) in Cambodia; bindu in China; shabu in Indonesia, Japan and the Philippines; anpon, philopoon (liquid) and speed in Japan; ‘P’ in New Zealand; bato, sha, and siopao in the Philippines; and ice in Australia, Cambodia, Japan, and Thailand.

Methamphetamine pills – yama in Cambodia, Lao PDR, and Myanmar; yaba in Cambodia, Lao PDR, and Thailand; bingdu pian in China; and seik kwyay say and myin say in Myanmar.

Ecstasy – thnam krovee kbai (shake-head drug) in Cambodia; yao tou ubin (head-shaking pill) in China; XTC in Indonesia; ya-E in Lao PDR and Thailand; X in Japan; gaung khar say (head-shaking pill) in Myanmar; XTC and love drug in the Philippines; ya-love in Thailand; and shaking pill in Viet Nam.

decrease in the trend of use or availability of a specified drug during the previous year - (↑) an increase, (↓) a decrease, and (↔) a stable trend. The symbol, '•' indicates that the information is not available, not known, or was not reported.

Country names and geographical terms – The term 'region' unless specified, generally refers to the geographical area that includes the countries and territories in East and South-East Asia (Brunei Darussalam, Cambodia, China (including Hong Kong, Macao and Taiwan Province of China), Indonesia, Japan, Republic of Korea, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam). Lao People's Democratic Republic is denoted as Lao PDR.

Terms – As there is some scientific and legal ambiguity about the distinctions between drug 'use', 'misuse' and 'abuse', efforts have been made to use the term 'use' throughout the document.

Trade names – The trade names under which licit drugs and medicines are sold in the market, and which are mentioned in the report, are not intended to be a pejorative connotation.

Maps – The boundaries and names shown and the designations used on maps do not imply official endorsement or acceptance by the United Nations.

Seizures of illicit drugs – Data related to seizures of ATS, their precursors and clandestine laboratories are subject to change for a variety of reasons, such as new or late data being added or revisions in data already provided by Member States. Thus, some figures may differ from previously published figures. All data reported herein reflect the most up-to-date and accurate information available at the time of writing.

Executive Summary

The East and South-East Asia region, which is home to about one-third of the global population, has one of the most established amphetamine-type stimulants (ATS) markets in the world, primarily for methamphetamine. Since the late 1990s, the illicit manufacture, trafficking and use of ATS have expanded significantly in the region. These trends continued in 2010.

The present report highlights the most current patterns and trends of amphetamine-type stimulants and other drugs of use in East and South-East Asia and provides overviews for the neighbouring regions of South Asia and the Pacific. This is the latest in a series of reports prepared under the Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme. The objective of the Global SMART Programme is to enhance the capacity of Member States and relevant authorities to generate, manage, analyse, report and use synthetic drug information, in order to design effective, scientifically-sound and evidence-based policies and programmes.

The findings of the report are based on primary information submitted by the drug control agencies and designated institutions in Brunei Darussalam, Cambodia, China, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand and Viet Nam, via the Drug Use Information Network for Asia and the Pacific (DAINAP) established through the Global SMART Programme. Information from DAINAP is supplemented with data from other Government sources such as national reports, the Annual Reports Questionnaire, and through primary and secondary research. Australia, Japan, New Zealand and Republic of Korea also provided data to the Global SMART Programme for this report.

All 15 countries that contributed to this report reported significant levels of ATS use. In several of those countries, ATS drugs, particularly methamphetamine (in pill or crystalline form), have emerged as the primary drug threat in recent years, in some cases displacing traditionally used plant-based drugs such as heroin, opium or cannabis. It is estimated that between 3.5 and 20.9 million persons in East and South-East Asia have used amphetamines in the past year.

ATS are used because they are perceived to enhance work performance; they are affordable; and many users

perceive them as not being very harmful to health. On the supply side, ATS are attractive because of their high profits – with little investment, hugely profitable quantities of drugs can be manufactured; they can be made from a variety of starting materials or precursor chemicals; they can be manufactured in any geographic location and require minimal space.

The manufacture of ATS is not geographically limited, and most ATS laboratories tend to be located close to the illicit ATS market. East and South-East Asia has become a centre for the illicit manufacture of ATS, particularly since 2006. Precursor chemicals used in the illicit manufacture of methamphetamine are often easily obtainable. Trafficking routes for ATS continue to evolve, and new players, many from organized criminal groups based outside of the region, are becoming increasingly involved in the ATS trade.

Although improvements have been made in the region in terms of data generation, analysis and sharing as well as forensic capacity, considerable challenges remain in order to assess the full extent of the security and health implications of illicit manufacture, trafficking and use of ATS in the region.

Based on data submitted for the years 2009 and 2010, the following observations are made in the report:

- **Increasing ATS use was reported from most countries in East and South-East Asia.** Since 2009, ATS have ranked in the top three drugs of use in all countries in the region. Reported use of methamphetamine showed an increase in ten countries, whereas methamphetamine use was reported as stable or declining in Australia, Japan, New Zealand, Philippines and the Republic of Korea.
- **The illicit manufacture of ATS continued at high levels in the region.** In 2010, some 442 ATS-related manufacturing facilities were seized in East and South-East Asia, most of which were manufacturing amphetamines-group substances. Significant quantities of ATS continued to be illicitly manufactured in China, Myanmar and the Philippines. Illicit ATS manufacture continued to expand in countries which were previously primarily transit countries for ATS, such as Cambodia, Indonesia and Malaysia. Limited and small-scale illicit ATS

manufacture was reported from Japan, the Republic of Korea and Thailand.

- **Diversification of pharmaceutical preparations containing pseudoephedrine for the manufacture of methamphetamine continued in the region.** Since 2008, significant quantities of pharmaceutical preparations have been seized in Cambodia, Myanmar and Thailand. Thailand's Office of the Narcotics Control Board estimates that at least 100 million pseudoephedrine preparations destined for illicit methamphetamine manufacturing sites in Cambodia and Myanmar transited the country in 2010.
- **Transnational organized criminal groups from Africa and the Islamic Republic of Iran continue to be involved in the trafficking of methamphetamine to East and South-East Asia.** The trafficking of methamphetamine by African groups has been officially reported by China, Cambodia, Indonesia, Japan, Malaysia, Philippines, Thailand and Viet Nam. Similarly, nationals of the Islamic Republic of Iran have been arrested for their involvement in the trafficking of crystalline methamphetamine in several countries in the region, including Japan, Indonesia, Malaysia, Philippines and Thailand.
- **Seizures of methamphetamine pills increased again in 2010.** The number of methamphetamine pills seized in the region increased substantially for the second consecutive year in 2010. A total of nearly 136 million pills was seized in 2010, representing a 44% increase from the 94 million pills seized in 2009 and a greater than four-fold increase compared with 2008 (32 million). Most pills were seized in China (58.4 million), Thailand (50.4 million) and Lao PDR (24.5 million), which account-

ed for 98% of the total number of methamphetamine pills seized in the region in 2010.

- **Lao PDR is vulnerable to international drug trafficking networks.** Increasing quantities of methamphetamine appear to have been trafficked through Lao PDR to neighbouring Cambodia, Thailand and Viet Nam in recent years. Lao PDR's remote and sparsely populated mountainous borderlands (adjacent to major ATS manufacturing sites in Myanmar) where law enforcement capacity is limited, make the country vulnerable to the displacement of methamphetamine manufacturing facilities from Myanmar.
- **Ecstasy manufacture and use** in East and South-East Asia is declining, reflecting the global trend.
- **Arrests and drug treatment demand** related to methamphetamine continued to show an upward trend.
- **The transmission of blood-borne diseases, including HIV,** through the injecting use of methamphetamine remains a risk in the region.
- **The neighbouring regions of South Asia and the Pacific Island States and territories** are vulnerable to the expansion of illicit ATS manufacture, trafficking of ATS, and the diversion of precursor chemicals, particularly ephedrine and pseudoephedrine, often in the form of pharmaceutical preparations. Moreover, in the absence of formal drug surveillance systems or comprehensive illicit drug assessments, either nationally or regionally, the nature and extent of the ATS situation in these two regions are not fully understood.

Background

Since the late 1990s, the use of amphetamine-type stimulants (ATS), such as methamphetamine and ecstasy, has been one of the most significant drug problems worldwide. The most recent global estimates of past year use of amphetamine-group substances exceed that of heroin and cocaine users, combined. Unlike cocaine and heroin, ATS can be manufactured anywhere, and since 1990 more than 65 countries worldwide have reported at least some ATS-related manufacture. Because of cheap and easy ways to manufacture the drugs, more countries are added to the list each year. ATS in East and South-East Asia have become the leading drugs of use and concern, replacing heroin, cannabis and opium which until a decade ago were the drugs that dominated the regional illicit market.

The primary ATS of use in East and South-East Asia are methamphetamine and, to a much lesser extent, ecstasy. Methamphetamine is a white, odourless, bitter-tasting crystalline powder that dissolves easily in water or alcohol. It is available as a powder or in crystalline form and may be presented as a pill or tablet. It can be ingested, smoked, snorted, sniffed and injected.

Ecstasy (MDMA) has the psychoactive action of both a stimulant and a hallucinogen and it is ingested almost exclusively in pill or tablet form. Use of ecstasy originated among teens and young adults at raves or night-long dance parties in Europe. However, use of the drug has expanded in recent years to include varied social settings and diverse demographic subgroups throughout the world. Manufacture of this drug has also spread, moving from more traditional locations in Western Europe closer to often young and lucrative consumer markets across the world.

Risk and protective factors for initial and progressive use of drugs are influenced by a wide range of social and behavioral factors. The use of certain ATS and other drugs has been sufficiently prevalent among middle and upper class youths and young adults in bars and discos, such that the phrase 'club drugs' became a term of reference. Research has documented that the groups at particularly high risk are marginalized youth, especially the homeless. In addition, workers in low-paying, labour-intensive jobs and those whose wages depend on working long hours have greater vulnerability to problem drug use, as do sex workers, including bar and karaoke workers and hostesses.

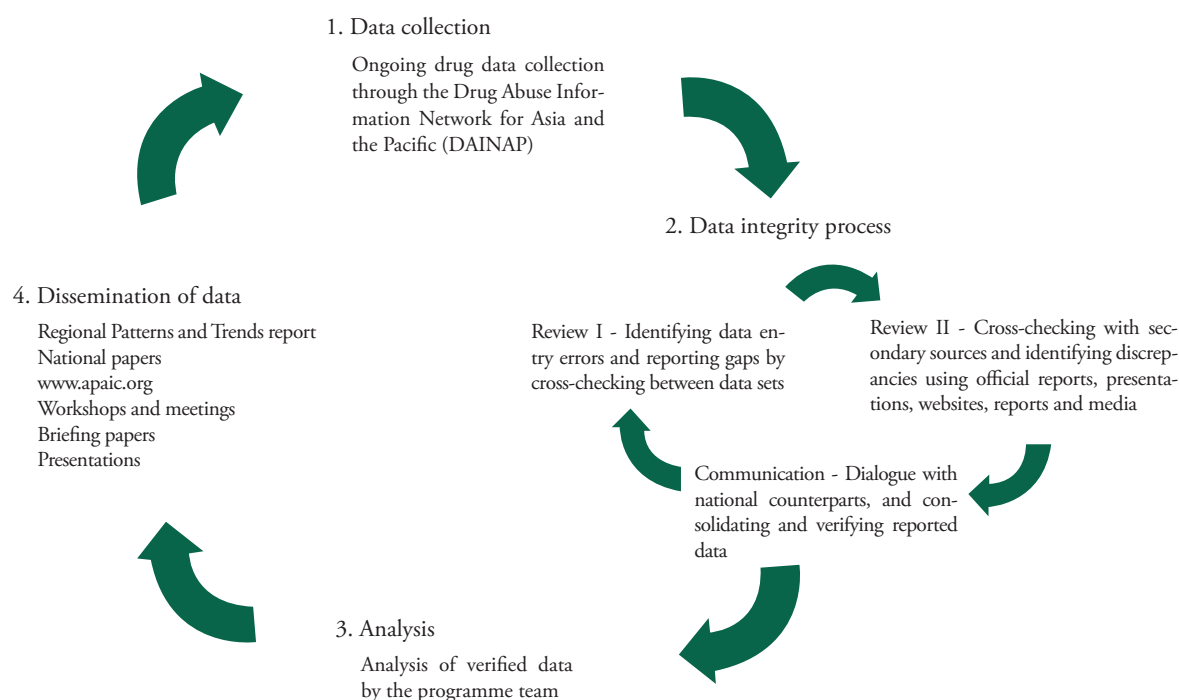
Method

The United Nations Office on Drugs and Crime established the Global SMART Programme in September 2008, to assist Governments in the establishment or strengthening of drug monitoring systems. This kind of support involves knowledge transfer in understanding and implementation of information systems, and training in the collection, collation and communication of data on drug use patterns and trends. An end-point to the provision of individual country assistance in data development is the organization of the national information into a standardized reporting format for the region and the implementation of a regional drug use surveillance network among countries participating in the programme.

The Global SMART Programme builds on mechanisms and lessons learned from a previous project on Improving ATS Data and Information Systems, established in 2002 and implemented by the UNODC Regional Centre for East Asia and the Pacific. Through consensus among the participating Member States, a minimum data set – aligned with UNODC Annual Reports Questionnaire (ARQ) – was developed. Data collection focuses on national trends, treatment and health-related information, and law enforcement data and is uploaded by Member States into the Drug Abuse Information Network for Asia and the Pacific (DAINAP).

DAINAP, initiated in May 2005, is an internet-based drug use information system which integrates data collection efforts of two major UNODC projects, i.e. Improving ATS Data and Information Systems, cited above, and the Regional Cooperative Mechanism to Monitor and Execute the ACCORD Plan of Action. DAINAP enhances both the timeliness and ease of data submission as well as improved efficiency and quality control of the information submitted. It has also provided a mechanism for communication among the national counterparts themselves. Key to the success of the SMART Programme is the effort that has gone into developing and implementing operational activities which ensure that the most accurate and up-to-date information is obtained from national data systems and to assist in the further development of those systems. The flow chart shown in Figure 1 outlines the data quality and integrity controls that have been implemented to achieve that objective.

Figure 1. Data integrity process



The capabilities of countries in the region to collect, compile, and disseminate accurate and timely data on the current drug use situation vary greatly. Some countries have sophisticated and well-funded data systems, research infrastructures, and survey programmes, while data collection activities in others are relatively basic due to various reasons including a lack of resources. The Global SMART Programme provides valuable assistance to a number of countries in the region in efforts to improve their data collection

capabilities. In addition to oversight of the regional surveillance, another aim of the Global SMART Programme is the development and maintenance of a comprehensive clearinghouse of ATS information. A complete description of the background, activities, and objectives, as well as other clearinghouse information, can be viewed on the Asia and Pacific Amphetamine-Type Stimulants Information Centre (APAIC) website at: www.apaic.org.

Regional Trends

East and South-East Asia
Pacific Island States and territories
South Asia



Regional Trends: East and South-East Asia

Summary, emerging trends and concerns

- Increasing ATS use is reported from most countries in East and South-East Asia.
- The illicit manufacture of ATS continues at high levels in the region.
- Diversion of pharmaceutical preparations for the manufacture of methamphetamine continues in the region.
- Transnational organized criminal groups from West Africa and the Islamic Republic of Iran continue to be involved in the trafficking of methamphetamine.
- Seizures of methamphetamine pills increased again in 2010.
- Ecstasy manufacture and use in East and South-East Asia is declining.
- The Lao People's Democratic Republic is vulnerable to international drug trafficking networks.
- Arrests and drug treatment demand related to methamphetamine show an upward trend.
- The transmission of blood-borne diseases, including HIV, through the injecting use of methamphetamine remains a risk in the region.

Regional trends: East and South-East Asia¹

For the past two decades, the use of amphetamine-type stimulants (ATS) has been one of the most significant drug problems worldwide. The World Drug Report 2011 estimates that globally, the number of persons between the ages of 15 and 64 years who used amphetamines-group substances at least once in 2009 was between 14 and 56 million, while the number of ecstasy users was between 11 and 28 million persons. East and South-East Asia is the region with the greatest number of past year ATS users in the world, with methamphetamine being the drug of choice for most users.

The first part of this chapter highlights the key emerging trends and concerns related to ATS and other drugs in the region. The second part of the chapter presents detailed data related to the use, manufacture, law enforcement and health dimensions of ATS and other primary drugs of use in the East and South-East Asia region.

¹ Although this chapter focuses in detail on the trends in the East and South-East Asia region, a summary of trends in Australia and New Zealand is also included. Detailed information for all countries is available in the individual country chapters.

1. Increasing ATS use is reported from most countries in East and South-East Asia. Use of ATS has overtaken the use of plant-based drugs in several countries over the past few years, and ATS now rank in the top three drugs of use in all countries in the region. In addition, reported use of methamphetamine shows an increase in ten countries whereas methamphetamine use is reported as stable or declining in Australia, Japan, New Zealand, Philippines and the Republic of Korea.

Use of methamphetamine pills ('yaba') is largely confined to countries within the Greater Mekong Subregion (Cambodia, China, Lao PDR, Myanmar, Thailand and Viet Nam) as well as Malaysia. All the above countries reported an increase in the use of methamphetamine pills in 2010. Methamphetamine in pill form is the primary drug of use in Cambodia, Lao PDR and Thailand and the secondary drug of use in China and Viet Nam.

Use of crystalline methamphetamine has become more widespread throughout the region, expanding into countries which did not previously report its use, such as Viet Nam, Brunei Darussalam, Cambodia, China, Indonesia, Malaysia, Singapore, Thailand and Viet Nam reported increasing use of

crystalline methamphetamine in 2010. Crystalline methamphetamine is the most commonly used drug in Brunei Darussalam, Indonesia, Japan, Philippines and the Republic of Korea. In Thailand, crystalline methamphetamine use has expanded considerably. In 2010, an estimated 4.3% of all drug users reported using crystalline methamphetamine, about double the percentage of estimated crystalline methamphetamine users in 2009 and nearly four times higher than the figure for 2006.

2. The illicit manufacture of ATS continues at high levels in the region. In 2010, some 442 ATS-related laboratories were seized in East and South-East Asia, most of which were manufacturing amphetamines-group substances. This figure represents a slight decrease from the number of illicit ATS manufacturing facilities seized in 2009, but is more than five times higher than the number of illicit manufacturing facilities seized in 2006 (83).

One trend that has emerged during the past few years is the expansion of illicit ATS manufacture in countries which have hitherto been primarily transit countries for ATS, such as Cambodia, Indonesia and Malaysia. Cambodia reported the seizure of 11 illicit laboratories for manufacturing ATS and their precursor chemicals in 2010. Indonesia reported the dismantling of 26 illicit ATS laboratories in 2010, including large and small-scale crystalline methamphetamine and ecstasy manufacturing facilities. Malaysia reported the seizure of 16 illicit ATS facilities in 2010, including six large-scale methamphetamine laboratories. In addition, Malaysia seized one large illicit ketamine manufacturing facility during the year. The expansion of crystalline methamphetamine manufacture in the region is reflected by the substantial increase (44%) in seizures of the drug in 2010 (6.9 mt) compared with the amount seized in 2009 (4.8 mt).

China continued to report high levels of illicit ATS manufacture in 2010, with 378 illicit synthetic drug manufacturing facilities seized during the year. Illicit manufacture has expanded from the southern coastal areas of China to northern and central areas of the country. In the Philippines, illicit methamphetamine manufacture has shifted in recent years from large and medium-sized facilities to smaller so-called 'kitchen-type' laboratories in metropolitan areas.

Myanmar remains a major source of methamphetamine pills found in the region but crystalline meth-

amphetamine is also manufactured in the country. Several kitchen-type manufacturing facilities have been dismantled in Thailand. Japan, which had not reported any domestic ATS manufacture since 1995, reported several incidents of illicit ATS manufacture in 2010, suggesting a possible risk of expanding domestic manufacture. The Republic of Korea has reported limited illicit methamphetamine manufacture during the past two decades; in 2010, however, authorities reported the seizures of four small-scale illicit crystalline methamphetamine manufacturing facilities.

In Australia, 602 illicit ATS manufacturing facilities were dismantled in 2010, the highest number on record. New Zealand dismantled 130 illicit manufacturing laboratories in 2010, primarily for methamphetamine or the extraction of pseudoephedrine, a slight decrease compared to the 135 laboratories dismantled in 2009.

3. Diversion of pharmaceutical preparations for the manufacture of methamphetamine continues in the region. As a result of strengthened controls over ephedrine and pseudoephedrine, traffickers have resorted to diverting pharmaceutical preparations containing ephedrine or pseudoephedrine and then extracting the active ingredients for illicit methamphetamine manufacture. Many countries in the region have seized large quantities of pharmaceutical preparations. In Cambodia, approximately 19.3 million pharmaceutical preparations containing pseudoephedrine were seized in 2010. Of those, some 12.9 million tablets originating from the Republic of Korea were seized in a single operation. Thailand's Office of the Narcotics Control Board estimates that at least 100 million pseudoephedrine preparations transited the country to Cambodia and Myanmar in 2010. In 2010, 33.4 million pharmaceutical preparations containing pseudoephedrine were seized in 13 separate cases in 2010. In Myanmar, 23.6 million tablets of pharmaceutical preparations containing pseudoephedrine have been seized since 2008, including 4.4 million tablets in 2010.

Australia and New Zealand are affected by the diversion of pharmaceutical preparations containing ephedrine or pseudoephedrine. In Australia, 44 illicit laboratories in 2009-2010 which were ephedrine or pseudoephedrine extraction operations were dismantled and 556 kg of the two substances were detected at the border. New Zealand reported the seizure of a total of approximately 4.3 million pill equivalents of

ephedrine and pseudoephedrine in 2010. The primary product precursor encountered by Customs in New Zealand is ContacNT[®], a pharmaceutical preparation containing pseudoephedrine, which is mainly sourced from China. In addition, pseudoephedrine extraction laboratories were reported seized in New Zealand during the year.

4. Transnational organized criminal groups from Africa and the Islamic Republic of Iran continue to be involved in the trafficking of methamphetamine. Over the past few years these drug trafficking groups have targeted several countries in East and South-East Asia. African criminal organizations, which used to engage primarily in cocaine and heroin trafficking, have now diversified into ATS trafficking. African groups are involved in trafficking crystalline methamphetamine, ecstasy and heroin into Indonesia, and have used Cambodia as a centre for financial transactions and for the distribution of illicit drugs to Indonesia. In Japan, the proportion of seized methamphetamine that was trafficked into the country from Africa increased from 7.4% in 2009 to 36% in the first half of 2010. In Malaysia, the number of African couriers arrested almost doubled, from 35 in 2009 to 65 in 2010, including 50 Nigerian nationals. To avoid detection, African drug trafficking organizations have diversified their methods by using couriers from countries in the Middle East, Eastern Europe and Asia and by diversifying their trafficking routes. In the Philippines, 23 foreign nationals associated with African drug trafficking organizations were arrested from January 2010 through June 2011. African drug couriers have also been arrested in Cambodia, China and Thailand.

Trafficking of crystalline methamphetamine by groups from the Islamic Republic of Iran was identified as a significant threat throughout the region in 2009. A total of 228 couriers from the Islamic Republic of Iran were arrested in Malaysia in 2009-2010 for attempting to smuggle crystalline methamphetamine. Japan has reported the arrests of 135 Iranian nationals (50 in 2010, 85 in 2009). Other countries reporting such arrests include Thailand (75 persons in 2010, 12 in 2009) and Indonesia (27 persons in 2010, 25 in 2009).

There are also indications that Iranian drug organizations have attempted to establish illicit ATS manufacturing operations in Malaysia and Thailand.

5. Seizures of methamphetamine pills increased again in 2010. The number of methamphetamine pills seized in the region increased substantially for the second consecutive year in 2010. A total of nearly 136 million pills were seized in 2010, representing a 44% increase from the 94 million pills seized in 2009 and a greater than four-fold increase compared with 2008 (32 million). Most pills were seized in China (58.4 million), Thailand (50.4 million) and Lao PDR (24.5 million), which accounted for 98% of the total. The largest increases in methamphetamine pill seizures in the region were reported from Lao PDR (ten-fold increase), Thailand (89%) and China (69%). Myanmar, where most pills are manufactured, reported the seizure of only 2.2 million methamphetamine pills in 2010, which represents just under one-tenth of the number of pills seized during the previous year (23.9 million). This may reflect the fact that traffickers are deliberately avoiding trafficking methamphetamine directly to Thailand along the overland route and instead smuggling larger amounts out of the country through Lao PDR and along the Mekong River into Thailand.

6. Ecstasy manufacture and use in East and South-East Asia is declining. Reported ecstasy use has shown a stable or declining trend in most countries in the region over the past few years, reflecting the global trend. Ecstasy continues to be manufactured in the region, particularly in Indonesia, and, to a far lesser extent, Malaysia. Continuing high levels of illicit ecstasy manufacture in Indonesia indicate that the country is possibly replacing Europe as the primary source of ecstasy in East and South-East Asia.

In addition, many of the seized drugs marketed on the street as 'ecstasy' in the region contain psychoactive substances other than MDMA,² such as ketamine or methamphetamine. The number of ecstasy pills seized in the region in 2010 increased slightly over the previous year but remained far below figures from early in the decade. In Viet Nam, one ecstasy pill re-pressing operation was seized in 2008, although there are indications that ecstasy re-pressing is taking place on a wider scale in the country.

7. The Lao People's Democratic Republic is vulnerable to international drug trafficking networks. Increasing quantities of methamphetamine appear to have been trafficked through Lao PDR to

² 3,4-methylenedioxymethamphetamine, or one of its related analogues.

neighbouring Cambodia, Thailand and Viet Nam in recent years. As has previously been seen in Indonesia, Malaysia and Cambodia, transit countries for illicit drugs often rapidly develop illicit drug use and manufacture problems. Lao PDR already has an established and expanding domestic ATS market. In addition, the country's location (adjacent to major ATS manufacturing sites in Myanmar) and its remote and sparsely populated mountainous borderlands, where law enforcement capacity is limited, make the country vulnerable to the displacement of methamphetamine manufacturing facilities from Myanmar. Although no ATS manufacture has been reported from Lao PDR, transnational drug trafficking networks, including groups from Myanmar, are well established in the country.

8. Arrests and drug treatment demand related to methamphetamine show an upward trend.

Methamphetamine-related arrests in East and South-East Asia have increased each year since 2004. In 2010, nearly 218,000 arrests in the region involved methamphetamine, a 19% increase from the previous year. In 2010, methamphetamine accounted for roughly 70% or more of all drug-related arrests in Brunei Darussalam (87%), Japan (83%), Philippines (77%), the Republic of Korea (70%) and Thailand (80%). The large majority of the persons arrested were drug users. In several countries in the region, arrested drug users are sent to compulsory drug treatment facilities, most of which do not provide ATS-specific treatment services. Most drug treatment services in the region are aimed at users of heroin, opium and cannabis. ATS were the primary drugs of use for 44% of all persons in treatment in 2010. During the year, of all persons in drug treatment in the Philippines, 60% were crystalline methamphetamine users. In Thailand, 84% were methamphetamine pill users. Most persons who underwent drug treatment in Cambodia used methamphetamine in pill and crystalline form. In Brunei Darussalam and the Republic of Korea, more than 98% of all persons in drug treatment used crystalline methamphetamine.

9. The transmission of blood-borne diseases, including HIV, through the injecting use of methamphetamine remains a risk in the region.

Although the level of injecting methamphetamine use remains at far lower levels than the injecting use of heroin in the region, there are indicators which suggest that injecting drug users are increasingly injecting methamphetamine. This poses a particular

risk in countries which have concentrated HIV epidemics, some of which are being driven largely by the unsafe injection of drugs. Of the population living with HIV in Indonesia, an estimated 28% are injecting drug users (IDUs). In addition, an estimated one half of all IDUs in the country are infected with HIV. Injection is the second most common mode of administration for crystalline methamphetamine in Indonesia. In Thailand, injection is the second most common mode of administration for crystalline methamphetamine and the third most common mode for methamphetamine pills. The estimated HIV prevalence among IDUs in Thailand was 48-52% during the 2008-2009 period.

In Malaysia, there are some indications that injecting use of methamphetamine is taking place, although no injecting methamphetamine users have been registered in drug treatment facilities. However, injecting drug use is reported as the primary mode of HIV transmission. Cumulative reported cases of HIV transmission in Malaysia have been predominantly through drug use (71.6% of all HIV cases). The injecting use of methamphetamine was first reported in Lao PDR in 2008, although this practice remains limited in the country. In Singapore, injection is the secondary mode of administration for crystalline methamphetamine.

Methamphetamine

Methamphetamine use – All countries in the region report the use of methamphetamine, with 11 countries reporting it as the primary or secondary drug of use. Seven countries reported the use of methamphetamine pills while all but two countries (Lao PDR and Myanmar) reported the use of crystalline methamphetamine.

Crystalline methamphetamine has become more widespread across the region. In 2010, increasing use of crystalline methamphetamine was reported by Government experts in Brunei Darussalam, Cambodia, China, Indonesia, Malaysia, Singapore, Thailand and Viet Nam.

In Australia, Japan, New Zealand and the Republic of Korea, methamphetamine use has shown stable or declining trends over the past few years. Methamphetamine in crystalline form is the most common form of the drug in Japan and the Republic of Korea

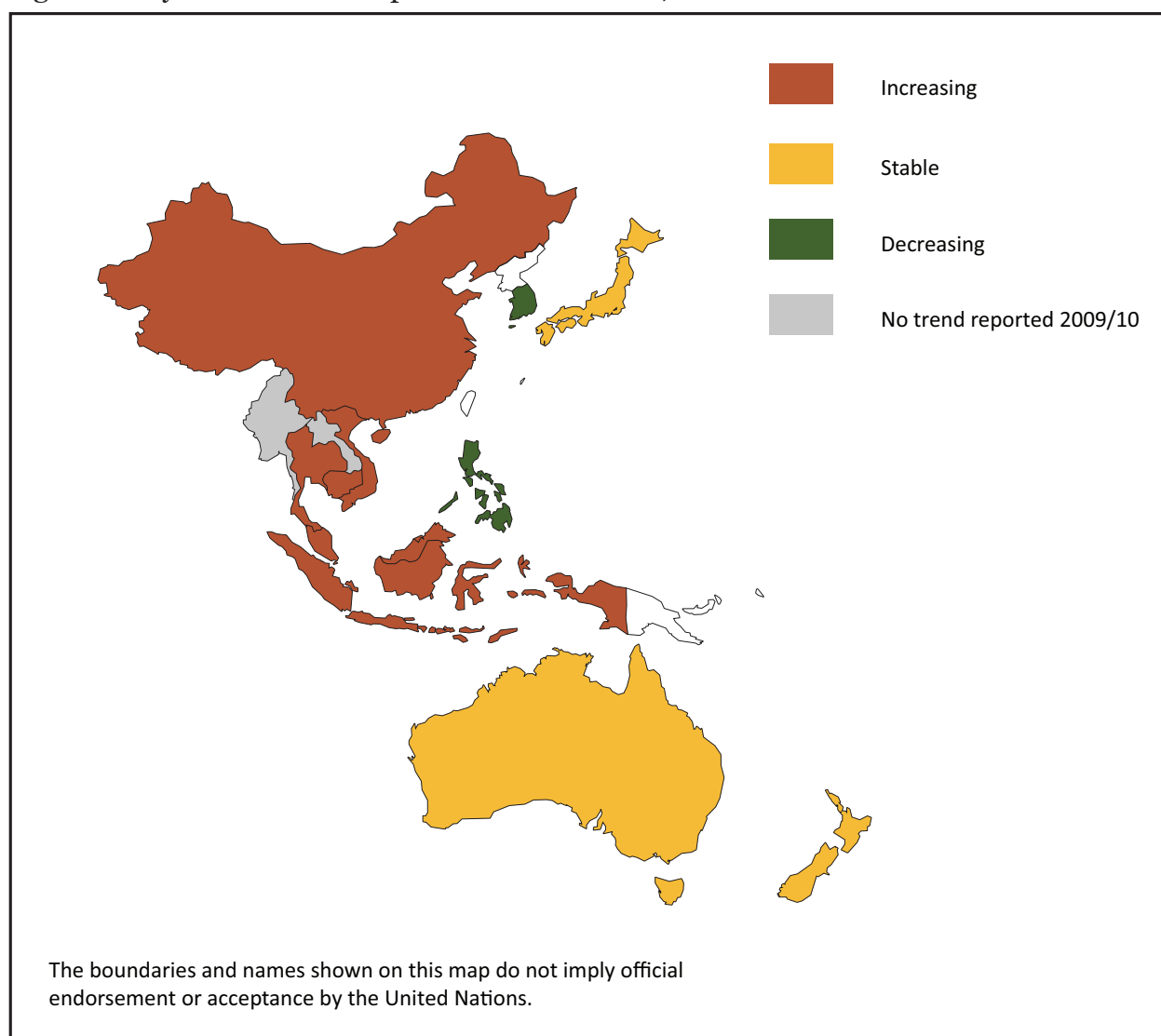
and the second most common form in Australia and New Zealand, after methamphetamine powder.

Methamphetamine pills are almost exclusively a concern in the developing countries of the Greater Mekong Subregion (Cambodia, China, Lao PDR, Myanmar, Thailand and Viet Nam). Small quantities of lower purity methamphetamine pills are found elsewhere in the region. The popularity of methamphetamine pills is fueled in large part by their comparatively low cost and the close proximity of these countries to illicit manufacturing centres. Methamphetamine pills are the primary drugs of use in Cambodia, Lao PDR

and Thailand and the secondary drugs of use in China and Viet Nam, according to expert perception. In 2010, all countries that reported methamphetamine use, namely Cambodia, China, Lao PDR, Myanmar, Thailand and Viet Nam, reported increasing use.³ China, Lao PDR, Myanmar and Viet Nam reported increasing methamphetamine pill use every year during the 2006-2010 reporting period.

Methamphetamine-related arrests – Methamphetamine-related arrests in East and South-East Asia rose each year during the 2006-2010 reporting period. In 2010, more than 222,000 methamphetamine-related

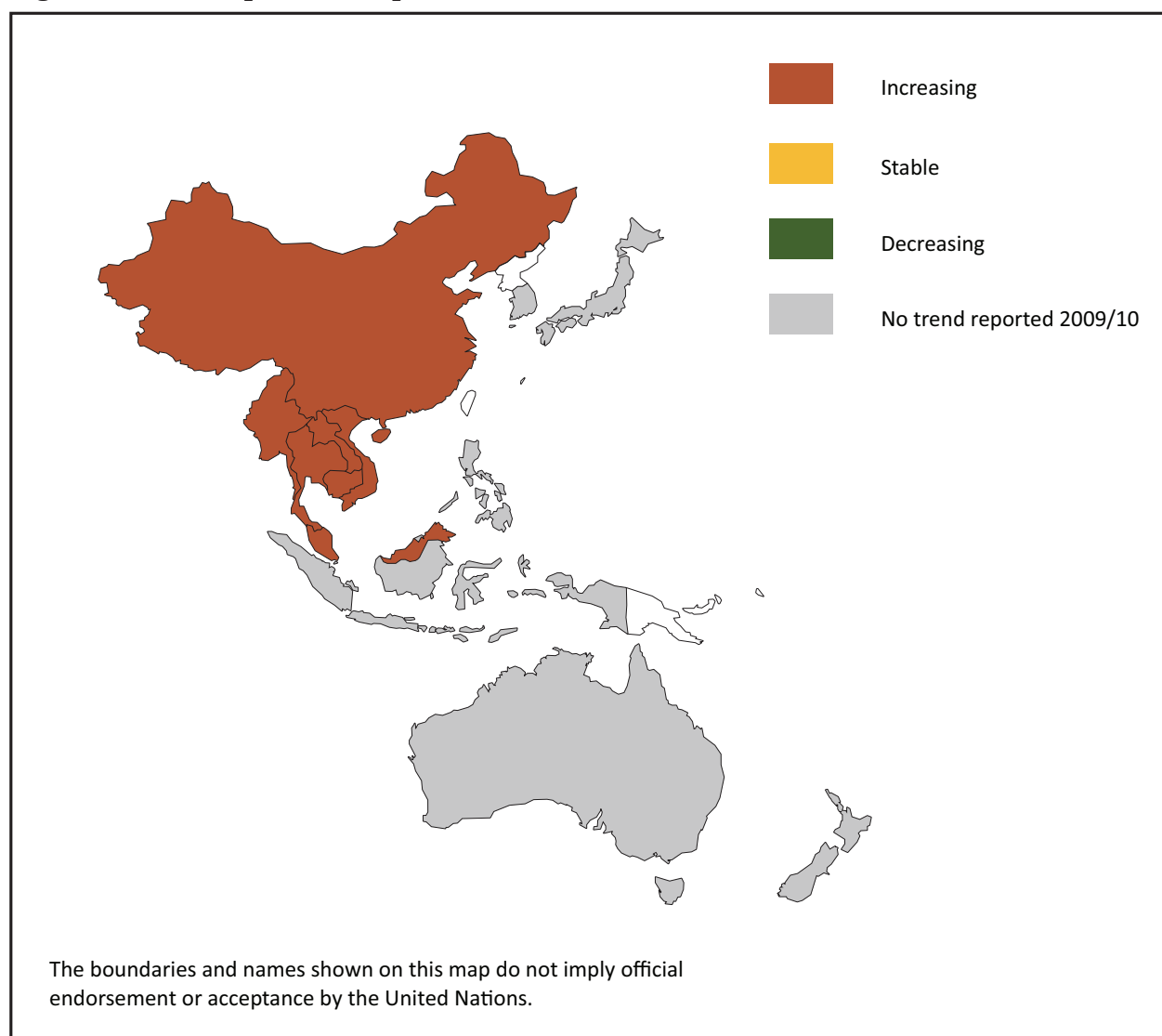
Figure 2. Crystalline methamphetamine use trend, 2010



Source(s): DAINAP

³ Thailand conducts drug use prevalence surveys every two years. Results of the 2009 survey found a stable methamphetamine use trend during the year. In 2010, however, arrest, seizure and drug treatment data related to methamphetamine pills indicate that methamphetamine pill use in Thailand increased in 2010.

Figure 3. Methamphetamine pill use trend, 2010



Source(s): DAINAP

arrests were recorded in the region, a 22% increase compared with 2009. However, this figure excludes detailed information from Cambodia, Lao PDR, Philippines and Viet Nam, which did not provide disaggregated arrest data in 2010. During the year, methamphetamine accounted for roughly 70% or more of all drug-related arrests in Brunei Darussalam (87%), Japan (83%), Philippines (77%), the Republic of Korea (70%) and Thailand (80%).

The continuous increase in methamphetamine-related arrest figures for the region has been driven primarily by the large and growing number of arrests in Thailand, with the country accounting for more than 63% of the total in 2010. In addition, China, which reported the second highest number of methamphetamine-related arrests in the region, after Thailand, first reported methamphetamine-related arrests in 2009, which

has contributed to the increase. Other countries have also reported substantial increases since 2006, including Indonesia, Malaysia and Singapore, with Myanmar being the only country reporting fewer methamphetamine arrests in 2010 than in 2006.

In New Zealand, about 12% of all drug-related arrests involved methamphetamine in 2010. Whereas this is roughly the same percentage as reported in 2009, the total number of methamphetamine-related arrests in the country declined by 9% in 2010. Australia reported a total of 13,982 arrests related to ATS in 2009-2010, representing 16% of all drug-related arrests, second only to cannabis.

Methamphetamine seizures – In 2010, the number of methamphetamine pills seized in the region increased substantially for the second consecutive year.

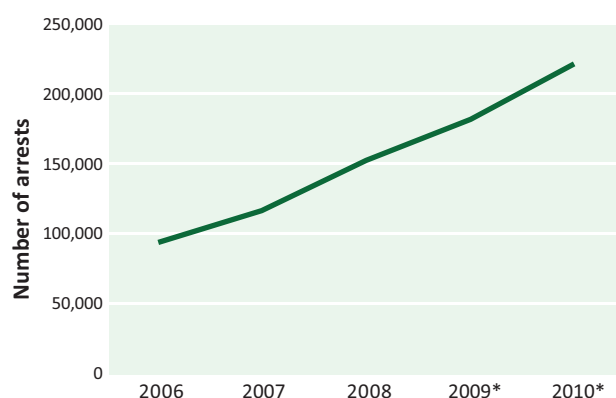
Table 1. Methamphetamine-related arrests in East and South-East Asia, 2006-2010

Country	Number of methamphetamine arrests				
	2006	2007	2008	2009	2010
Brunei Darussalam	407	174	500	411	489
Cambodia	561	246	371	•	•
China	•	•	•	31,907	39,231
<i>Hong Kong (SAR)</i>	509	747	874	788	726
Indonesia	8,589	11,731	8,683	10,183	12,361
Japan	11,606	12,009	11,025	11,655	11,999
Lao PDR	479	147	344	581	•
Malaysia	2,637	1,308	1,668	1,215	8,311
Myanmar	1,069	745	943	1,317	1,008
Philippines	•	•	•	•	•
Republic of Korea	6,006	8,521	7,457	7,965	6,771
Singapore	124	221	404	542	702
Thailand	61,816	80,723	120,776	115,923	140,466
Viet Nam	•	•	•	•	•
Total	93,803	116,572	153,045	182,487	222,064

• = Not reported

Source(s): DAINAP

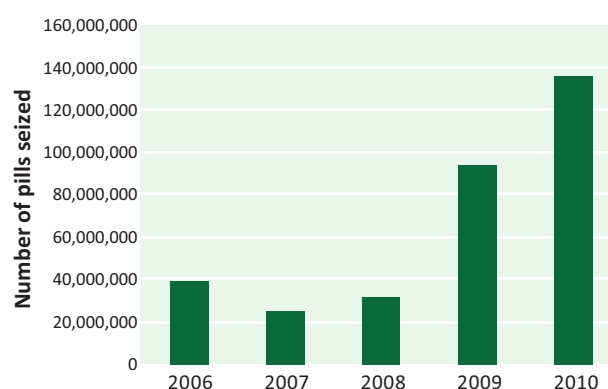
Figure 4. Methamphetamine-related arrests in East and South-East Asia, 2006-2010



*Includes arrest data from China, which prior to 2009 did not report disaggregated drug-related arrest data to DAINAP.
Source(s): DAINAP

A total of nearly 136 million pills was seized in the region in 2010, representing a 44% increase from the 94 million pills seized in 2009 and a greater than four-fold increase compared with 2008. The largest increases were reported from China (69%), Thailand (89%) and Lao PDR (ten-fold increase). The number of pills seized in the three countries – China (58.4 million), Thailand (50.4 million) and Lao PDR (24.5 million) – accounted for 98% of the total during the year. Myanmar, where most pills are manufactured, reported the seizure of only 2.2 million methamphetamine pills in 2010, which represents less than 10%

Figure 5. Methamphetamine pill seizures in East and South-East Asia, 2006-2010



Source(s): DAINAP

of the number of pills seized during the previous year (23.9 million). Cambodia reported a 40% decrease in the number of pills seized in 2010 (82,746 pills). Viet Nam reported a 61% decline in methamphetamine pills seizures in 2010 with 221,685 pills seized during the year. However, methamphetamine seizure data are not uniformly reported from Viet Nam, making year-by-year comparisons in the country difficult.

Seizures of crystalline methamphetamine also showed a 44% increase in 2010 when 6.9 mt were seized, up from 4.8 mt seized in 2009. However, the amount of

Table 2. Methamphetamine pill seizures in East and South-East Asia, 2006-2010

Country	Number of methamphetamine pills seized				
	2006	2007	2008	2009	2010
Brunei Darussalam	157	•	•	•	•
Cambodia	428,553	420,287	116,772	137,249	82,746
China	4,021,492	7,620,322	6,255,658	40,460,038	58,443,666
<i>Hong Kong, China</i>	•	•	•	•	•
Indonesia	466,907	•	•	•	•
Japan	•	•	•	•	•
Lao PDR	1,755,989	1,272,815	1,227,205	2,335,330	24,530,177
Malaysia	•	121,629	281,343	107,952	107,963
Myanmar	19,065,674	1,666,141	1,102,199	23,899,156	2,192,263
Philippines	•	•	•	•	•
Republic of Korea	•	196	151	1	5
Singapore	22	498	1,135	1,237	352
Thailand	13,820,000	14,340,000	22,115,911	26,640,206	50,400,000
Viet Nam	62,870	29,679	850,000*	564,515**	221,685
Total	39,621,664	25,471,567	31,950,374	94,145,684	135,978,857

• = Not reported. *Reported as 60 kg plus 70,000 pills. **Reported as 500,000 pills and 5.87 kg.

Source(s): DAINAP

crystalline methamphetamine seized in 2010 is 14% less than the 2008 total (8.0 mt), the year in which crystalline methamphetamine seizures reached their peak. Most crystalline methamphetamine seizures in the region are reported from China, about 4.2 mt in 2010, a 69% increase over 2009. China accounted for about 61% of the total reported seizures in the region in 2010.

With 887 kg, Malaysia reported the second highest crystalline methamphetamine seizure total in 2010, followed by Thailand with 733 kg seized. Seizures in Thailand more than tripled in 2010. Nearly one-quarter (23%) of the crystalline methamphetamine seized in Thailand in 2010 was seized from air passenger couriers from the Islamic Republic of Iran, which, since 2009, have emerged as a significant source of methamphetamine trafficked to parts of the region. Crystalline methamphetamine seizures in Indonesia totaled 354 kg in 2010, representing an increase of one third compared with the 225 kg seized in 2009 but less than half of the amount seized in 2008 (710 kg). In Myanmar, the 226 kg of crystalline methamphetamine seized in 2010 is 82% greater than the amount seized in 2009 (124 kg) and is far higher than the quantities seized in previous years. The amount of crystalline methamphetamine seized in the Philippines in 2010 (63.6 kg) is considerably lower than the totals reported in each of the previous three years.

New Zealand reported seizures of 30.7 kg of methamphetamine in 2010, a 46% increase compared with the 20.8 kg seized in 2009 and the highest total reported since 2007. In Australia, a total of 672 kg of amphetamine and methamphetamine were seized in 2009-2010, representing a 59% decline from the previous year and the lowest amount reported in the past decade.

Figure 6. Crystalline methamphetamine seizures in East and South-East Asia, 2006-2010



Source(s): DAINAP

Table 3. Crystalline methamphetamine seizures in East and South-East Asia (kg), 2006–2010

Country	Amount of crystalline methamphetamine seized				
	2006	2007	2008	2009	2010
Brunei Darussalam	0.4	0.4	0.4	0.3	0.8
Cambodia	16.2	6.8	1.9	4.6	9.9
China	5,946.0	5,863.0	5,523.0	2,479.0	4,186.0
<i>Hong Kong, China</i>	6.7	40.8	23.9	40.1	101.8
Indonesia	1,241.2	492.9	709.9	224.5	354.1
Japan	126.8	339.3	397.5	356.3	302.3
Lao PDR	•	•	•	•	•
Malaysia	145.2	69.2	357.0	1,159.7	887.3
Myanmar	3.2	3.4	14.4	124.0	226.1
Philippines	54.1	368.9	853.5	149.3	63.6
Republic of Korea	21.5	23.7	25.6	15.2	11.9
Singapore	0.5	1.5	1.8	3.7	5.6
Thailand	92.2	47.4	52.9	209.0	733.0
Viet Nam	•	•	•	•	•
Total	7,654.0	7,257.3	7,961.8	4,765.7	6,882.4

• = Not reported

Source(s): DAINAP

Ecstasy

Ecstasy use – Ecstasy use is on the decline in the region, in line with the global trend. There are indications that the stabilization of ecstasy use in recent years has been linked to reductions in the manufacture of ecstasy which, in turn, appears to have been a consequence of some improvement in the control of ecstasy precursors. In addition, many of the seized drugs marketed on the street as ‘ecstasy’ in the region contain psychoactive substances other than MDMA,⁴ such as ketamine and/or methamphetamine. Hence, caution should be exercised when assessing statistics related to ecstasy in countries which do not have ATS data and classification systems or the appropriate forensic and analytical facilities. In 2010, all countries that reported ecstasy use trend data to DAINAP reported stable or decreasing use of the drug, except for Viet Nam and New Zealand, which reported increasing use. Ecstasy is not reported as the most common drug of use in any country in the region but is the second most common illicit drug of use in Australia (although use is declining), New Zealand and Viet Nam and the third most common illicit drug of use in China and the Republic of Korea.

Ecstasy-related arrests – Only 1% of the ATS-related arrests in the region involved ecstasy in 2010. During the year a total of 2,445 ecstasy-related arrests were reported compared with 3,959 arrests in 2009, a 38% decline. Nearly all countries able to report ecstasy arrests showed a decline in figures for 2010; only Malaysia reported an increase during the year. The largest number of ecstasy-related arrests continued to be reported from Indonesia, which accounted for 44% of all ecstasy-related arrests in the region in 2010.

New Zealand reported only 141 ecstasy-related arrests, the lowest total reported during the past five years. Australia does not disaggregate arrest data for ATS.

Ecstasy seizures – Ecstasy seizures in the region have fluctuated over the past five years. In 2010, seizures of ecstasy pills increased slightly (11%), with more than 1.7 million pills seized during the year compared with fewer than 1.6 million pills seized in 2009. The increase was driven by the higher amounts reported seized in China and Indonesia, the only two countries that reported increases in ecstasy seizures in 2010. The two countries accounted for about 94% of the total number of ecstasy pills seized region-wide in 2010. Ecstasy seizures in the region peaked in 2007, when almost 5.8 million pills were seized, but have since declined by about 70%.

⁴ 3,4-methylenedioxymethamphetamine, or one of its related analogues.

Figure 7. Ecstasy use trend, 2010



Source(s): DAINAP

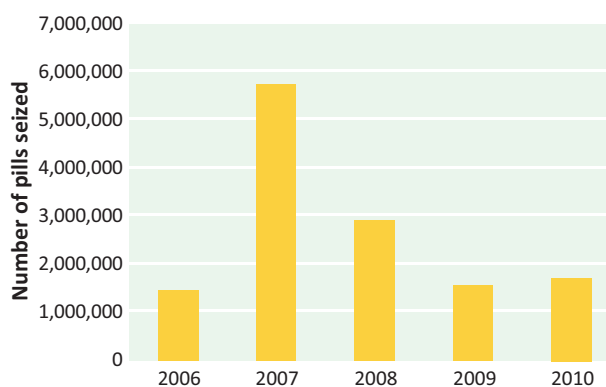
In 2009-2010, the number of ecstasy detections at the Australian border remained stable with 53 detections reported compared with 55 seizures in 2008-2009, which was the lowest total reported in the past decade. The total weight of ecstasy detections declined by half, from 12.9 kg in 2008-2009 to 6.5 kg in 2009-2010, the lowest amount recorded in the past decade.

New Zealand reported a total of 16,589 ecstasy pills seized in 2010, a 10% increase from the 15,063 pills seized in 2009.

ATS manufacture

The East and South-East Asia region plays a major role in the illicit manufacture of methamphetamine, and a significant number of illicit methamphetamine

Figure 8. Ecstasy seizures in East and South-East Asia, 2006-2010



Source(s): DAINAP

Table 4. Ecstasy-related arrests in East and South-East Asia, 2006-2010

Country	Number of ecstasy-related arrests				
	2006	2007	2008	2009	2010
Brunei Darussalam	2	0	3	10	0
Cambodia	0	1	7	•	•
China	•	•	•	1,287	816
<i>Hong Kong, China</i>	283	224	315	157	34
Indonesia	0	2,274	1,984	1,919	1,068
Japan	370	296	281	107	62
Lao PDR	•	•	•	•	•
Malaysia	228	182	119	83	240
Myanmar	4	8	6	0	•
Philippines	•	•	•	•	•
Republic of Korea	•	•	•	•	•
Singapore	67	78	110	39	17
Thailand	459	410	550	357	208
Viet Nam	•	•	•	•	•
Total	1,413	3,473	3,375	3,959	2,445

• = Not reported

Source(s): DAINAP

Table 5. Ecstasy seizures in East and South-East Asia, 2006-2010

Country	Number of ecstasy pills seized				
	2006	2007	2008	2009	2010
Brunei Darussalam	50	•	3.3g*	15	•
Cambodia	•	300	33	3,352	1,056
China	454,145	2,219,353	1,077,552	1,062,173	1,272,904
<i>Hong Kong, China</i>	104,296	65,539	11,984	7,146	5,810
Indonesia	466,908	1,247,302	1,045,105	309,363	352,515
Japan	185,773	1,187,434	202,886	36,467	15,653
Lao PDR	•	•	•	•	•
Malaysia	227,932	709,888	80,788	75,515	60,713
Myanmar	54	2,690	108	5	•
Philippines	83	122	513	2,090	336
Republic of Korea	356	18,323	714	894	486
Singapore	4,236	7,034	7,415	8,985	8,085
Thailand	26,656	315,444	486,553	58,024	16,081
Viet Nam	•	•	19,000	•	•
Total	1,470,489	5,773,429	2,932,651	1,564,029	1,733,639

• = Not reported. *Reported as 3.28 g.

Source(s): DAINAP

manufacturing laboratories have been dismantled in the region over the past decade or so. Whereas in previous years, illicit drug manufacturing laboratories were primarily large industrial-scale operations, in recent years several countries have dismantled a significant number of smaller laboratories, a pattern that continued in 2010. In addition, the global

trend of extracting ephedrine and pseudoephedrine from non-controlled pharmaceutical products in the manufacture of methamphetamine also occurs in East and South-East Asia as well as in Australia and New Zealand.

In 2010, some 442 ATS-related laboratories were seized in East and South-East Asia, most of which were manufacturing amphetamines-group substances. Limited amounts of ecstasy also continue to be manufactured in the region, notably in China, Indonesia and Malaysia, primarily for use within the region. Trafficking of ecstasy to other regions (with

the exception of small quantities to Oceania) is rare. Indonesia and Malaysia also continued to report the seizures of a considerable number of large and small-scale illicit manufacturing facilities for crystalline methamphetamine.

Table 6. Illicit methamphetamine manufacturing facilities dismantled, 2006-2010

Country	Methamphetamine				
	2006	2007	2008	2009	2010
Brunei Darussalam	•	•	•	•	•
Cambodia	8*	2	•	5	11
China	53	75	•	•	•
<i>Hong Kong, China</i>	•	•	•	2	1
Indonesia	•	7	•	•	11
Japan	•	•	•	•	1
Lao PDR	•	•	•	•	•
Malaysia	1	•	•	•	6
Myanmar	10**	5**	1**	•	•
Philippines	4	9	10	9	7
Republic of Korea	•	•	•	•	4
Singapore	•	•	•	•	•
Thailand	•	•	•	1	1
Viet Nam	•	•	•	•	•
Total	76	98	11	17	42

• = Not reported. *Not specified by laboratory type; includes ketamine and non-synthetic drugs. **Pill pressing operation.

Source(s): DAINAP

Table 7. Illicit ecstasy or undefined ATS manufacturing facilities dismantled, 2006-2010

Country	Ecstasy or undefined ATS				
	2006	2007	2008	2009	2010
Brunei Darussalam	•	•	•	•	•
Cambodia	•	•	•	•	•
China	•	•	244*	391	378
<i>Hong Kong, China</i>	•	•	•	•	•
Indonesia	7	16	21	37	15
Japan	•	•	•	•	•
Lao PDR	•	•	•	•	•
Malaysia	•	9	12*	11	1
Myanmar	•	•	•	3**	•
Philippines	•	•	•	•	•
Republic of Korea	•	2	•	•	•
Singapore	•	•	•	•	•
Thailand	•	•	•	2**	6**
Viet Nam	•	•	•	•	•
Total	7	27	277	444	400

• = Not reported. * Not specified by laboratory type; includes ketamine and non-synthetic drugs. **Pill pressing operation.

Source(s): DAINAP

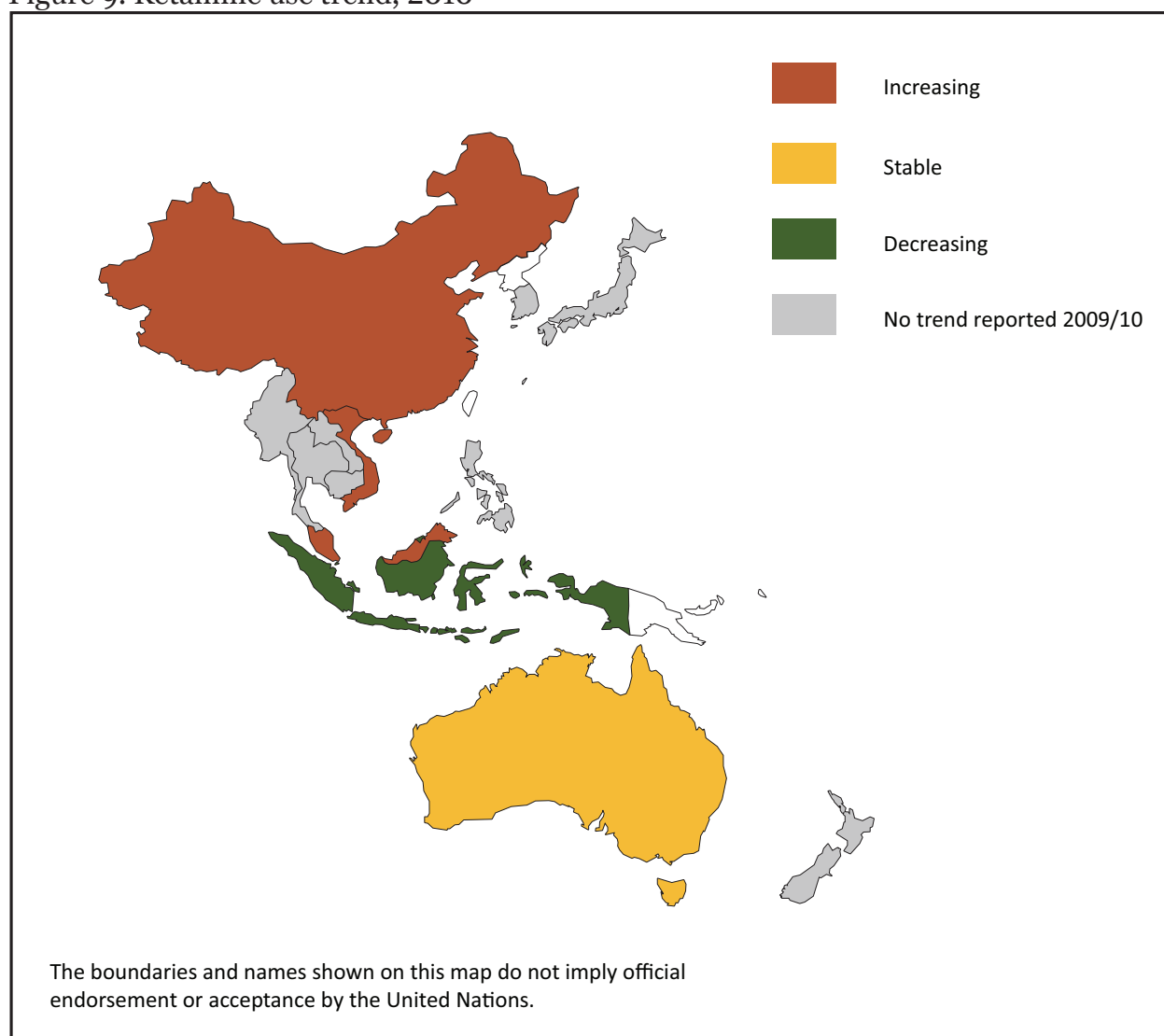
Myanmar is the primary source of methamphetamine pills. However, only small-scale operations and pill pressing machines have been reported seized from the country, which is inconsistent with the high number of pills seized in Myanmar and neighbouring countries. Although no crystalline methamphetamine manufacturing facilities have ever been reported seized in Myanmar, authorities in Myanmar and Thailand confirm that a high level of manufacture takes place.

China continued to report high levels of illicit synthetic drug manufacture in 2010. In Hong Kong, China, police seized one large illicit crystalline methamphetamine laboratory in 2010 and two small-scale facilities in 2009. In previous years, most illicit ATS manufacture in Hong Kong, China, consisted of ecstasy-type pill pressing and repackaging operations.

Cambodia seized a number of illicit laboratories which were manufacturing ATS and their precursor chemicals in 2010. In the past few years, Philippine law enforcement authorities have seized multiple illicit manufacturing sites segmenting the various stages of methamphetamine manufacture in the country.

Lower levels of illicit ATS manufacture have been detected in Thailand, where law enforcement agencies have reported the seizure of about 10 methamphetamine pill pressing operations as well as two small-scale illicit crystalline methamphetamine manufacturing facilities during the past two years. In 2010, a small number of illicit methamphetamine manufacturing operations was seized in the Republic of Korea and Japan.

Figure 9. Ketamine use trend, 2010



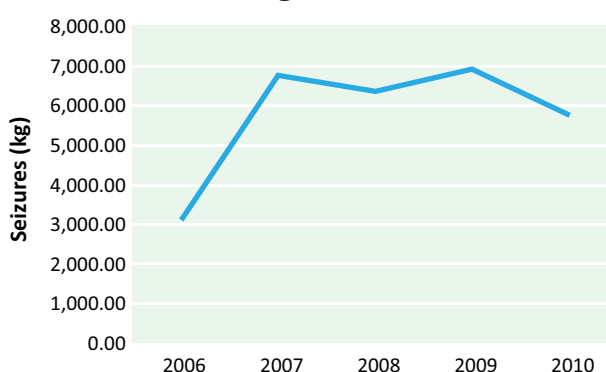
Source(s): DAINAP

Ketamine

Ketamine use – Use of ketamine, a hallucinogenic substance used mainly in veterinary medicine, is a problem in some countries in East and South-East Asia. Ketamine is not under international control, which makes it widely available for diversion in many countries. In 2010, use of ketamine was reported in Australia, Brunei Darussalam, China (including Hong Kong), Indonesia, Malaysia, Singapore and Viet Nam. While Thailand did not report ketamine use in 2010, arrest, seizure and drug treatment data suggest that ketamine use continued. In Hong Kong, China, ketamine users accounted for roughly 38% of all drug users in 2010 and an estimated 84% of all drug users below the age of 21. Ketamine use was reported to have increased in 2010 in China, Malaysia and Viet Nam.

Ketamine seizures – Ketamine seizures in the region declined by 17% in 2010, with 5.7 mt seized during the year compared with 6.9 mt seized in 2009. However, total seizures may actually be higher as several countries report ketamine seizures in the categories of ‘other drugs’, ‘synthetic drugs’, or not at all since it is not an internationally controlled substance. Almost 86% of the ketamine seized in the region in 2010 was seized in China, which, along with India, is one of the major source countries for ketamine. However, ketamine seizures declined slightly in China in 2010 to

Figure 10. Ketamine seizures in East and South-East Asia (kg), 2006-2010



Source(s): DAINAP

4.9 mt compared with 5.3 mt in 2009. Sharp declines were recorded in Hong Kong, China (60%) and Malaysia (69%). The only increases were reported from Thailand where 172 kg were seized – a nine-fold increase compared with 19 kg in 2009 – and Singapore, which reported a 40% increase in 2010 (12 kg compared with almost 9 kg in 2009).

Opiates

Despite significant declines in cultivation levels, the area formerly known as the ‘Golden Triangle’ remains a source of opiates. Opiate use has generally stabilized in the region of late. However, since 2009, there have been indicators to suggest that heroin use is re-

Table 8. Ketamine seizures in East and South-East Asia (kg), 2006-2010

Country	Amount of ketamine seized (kg)				
	2006	2007	2008	2009	2010
Brunei Darussalam	•	0.005 *	0.001**	0.01	0.04
Cambodia	•	•	495***	1.1	0.001
China	1,788.5	6,101.7	5,271.1	5,323.0	4,905.0
Hong Kong, China	1,006.1	96.4	423.3	472.3	189.1
Indonesia	•	•	19.8	6.1	116.9
Japan	•	•	•	•	•
Lao PDR	•	•	•	•	•
Malaysia	109.5	267.9	553.1	1,070.6	334.1
Myanmar	•	•	•	14.9	•
Philippines	98.0	325.1	10.2	0.0	0.0
Republic of Korea	•	•	•	•	•
Singapore	5.3	11.0	14.0	8.7	12.2
Thailand	22.7	2.8	18.1	18.9	172.0
Viet Nam	•	•	5.7	•	•
Total	3,030.1	6,804.9	6,315.3	6,915.6	5,729.3

• = Not reported. *Reported as 0.005 kg and 9 pills. **Reported as 0.001 kg and 2 pills. ***Reported as 495 small bottles of undefined weight.

Source(s): DAINAP

emerging as a threat in the region. In 2010, China, Indonesia, Malaysia, Singapore, Thailand and Viet Nam reported increasing heroin use. Heroin ranked as the primary drug of use in China, Malaysia, Myanmar, Singapore and Viet Nam in 2010. In addition, heroin accounted for a significant number of problem drug users in treatment in Malaysia (80%), Myanmar (80%) and Singapore (53%). Opium use increased in Lao PDR and Thailand in 2010. In New Zealand, the number of persons admitted to drug treatment in New Zealand for the use of heroin, morphine and opiates (including pharmaceutical opioids) accounted for 44% of all drug-related hospital admissions during the year.

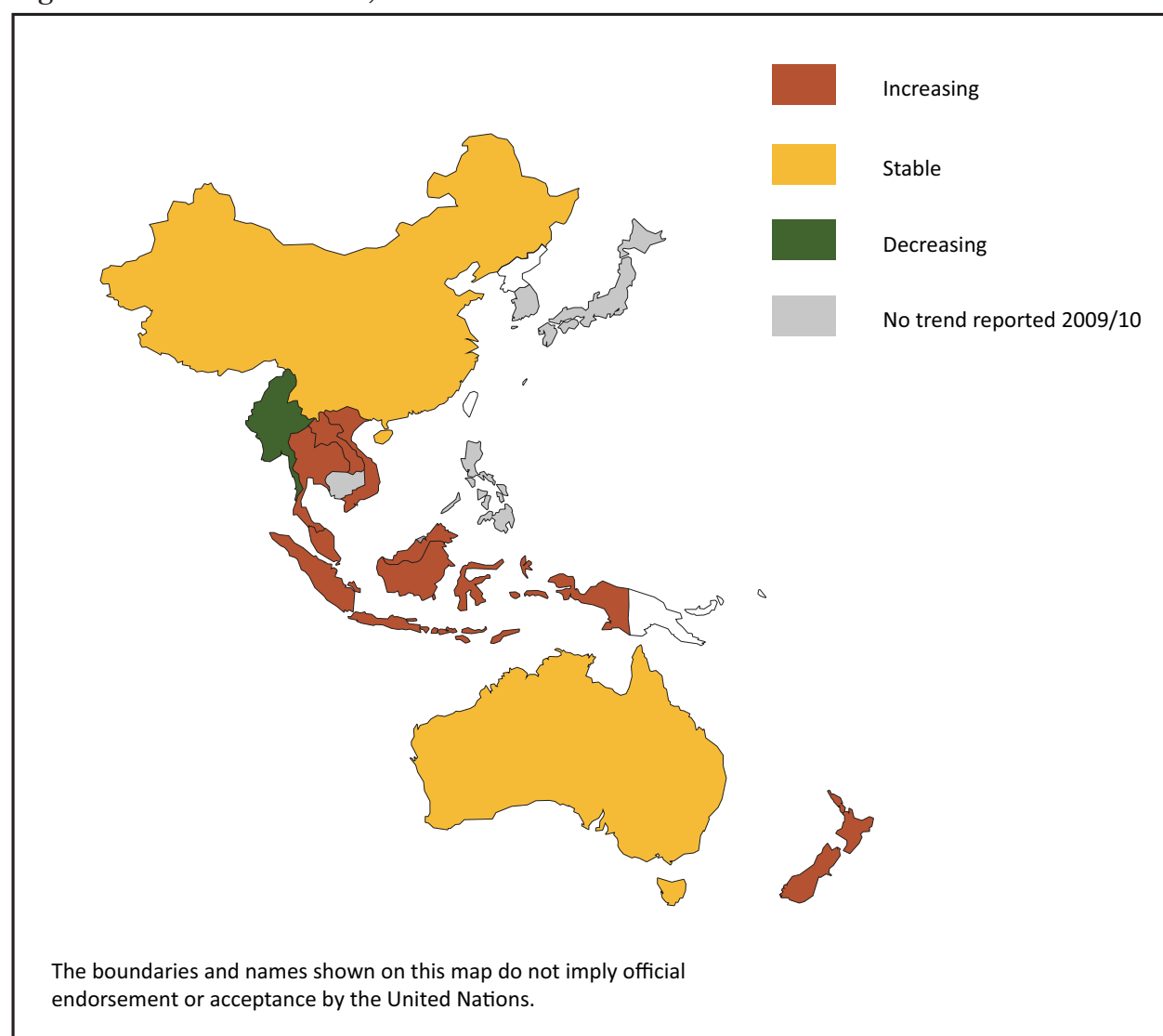
Opium poppy cultivation in South-East Asia (mainly in Myanmar and Lao PDR) is at far lower levels than in the mid-1990s but has increased in each of the

past four years. The total area under opium poppy cultivation in the region increased by 22% from 33,811 ha in 2009 to 41,389 ha in 2010, 92% of which was cultivated in Myanmar. Lao PDR reported the cultivation of 3,000 ha compared with 1,900 ha in 2009, representing a 58% increase. Small amounts of opium poppy are also cultivated in Thailand, the Republic of Korea and Viet Nam.

In the past few years, there has been an increase in the amount of heroin trafficked into the region from Afghanistan. In 2009, an estimated 65 mt were trafficked to the region to fill the gap in local production – 25 mt to South-East Asia and 40 mt to China (UNODC 2011).

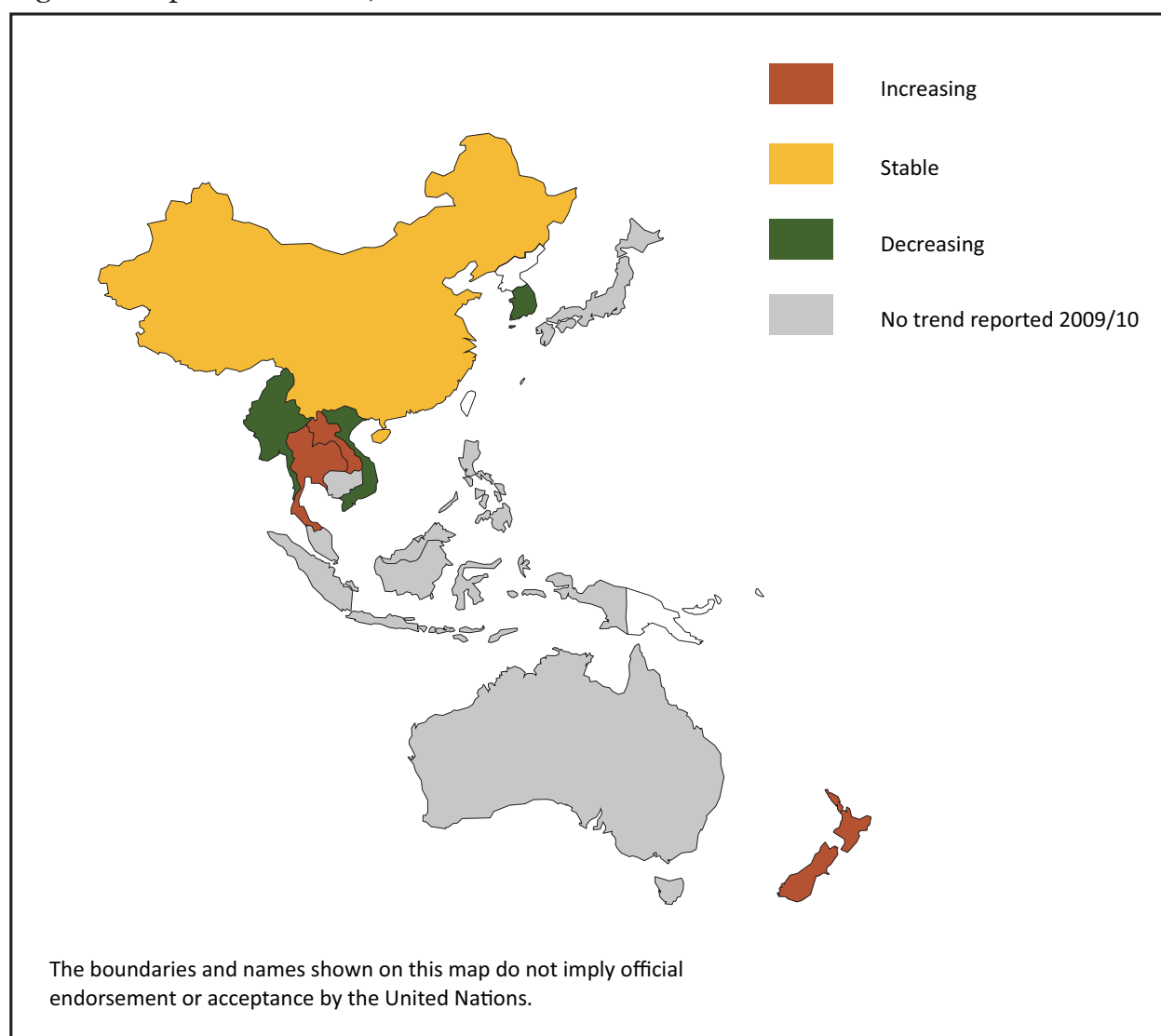
Overall, opiate-related arrests in the region increased by 8% in 2010 compared with the previous year.

Figure 11. Heroin use trend, 2010



Source(s): DAINAP

Figure 12. Opium use trend, 2010



Source(s): DAINAP

The 19,603 opiate-related arrests reported in 2010 constitute the highest total reported since 2006. However, this figure does not reflect the full extent of the opiate situation, as China, which has the largest opiates market in the region, does not report disaggregated drug-related arrest data to DAINAP.

Heroin seizures in the region declined by 16.5% in 2010, with 6.4 mt seized compared with 7.7 mt seized in 2009. The majority of seizures in 2010 was made in China (including Hong Kong), with more than 5.4 mt seized during the year. Substantial increases were reported from Viet Nam, Lao PDR, Singapore and Indonesia.

As in previous years, in 2010, China and Myanmar reported the majority of opium seized in the region,

with the 1 mt of opium seized in China and 922 kg seized in Myanmar accounting for 82% of total opium seizures in the region that year. Thailand and Lao PDR both reported significant increases in opium seizures in 2010.

In Australia, heroin use has remained stable since 2001. The number of persons who have entered drug treatment for heroin use has shown a strong declining trend during the past five years. The illicit trafficking and use of heroin or opium is not widespread in New Zealand. Most opiate users in the country use 'homebake' heroin, or diverted medicines such as oxycodone.

Table 9. Opiate-related arrests in East and South-East Asia, 2006-2010

Country	Number of opiate-related arrests*				
	2006	2007	2008	2009	2010
Brunei Darussalam	1	0	0	1	0
Cambodia	28	8	6	•	•
China	•	•	•	•	•
<i>Hong Kong, China</i>	1,713	1,601	1,378	1,145	888
Indonesia	2,610	3,561	1,813	925	759
Japan	49	54	27	43	38
Lao PDR	0	36	45	94	•
Malaysia	14,039	9,169	8,693	8,488	11,766
Myanmar	2,076	2,015	2,059	2,613	1,689
Philippines	•	•	•	•	•
Republic of Korea	861	954	1,389	2,189	1,124
Singapore	119	690	1,216	1,425	1,787
Thailand	1,195	1,278	1,479	1,255	1,552
Viet Nam	•	•	•	•	•
Total	22,691	19,366	18,105	18,178	19,603

• = Not reported. *Also includes heroin, opium, morphine and other opiates.

Source(s): DAINAP

Table 10. Heroin seizures in East and South-East Asia (kg), 2006-2010

Country	Amount of heroin seized (kg)				
	2006	2007	2008	2009	2010
Brunei Darussalam	0.01	•	•	1.1	•
Cambodia	21.3	10.7	5.3	26.7	2.4
China	5,792.1	4,594.0	4,332.3	5,838.0	5,353.0
<i>Hong Kong, China</i>	52.2	37.4	46.4	37.1	68.5
Indonesia	11.9	17.2	29.1	12.3	25.0
Japan	2.3	1.8	1.0	1.2	0.2
Lao PDR	9.2	23.8	17.5	29.2	84.3
Malaysia	155.7	243.3	297.1	283.4	299.3
Myanmar	192.4	68.4	88.2	1,076.1	88.5
Philippines	•	•	•	•	•
Republic of Korea	0.0	•	•	1.9	0.1
Singapore	6.1	17.2	44.5	29.1	49.0
Thailand	92.5	293.4	199.8	142.8	138.8
Viet Nam	276.6	160.2	156.2	213.0	316.8
Total	6,612.3	5,467.4	5,217.4	7,691.9	6,425.9

• = Not reported

Source(s): DAINAP

Cannabis

Cannabis continues to be widely used in East and South-East Asia. However, most countries reported a declining or stable trend in cannabis use in 2010. Increasing cannabis use was reported in Australia, Brunei Darussalam, Republic of Korea, Lao PDR and Thailand.

Cannabis-related arrests in the region in 2010 declined by 17% compared with 2009. The 29,484 arrests is the lowest total reported in the past five years. Indonesia and Thailand continued to account for the majority of the region's cannabis-related arrests in 2010 (74%).

Table 11. Opium seizures in East and South-East Asia (kg), 2006-2010

Country	Amount of opium seized (kg)				
	2006	2007	2008	2009	2010
Brunei Darussalam	•	•	•	•	•
Cambodia	1.8	•	•	•	•
China	1,691.0	1,184.6	1,375.0	1,303.0	1,015.0
<i>Hong Kong, China</i>	•	•	182.7	•	•
Indonesia	•	•	•	•	•
Japan	17.2	19.4	6.6	3.2	3.7
Lao PDR	1.2	14.2	11.8	50.0	86.5
Malaysia	0.5	7.4	13.9	10.1	4.4
Myanmar	2,321.0	1,173.8	1,463.4	752.0	922.0
Philippines	•	2.5	•	•	•
Republic of Korea	0.1	0.1	0.2	0.2	0.1
Singapore	•	•	0.5	•	•
Thailand	767.5	139.7	111.3	102.3	304.4
Viet Nam	184.0	63.4	18.8	69.8	28.2
Total	4,984.3	2,605.1	3,184.2	2,290.6	2,364.3

• = Not reported

Source(s): DAINAP

Cannabis seizures decreased considerably in 2010 to 38 mt compared with 134 mt seized in 2009. The steep decline is due largely to the significantly lower amount of cannabis seized in Indonesia in 2010. During the year, Indonesia and Thailand accounted for 83% of the total amount of cannabis seized in the region. A significant increase in cannabis seizures was

reported in Lao PDR, with 3.5 mt seized in 2010 compared with 976 kg in 2009.

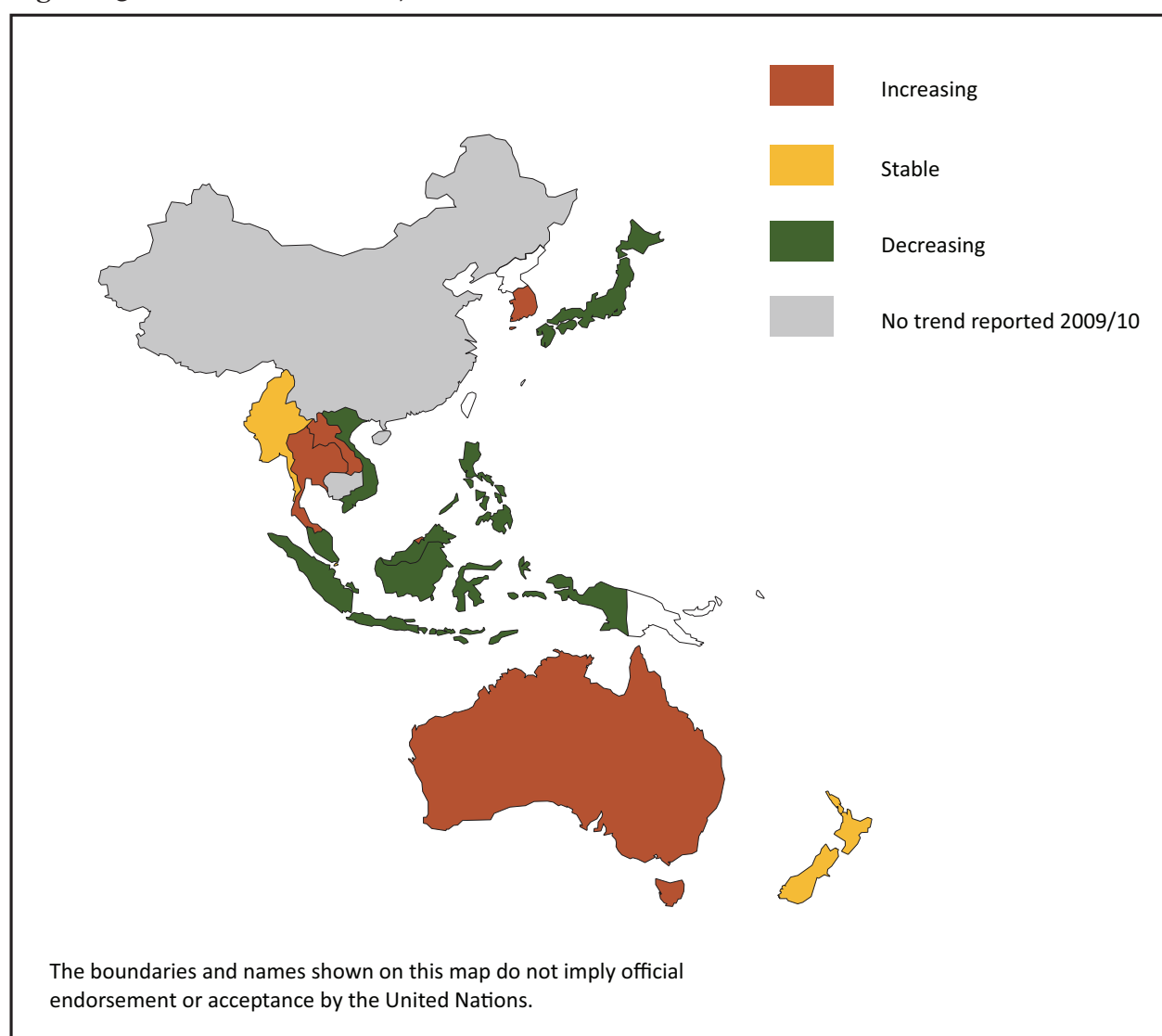
Table 12. Cannabis-related arrests in East and South-East Asia, 2006-2010

Country	Number of arrests				
	2006	2007	2008	2009	2010
Brunei Darussalam	31	27	28	5	44
Cambodia	8	8	6	•	•
China	•	•	•	•	•
<i>Hong Kong, China</i>	567	541	544	543	325
Indonesia	12,865	18,142	11,581	12,001	9,630
Japan	2,288	2,271	2,758	2,920	2,216
Lao PDR	0	2	26	40	•
Malaysia	5,275	3,385	1,726	5,207	3,011
Myanmar	232	217	240	490	146
Philippines	•	•	•	•	•
Republic of Korea	835	1,170	1,045	1,712	1,837
Singapore	122	102	88	126	131
Thailand	10,549	9,833	11,689	12,502	12,144
Viet Nam	•	•	•	•	•
Total	32,772	35,698	29,731	35,546	29,484

• = Not reported

Source(s): DAINAP

Figure 13. Cannabis use trend, 2010



Source(s): DAINAP

Other substances

Apart from ATS, cannabis, heroin, opium and ketamine, a range of other illicit drugs are used in the region, although to a far lesser extent.

Cocaine use in Asia is still limited, though there are some indicators to suggest that organized crime groups are trying to develop the potentially large market in the region. In 2010, significant quantities of cocaine were seized in the Philippines (342 kg) and China (441 kg), in addition to some 580 kg seized in Hong Kong, China. A considerable increase in cocaine seizures was also reported in Thailand in 2010.

The non-medical use of benzodiazepines, in particular nimetazepam, is reported from various countries in the region. Use of nimetazepam, sometimes in

combination with methamphetamine, is particularly prevalent in peninsular South-East Asia, including Brunei Darussalam, Malaysia, the Philippines and Singapore.

The use of kratom (*mitragyna speciosa*), a substance derived from the leaves of the Rubiaceae tree, which produces both stimulant and sedative effects, is most prevalent in Malaysia, Myanmar and the southern part of Thailand. The most frequent mode of administration is making tea out of the dried leaves. It is a controlled substance in several Asian and European countries.

Recently, new synthetic compounds have emerged on ATS markets in the region. These compounds mimic either the pharmacological properties or chemical structures of existing controlled substances such as amphetamines or ecstasy. Piperazines and

Table 13. Cannabis seizures in East and South-East Asia (kg), 2006-2010

Country	Amount of cannabis seized (herb and resin) (kg)				
	2006	2007	2008	2009	2010
Brunei Darussalam	2.3	0.1	0.6	1.6	6.3
Cambodia	•	10.0	5.0	3.8	1.2
China	•	•	•	•	•
<i>Hong Kong, China</i>	467.3	257.4	261.0	107.0	14.3
Indonesia	11,722.4	35,464.6	140,496.3	110,723.0	12,661.0
Japan	322.5	457.9	408.2	212.3	153.5
Lao PDR	291.5	2,302.8	804.6	976.0	3,521.0
Malaysia	2,378.8	1,482.6	874.8	2,351.8	1,064.0
Myanmar	72.9	104.3	170.2	284.6	205.6
Philippines	6,273.5	1,207.7	3,724.0	1,660.0	1,129.4
Republic of Korea	21.1	23.0	94.7	123.0	44.5
Singapore	14.9	30.8	3.3	7.1	8.5
Thailand	11,875.3	15,384.6	18,891.9	17,558.8	18,982.5
Viet Nam	645.0	8,000.0	8,928.8	332.0	211.3
Total	34,087.5	64,725.8	174,663.4	134,341.0	38,003.1

• = Not reported

Source(s): DAINAP

cathinones, for example mephedrone, are examples of such unregulated substances. Whereas the use of these substances has been reported in Australia and New Zealand for some time, they have more recently emerged in some of the less economically developed countries in the region, such as Viet Nam (2C-B, BZP⁵ and TFMPP⁶) and the Philippines (BZP).

A similar development has been observed with regard to synthetic cannabinoids which have appeared in some countries. Sold on the Internet and in specialized shops, synthetic cannabinoids have been referred to as 'legal alternatives' to cannabis, as they are not under international control. In Thailand, the synthetic cannabinoid 'spice' is available in some border towns and popular tourist destinations. The substances are not under international control and the control status of these synthetic compounds differs significantly from country to country (UNODC 2011).

Several countries in the region report inhalant and solvent use as an issue of concern, particularly among young drug users.

⁵ BZP refers to benzylpiperazine, also known as 'mimic ecstasy'.

⁶ TFMPP refers to the piperazine 1-(3-trifluoromethyl-phenyl).



Regional Trends: Pacific Island States and territories

Summary, emerging trends and concerns

- Although the region is surrounded by major markets for ATS and other drugs, there are few formal drug surveillance systems, either nationally or regionally, in place for monitoring illicit drug use and trends.
- High lifetime prevalence rates for methamphetamine among secondary school students have been reported from Marshall Islands and Palau. ATS use is also reported among secondary school students from Cook Islands, Fiji, Federated States of Micronesia, Papua New Guinea and Samoa. Cannabis is widely cultivated and used throughout the region.
- There is evidence of injecting drug use in several states and territories; e.g. in Vanuatu, methamphetamine is injected by 41% of injecting drug users aged 15-24 (2008), while 10% of young men reported injecting drug use in the Federated States of Micronesia, Marshall Islands and Vanuatu, and more than 5% of young women in the Federated States of Micronesia and Marshall Islands.
- The Pacific continues to have the lowest rate of adherence to the United Nations Drug Control Conventions in the world. As a result, many states and territories often do not have the necessary legislation, infrastructure and enforcement capabilities in place to prevent, detect and seize drugs. The lack of treaty adherence also increases the vulnerability of Pacific Island States and territories to exploitation by drug trafficking organizations.
- Kava, a plant indigenous to the region with psychoactive effects, is used in rituals and traditional ceremonies. Use of kava is widespread and a concern in some islands, including Fiji and Vanuatu.
- Several major cases over the past five years indicate that illicit ATS manufacture, trafficking of ATS, drugs and precursors are real and current threats.

The Pacific island region covers millions of square kilometres of ocean and is strategically located between Asia to the west, Australia and New Zealand to the south, and the Americas to the East. The states and territories in the region are a mixture of independent states, associated states, integral parts of non-Pacific island countries, and dependent states. Australia and New Zealand are covered in separate chapters of this report.

There is a large variation in populations of Pacific Island States and territories: Papua New Guinea is the largest with more than 6 million inhabitants, and Niue the smallest, with an estimated population of less than two thousand (UN Population Division 2009). Due to a high degree of intra-regional migration, accurate population estimates cannot always be established. For the Cook Islands, for example, population estimates

range from 12,000 to 20,000 (ANCD 2010). Many of the states and territories in the region are characterized by high rates of unemployment, rural-urban migration and very high youth populations (in many cases, over 50% are under 20 years of age) (ANCD 2010). UNODC estimates that 59% of the region's population is between 15 and 64 years old, the ages of common illicit drugs use (UNODC 2009).

The Pacific islands are vulnerable due to their close proximity to major amphetamine-type stimulants (ATS) markets. ATS awareness is low and information related to ATS manufacture, trafficking and use in the Pacific Island States and territories is virtually non-existent. There are millions of potential customers and the potential for spill-over effect exists. A similar spill-over effect has been observed in states and territories in the Caribbean which are used for the transshipment

of cocaine from South America to North America or Europe. Good air and sea links to South-East Asia, long coastlines which are difficult to patrol, limited law enforcement capacity and a multitude of small islands increase the vulnerability. In addition, there is a growing risk of drug crimes from returning deportees with links to criminal organizations.

Data gaps

Very few drug monitoring systems exist in the region and data vary widely in terms of availability, quantity and quality. Much of the data is collected as part of small-scale localized interventions and research activities and not widely disseminated, limiting comparability. Where large-scale surveys have been undertaken, they have often targeted specific populations, leaving large numbers of the population under-explored (ANCD 2010). Achieving a scientific understanding of the situation with respect to illicit manufacture, trafficking and use of drugs therefore has remained an elusive goal so far.

The very low rate of adherence to the three United Nations Drug Control Conventions in the region, namely the 1961 Single Convention on Narcotic Drugs, the 1971 Convention on Psychotropic Substances and the 1988 United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, is another obstacle towards gaining a comprehensive insight into the drug issue. Only four states in the Pacific, namely Fiji, Marshall Islands, Federated States of Micronesia and Tonga are parties to all the above three treaties, making the Pacific the region with the lowest rate of adherence to the treaties in the world. This has impacted not only on the availability of reliable data and drug monitoring systems but also on drug-related legislation which is often outdated and ill-equipped to manage emerging drug issues such as ATS. None of the Pacific Island States and territories have submitted ARQs to UNODC since 2006.

Given these constraints, it is not surprising that evidence of the use of ATS has largely been anecdotal in nature. Little data is available on drug use in the wider population. Health data comes from the Pacific Drug and Alcohol Research network (PDARN) or from non-recurrent one-off surveys conducted by the World Health Organization (WHO) and others. No formal national or regional drug use surveillance systems are in place. Collection of data related to illicit

Table 14. Status of treaty adherence of selected Pacific Island States and territories

State/territory	1961	1971	1988
Cook Islands			x
Fiji	x	x	x
Marshall Islands	x	x	x
Federated States of Micronesia	x	x	x
Palau	x	x	
Papua New Guinea	x	x	
Samoa			x
Solomon Islands	x		
Tonga	x	x	x
Tuvalu*			
Vanuatu			x

*Tuvalu is not party to any of the international drug control treaties
Source(s): United Nations Treaty database, <http://treaties.un.org/>

drugs, particularly ATS, is not considered a priority. Use of ATS is not considered a significant concern in the region.

ATS data collection is hampered by a lack of resources such as drug testing equipment and forensic facilities as well as not being seen as a priority at present. There are no specific drug treatment facilities for ATS but treatment for drugs and alcohol abuse is undertaken by Salvation Army for the Ministry of Health (SMART Pacific March 2011).

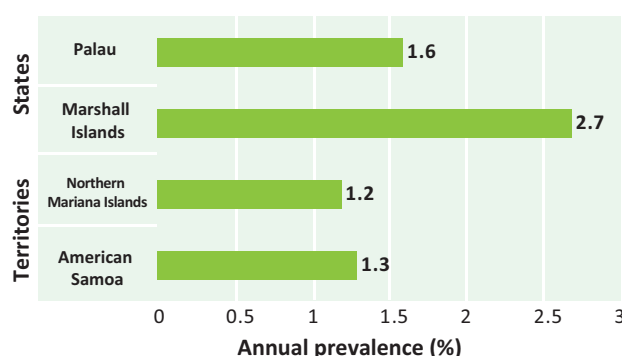
ATS use

The Pacific Island States and territories in the region with available data report high prevalence rates of amphetamines-group substances.¹ The Marshall Islands report the highest annual prevalence rate among Pacific Island States and territories (2.7%) (UNODC).

Lifetime methamphetamine use rates among secondary school students in this region vary considerably, but most tend to be higher than those for Australia or New Zealand. The highest rate was reported from the Marshall Islands (13.1%) and Palau (7.1%); the lowest from American Samoa (5.7%) and Commonwealth of the Northern Mariana Islands (4.9%). Most of these rates are higher than comparable rates for secondary school students in Australia (5.3%) or

¹ High rates may also in part reflect confusion of the substance used, which is common for synthetic drugs, particularly among inexperienced users.

Figure 14. Annual prevalence of amphetamines-group substances in selected Pacific Island States and territories

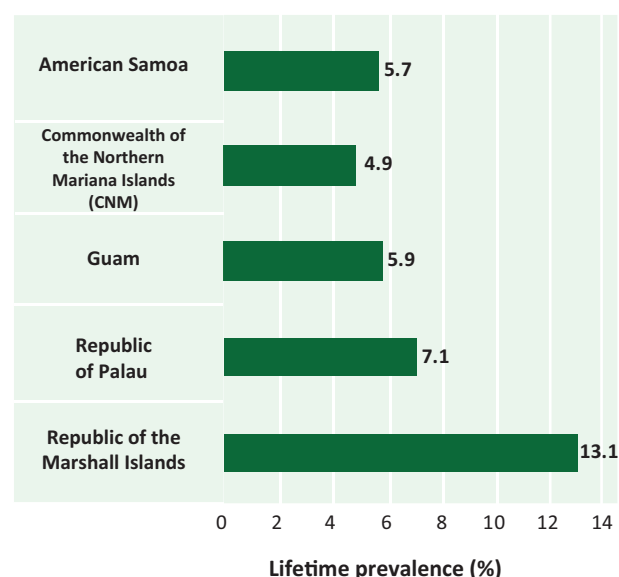


Source(s): UNODC 2011

New Zealand (1.2%). Data on lifetime use of ecstasy in American Samoa, Commonwealth of the Northern Mariana Islands, Guam and Palau show an average use rate of 5.4%.

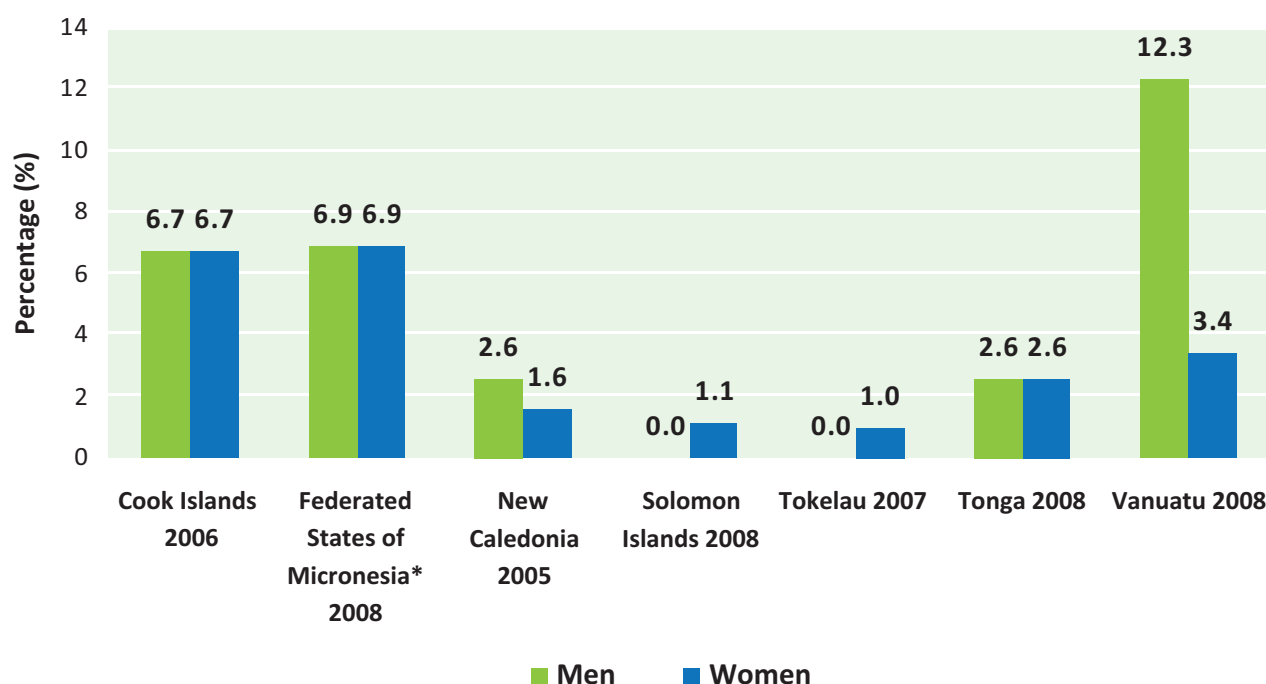
According to the Second Generation Behaviour Surveillance Survey, Vanuatu reports the highest lifetime use of ATS among young people aged 15-24, with an overall rate of 8% (12.3% men and 3.4% women). ATS is not just a one-time experience: last month use was reported from Cook Islands, Solomon Islands, Tonga and Vanuatu.

Figure 15. Lifetime prevalence of methamphetamine use among secondary school students (Grades 9-12), 2007



* Includes all amphetamines-group substances.
Source(s): Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance – Selected Steps Communities, United States, 2007; Youth Risk Behavior Surveillance – Pacific Island United States Territories, 2007. Surveillance Summaries, November 21, 2008. MMWR 2008; 57 (No. SS-12)

Figure 16. Lifetime ATS use among 15-24 year olds in selected Pacific Island States and territories



* Survey conducted in Pohnpei.
Source(s): Howard et al., 2011 (Second Generation Behaviour Surveillance Survey)

Use of cannabis and other substances

Cannabis is the most frequently mentioned illicit drug of concern in Pacific Island States and territories and its use is reported from almost all islands in the region. Lifetime use of cannabis is high in the Northern Mariana Islands, Palau and Vanuatu, where nearly two thirds of young men surveyed reported lifetime use. More than half the women surveyed in Palau and the Solomon Islands reported having used cannabis. Recent use of cannabis was reported by more than 40% of persons surveyed in Palau,

Solomon Islands and Vanuatu (Howard et al., 2011).

Several islands also reported the use of cannabis before the age of 13: high rates were reported from Palau (29% for men) and Northern Mariana Islands (12.3% for women). The lowest rates for both men and women were reported from the Marshall Islands (6% and 3%, respectively), where rates for lifetime and recent use of cannabis among young people are also lower than the rates reported by most other states or territories in the region.

Table 15. Lifetime and past 30-day cannabis use among 15-24 year olds in selected Pacific Island States and territories

State/territory	Sample	Year	Lifetime (%)		Past 30 days (%)	
			Men	Women	Men	Women
Cook Islands	Second generation BSS 15-24 (n = 258)	2006	46.8	46.8	6.5	6.5
Federated States of Micronesia	Second generation BSS in Pohnpei 15-24 (n = 280)	2008	14.5	14.5	6.8	6.8
New Caledonia	Second generation BSS 15-24 (n = 292)	2005	54.8	42.5	•	•
Solomon Islands	Second generation BSS 15-24 (n = 592)	2008	53.7	53.7	44.7	44.7
Tokelau	Second generation BSS 15-24 (n = 207)	2007	37.0	13.0	•	•
Tonga	Second generation BSS 15-24 (n = 387)	2008	24.0	24.0	16.5	16.5
Vanuatu	Second generation BSS 15-24 (n = 301)	2008	67.1	28.8	43.2	17.1
Wallis and Fortuna	Second generation BSS 15-24 (n = 199)	2006	15.3	12.6	•	•

• = Not reported

Source(s): Howard et al., 2011 (Second Generation Behaviour Surveillance Survey)

Table 16. Lifetime and past 30-day cannabis use among secondary school students in selected Pacific Island States and territories

State/territory	Sample	Year	Lifetime (%)		Past 30 days (%)	
			Men	Women	Men	Women
American Samoa	YRBS school students (n = 3625)	2007	25.3	10.6	15.2	5.6
Guam	YRBS school students (n = 1610)	2007	49.9	40.6	25.6	20.5
Marshall Islands	YRBS school students (n = 1522)	2007	22.4	5.5	14.1	3.2
Northern Mariana Islands	YRBS school students (n = 2292)	2007	61.0	48.7	37.5	26.3
Palau	YRBS school students (n = 732)	2007	64.3	55.6	43.7	33.0

Source(s): Howard et al., 2011 (Youth Risk Behaviour Survey)

Table 17. Percentage of secondary school students who tried cannabis for the first time before the age of 13 in selected Pacific Island States and territories

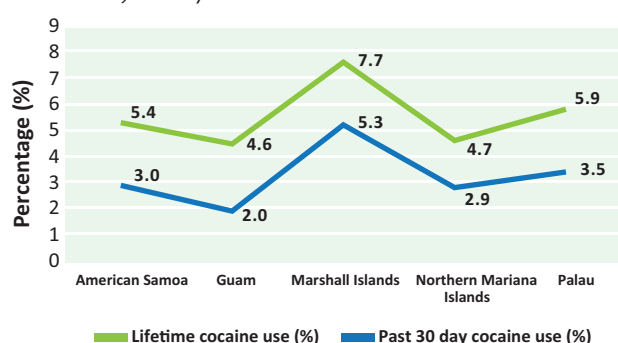
State/territory	Sample	Year	Lifetime (%)		Past 30 days (%)	
			Men	Women	Men	Women
American Samoa	YRBS school students (n = 3625)	2007	11.0	3.1	30.2	23.6
Guam	YRBS school students (n = 1610)	2007	20.2	9.9	42.0	30.7
Marshall Islands	YRBS school students (n = 1522)	2007	6.0	3.0	28.5	19.7
Northern Mariana Islands	YRBS school students (n = 2292)	2007	27.5	12.3	42.3	29.9
Palau	YRBS school students (n = 732)	2007	29.0	9.4	28.3	29.0

Source(s): Howard et al., 2011 (Youth Risk Behaviour Survey)

There are also reports of cocaine and heroin use. Marshall Islands, Palau and American Samoa report rates of last month cocaine use of between 3.0 and 5.3%. Marshall Islands, Palau and American Samoa also report high lifetime rates of heroin use among young people – the highest rate being reported from the Marshall Islands (9.6%). In 2008, 23% of injecting drug users aged 15-24 in Vanuatu reported injecting heroin.

Kava, a psychoactive plant with sedative effects, is traditionally used on many islands in the Pacific. In a 2008 survey, almost 50% of 15-24 year olds in Vanuatu reported lifetime use of kava, followed by Tonga (38%) and Solomon Islands (21%). Alcohol and inhalants have also been reported as being of concern.

Figure 17. Lifetime and past 30-day cocaine use in selected Pacific Island States and territories, 2007

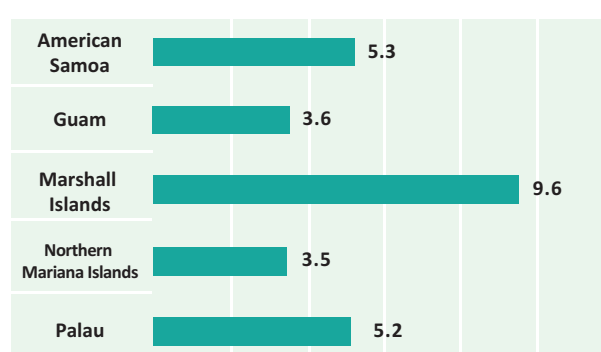


Source(s): Youth Risk Behaviour Surveillance Survey, 2007

Injecting drug use

A study by the Australian National Drug and Alcohol Research Centre revealed that there was a greater proportion of young people who reported injecting drug use (IDU) during the previous 12 months in the Pacific Island States and territories than in Australia and New Zealand. More than 10% of young men reported IDU in the Federated States of Micronesia, Marshall Islands and Vanuatu, and more than 5% of young women in the Federated States of Micronesia and Marshall Islands. There is also some evidence of the presence of IDU in Fiji, Solomon Islands and Kiribati (Ali and Howard 2011).

Figure 18. Lifetime heroin use in selected Pacific Island States and territories, 2007



Source(s): Youth Risk Behaviour Surveillance Survey, 2007

Table 18. Annual prevalence of injecting drug use among young people in selected Pacific Island States and territories

State/territory	Sample	Year	Men IDU (%)	Women IDU (%)
Annual prevalence of injecting drug use among secondary school students in selected Pacific Island States and territories				
American Samoa	YRBS school students* (n = 3625)	2007	8.0	3.8
Guam	YRBS school students* (n = 1716)	2007	5.4	2.1
Marshall Islands	YRBS school students* (n = 1522)	2007	15.8	14.1
Northern Mariana Islands	YRBS school students* (n = 2292)	2007	5.5	2.4
Palau	YRBS school students* (n = 732)	2007	6.5	3.8
Annual prevalence of injecting drug use among 15-24 year olds in selected Pacific Island States and territories				
Federated States of Micronesia	Second generation BSS** (n = 275 in Pohnpei)	2008	11.1	6.4
New Caledonia	Second generation BSS** (n = 292)	2005	0.6	0.0
Tonga	Second generation BSS** (n = 387)	2008	2.3	2.3
Vanuatu	Second generation BSS** (n = 301)	2008	12.9	1.4

*Representative sample. **Convenience sample: at-risk young people.

Source(s): Ali and Howard 2011. Abbreviations: IDU, injecting drug use; YRBS, Youth Risk Behaviour Surveillance; BSS, Behavioural Survey

Table 19. Drug use concerns in selected Pacific Island States and territories

Drug type	Cook Islands	Fiji	Marshall Islands	Federated States of Micronesia	Niue	Palau
ATS (methamphetamine, ecstasy)	Some limited use reported	Use in urban settings (night-clubs) reported	High lifetime prevalence of methamphetamine reported (13.1%)	Some limited use reported	None identified	Methamphetamine use among youth. No data collection on adult substance use
Cannabis	Well reported among Cook Islands Maori residents (annual prevalence 21%) and youth (46.8% lifetime prevalence among 15-24 year olds)	Use widely established	2.7% of women used cannabis before pregnancy and 22.4% of men and 5.5% of women (secondary school students) report lifetime use. Link to mental health problems	Reportedly on the rise - 14.5% of 15-24 year olds in Pohnpei report lifetime use and 6.8% report past 30-day use	Anecdotal information on use	Easily accessible - high use rates reported among secondary school students in 2007 (lifetime use 64.3% men, 55.6% women; past 30-day use 43.7% men, 33% women). Almost a third of men (29%) reported use of the drug before the age of 13
Cocaine	•	Some use reported	High rates of lifetime use (7.7%) and past 30-day cocaine use (5.3%) reported by secondary school students	•	None identified	5.9% of secondary school students report lifetime use and 3.5% report past 30-day use of cocaine (2007). No data collection on adult substance use
Heroin	Some limited use reported	Some use reported	9.6% of secondary school students surveyed report lifetime use of heroin (2007)	None identified	None identified	5.2% of secondary school students surveyed report lifetime use of heroin. Reports of injecting drug use
Traditional psycho-active substances (kava, noni, yaquona, saku, etc.)	Not significant	Widespread use	Very limited use reported to occur	Reportedly on the rise	None identified	None identified
Other concerns	None identified	Widespread inhalant use	Injecting drug use among secondary school students: 15.8% men, 14.1% women	Pohnpei Youth Survey (2007) reports injecting drug use: 11.1% men, 6.4% women	None identified	Injecting drug use among youth (secondary school students) reported in 2007: 6.5% for men and 3.8% for women

• = Not reported

Table 19. Cont. Drug use concerns in selected Pacific Island States and territories

Drug type	Papua New Guinea	Samoa	Solomon Islands	Tonga	Tuvalu	Vanuatu
ATS (methamphetamine, ecstasy)	Use reported	Use reported	Use reported	Use reported (2.6% lifetime use of ATS among 15-24 year olds)	Use reported	8% lifetime use of ATS reported by 15-24 year olds (12.3% men; 3.4% women). Vanuatu also reported a very high rate of past 30-day ATS use among men - 11.6%. Methamphetamine (speed) was the most commonly used drug by 41% of injecting drug users
Cannabis	Use said to be very widespread but few systematic data collection efforts	25.3% of men and 10.6% of women secondary school students surveyed in 2007 reported lifetime use. Past 30-day use: 15.2% (men); 5.6% (women). 11% of men surveyed tried the drug before the age of 13	Key drug of concern. High rates of use - 53.7% of 15-24 year olds report lifetime use; 44.7% report past 30-day use (2008)	Use reported – 24% of 15-24 year olds report lifetime use; 16.5% report past 30-day use (2008)	Use reported	Increased use among young people reported. 15-24 year olds: lifetime use of ATS (67.1% men; 28.8% women); past 30-day use (43.2% men; 17.1% women)
Cocaine	•	Lifetime use reported by secondary school students in 2007 (5.4%); past 30-day use (3%)	Use reported	•	None identified	Cocaine reported as a commonly injected drug among 13.7% of injecting drug users aged 15-24 (2008)
Heroin	•	Use reported – 5.3% lifetime use rate reported by secondary school students in 2007	None identified	None identified	None identified	23% of injecting drug users (aged 15-24) reported injecting heroin
Traditional psychoactive substances (kava, noni, yaquona, saku, etc.)	Use reported but concern low compared to other drugs	Use reported	21.4% of 15-24 year olds surveyed reported lifetime use of kava (2008)	Ceremonial use reported. 38% of 15-24 year olds reported lifetime use of kava (2008)	Use reported among young people	Local use. Almost 50% of 15-24 year olds in 2008 reported ever having used kava, with a higher rate of use reported among men (59.4%) than women (37%)
Other concerns	Injecting drug use reported	Limited injecting drug use (8% men, 3.8% women secondary school students surveyed in 2007 reported injecting drug use)	None identified	Injecting drug use (15-24 year olds): 2.3%	None identified	High injecting drug use among 15-24 year olds: 12.9% for men and 1.4% for women

• = Not reported

In Vanuatu, methamphetamine is the most commonly injected drug among 15-24 year olds, used by 41% of injecting drug users. Heroin and cocaine were also reported as commonly injected drugs. More than half of injecting drug users aged 15-24 in Vanuatu reported that the needle and syringe had been used by another person first (59%) (Second Generation Surveillance of Antenatal Women, STI Clinic Clients and Youth, Vanuatu, 2008).

Drug manufacture/cultivation and trafficking

The large number of commercial shipping routes in Oceania to Asia and North America offer ample opportunities for drug trafficking. In addition, most Pacific Island States and territories have porous maritime borders and long coastlines which represent almost insurmountable challenges to effective law enforcement. While amounts seized tend to be small (less than 1 kg), these low figures should not be taken to reflect the actual situation. Most States have limited knowledge in identifying synthetic drugs, specifically ATS, as well as their precursors.

ATS

Reports of significant illicit drug manufacturing facilities in the Pacific region date back to 2004. In that year, the largest laboratory seizure was made in Fiji, where a large-scale illicit manufacturing plant for methamphetamine was discovered. The weekly manufacturing capacity of methamphetamine was estimated at between 500 and 1,000 kg (Schloenhardt, 2007). The facility was managed by an Asian drug trafficking organization. Over the past years, several smaller-scale methamphetamine laboratories have been seized in Guam and in a crystallization operation in French Polynesia in 2009 and there are indications that manufacture may be spreading to other islands.

Precursors appear to be trafficked with increasing frequency in the Pacific. As Australia and New Zealand have strengthened controls over precursor chemicals, these have become lucrative items that can be sold at high prices. Seizures of precursors, attempted diversions and thefts have been reported by authorities in Fiji, French Polynesia, Nauru, Papua New Guinea, Samoa and Tonga. Attempts have been made to traffic large amounts of ephedrine through Fiji disguised as allergy medication (ANCD 2010).

As a result, some States have introduced control measures over the substance. In Fiji, sales of over-the-counter preparations containing ephedrine require registration and are subject to a purchase limit of one packet per person. In addition, an informal network of pharmacists identified suspicious purchasing behaviour. Similar restrictions over such preparations exist in Samoa but it is unclear whether they are strictly enforced (ANCD 2010).







Amphetamine-type stimulants, particularly methamphetamine, are seized throughout the region. Along with cannabis, methamphetamine is the most frequently intercepted drug in the region. Methamphetamine seizures were reported from Fiji, French Polynesia, Samoa and Tonga in 2009 and 2010. In Tonga, 17.7 kg of methamphetamine believed to be destined for Australia were seized in 2009. Liquid methamphetamine was reported seized in French Polynesia (340 grams), and five seizures of smaller quantities of methamphetamine were seized in the mail in Guam (OCO undated). The United States Postal Inspection Service also reported that packages containing small amounts of methamphetamine had been sent through the postal system. More than 15,000 methamphetamine pills were reportedly seized by Fiji authorities in 2009 and 2010 (Fiji Times, July 2010). Most recently, in February 2011, 4 kg of methamphetamine-cocaine mixture were found in a vehicle in Tonga.

Cannabis and other substances

Cannabis is cultivated on many islands in the region, including Fiji, Papua New Guinea, Samoa, Solomon Islands, Tonga and Vanuatu. Fiji has reported large seizures of cannabis plants, including 15,000 cannabis plants eradicated by the Fiji Police Force (INCB 2010). Eradication campaigns have been reported from Fiji and the Solomon Islands. It appears that in recent years, organized criminal groups have been involved in the illicit manufacture of and trafficking in cannabis in the Pacific region and there is concern that the development of the 'cannabis industry' will facilitate the investment of profits from that industry in the illicit manufacture of other drugs, in particular methamphetamine (INCB 2010a).

Several seizures of cocaine and heroin have been reported from Fiji, French Polynesia, Papua New Guinea and Vanuatu. In some instances, the seizures

Table 20. Drug/laboratory seizures and trafficking in selected Pacific Island States and territories

Drug type	 Cook Islands	 Fiji	 Marshall Islands	 Federated States of Micronesia	 Niue	 Palau
ATS (methamphetamine, ecstasy)	•	Large-scale illicit manufacturing plant for methamphetamine seized in 2004. Methamphetamine seizures reported. Seizures of precursors, attempted diversions and thefts also reported	Seizures reported. Identified source countries include China, Philippines, United States of America (mainland and Hawaii)	•	•	•
Cannabis	•	Cultivation widely established. Large seizures of cannabis plants reported	Reported seizures	•	No reports of cannabis cultivation	Locally grown
Cocaine	•	Some seizures reported	Seizures reported	•	None identified	•
Heroin	•	357 kg reported seized in 2007	Limited	None identified	None identified	None identified
Traditional psychoactive substances (kava, noni, yaquona, saku, etc.)	Not significant	Kava trade significant source of income	•	•	None identified	None identified

• = Not reported

Table 20. Cont. Drug/laboratory seizures and trafficking in selected Pacific Island States and territories

Drug type	Papua New Guinea	Samoa	Solomon Islands	Tonga	Tuvalu	Vanuatu
ATS (methamphetamine, ecstasy)	Seizures reported. Seizures of precursors, attempted diversions and thefts reported	Methamphetamine seizures reported. Seizures of precursors, attempted diversions and thefts reported	•	Seizures reported. Potential major transshipment point for ATS and precursor chemicals. Seizures of precursors, attempted diversions and thefts reported	None identified	Seizures of amphetamines and ecstasy reported
Cannabis	•	Source of cannabis	Key drug of concern	Source of cannabis. Seizures reported	Occasional seizures reported	Cultivation of cannabis, substance often sold in kava bars
Cocaine	Seizures reported	Seizures reported	•	Potential major transshipment point for cocaine. Last large seizure of cocaine (100 kg) reported in 2001. Four kg of cocaine-methamphetamine mixture seized February 2011	None identified	Last seizure (120 kg) reported in 2004
Heroin	Transit country for trafficking	None identified	None identified	None identified	None identified	Last seizure (160 kg) reported in 2001
Traditional psychoactive substances (kava, noni, yaquona, saku, etc.)	Frequent arrests for drug possession	Frequent arrests for drug possession	None identified	None identified	None identified	None identified

• = Not reported

were significant. In Fiji, 357 kg of heroin were seized in 2007, and more than 120 kg of cocaine were seized in Vanuatu in 2004. Customs authorities of Fiji and Papua New Guinea reported seizures of cocaine from South America and Central America that had been smuggled in air cargo and by air passengers. Although the total amount seized was small, it is a possible sign that these countries are being considered as possible new markets for cocaine (INCB 2010a).

Conclusion

The geographical proximity to major markets for illicit drugs, particularly ATS, renders the region very vulnerable to drug transit trafficking. The risk of a spillover of illicitly manufactured or trafficked substances into the domestic market can be rapid and new forms of drug use can become a major public health concern. This concern is even more acute in light of the fact that only four Pacific Island States and territories have ratified the three fundamental United Nations Drug Control Conventions.



Regional Trends: South Asia

Summary, emerging trends and concerns

- Countries in South Asia¹ are vulnerable targets for illicit ATS manufacture due to several factors:
 - the geographical proximity to East and South-East Asian source countries of illicit methamphetamine;
 - the wide availability of precursor chemicals, particularly ephedrine and pseudoephedrine, often in the form of pharmaceutical preparations;
 - the technical know-how available in the region.
- India is the main source of manufacture and trafficking of ATS in South Asia, which has been targeted by organized crime groups for several years.
 - The first illicit ATS manufacturing operation was detected in 2003;
 - ATS seizures have developed from a few isolated cases of methamphetamine and ecstasy in 2004 to relatively large seizures of methamphetamine, ecstasy and amphetamine, although the level of seizures does not reflect the true extent of the ATS problem in India and awareness of the problem remains low;
 - In spite of the tight controls and strong implementation, ephedrine and pseudoephedrine originating from India are routinely seized in India as well as in many countries around the world;
 - Seizures of ketamine have increased from 60 kg in 2005 to more than 1.2 mt in 2010 and continued to show an upward trend in 2011. In addition, ketamine has been trafficked to countries in East and South-East Asia and Canada.
- Bangladesh and Nepal have reported methamphetamine seizures.
- Official statistics represent only the tip of the iceberg, as comprehensive assessments to determine the nature and extent of the ATS situation have not been made. In addition, there is no systematic profiling of seizures of ATS with respect to their constituents, markings, colour, manufacturing batch numbers and/or identifications and back track investigations to identify the origin of precursors and equipments. These are areas that deserve further action by the governments concerned, with possible support from the international community.

Overview of the situation

The subregion of South Asia consists of Bangladesh, Bhutan, India, Maldives, Nepal and Sri Lanka. In this chapter, the focus is on those countries where the risk of increasing use of amphetamine-type stimulants (ATS) is greatest, namely Bangladesh, India, Nepal and Sri Lanka. Very little information is available from Bhutan and Maldives.

Unfortunately, dedicated data collection mechanisms on this important issue are still absent from most countries in the region. There is also a need to continue improving forensic information which can provide important insights into the origin of synthetic drugs. Nevertheless, the discovery of several illicit methamphetamine laboratories in South Asia over the past two years shows that countries in the region are increasingly being used as locations for illicit ATS manufacture.

In recent years, the vulnerability of South Asia to ATS trafficking and manufacture has become evident. International drug trafficking organizations have

¹ Data used in this chapter were largely supplied by the UNODC Regional Office for South Asia based in India, which used information provided by Government authorities, United Nations entities and other international organizations such as Interpol and the World Customs Organization as well as regional organizations.

sought to convert the subregion into a major base, given the wide availability of precursor chemicals required to manufacture illicit synthetic drugs throughout South Asia, coupled with good technical knowledge and infrastructure.

The subregion has witnessed various scales of ATS manufacture, ranging from small-scale kitchen laboratories to large-scale so-called 'super labs'. Illicit laboratories have also engaged in extracting precursors for ATS from pharmaceutical preparations containing ephedrine or pseudoephedrine. New techniques for chemical syntheses are being used in illicit methamphetamine manufacture. Bangladesh, India and Sri Lanka appear to be targeted by organized criminal groups involved in such manufacturing activities.

South Asia is also a transit region for ATS trafficked from neighbouring South-East Asia. The influx of methamphetamine pills from Myanmar into India and Bangladesh is on the rise. In addition, crystalline methamphetamine manufactured in the region is also being trafficked from South Asia to South-East Asia and Oceania.

There is already evidence of diversion of consignments of ephedrine and pseudoephedrine originating from South Asia to destination countries. Trafficking of ATS precursors from China into Nepal has also been reported, although their use in the illicit manufacture of ATS remains a matter of conjecture. In addition, the number of seizures of pharmaceutical preparations containing ephedrine and pseudoephedrine in Central American countries such as Guatemala and Honduras sourced from India and Bangladesh is increasing.

Trafficking of ketamine (a substance not controlled by the international drug control treaties) from India to destinations in East Asia is on the rise. Ketamine is substituted for MDMA in products sold as 'ecstasy' and is also used for direct consumption. Since there had been no reports that the substance was being used in India, the Government of India initially brought in controls on the export of the substance. Subsequently, in February 2011, the Government of India placed the substance under national control as a psychotropic substance, with the result that ketamine can now be seized under the Narcotic Drugs and Psychotropic Substances Act (NDPS Act), 1985.



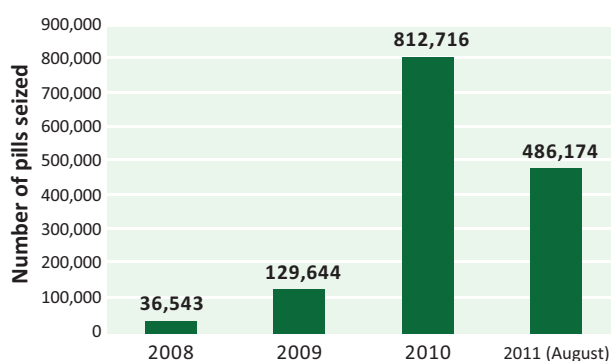
Bangladesh

The most widely seized amphetamine-type stimulants in Bangladesh are methamphetamine pills (locally known as 'yaba'), which are mostly smuggled into the country from Myanmar (INCSR Bangladesh 2011). However, in November 2007, a single seizure of 1.3 million methamphetamine pills was made by the Rapid Action Battalion in Dhaka, which were believed to have been manufactured locally. The number of methamphetamine seizures has shown a steady upward tendency since 2008.

Bangladesh has a sizeable pharmaceutical industry. Over the past few years, the country has emerged as a source for large quantities of precursors in the form of pharmaceutical preparations which are trafficked to destinations in Central America and the Caribbean. The International Narcotics Control Board (INCB) reports that almost all of the attempted diversions and seizures of pseudoephedrine preparations destined for Guatemala in 2010 originated in Bangladesh with individual seizures weighing between 6 kg and 1.2 tons (INCB 2011b).

Use of ATS has become widespread in the urban areas of Bangladesh, particularly in Dhaka where the drug is said to be widely available. Methamphetamine pills are the most frequently used ATS.

Figure 19. Bangladesh: total seizures of methamphetamine pills, 2008-2011



Source(s): UNODC South Asia, based on information received from Government agencies from Bangladesh (Department of Narcotics Control, Rapid Action Battalion, Border Guard Bangladesh, Police and Coast Guard)

Table 21. Bangladesh: total seizures of methamphetamine pills, 2008-2011

Year	No. of cases	Quantity seized (no. of pills)
2008	149	36,543
2009	233	129,644
2010	629	812,716
2011 (Jan-Aug)	727	486,174

Source(s): UNODC South Asia, based on information received from Government agencies from Bangladesh (Department of Narcotics Control, Rapid Action Battalion, Border Guard Bangladesh, Police and Coast Guard)



India

Illicit manufacture of amphetamine-type stimulants (ATS)

India has been targeted for illicit ATS manufacture for some time. The first seizure of an illicit ATS laboratory (a methamphetamine laboratory) was reported in May 2003 in Kolkata. Twenty-four kilogrammes of ephedrine were seized and nationals from China and Myanmar were arrested. Backtrack investigations led to a further seizure of ephedrine (500 kg) in June 2003 and the arrest of more persons operating on the India - Myanmar border.

Between 2004 and 2009, several additional facilities, or attempts to establish facilities for the illicit manufacture of ATS, predominantly methamphetamine, were uncovered by law enforcement agencies in India.

In December 2009, 18 kg of methamphetamine were seized in the Punjab region, apparently destined for Canada. In that same month, a factory illicitly manufacturing ephedrine, the first of its kind detected in South Asia, was seized in Nasik, in the southwest of India.

During 2010, two illicit methamphetamine laboratories were seized in Mumbai and one methamphetamine laboratory was seized in the State of Himachal Pradesh (INCB 2011a). Significantly, three laboratories found to be illicitly manufacturing ephedrine were seized in Maharashtra and Gujarat by the Narcotics Control Bureau, Mumbai (NCB). During the course of the investigation, methamphetamine, ephedrine, pseudoephedrine, powder of Actifed tablets and Lorfast-D (loratadine + pseudoephedrine) tablets were also seized.

In February 2011, officers of the NCB of Mumbai seized an ephedrine laboratory at District Satara, Maharashtra along with 13 kg of ephedrine. Two persons were arrested.

As in previous years, attempts to set up illicit facilities to manufacture methamphetamine continue. In most cases, the involvement of foreign operatives has been noted, which indicates that India is being used by international criminal networks for the illicit manufacture of ATS.

Trafficking of ATS

Traditionally, ATS precursors have been smuggled from India to Myanmar whereas the finished ATS product has been trafficked in the reverse direction. Seizures of methamphetamine and amphetamine pills in India are

Table 22. ATS seizures in India, 2007-2011

Substance	2007	2008	2009	2010	2011*
Methamphetamine pills (units)	•	6,739	•	2,547	•
Methamphetamine (kg)	•	10.6	46.1	22.0	•
Ecstasy (units)	•	•	•	15	•
Ecstasy (g)	•	21	20	236	132
Amphetamine pills (units)	•	5,870	•	•	•
Amphetamine (kg)	4.6	67.9	2.4	14.0	4.3
No. of manufacture facilities seized	1	1	2**	4***	1****

• = Not reported. *January to September, 2011. **Includes one illicit seized ephedrine manufacturing facility and one ATS laboratory. ***Includes two seized ephedrine manufacturing facilities and two ATS laboratories. ****Illicit ephedrine manufacturing facility.

Source(s): Monthly Drug Situation Report of Narcotics Control Bureau of India

predominantly made in the northeast of the country, in the region bordering Myanmar, which is also the source of these drugs. An overview of ATS seizures in India is shown below:

Seizures have developed from a few isolated cases of seized methamphetamine and ecstasy in 2004 to relatively large seizures of methamphetamine, ecstasy and amphetamine in more recent years. Whereas amphetamine and methamphetamine pills are mostly trafficked into the country from abroad, amphetamine and methamphetamine in powder form are primarily manufactured in India. It should be noted that most ecstasy seizures are reported from Goa, a popular tourist destination located in southwest India. The last significant ecstasy seizure outside Goa was recorded in 2004.

Cambodia, Canada, Spain, Taiwan Province of China and United Kingdom have been cited as final destinations of ATS. The Philippines has also been noted as a final destination for seizures of methamphetamine made at international airports in India and Hong Kong, China (HKNB 2008). Smuggling by courier and postal services has also been detected.

The low level of ATS seizures does not reflect the true situation of ATS trafficking, but rather the fact that the level of awareness among law enforcement agencies of the ATS problem remains fairly low. However, even from the limited information that is available, it is clear that India has become a source for ATS and the precursor chemicals needed to manufacture them, as drug trafficking organizations continue to build networks to and from the region.

Trafficking of ATS precursors – ephedrine and pseudoephedrine

The availability of ATS precursors, primarily ephedrine and pseudoephedrine, in India and throughout the subregion is a precondition for illicit ATS manufacture. Along with China and Germany, India is among the world's largest manufacturers of ephedrine and pseudoephedrine and a main exporter of these substances.

India is among the countries most often reported as sources of seized illicit shipments of ephedrine and pseudoephedrine. Consignments of these chemicals have been trafficked from and through various

countries and regions, including the Balkans, Islamic Republic of Iran, Pakistan, Philippines, Syrian Arab Republic, United Arab Emirates and Africa (EMCDDA 2009).

Several seizures made between 2008 and 2010 underscore the importance of India as a point of origin of ephedrine or pseudoephedrine. In April 2010, Mexican authorities reported the seizure of over 3.7 mt of pseudoephedrine in the form of pharmaceutical preparations from a vessel that originated in India. Several seizures of ephedrine made in Latin American countries are reported to have originated in India (INCB 2011b).

Law enforcement agencies in India have also made significant seizures of ephedrine and pseudoephedrine over the last few years which confirm that diversion of these substances from licit channels is taking place in spite of the strict controls imposed by the Government of India.

No specific pattern has emerged from the analysis of these seizures. The primary factor contributing to larger seizures in 2006 was the discovery of an illicit methamphetamine manufacturing facility which resulted in the seizure of 550 kg of ephedrine and additional seizures of 650 kg of the substance. In 2008, the largest single seizure of ephedrine amounted to 872 kg whereas in 2009 the largest single seizure was 400 kg.

The increase in the number and quantity of seizures in 2008 and 2009 over previous years as well as the documented evidence suggests that ephedrine is becoming increasingly available to traffickers in India, despite the strict controls.

Seizures of pseudoephedrine in India were first recorded in 2007 when 290 kg were seized from an illicit laboratory in western India. A single seizure of 37 mt of dl pseudoephedrine² was made in 2008.

These seizures confirm the availability of both of these precursors for illicit ATS manufacture, and at the same time prevented the trafficking of these amounts which could have resulted in the illicit manufacture of about 27.5 mt of ATS.

² dl Pseudoephedrine is dl-threo-2-(methyldamino)-1-phenyl-propan-1-ol

Table 23. Seizures of ephedrine and pseudoephedrine in India, 2007-2011

Year	2007	2008	2009	2010	2011*
Amount (kg)	236	2,754	1,244	2,207	1,402

*January to September, 2011

Source(s): Monthly Drug Situation Report of Narcotics Control Bureau of India

The smuggling of ATS precursors using courier services is significant: in one third of the cases detected, courier services were used for trafficking ephedrine and/or pseudoephedrine.

Indo-Canadians have surfaced in the smuggling of precursors and illicit methamphetamine manufacture. Links to Mexican drug trafficking groups cannot be ruled out. Canadian police have also identified Indo-Canadian criminal groups as high-level transporters of synthetic drugs and precursor chemicals from Canada to the United States. ATS seizures made in the Punjab/Delhi regions have also indicated the involvement of Indo-Canadians.

Reports from law enforcement agencies suggest an increase in methamphetamine trafficking by Canada-based Asian drug trafficking organizations in the United States. However, detailed information on the extent of their operations is somewhat limited, as Asian drug trafficking organizations tend to operate within highly insular Asian communities that are very difficult for law enforcement to investigate and infiltrate. This has been identified as a major intelligence gap in the 'Methamphetamine Threat Assessment Report' published annually by the National Drug Intelligence Center of the US Department of Justice (USDOJ 2008).

Trafficking of pharmaceutical preparations containing ATS precursors

India is also a source country for pharmaceutical preparations containing ATS precursors. The stringent controls exercised by India on ATS precursors, complemented by voluntary compliance by the chemical industry and trade in the country, have made the availability of bulk ATS precursors scarce for illicit drug manufacturers and traffickers, which has resulted in many of them resorting to the extraction of ATS precursors from pharmaceutical preparations containing ephedrine and pseudoephedrine. The lack of both international and domestic controls on such substances has led to many drug manufacturers and traffickers sourcing them from India.

Major seizures of pseudoephedrine tablets originating from India have been made in various countries around the world. Several million tablets, labeled as cold medication and ultimately destined for Mexico, were seized in the United States and Guatemala in 2009. Seizures of pseudoephedrine of Indian origin were also made, *inter alia*, in France, Republic of Korea and United Kingdom.

These examples illustrate the fact that pharmaceutical preparations containing pseudoephedrine are being sourced from India for the purpose of illicit ATS manufacture. These preparations are not controlled by the 1988 United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. While the law in India does not restrict the export of such substances, restrictions are often imposed upon their arrival at destination countries, with the result that pharmaceutical preparations are often not legally exported out of India but rather smuggled under the guise of other legally exportable goods by way of mis-declaration. Awareness among law enforcement agencies about diversion of pharmaceutical preparations containing precursor chemicals needs to be strengthened to counteract this effectively.

The trend of using pharmaceutical preparations for the extraction of ATS precursors for further use in the illicit manufacture of methamphetamine is a global phenomenon which also affects India. The seizure of about 5,000 kg of 'Actifed' brand tablets containing pseudoephedrine by the Food & Drug Administration, Maharashtra from different storage places in December 2008 is a classic example of such diversion. Pseudoephedrine is subsequently extracted from these preparations by dissolving it in isopropyl alcohol.

Seizures of pharmaceutical preparations continue to be made in India. Further seizures of Actifed tablets were made close to the India-Myanmar border in 2009.

Trafficking of other ATS precursors

Norephedrine, phenylacetic acid and 1-Phenyl-2-propanone (P-2-P) are other precursors trafficked from India for use in the illicit manufacture of methamphetamine.

In December 2006, Chennai Customs seized about 245 kg of phenylpropanolamine (norephedrine) from an export consignment of groundnut kernels destined for Jakarta. The norephedrine was concealed in gunny bags containing groundnut kernels and disguised as pesticide. Less than a week later, another seizure of 500 kg of norephedrine was made from an import consignment which was not claimed by anyone, suggesting that India is also possibly used as a transit point for smuggling. However, norephedrine is also manufactured in India but not controlled domestically.

Eight hundred and twenty-three kilogrammes of a substance purported to be amphetamine were seized in Mumbai in June 2008, which on chemical analysis, were confirmed to be norephedrine. The consignment was destined for Mexico. In October 2008, Croatian authorities, jointly with their Canadian counterparts, seized 188 kg of norephedrine and another 223 kg in Montreal, Canada as a consequence of the joint operation. The substance had originated in India and had been smuggled into Croatia concealed in machinery (INCB 2009).

Anecdotal evidence suggests that phenylacetic acid and P-2-P, precursors commonly used in illicit amphetamines manufacture, are also being trafficked from India. In 2009, anti-drug police in Dominican Republic seized 250 kg of phenylacetic acid coming from India. The substance was bound for Honduras and the suspects were detained for attempting to smuggle pseudoephedrine tablets into Honduras. In 2009, 4,000 lt. of P-2-P were stopped in India before being trafficked onwards, following information from authorities in the Syrian Arab Republic that the material had not been ordered by the company named in the pre-export notification documentation (INCB 2010b).

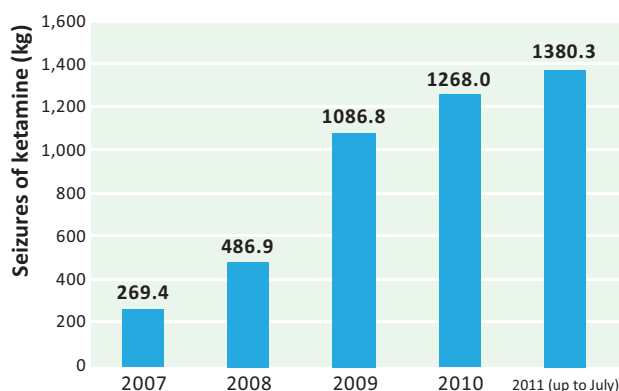
Trafficking of ketamine

Ketamine is a hallucinogenic substance often used for veterinary purposes. It is not under international control but the Government of India introduced controls on the export of ketamine in December 2007. In order to curb the trafficking of ketamine, in February 2011, the Government of India placed the substance under national control as a psychotropic substance, with the result that ketamine can now be seized under the Narcotic Drugs and Psychotropic Substances Act (NDPS Act), 1985.

However, despite control measures, ketamine continues to be smuggled from India to countries in East and South-East Asia where its use is reportedly widespread. Ketamine has also emerged as an adulterant in the illicit manufacture of ecstasy in East and South-East Asia and as an ingredient in pills sold as 'ecstasy' on the East and South-East Asian ATS markets. The quantities of ketamine seized by Indian law enforcement agencies have continuously increased over the past six years, from 60 kg in 2005 to more than 1.3 mt in 2011.

Ketamine seizures are made at airport interdictions, courier parcels, sea cargo and during domestic transportation. More than 90% of seizures have been made in the south of India.

Figure 20. Seizures of ketamine in India, 2007-2011



Source(s): Various seizure reports from the Directorate of Revenue Intelligence, Chennai and Drug Situation Reports of Narcotics Control Bureau

Table 24. Seizures of ketamine in India, 2007-2011

Year	2007	2008	2009	2010	2011 (Jan-Jul)
Quantity (kg)	269.4	486.9	1,086.8	1,268.0	1,380.3

Source(s): Various seizure reports from the Directorate of Revenue Intelligence, Chennai and Drug Situation Reports of Narcotics Control Bureau

Ketamine has been popular among drug trafficking organizations due to high profit margins. The absence of domestic controls allows free movement of the substance and makes it more easily available to traffickers. While evidence from forensic analyses of ATS has not shown that ketamine is being used in the manufacture of illicit ATS, this cannot be ruled out due to its easy availability.

The extent of use of ATS in India remains unknown. The last household survey on drug use was carried out in 2000-2001; however, questions specific to various types of ATS used were not included. Available data on drug treatment are scarce as the last assessment was conducted in 2001 (UNODC 2009a). Anecdotal reports, however, suggest that ATS use for recreational purposes exists and is on the rise.



Nepal

No illicit manufacture or use of ATS has been reported from Nepal to date. The main drugs in the country are domestically cultivated cannabis and opium which are trafficked through and to Nepal. Pharmaceutical preparations commonly smuggled out of India and into Nepal contain buprenorphine and nitrazepam. In 2007, about 11,500 vials containing buprenorphine and 92,500 vials containing benzodiazepines were seized in Nepal (INCB 2010a). With regard to illicitly manufactured ATS, several seizures have been reported by the Narcotic Drugs Control Law Enforcement Unit (NDCLEU) in Nepal to date, including 800 g of methamphetamine seized in Kathmandu airport in 2008, involving an Iranian national, and a total of 255.3 grams of methamphetamine pills in 2010 seized in three separate incidents, all involving Nepalese nationals (NDCLEU 2011).

The NDCLEU has reportedly noted an increase in arrests of Nepalese couriers in other countries in recent years, indicating that Nepalese nationals are possibly becoming more involved in the drug trade, both as couriers and as traffickers. Nepal may also be increasingly used as a transit point for destinations in South and East Asia, as well as in Europe. The NDCLEU has identified the United States as a final destination for some drugs transiting Nepal, typically routed through Thailand, China and Indonesia (INCSR 2011 Nepal).

Unconfirmed reports emanating from law enforcement officials suggest that ATS precursors are smuggled through the land border from China into Nepal. This is a serious development that is largely going unnoticed in Nepal as resources to address all aspects of drug use and trafficking remain very limited. Treatment and rehabilitation services for drug users in the country remain under-resourced (INCB 2010a).

The pharmaceutical industry is also fast developing in the country and the absence of legislative controls on precursor chemicals is likely to be exploited by organized crime groups. Legitimate imports of pseudoephedrine into Nepal have also increased significantly over the years, although exact data are not available.



Sri Lanka

Traffickers have been searching for new places to set up clandestine laboratories for ATS manufacture in South Asia, and Sri Lanka is becoming a target. ATS use is also reportedly on the rise in Sri Lanka.

The first illicit laboratory seizure was reported from the country in May 2008, in Kosagama, 70 km from Colombo. Large quantities of chemicals were seized which were suspected of being used in illicit methamphetamine manufacture.

In the first major haul of methamphetamine in the country in January 2010, Sri Lankan customs officers seized over 17 kg of methamphetamine at Colombo International Airport, while in August 2010, police narcotic officers seized a further 8.3 kg of methamphetamine from Iranian nationals who had just flown in to Colombo from Qatar (SMART 2010). Small quantities of ecstasy are routinely seized in Colombo and these drugs are believed to have been trafficked into the country from Thailand (INCSR Sri Lanka 2011).

National Trends

Australia
Brunei Darussalam
Cambodia
China
Indonesia
Japan
Lao PDR
Malaysia
Myanmar
New Zealand
Philippines
Republic of Korea
Singapore
Thailand
Viet Nam



Emerging trends and concerns

- A record number of illicit laboratories were detected in Australia in 2009-2010,¹ predominantly for the manufacture of amphetamine and methamphetamine. However, the scale of manufacture at these facilities is unclear.
- Border detections of ephedrine and pseudoephedrine declined sharply in 2009-2010. In addition, manufacturers are increasingly seeking alternative ATS manufacturing methods which do not rely upon these chemicals.
- The number of arrests for illicit drugs in 2009-2010 is the highest reported in the past decade. Although ATS-related arrests decreased by 15%² compared with the previous reporting period, they accounted for one-sixth of all drug-related arrests, second only to cannabis.
- Cocaine use is at its highest level on record and arrests related to the drug have almost doubled over the past decade. However, the weight of national seizures continued to decline in 2009-2010.

Overview of the drug situation

The use of amphetamine-type stimulants (ATS) expanded significantly in Australia in the late 1990s and early 2000s. Methamphetamine powder, known on the street as 'speed', is the most widely used form of the drug in Australia, followed by crystalline methamphetamine and methamphetamine base (Sindicich and Burns 2010; Stafford and Burns 2010). Since 2004, ecstasy has been reported as the second most commonly used illicit drug in the country, second only to cannabis (AIHW 2011).

Although ATS use has stabilized in Australia in recent years, significant amounts of ATS continue to be illicitly manufactured in the country. A record 694 clandestine laboratories were detected during 2009-

2010. Of those, 585 were identified as manufacturing amphetamine or methamphetamine and 17 were identified as manufacturing ecstasy. The majority of clandestine laboratories detected in Australia continued to be detected in residential areas (ACC 2011).

Cannabis continues to be the dominant illicit drug in terms of arrests, seizures and use. In addition, domestic cannabis cultivation continues at high levels.

The cocaine market is limited in Australia but it has expanded more recently as reflected by increases in cocaine-related arrests, treatment presentations and seizures. However, in 2010, the weight of cocaine seized in Australia decreased. Australia has a small heroin market, although heroin accounts for a significant number of problem drug users in treatment.

Australia has identified the use of analogue substances not under international control as problematic (ACC 2011). Increased law enforcement attention has been given in particular to mephedrone

¹ Drug-related law enforcement data reported for Australia follow the fiscal calendar year from 1 July through 30 June.

² Percentages throughout this chapter are given as rounded figures, except in the Drug use and Forensic data sections.

(4-methylmethcathinone)³ (ACC 2011), a synthetic stimulant and an analogue of the internationally controlled substance cathinone. Data on this phenomenon are currently limited as the Household Survey does not include questions on these substances, with the exception of the Ecstasy and related Drugs Reporting System which started asking about the use of mephedrone and other unregulated psychoactive substances in 2010.

Patterns and trends of drug use

Drug use – Recent illicit drug use (use in the previous 12 months) increased from 13.4% of the population aged 14 years and over in 2007 to 14.7% in 2010.⁴ The increase was primarily due to expanding cannabis use (AIHW 2011). Of those who reported recent illicit drug use in 2010, approximately 41% were women (AIHW 2011). A notable increase was seen in the proportion of women reporting recent illicit drug use, from 11.0% in 2007 to 12.3% in 2010 (AIHW 2011).

The recent non-medical use of amphetamine and methamphetamine showed a slight but insignificant decrease, with 2.1% reporting recent use in 2010 compared with 2.3% in 2007. Recent amphetamine use peaked in Australia in 1998 at 3.7% (AIHW 2011). The lifetime prevalence of amphetamine and methamphetamine use among the general population was 7.0% in 2010 compared with 6.3% in 2007 (AIHW 2011).

Ecstasy was the second most commonly used illicit drug in Australia, although recent ecstasy use declined from 3.5% in 2007 to 3.0% in 2010 (AIHW 2011). It is the first decline in ecstasy use reported since 1995. In 2010, the lifetime prevalence of ecstasy use was 10.3% compared with 8.9% in 2007 (AIHW 2011).

Cannabis remains the most commonly used illicit drug among the general population in Australia. The proportion of the population reporting recent cannabis use increased for the first time since 1998, from 9.1% in 2007 to 10.3% in 2010 (AIHW 2011).

Reported cocaine use in Australia has shown a significant increase since 2004, with 2.1% of the general population reporting its recent use – the highest level reported since 1993 (AIHW 2011). However, prevalence is relatively low, and use is infrequent.

Heroin use among the general population has remained low and stable during the past decade with 0.2% of the population reporting having used the drug in each reporting year since 2001 (AIHW 2011). It should be noted however that population surveys are not likely to capture problem drug users, and this figure may represent an underestimate of heroin use in Australia.

Injecting drug use

According to the findings from the 2010 Illicit Drug Reporting System (IDRS), a national survey of 902 regular injecting drug users, about 60% of respondents had reported having used some form of methamphetamine (in powder, base, crystalline or liquid form) in the six months preceding the interview. This was the lowest figure reported since 2000 (Stafford and Burns 2010). Frequency of methamphetamine use also declined in 2010. Of the 12,739 episodes for treatment for amphetamine use in 2008-2009, 64% recorded injecting as the most common mode of administration (AIHW 2010).

The 2010 IDRS also found that heroin was the drug of choice for 54% of respondents. Those who reported heroin use in the previous six months increased from 60% in 2008 to 64% in 2009. This figure remained stable in 2010 (Stafford and Burns 2010). Median days of heroin use stabilised in 2010 at approximately three times per week, with use most frequent among participants in New South Wales.

The mean age of IDRS respondents was 38 years (range 18-64 years). Forty-nine per cent reported that an amphetamine was the first drug they injected, followed by heroin (41%). The mean age of first injection was 20 years (Stafford and Burns 2010).

³ This is also known in Australia as 4-MMC, meow and m-cat.

⁴ The National Drug Strategy Household Survey was conducted by the Australia Institute for Health and Welfare (AIHW). A total of 26,648 persons in Australia were interviewed between April and September 2010.

Table 25. Rank of general population reporting recent use of selected drugs in Australia, 1998-2010

Drug type	1998	2001	2004	2007	2010
Ecstasy	4	3	2	2	2
Amphetamines	2	2	3	3	3
Cocaine	5	4	4	4	3
Ketamine	•	•	6	6	6
Heroin	6	6	7	6	6
Cannabis herb	1	1	1	1	1

• = Not reported

Source(s): AIHW 2011

Table 26. Trend of recent use of selected drugs in Australia, 1998-2010

Drug type	1998	2001	2004	2007	2010
Ecstasy	↑	↑	↑	↔	↓
Amphetamines	↑	↓	↓	↓	↔
Cocaine	↔	↔	↔	↑	↑
Ketamine	•	•	↔	↔	↔
Heroin	↑	↔	↔	↔	↔
Cannabis herb	↑	↓	↓	↓	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported

Source(s): AIHW 2011

Drug treatment

There were 138,027 treatment episodes reported in 2008–2009 for clients seeking treatment for alcohol and other drug problems in publicly funded and non-government drug treatment facilities in Australia (AIHW 2010).⁵ Amphetamines were the principal drug of concern in approximately 9% of treatment

episodes compared with 11% in the previous reporting period. Persons aged 20–40 years accounted for 78% of amphetamines treatment episodes (AIHW 2010). Ecstasy was the principal drug of concern in only 1% of treatment episodes. The proportion of treatment episodes for cannabis and heroin use remained stable at approximately 22% and 10% respectively.⁶ The median age for persons who entered treatment in

Table 27. Number of drug treatment episodes in Australia by drug type, 2004-2005 to 2008-2009

Drug type	2004–05	2005–06	2006–07	2007–08	2008–09
Amphetamines	14,780	15,935	17,292	16,588	12,739
Ecstasy	580	897	1,010	1,321	1,397
Cannabis	31,044	35,636	31,980	31,864	31,100
Cocaine	400	434	448	457	479
Heroin	23,193	19,776	14,870	15,571	14,222

Note: Data based on financial year from 1 July of the prior year through 30 June of the following year.

Source(s): AIHW 2010

⁵ The Alcohol and other drug treatment services national minimum data set (AODTS–NMDS) is a collection of data from publicly funded treatment services in all states and territories in Australia. ‘Treatment episodes’ are defined as a period of contact, with definite dates of commencement and cessation, between a client and a treatment provider. Only treatment episodes that are completed during the collection period (between 1 July 2008 and 30 June 2009) are included in the data for 2008–2009 (AIHW 2010).

⁶ Heroin treatment data in this collection does not include opioid pharmacotherapy treatment.

2008-2009 was 32 years and two-thirds of all episodes were for men. Fifty-five per cent of treatment episodes were for multiple drugs (AIHW 2011).

Drug-related arrests, seizures and prices

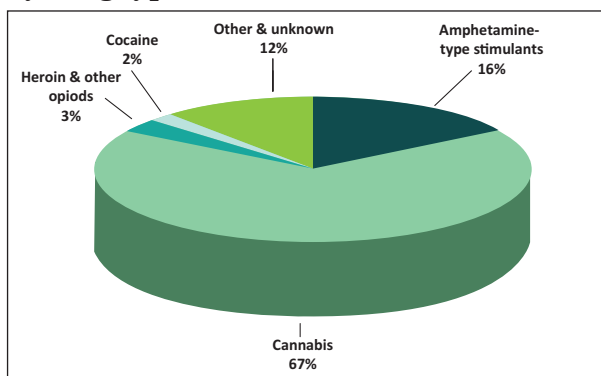
Drug-related arrests⁷ – During 2009-2010, ATS arrests accounted for about 16% of all drug-related arrests (85,252) in Australia, second only to cannabis. The number of ATS arrests in 2009-2010 was 13,982, a 15% decrease from the previous reporting period. However, the 16,452 ATS arrests in 2008-2009 was the highest total on record (ACC 2011).

Cannabis-related arrests accounted for two-thirds of all illicit drug-related arrests in 2009-2010, the same proportion as in 2008-2009. The 57,170 arrests involving cannabis in 2009-2010 represent a slight increase from the previous year (ACC 2011).

The number of arrests for heroin and other opioids in 2009-2010 totaled 2,767, representing the highest total recorded since 2004-2005. The number of cocaine-related arrests has almost doubled over the past decade, increasing from 652 in 2000-2001 to 1,244 in 2009-2010, the highest on record. In 2009-2010, cocaine users accounted for 68% of all arrests involving cocaine (ACC 2011).

Drug seizures – The number of ATS detections at the Australian border increased by 71%, from 392 in

Figure 21. Drug-related arrests in Australia by drug type, 2009-2010



Source(s): ACC 2011

2008-2009 to 672 in 2009-2010. However, the total weight of detections decreased by 84%, from 416.5 kg in 2008-2009 to 66.7 kg in 2009-2010. Only 3% of amphetamine and methamphetamine detections in 2009-2010 were over 500 g (ACC 2011).

While the number of ecstasy border detections remained stable at 53 detections reported in 2009-2010, the total weight of ecstasy detections declined by 50%, from 12.9 kg in 2008-2009 to 6.5 kg in 2009-2010, the lowest amount recorded in the past decade. All border detections of ecstasy in 2009-2010 were below 1 kg (ACC 2011).

Nationally,⁸ the number of ATS seizures decreased by almost 21%, from 13,300 in 2008-2009 to 10,543 in 2009-2010. The weight of seizures decreased by 59%,

Table 28. Illicit drug-related arrests in Australia, 2005-2006 to 2009-2010

Drug type	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010
ATS	11,848	15,216	16,047	16,452	13,982
Cannabis	55,732	56,862	52,465	55,638	57,170
Heroin and other opioids	2,249	2,164	2,279	2,693	2,767
Cocaine	396	699	669	848	1,244
Steroids	67	142	163	214	314
Hallucinogens	143	243	325	369	512
Other and unknown	8,098	7,063	6,727	7,659	9,263
Total	78,533	82,389	78,675	83,873	85,252

Source(s): ACC 2011

⁷ Drug-related arrest data for Australia refer to illicit drug users arrested. Illicit drug offenders in Australia are classified as consumers or providers in order to differentiate between people who have been apprehended for trading in, as opposed to using, illicit drugs. Those charged with supply-type offences (importation, trafficking, selling, cultivation and manufacture) are classified as providers. Those charged with user-type offences (possessing or administering drugs for their own use) are classified as consumers.

⁸ National seizure statistics in Australia include both domestic seizures and border detections. National ATS seizures include methamphetamine, amphetamine, ecstasy as well as other ATS.

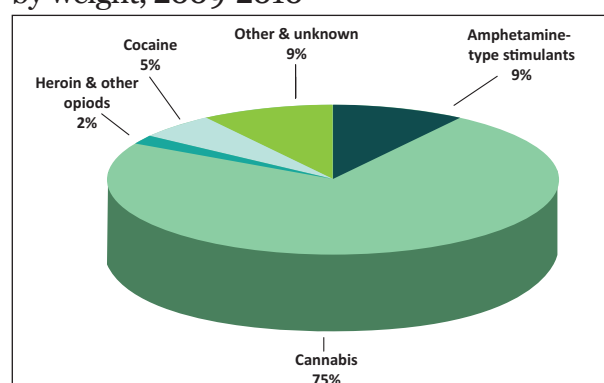
from 1,640 kg in 2008-2009 to 672 kg in 2009-2010 (ACC 2011).

Cannabis accounted for 70% of the total number and 76% of the total weight of national illicit drug seizures in 2009-2010. Although the number of cannabis seizures declined slightly in 2009-2010, there was a small increase in the weight of cannabis seizures from 5,573 kg in 2008-2009 to 5,989 kg in 2009-2010 (ACC 2011).

Both the number and weight of national heroin seizures decreased during 2009-2010. The number of seizures decreased by approximately 6%, from 1,691 in 2008-2009 to 1,582 in 2009-2010, while the weight of national seizures totaled almost 75 kg in 2009-2010, representing a decrease of nearly 49% from the 145.5 kg seized in 2008-2009 (ACC 2011). The weight of heroin seizures reported during the past seven reporting periods is considerably lower than seizures earlier in the decade.

The number of national cocaine seizures recorded in Australia during 2009-2010 was 1,517, the highest

Figure 22. Seizures of illicit drugs in Australia by weight, 2009-2010



Source(s): ACC 2011

on record. However, the weight of cocaine seizures decreased by one-third, from around 592 kg in 2008-2009 to 394.8 kg in 2009-2010 (ACC 2011).

Drug prices – Retail prices for crystalline methamphetamine in 2009-2010 increased in most jurisdictions in Australia compared with prices from the previous year. Prices ranged between USD 279 and USD 930 per gram in 2009-2010 compared with between USD 226 and USD 542 in 2008-2009

Table 29. Seizures of selected illicit drugs in Australia, 2005-2006 to 2009-2010

Drug type	Measurement	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010
ATS*	Number	9,987	13,243	13,097	13,300	10,543
	Weight (kg)	1,296.6	5,443.0	2,035.8	1,640.0	671.8
Cannabis	Number	40,679	43,844	41,660	46,875	44,736
	Weight (kg)	4,482.6	4,781.9	5,409.3	5,573.0	5,989.8
Heroin	Number	1,298	1,476	1,411	1,691	1,582
	Weight (kg)	29.5	86.2	68.5	145.5	74.7
Cocaine	Number	697	1,184	1,271	1,217	1,517
	Weight (kg)	46.1	646.6	664.7	591.9	394.8
Other opioids	Number	114	148	178	277	315
	Weight (kg)	5.3	6.6	12.4	41.1	41.5
Hallucinogens	Number	69	105	126	135	217
	Weight (kg)	2.9	2.7	6.9	1.5	11.8
Steroids	Number	58	91	104	113	134
	Weight (kg)	5.9	9.6	6.6	3.9	5.6
Other and unknown ⁹	Number	2,318	2,408	3,442	3,951	4,628
	Weight (kg)	622.4	792.5	270.9	5,306.5	661.0

Note: Data based on financial year (1 July to 30 June). Includes only those seizures for which a drug weight was recorded. Data reflect State and Territory police and Australian Federal Police (AFP) seizures. Seizures made during joint operations between the AFP and State and Territory police may be duplicated in these statistics. Weight given as rounded figures. *ATS includes amphetamine, methamphetamine, and ecstasy.

Source(s): ACC 2011 and previous years

⁹ Drugs categorized as 'other and unknown' include anabolic agents and selected hormones, tryptamines, anaesthetics and various pharmaceuticals (ACC 2011).

(ACC 2011). Prices for the non-crystalline forms of methamphetamine also increased in 2009-2010, ranging between USD 93 and USD 930 in 2009-2010 compared with USD 93 to USD 452 in 2008-2009 (ACC 2011). The retail price for one gram of amphetamine increased to between USD 47 and USD 93 compared with USD 28 to USD 74 in 2008-2009.

The street price for one pill of ecstasy ranged between USD 9 and USD 47 in 2009-2010 compared with USD 15 to USD 45 in 2008-2009 (ACC 2011).

Sources of illicit drugs

Most of the amphetamines found in Australia are supplied by domestic illicit manufacture. A record 694 illicit laboratories were detected in Australia in 2009-2010. During this reporting period, clandestine laboratories manufacturing ATS continued to be the most common type of laboratory detected in Australia. Ninety percent of laboratories (in which the drug manufactured was identified) were manufacturing ATS, the majority of which were manufacturing methamphetamine (ACC 2011). While domestic manufacture appears to be the dominant source of ATS (excluding ecstasy) within Australia, ATS – as well as ephedrine and pseudoephedrine – are also trafficked into Australia.

The most common method of illicit ATS manufacture detected in Australia is the hypophosphorous method, followed by the Birch method, the red phosphorous method and the P-2-P method. With the exception of the P-2-P method, the detection of all other manufacturing methods increased substantially in 2009-2010 (ACC 2011).

Most of the cannabis used in Australia is cultivated domestically, although some quantities are also trafficked into the country. Most cannabis detections at the Australian border involve cannabis seeds. Prominent countries of embarkation for cannabis continue to be the United States, United Kingdom and the Netherlands (ACC 2011).

Cambodia was the prominent embarkation point for illicit importations of heroin over 1 kg in 2009-2010. Other embarkation points during the period (in weight order) were Viet Nam, Singapore, Afghanistan and Canada (ACC 2011). Australia identified 29 embarkation countries for heroin trafficking into

Australia in 2009-2010 compared with only 10 countries in 2000-2001 (ACC 2011).

Cocaine profiling data indicate the continued prominence of Colombia as the primary source country for cocaine detected at the Australian border. In the first half of 2010, however, there was a notable increase in the proportion of cocaine being sourced from Peru (ACC 2011).

Drug trafficking – More than 90% of amphetamines-group detections at the Australian border were in parcel post, while air cargo accounted for about 45% of the total weight of detections in 2009-2010. Notable amphetamines-group detections in 2009-2010 included 17 kg of crystalline methamphetamine detected in air cargo from South Africa, 3.9 kg of amphetamine powder detected in air cargo from China, 3.4 kg of methamphetamine powder detected in the luggage of an air passenger travelling from Canada, and 3 kg of amphetamine powder detected in air cargo from China (ACC 2011).

In 2009-2010, Spain was the most prominent embarkation point for the number of attempted amphetamines-group importations of more than 500 grams, with 247 detections. By weight, South Africa was the most prominent point of embarkation, accounting for 28% of attempted importations totalling more than 500 g. China (including Hong Kong) was the second most prominent embarkation point for both the number and weight of amphetamines-group detections at the Australian border. Other prominent embarkation points for attempted amphetamines-group importations by weight into Australia include Canada, Singapore, Viet Nam, United States, Thailand, Netherlands, Turkey and Zambia (ACC 2011). Primary embarkation points for detections of amphetamine by number during 2009-2010 were Spain, China (including Hong Kong), Singapore and the Netherlands (ACC 2011).

A total of 556 kg of ephedrine and pseudoephedrine was detected at the Australian border in 2009-2010, which is a significant decrease from the more than 2 mt of the substances detected in 2008-2009. Notable detections (illicitly imported via parcel post) include 100 kg of pseudoephedrine powder shipped from Viet Nam in August 2009, 22.8 kg of pseudoephedrine granules shipped from Egypt in March 2010, 18 kg of pseudoephedrine shipped from Cambodia in November 2009, and 18 kg of ephedrine powder

shipped from Egypt in May 2009 (ACC 2011). There were no detections of ecstasy precursors in 2009-2010. However, 5 lt. of 4-methoxyphenyl-2-propanone, a precursor used in the manufacture of paramethoxyamphetamine (PMA), a drug closely related to ecstasy, were detected during the reporting period (ACC 2011).

Embarkation points for cocaine seized at the Australian border include Mexico, which was the prominent embarkation country by weight but only accounted for 1% of the total number of attempted importations. Other prominent embarkation countries (in weight order) were the United States, Canada, Panama, Argentina and Nigeria (ACC 2011). Significant detections included 240 kg concealed in a sea cargo consignment from Mexico, which accounted for 62% of the total weight of cocaine detections at the Australian border in 2009-2010. In addition, 9.4 kg were detected in a parcel post consignment from Panama; 8 kg were detected in an air cargo shipment from Nigeria; and 10 kg were detected in the luggage of an air passenger travelling from Canada (ACC 2011).

period, except in Western Australia where the median purity has remained relatively stable (ACC 2011).

The annual median of purity of heroin in Australia over the past decade has been approximately 23.0% heroin. In 2009-2010, the median purity of heroin samples remained relatively stable compared with 2008-2009, but showed a wide range in purity levels, from 14.3% in Victoria to 63.0% in Western Australia (ACC 2011). The annual median purity of cocaine over the past decade has ranged from 3.0% to 68.8%. In 2009-2010 the annual median purity for cocaine analysed on a quarterly basis ranged from between 25.0% and 77.0% (ACC 2011).

Forensic data

The annual median purity of analysed amphetamine samples has fluctuated greatly over the past decade, ranging between 0.1% and 45.2%. In 2009-2010, the median purity of amphetamine ranged from 1.1% in South Australia to 9.3% in the Australian Capital Territory.¹⁰ The annual median purity of analysed crystalline methamphetamine samples has remained relatively stable during the past decade. In 2009-2010, the median purity of crystalline methamphetamine ranged from 4.4% in Tasmania to 17.0% in Western Australia, which has continuously recorded high purities in comparison to other jurisdictions during the past decade (ACC 2011). Over the past decade, the annual median purity of phenethylamine samples, the majority of which were MDMA, ranged from 6.8% in South Australia to 23.0% in Western Australia. In 2009-2010, all jurisdictions reported decreases in the median purity of analysed phenethylamine samples during the

¹⁰Amphetamine is a manufacturing by-product of some common methods of methamphetamine manufacture. This can result in two separate purity figures for a single drug sample – one as methamphetamine with considerable purity and another as amphetamine of low purity (ACC 2011).



Emerging trends and concerns

- Crystalline methamphetamine use remains the major drug problem in Brunei Darussalam. Almost 99% of the persons who have entered drug treatment during the past two years have been admitted for crystalline methamphetamine dependency. Since 2003, approximately 85-95% of the total drug-related arrests have been related to amphetamine-type stimulants, primarily crystalline methamphetamine.
- Reported cannabis use surged in the country in 2010. In addition, the 6.3 kg of cannabis seized in 2010 is the highest total reported in Brunei Darussalam in the past five years and is more than 29% higher than the total amount of cannabis seized in the previous four years combined.
- Inhalants remain a concern in Brunei Darussalam.

Overview of the drug situation

Whereas in the 1990s cannabis and pharmaceutical drugs such as codeine and diazepam were the main drugs of use in Brunei Darussalam, in 1993 crystalline methamphetamine first emerged in the country. In 1996, crystalline methamphetamine was identified as the primary drug problem in the country.

Cannabis use remains widespread in Brunei Darussalam. Over the past eight years, however, crystalline methamphetamine has been consistently ranked as the leading drug of use. During this period, nearly 99% of all persons who entered drug treatment facilities in the country were admitted for crystalline methamphetamine use and nearly 87% of total drug-related arrests involved crystalline methamphetamine.

No illicit drug manufacture or diversion of precursor chemicals has been reported from the country. The quantity of drugs seized in the country remains comparatively low.

Patterns and trends of drug use

Drug use - Crystalline methamphetamine has been ranked by government experts as the major drug of concern in Brunei Darussalam each year since 1996. In 2010, the vast majority of all drug users in the country were crystalline methamphetamine users, according to arrest and treatment data. Although crystalline methamphetamine use increased in 2010, use of the drug has shown a general declining trend during the past five years. The primary mode of administration for crystalline methamphetamine is smoking. There is no reported use of methamphetamine pills in the country; however, small quantities of the drug have been seized in previous years.

Ecstasy is not considered to be a problem in Brunei Darussalam and use of the drug was only reported in 2006 and 2009.

Cannabis herb remains the second most commonly used drug in the country and its use is perceived to have risen for three successive years. The Narcotics Control Bureau (NCB) reported that cannabis use increased considerably in 2010.

Table 30. Rank of use of selected drugs in Brunei Darussalam, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	1	1	1	1	1
Ecstasy	3	•	•	5	•
Ketamine	•	4	4	3	3
Cannabis herb	2	2	2	2	2
Heroin	•	•	•	6	•
Inhalants	•	•	•	•	4
Nimetazepam ¹	5	3	3	4	5

• = Not reported

Source(s): DAINAP

Table 31. Trend in use of selected drugs in Brunei Darussalam, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	↓	↓	↔	↓	↑
Ecstasy	↑	•	•	↑	•
Ketamine	•	↓	↑	↑	↓
Cannabis herb	↑	↓	↑	↑	↑
Heroin	•	•	•	•	•
Inhalants	•	•	•	•	↓
Nimetazepam	↓	↑	↓	↓	↔

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

Source(s): DAINAP

Ketamine ranked as the third most common substance of use in 2010, although its use declined in 2010.

Heroin re-emerged as a drug of concern in 2009. In 2010, however, there was no reported use, seizures or arrests related to heroin in Brunei Darussalam. The country had been indicated previously as a transit country for heroin. In 2009, there was one recorded seizure of heroin of just over 1 kg.

Inhalants remain a concern in Brunei Darussalam and in 2010 ranked as the fourth most commonly used substance during the year.

Nimetazepam use remained stable in 2010.

Injecting drug use

There are no known cases of injecting drug use in the country. Brunei Darussalam reported a total of 56 HIV cases from 1986 to 2009, with 11 new cases reported in 2009 (UNGASS 2010), the latest year for which data are available.

Drug treatment

Drug treatment is only available at the Government-run Pusat Al-Islah drug rehabilitation and treatment centre which also offers counselling as well as religious and therapeutic community programmes (NCB 2011b).

Table 32. Drug treatment admissions in Brunei Darussalam, 2010

Drug type	New admissions			All admissions		
	Men	Women	Total	Men	Women	Total
Crystalline methamphetamine	58	12	70	111	22	133
Inhalants	2	•	2	2	•	2
Total	60	12	72	113	22	135

• = Not reported

Source(s): DAINAP

¹ Nimetazepam is a benzodiazepine derivative, controlled in Schedule IV of the 1971 Convention on Psychotropic Substances, often marketed under the brand name Erimin.

In 2010, a total of 135 persons received treatment for drug use, increasing by 30% over 2009. Of the 135, all but two persons were admitted for crystalline methamphetamine use with the other two persons treated for the use of inhalants.

Of those treated for crystalline methamphetamine use in 2010, 83% were men with an average age of 32 years. For persons treated for the use of inhalants the average age was 21 years. Of the 135 persons who received treatment in 2010, 53% were newly admitted during the year.

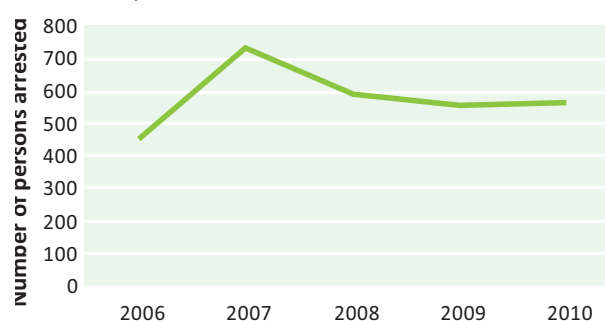
Drug-related arrests, seizures and prices

Drug-related arrests – The number of total arrests and the proportion of arrests by drug type have remained comparatively stable over the past three years. Nearly 87% of the 565 total drug-related arrests in 2010 involved crystalline methamphetamine. In 2010, the number of total arrests increased by less than 2% after showing decreases for two successive years. Most of the persons arrested in 2010 were nationals of Brunei Darussalam (90% of the total). Males continued to dominate drug-related arrests, accounting for 83% of all persons arrested during the year. The majority of persons arrested for drug-related offences in 2010 was unemployed and aged 31 years and above (NCB 2011a).

Cannabis accounted for just less than 8% of all drug-related arrests and inhalants accounted for 3% of drug-related arrests in 2010. Ketamine accounted for 2% and nimetazepam accounted for less than 1% of all drug-related arrests during the year.

Since 2003, approximately 85-95% of drug-related arrests have involved amphetamine-type stimulants. Total drug-related arrests since 2006 were reported as 556 in 2009, 591 in 2008, 772 in 2007 and 475 in 2006.

Figure 23. Drug-related arrests in Brunei Darussalam, 2006-2010



Source(s): DAINAP

Drug seizures – The quantities of crystalline methamphetamine seized in Brunei Darussalam remain low, and from 2006 to 2009 less than 0.5 kg of the drug were seized each year. In 2010, however, the amount of crystalline methamphetamine seized in the country more than doubled from 0.3 kg to approximately 0.8 kg. The number of seizures of crystalline methamphetamine (231) is 6% lower compared with the previous year and accounted for approximately 87% of all drug seizure cases in 2010.

The amount of cannabis seized in 2010 (6.3 kg) is the highest total reported in Brunei Darussalam during the past five years and is more than 29% higher than the total amount of cannabis seized in the previous four years combined. The increase in 2010 is partly due to two comparatively large seizures: more than 2 kg of cannabis from a Bruneian national at a department store in May and the seizure of nearly 1.4 kg at Brunei International Airport in August (NCB 2011b). Brunei Darussalam also reported the seizure of 66 nimetazepam pills and a small quantity of ketamine in 2010.

Table 33. Drug-related arrests in Brunei Darussalam by drug type, 2010

Drug Type	National			Non-national		
	Men	Women	Total	Men	Women	Total
Crystalline methamphetamine	368	73	441	39	9	48
Ketamine	7	●	7	5	●	5
Cannabis herb	31	7	38	5	1	6
Inhalants	14	3	17	●	●	●
Nimetazepam	2	1	3	●	●	●
Total	422	84	506	49	10	59

● = Not reported

Source(s): DAINAP

Table 34. Seizures of selected drugs in Brunei Darussalam, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	0.4	0.4	0.4	0.3	0.8
Methamphetamine pills	pills	157	•	•	•	•
Methamphetamine powder	kg	•	•	0.003	•	•
Ecstasy	pills	50	•	3.3 grams	15	•
Ketamine	kg	•	0.005*	0.001**	0.005	0.04
Cannabis herb	kg	2.3	0.05	0.61	1.6	6.3
Ephedrine/tripolidine	kg	10	•	•	0.06	•
Heroin	kg	0.01	•	•	1.1	•
Nimetazepam	tablets	42	100	70	44	66
Promethazine	lt.	0.3	•	•	•	•

• = Not reported. *Reported as 9 pills and 0.005 kg. **Reported as 2 pills and 0.001 kg.

Source(s): DAINAP

Table 35. Retail prices of illicit drugs in Brunei Darussalam (USD), 2008-2010

Drug type	Measurement	2008	2009	2010
Crystalline methamphetamine	per gram	510 – 549	476 – 510	510
Ecstasy	per pill	•	120 – 127*	•
Cannabis herb	per gram	71 - 77	71	71
Heroin	per gram	•	1,470*	•
Nimetazepam	per tablet	4	3 – 4	3.6

• = Not reported

Source(s): DAINAP; *ARQ 2010

Sources of illicit drugs

Brunei Darussalam is one of the few countries in the region which has not reported illicit drug manufacture. In addition, there is no legitimate domestic production of precursor chemicals. Most of the crystalline methamphetamine trafficked into Brunei Darussalam originates from Malaysia (NCB 2011b). The Philippines has also been indicated as a source for crystalline methamphetamine found in Brunei Darussalam in recent years (ARQ 2010). Most of the nimetazepam found in Brunei Darussalam originates from Malaysia (ARQ 2010).

Most of the cannabis trafficked into Brunei Darussalam originates from Thailand and Malaysia (ARQ 2011).

Trafficking – Drug trafficking routes for crystalline methamphetamine have not changed significantly in recent years. Most illicit drugs are trafficked from Malaysia, primarily by land through border entry points. Smaller quantities are trafficked from Malaysia by air and sea (NCB 2011b). Most of the crystalline methamphetamine found in Brunei Darussalam originates

from the Philippines and is shipped to Malaysia by sea before being trafficked into Brunei Darussalam (NCB 2010; ARQ 2010).

Cannabis herb seized in Brunei Darussalam in 2010 originated primarily from Thailand and was trafficked into Brunei Darussalam via neighbouring Malaysia (Sabah and Sarawak). A new trend developed in 2010 as traffickers attempted to traffic cannabis directly into Brunei Darussalam from Thailand by air passenger couriers (ARQ 2011).

The main embarkation country for heroin found in Brunei Darussalam is Thailand, according to interviews with suspected heroin traffickers arrested in 2010 (NCB 2011c).

Ketamine is smuggled into the country from Malaysia, according to information gathered from interviews with suspected ketamine traffickers arrested during the year (NCB 2011c).

Forensic data

Methamphetamine samples analysed in 2010 showed a wide range of purity. Some 361 samples were analysed during the year and all samples showed a purity of higher than 60% methamphetamine. The one large methamphetamine sample analysed of more than 50 g showed a purity of less than 50% methamphetamine. Only qualitative analysis was conducted for ketamine samples tested in 2010; therefore, no purity data are available.



Emerging trends and concerns

- Cambodia is becoming a significant centre for the manufacture and trafficking of methamphetamine. The seizure of nearly 20 million pharmaceutical preparations containing pseudoephedrine in 2010 raises the concern that large-scale methamphetamine manufacture may be taking place in the country.
- Cambodia remains a key transit country for ATS and heroin and is being increasingly targeted by international drug trafficking organizations.
- There is some likelihood that the latest anti-drugs campaign in neighbouring Thailand, launched in September 2011, may lead drug traffickers to smuggle greater amounts of ATS and heroin from manufacturing centres in Myanmar through Lao PDR and into Cambodia for further trafficking into Thailand.
- Methamphetamine in pill form is the primary drug of use in the country; however, in recent years, crystalline methamphetamine use has become increasingly widespread.
- Cambodia could experience an increase in HIV infection due to expanding injecting drug use in the country.

Overview of the drug situation

The manufacture, trafficking and use of illicit drugs is a significant and worsening problem in Cambodia. There are indicators of increasing numbers of local and international drug criminals using the country as a manufacturing base and a transit route for ATS and other drugs to international markets (NACD 2011b). Crystalline methamphetamine is becoming more widely available and use of the drug is on the rise, particularly among young drug users (NACD, 2011b). Methamphetamine, in both pill and crystalline form, is the primary illicit drug of use in Cambodia.

The illicit manufacture of ATS in Cambodia was first detected in 2007 and has since increased considerably. In 2010, law enforcement authorities dismantled 11 clandestine laboratories for manufacturing ATS and their precursor chemicals (NACD 2011a; NACD 2010c). In addition, large quantities of pharmaceutical preparations containing pseudoephedrine were seized during 2010 along with other essential chemicals used in the manufacture of ATS.

West African drug trafficking organizations are involved in trafficking drugs, primarily heroin and cocaine, both to and from Cambodia. In addition, criminal organizations from Taiwan Province of China and mainland China are also involved in drug trafficking in Cambodia (NACD 2011c).

Patterns and trends of drug use

Drug use – Estimating the number of drug users in Cambodia is difficult as there have been no nationally representative surveys of illicit drug use performed, and inconsistent terminology and methodology have been used in various studies. The number of reported drug users increased more than ten-fold from about 600 persons in 2000 (NACD 2010a) to between 6,000 and 7,000 persons in 2010 (NACD 2010c). The Cambodian National Centre for HIV/AIDS, Dermatology and STI (NCHADS) estimated that there were 13,000 drug users in 2008.

The National Authority for Combating Drugs of Cambodia (NACD) estimated that about 70% of all illicit drug users in 2009 were users of methamphetamine (both in pill and crystalline form). An estimated 15% were heroin users and the remaining 15% were reported as being users of other drugs (NACD 2010b). Cambodia has been reporting crystalline methamphetamine as the most commonly used drug in Phnom Penh since 2009. There is a small market for ecstasy in Cambodia; however, ecstasy is primarily trafficked through Cambodia to neighbouring countries (NACD 2010c).

The Cambodian government has never conducted a comprehensive national survey on drug use. However, NACD estimates that about 80% of all drug users in Cambodia are between the ages of 10 and 25 (NACD 2010c). Recent surveys conducted by Friends-International, a Cambodian non-governmental organization (NGO), show that more than half of the estimated 24,000 street children and youth in Phnom Penh use drugs and a large portion are poly-drug users. Methamphetamine in both pill and crystalline form is the most widespread illicit drug and injecting use of this drug among young users is on the rise (Friends-International 2011). The use of inhalants and solvents, particularly among young drug users, continues to be a problem (NACD 2008).

Injecting drug use

There are no government estimates for the number of injecting drug users (IDUs) in Cambodia. The primary sources of data for injecting drug use are available from NGOs in Phnom Penh which provide services to drug users such as referrals to government-sponsored counseling and testing services. A cross-sectional survey of 528 drug users in 11 rehabilitation centres and in the community in Phnom Penh conducted in 2007 found that 32% (170 drug users) were injecting drug users (NCHADS 2008). Of those IDUs, 24.4% (range: 16.4-33.2%) were infected with HIV (NCHADS 2008). Almost 36% of IDUs surveyed were reported to have shared needles/syringes during their most recent injecting episode (NCHADS 2008). Heroin was the most commonly injected drug among the 170 IDUs (NCHADS 2008). A former survey conducted by an expert consensus group in 2004 showed an estimated 1,750 injecting drug users in Cambodia, representing 0.02% prevalence of injecting drug use among the population in the age range of 15 to 64 years (Lancet 2008). However, a survey of 53 governmental and non-governmental organizations that have contact with drug users conducted by the NACD in 2008 showed that the number of IDUs in the country was approximately 3,260, of which 2,100 lived in Phnom Penh (NACD 2009).

Table 36. Rank of use of selected drugs in Cambodia, 2006-2010

Drug type	2006	2007	2008	2009	2010**
Methamphetamine pills	1	•	•	2*	1
Crystalline methamphetamine	2	•	•	1*	2
Ecstasy	4	•	•	•	•
Cannabis herb	3	•	•	•	4
Heroin	2	•	•	•	3
Inhalants	5	•	•	•	•
Opium	4	•	•	•	•

• = Not reported. **2010 rankings based on DAINAP data and Cambodia country reports.

Source(s): DAINAP; *NACD 2010a

Table 37. Trend in use of selected drugs in Cambodia, 2006-2010

Drug type	2006	2007	2008	2009	2010*
Methamphetamine pills	↑	•	•	•	↑
Crystalline methamphetamine	↑	•	•	•	↑
Ecstasy	↑	•	•	•	•
Cannabis herb	↓	•	•	•	•
Heroin	↑	•	•	•	•
Inhalants	↓	•	•	•	•
Opium	↓	•	•	•	•

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported. *2010 trends based on DAINAP data and Cambodia country reports.

Source(s): DAINAP

Although Cambodia does not have a history of significant injecting drug use, many persons who use drugs, particularly heroin and methamphetamine, are shifting to injection as their primary mode of administration. This rapidly changing pattern of drug use is primarily due to the increasing availability of affordable opiates, particularly heroin (WHO 2009). Thus, there is concern that Cambodia could experience a resurgence of HIV infections due to expanding injecting drug use in the country.

Drug treatment

As of 2008, the latest year for which data are available, Cambodia had 14 Compulsory Centres for Drug Users (CCDUs). Most of them are run by the military or civilian police. However, some centres are run by the Ministry of Social Affairs or local municipalities. In 2009, approximately 1,400 drug users received treatment in the centres. Methamphetamine pills and crystalline methamphetamine were the predominant drugs of use among those admitted to the centres. Most drug users in treatment were young men between the ages of 19 and 25 (NACD 2009b).

Recent research by the World Health Organization into compulsory treatment centres in Cambodia found a post-treatment relapse rate of nearly 100%, citing problems such as treatment components which isolated clients, no provision of mental health therapy, lack of formal criteria to determine the appropriate length of treatment and no provision of a community-based reintegration component (WHO 2009).

Drug arrests, seizures and prices

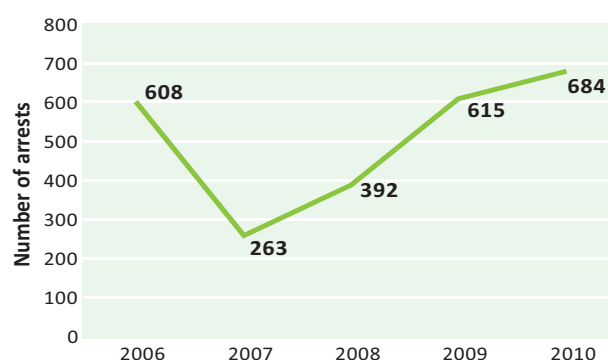
Drug-related arrests – In 2010, the number of drug-related arrests in Cambodia totaled 684 persons, representing an 11% increase from the 615 drug-related arrests in 2009 and the highest total in the past five years. In the first six months of 2011, however, the total number of drug-related arrests more than doubled to 1,524 persons (NACD 2011b).

Of the 684 persons arrested in 2010, 10% (68 persons) were non-nationals, mostly from Viet Nam (44), Lao PDR (9) and Thailand (4) (NACD 2011b). By comparison, of the 615 persons arrested in 2009, 18% were non-nationals. The proportion of non-nationals arrested for drug-related crimes in Cambodia has been

declining over the past few years. In the first half of 2011, 8% (115 persons) of those arrested for drugs were non-nationals.

While 2010 and 2009 data do not disaggregate by drug type, data from 2008 show that 94% of all drug-related arrests involved methamphetamine-related offences.

Figure 24. Drug-related arrests in Cambodia, 2006-2010



Source(s): DAINAP

Drug seizures – The number of methamphetamine pills seized in Cambodia in 2010 totaled 82,746, representing a 40% decrease compared with the 137,249 pills seized during the previous year and the lowest total in the past five years. However, in the first six months of 2011, a total of 296,351 methamphetamine pills were seized in the country, which is the highest number of pills reported seized in Cambodia since 2007 (NACD 2011b). This may indicate either increased trafficking of methamphetamine from Myanmar or the possible expansion of domestic manufacture.

In 2010, crystalline methamphetamine seizures totaled 9.9 kg, which is more than double the 4.6 kg seized in 2009. The 17.2 kg of crystalline methamphetamine seized in the first six months of 2011 represent a 74% increase from the total amount seized in 2010 (NACD 2011b). The increase in crystalline methamphetamine seizures is a likely indicator of greater availability of the drug in Cambodia.

The number of ecstasy pills seized in 2010 amounted to 1,056, representing roughly one third of the number of ecstasy pills seized in 2009; however, it also represents the second highest total reported in the past five years (NACD 2011b). Cambodia does not have a large illicit ecstasy market and most of the ecstasy is trafficked through the country to illicit markets in neighbouring countries.

Official reports of illicit ATS manufacture in Cambodia first emerged in 2007 when police dismantled a large-scale laboratory in the central province of Kompong Speu that was reported to have manufactured at least 1 mt of chloropseudoephedrine, an intermediate in the manufacture of methamphetamine.¹ Illicit ATS manufacture in the country has since expanded considerably.

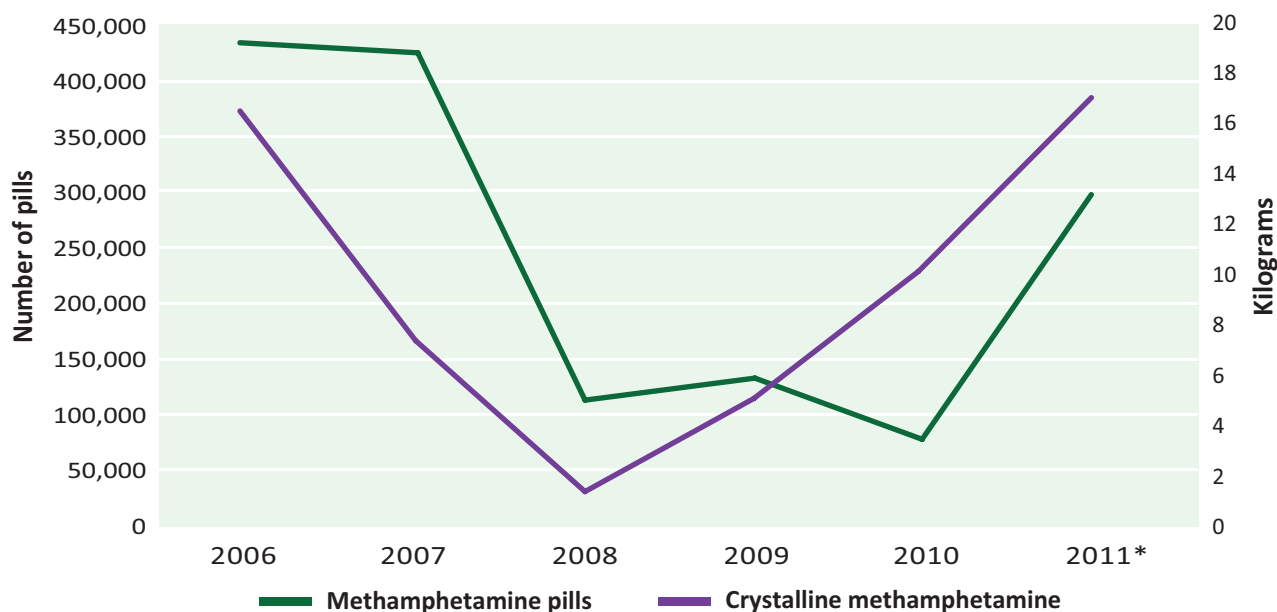
In 2010, law enforcement authorities dismantled 11 clandestine manufacturing facilities (NACD 2011a), most of which were for ATS, including one methamphetamine manufacturing facility in a residential area where authorities seized 61 kg of sodium hydroxide and 13 kg of hydrochloric acid, along with various other chemicals. In 2009, Cambodia reported five seizures of ATS laboratories and precursor manufacturing sites (NACD 2009a).

Significant seizures of precursor chemicals used in the manufacture of ATS have been reported in Cambodia in recent years. In 2010, approximately 19.3 million pharmaceutical preparations containing pseudoephedrine were seized in Cambodia. Of those,

approximately 12.9 million tablets were seized in a single operation in the northwest province of Banteay Meanchey in August 2010. The tablets, manufactured in the Republic of Korea, were found in a warehouse not long after having been smuggled from Thailand to the border city of Poipet. It is unclear whether the tablets were intended for direct consumption or for use in illicit methamphetamine manufacture, which has increasingly spread throughout the Greater Mekong Subregion.

In 2009, Cambodia reported the seizure of 2,914 kg of ephedra grass, 90.8 kg of unspecified chemicals and 1,898 kg of pseudoephedrine. In 2007, a total of 5,770 kg of various precursor chemicals was seized (NACD 2011b). In March 2009, an extraction site for ephedrine was dismantled in the eastern province of Kampong Cham. The facility was utilizing ephedra grass, with plants suspected to have been trafficked from northern China. This was the first time that the alleged extraction of ephedrine from natural ephedra raw material was reported from Cambodia (NACD 2009a). In addition, extraction sites for pseudoephedrine were seized in Cambodia in June

Figure 25. Methamphetamine seizures in Cambodia, 2006-2011



*data as of 30 June
Source(s): DAINAP

¹ In 2005, Cambodia reported the seizure of a facility for the re-pressing of methamphetamine pills, and in 2006, Cambodia reported the seizure of eight illicit drug manufacturing laboratories which were manufacturing ketamine and non-synthetic drugs.

Table 38. Seizures of selected drugs in Cambodia, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine pills	pills	428,553	420,287	116,772	137,249	82,746
Crystalline methamphetamine	kg	16.2	6.8	1.9*	4.6	9.9
Ecstasy	pills	●	300	33	3,352	1,056
Ketamine	kg	●	●	495.0**	1.1	0.001
Cannabis herb	kg	●	10.0	5.0	3.8	1.2
Cocaine	kg	5.1	●	0.2	1.0	0.9
Heroin	kg	21.3***	11.0	5.3	26.7	2.4

● = Not reported. *Plus 15 'small packs', undefined weight. **Small bottles, undefined weight. ***Plus 38 'small packs', undefined weight.

Source(s): DAINAP

2009 (NACD 2011b) and in September 2010 (NACD 2010c).

Safrole-rich oils (SRO²) have various licit commercial uses in the perfume and pesticide industries and have been known to be diverted for illicit ecstasy manufacture. SRO continue to be illegally harvested and sold in Cambodia, although at far lower levels than in previous years. Harvesting sassafras trees and trading SRO are illegal in Cambodia. In 2010, authorities reported total seizures of 2 mt of SRO (NACD 2011a), a steep decline compared with 14.2 mt seized in 2009 (NACD 2010a) and about 42 mt seized in 2008 (NACD 2011b).

Drug prices – Cambodia has not reported drug price data to DAINAP since 2009.

Sources of illicit drugs

Most of the methamphetamine and heroin seized in Cambodia originates from Myanmar and is trafficked into the country through the northeastern borders of the country by land and river routes. Ecstasy is primarily trafficked into the country from Europe via air routes and most of the ecstasy that enters Cambodia is further trafficked to neighbouring countries. Cocaine continues to be trafficked into Cambodia from South America via countries in West Africa and South-East Asia, primarily by West African drug trafficking organizations. West Asia is a source for heroin found in Cambodia (NACD 2010c).

Trafficking – Cambodia remains a key transit country for the trafficking of illicit drugs from manufacturing countries to markets in the region. During the past few years, drug criminals have been using Cambodia as a drug packaging location for trafficking to other countries and for distribution to local markets (NACD 2011a). A large portion of the methamphetamine and heroin seized in Cambodia is trafficked from manufacturing centres in Myanmar along the Mekong River and road networks in Lao PDR and then into Cambodia through its northeastern borders (NACD 2011b).

In 2010, cocaine was smuggled into Cambodia by air and post from a number of countries in South America, West Africa, and South-East Asia. A small amount of the smuggled cocaine was distributed in domestic markets and the remaining quantities were trafficked onwards, primarily to China (including Hong Kong and Taiwan), Singapore, Thailand, Viet Nam, Malaysia and the Republic of Korea (NACD 2011a). In 2010, some of the crystalline methamphetamine seized in Australia was found to have originated in Cambodia (INCB 2011).

Forensic data

The purity levels of methamphetamine in both pill and crystalline forms remain unchanged from 2009. Crystalline methamphetamine samples analysed in 2010 showed purities of between 75 and 83% methamphetamine. A large portion of this crystalline methamphetamine was reported to have been destined for third countries. Samples of methamphetamine pills for the domestic market showed purities of 15-28% methamphetamine. These pills most likely originated in Myanmar or were manufactured domestically (NACD 2011b). In 2009, methamphetamine pills

² 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' (INCB 2009).

which were re-pressed in Cambodia showed far lower purities of 8% methamphetamine and contained unspecified quantities of paracetamol. The crystalline methamphetamine samples analysed in 2009 also included adulterants such as aluminum sulphate, sugar and other unspecified substances (NACD 2010b). Ecstasy pills analysed in 2010 had a wide ranging composition of 20-75% MDMA (NACD 2011b).



Emerging trends and concerns

- The market for amphetamine-type stimulants (ATS) in China is expanding continuously as indicated by the increasing numbers of registered ATS users and arrests related to methamphetamine.
- Methamphetamine manufacture continues at high levels in China and there are indications that it may be on the rise. In addition, large and increasing quantities of methamphetamine have been trafficked into the country from Myanmar during the past few years.
- China reported the seizure of a record amount of methamphetamine in pill and crystalline form in 2010.
- The risk of diversion of precursor chemicals and pharmaceutical preparations used for the manufacture of methamphetamine remains a concern.
- Cocaine seizures in mainland China and the Special Administrative Region of Hong Kong increased substantially in 2010.
- Ketamine remains the primary drug of use among young drug users in Hong Kong, China.

Overview of the drug situation

Opiates have long been the primary drugs of concern in China, but the relentlessly expanding ATS market over the past decade and a half has now become the principal law enforcement and human security threat. Prior to the end of the 1990s, when ATS use became increasingly widespread, first opium and then heroin had dominated China's drug markets. By the early 2000s, however, ATS had overtaken opium as the second most commonly used drug in the country. Ketamine use has also become increasingly prevalent since it was first reported in 2004, particularly in Hong Kong. Due to the lack of nationally representative drug use prevalence estimates, however, the full extent of China's ATS and synthetic drug situation is unknown.

A large quantity of methamphetamine seized in China is manufactured domestically. However, as with other countries in the Greater Mekong Subregion, China experienced a surge in the amount of methamphetamine (in pill and crystalline form) trafficked into the country from Myanmar in 2009

and 2010. This trend is reflected by the substantial and increasing seizures of methamphetamine in Yunnan province which borders Myanmar.¹ Seizures of methamphetamine pills in China have shown a considerable increase during the past few years, totaling approximately 58.4 million methamphetamine pills in 2010 and 40.5 million pills in 2009.

China also remains a significant transit country for the trafficking of ATS and heroin originating from South-East and South-West Asia to international markets. In addition, drug criminals have targeted China's large chemical and pharmaceutical industries for the diversion of large amounts of chemicals used in the illicit manufacture of ATS and heroin. In response to the growing drug threat in the country, China's drug control agencies have been placing a greater focus on drug use prevention, treatment and rehabilitation and law enforcement since 2009.

¹ Methamphetamine seizures in the province rose from 2.2 mt in 2008 to 3.2 mt in 2009 and 4.6 mt in 2010 (NNCC 2011a; NNCC 2011b).

Patterns and trends of drug use

Drug use² – ATS use continues to expand in China. Since 2008, methamphetamine in pill and crystalline form has ranked as the second most commonly used drug in China and ecstasy has ranked third.

By the end of 2010, there were more than 1.5 million registered drug users in China, of which approximately 214,000 were identified for the first time (NNCC 2011a). Of the total number of registered drug users, 432,000 were synthetic drug users, accounting for 28% of the total. Of the newly identified drug users, approximately 118,000 used synthetic drugs (ATS, ketamine, etc.), or about 55% of all newly identified drug users. In 2010, approximately 21,500 newly registered methamphetamine users were below the age of 20 (NNCC 2011b), representing about 18% of all newly identified synthetic drug users. Of all illicit drug users in China, 73% are between the ages of 16 and 25 years (NNCC 2011).

Heroin remains the most commonly used drug in China, as it has been for the past several decades. The number of heroin dependents increased by almost 9% in 2010, to 1.065 million compared with 978,226 persons in 2009. Opium use has shown an overall stable trend during the past five years.

There were 6,885 registered ketamine users below the age of 20 in 2010, a 28% increase from 2009 (NNCC 2011b). Cannabis is not reported as a drug of concern in China.

Injecting drug use

An estimated 379,348 persons were living with HIV/AIDS in China in 2010, of which 30% (114,455 persons) had become infected through injecting drug use. Of the 48,249 estimated new HIV infections reported in 2010, about 21% had become infected through injecting drug use (NNCC 2011d). In

Table 39. Rank of use of selected drugs in China, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	2	●	2	2	2
Methamphetamine pills	3	5	2	2	2
Ecstasy	4	4	3	3	3
Ketamine	5	●	5	5	5
Cannabis	7	●	●	●	●
Heroin	1	1	1	1	1
Opium	6	2	4	4	4

● = Not reported
Source(s): DAINAP

Table 40. Trend in use of selected drugs in China, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	↑	●	↑	↑	↑
Methamphetamine pills	↑	↑	↑	↑	↑
Ecstasy	↑	↑	↑	↑	↓
Ketamine	↑	●	↑	↑	↑
Cannabis	↔	↑	●	●	●
Heroin	↓	↓	↔	↔	↔
Opium	↔	↓	↔	↔	↔

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported
Source(s): DAINAP

² Figures for 'China' in this section do not include data for the Special Administrative Regions (SAR) of Hong Kong and Macao, and Taiwan Province. Data for Hong Kong, China are reported separately below.

Sichuan province, an estimated 11,895 persons were infected with HIV during the year, about 40% of which had become infected through injecting drug use (NNCC 2011d). The proportion of HIV infections in China through IDU decreased from 32.2% in 2009 to 24.3% in 2010 (NNCC 2011d). China provides needle exchange programmes at 962 facilities throughout the country, assisting an average of 39,000 IDUs monthly (NNCC 2011d).

Injection is the second most common mode of administration for heroin (smoking being the first). In 2009, the latest year for which data are available, injecting use of heroin was reported to have decreased. China has not reported any cases of injecting methamphetamine use.

Drug treatment

In 2010, China had 93 drug treatment and rehabilitation centres established by public security agencies and judicial administration departments (NNCC 2011a). In 2010, more than 175,000 problem drug users underwent compulsory drug detoxification treatment and more than 96,000 underwent community-based treatment and rehabilitation (NNCC 2011a). No data are available on ATS treatment.

Post-treatment relapse rates for some compulsory treatment centres are as high as 50-80%, according to the National Narcotics Control Commission (NNCC) official statistics (NNCC 2011g).

Drug-related arrests, seizures and prices

Drug-related arrests – In 2010, a total of 101,748 persons were arrested for drug-related offences, representing an 11% increase from the previous year. A total of 39,231 persons were arrested for methamphetamine in 2010, accounting for about 39% of all drug-related arrests. The number of persons arrested for methamphetamine during the year is 23% higher than the number arrested in 2009 (31,907 persons). The number of persons arrested for ecstasy (816) in 2010 is 37% lower compared with the previous year (1,287) (NNCC 2011e). Disaggregated arrest data for other drug types in China are not available.

The number of non-nationals arrested for drug-related offences has fluctuated in recent years. In 2009, a total of 1,559 non-nationals were arrested, compared with 1,206 arrested in 2008, 1,299 arrested in 2007, and 1,060 arrested in 2006 (NNCC 2011b).

Drug seizures – In 2010, the quantity of methamphetamine seized in China increased significantly. During the year, 9.9 mt of methamphetamine were seized in the country, including more than 58.4 million methamphetamine pills and nearly 4.2 mt of crystalline methamphetamine (NNCC 2011e). The 58.4 million methamphetamine pills seized is the highest total ever recorded in the country and represents a 44% increase from the 40.5 million pills seized in 2009. In each of the previous few years, fewer than 8 million pills were seized. The 4.2 mt of crystalline methamphetamine seized in 2010 is about 68% higher than the 2.5 mt seized in 2009 but still lower than the amounts seized in the preceding four years. A total of 4.6 mt of methamphetamine in both crystalline and pill form were seized in Yunnan province in 2010, most of which originated from Myanmar (NNCC 2011b). In addition, a total of 1.27 million ecstasy pills was seized in 2010, representing a nearly 20% increase compared with the previous year (NNCC 2011e).

Ketamine seizures decreased slightly in 2010 to 4.9 mt. However, the quantities of ketamine seized during the past few years have been significantly higher than the quantities seized earlier in the decade (NNCC 2011a).

Cocaine seizures totaled nearly 441 kg in 2010, representing a more than ten-fold increase from the previous year (NNCC 2011f). In addition, about 3.2 mt of cannabis were seized in 2010 compared with more than 8.7 mt seized in 2009 (NNCC 2011a).

Significant seizures of precursor chemicals continued to be reported in China. In 2010, 234 seizures were reported, including the seizure of 869 tons of unspecified controlled precursor chemicals and 49 mt of uncontrolled chemicals (NNCC 2011a). In 2009, China reported the seizure of nearly 9 mt of hydroxylamine hydrochloride, a precursor used in the manufacture of ketamine, as well as other unspecified precursor chemicals (NNCC 2010a).

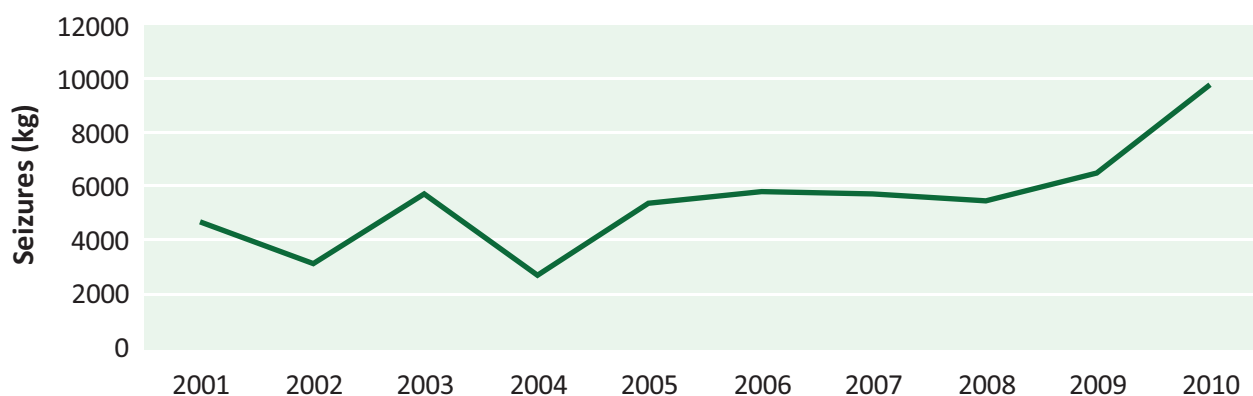
Table 41. Seizures of selected drugs in China, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	5,946	5,863	5,523	2,479	4,186
Methamphetamine pills	pills	4,021,492	7,620,322	6,255,658	40,640,038	58,443,666
Ecstasy	pills	454,145	2,219,353	1,077,552	1,062,173	1,272,904
Ketamine	kg	1,789	6,102	5,271	5,323	4,905
Heroin	kg	5,792	4,594	4,332	5,838	5,353
Opium	kg	1,691	1,185	1,375	1,303	1,015
Cocaine	kg	359	162*	530*	41	441

*Information from unconfirmed reports; not formally reported by NNCC

Source(s): DAINAP; 2009 and 2010 data from NNCC 2011a and NNCC 2011f

Figure 26. Methamphetamine (in crystalline and pill form) seizures in China, 2001-2010



Source(s): NNCC 2011a

Drug prices – China did not report drug price data to DAINAP in 2010.

Sources of illicit drugs

Significant quantities of methamphetamine are trafficked into China from Myanmar. However, a large portion of the methamphetamine in China is also manufactured domestically. In 2010, 378 illicit manufacturing laboratories were dismantled compared with 391 such facilities in 2009 and 244 in 2008. However, it is unclear how many of these laboratories were specifically manufacturing methamphetamine. Preliminary data for 2011 indicate that illicit ATS manufacture continued to expand (NNCC 2011e). Most of the illicit ATS manufacture takes place in five key provinces: Guangdong, Sichuan, Hubei, Henan and Hunan (NNCC 2011b).

Seizures of bulk quantities of ephedrine and pseudoephedrine have declined in recent years, largely due to tightened government controls on

the substances. However, the risk of diversion for ATS manufacture remains high. The diversion of uncontrolled substances, such as pharmaceutical preparations that contain ephedrine, is also a concern (NNCC 2011e).

The amount of heroin trafficked into China from Shan State in Myanmar has declined of late. At the same time, heroin is being trafficked into China from West Asia, particularly Afghanistan. In 2010, a total of 577 kg of heroin originating from West Asia was seized in China, accounting for 11% of total heroin seizures (NNCC 2011a). Most of the heroin in Hong Kong, China, originates from the region known as the 'Golden Triangle' of Myanmar, and to a lesser extent, Lao PDR (HKNB 2011).

Ketamine has been a controlled substance in China since July 2004. Criminal syndicates attempt to procure the precursor chemical hydroxylamine hydrochloride to manufacture ketamine in illicit laboratories in China rather than diverting the drug from the legitimate market (HKNB 2011). China

reports the highest seizures of ketamine in the world, having recorded an average of about 5.4 mt seized in each of the past four years (NNCC 2011a).

Trafficking – Most of the methamphetamine is trafficked overland from Shan State in Myanmar into Yunnan province in China. Apart from Yunnan, Guangdong and Guangxi provinces have become the primary routes for the trafficking of methamphetamine into other parts of China (NNCC 2011e). In 2010, some quantities of crystalline methamphetamine were trafficked through Hong Kong, China, to Australia (HKNB 2011). Whereas in the past most ecstasy in Hong Kong, China, originated from Europe, more recently, many of the pills sold as ‘ecstasy’ in the territory originated in Asia and contained various substances other than MDMA (HKNB 2011).

Heroin from West Asia is trafficked into China via air, land and sea routes. The port of Karachi, Pakistan, is the primary point of embarkation for trafficking by sea, with maritime vessels transiting Singapore, Taiwan Province of China and Hong Kong, China. Heroin trafficked by air into China is smuggled in cargo or by air passenger couriers (NNCC 2010b).

West African groups primarily traffic cocaine into China, often in parcel post packages sent from Peru (NNCC 2011c). Some West African drug trafficking groups are reported to be working in association with criminal syndicates from South America (NNCC 2011c). In addition, an increase in ATS-related crime involving drug trafficking organizations from Japan and the Republic of Korea has been reported (NNCC 2011b).

Forensic data

China did not report forensic data to DAINAP in 2010.

Hong Kong (Special Administrative Region of China)

Opiates have traditionally been the primary drugs of concern in Hong Kong, China, and heroin remains the most commonly used drug. The use of methamphetamine, primarily in crystalline form, emerged in Hong Kong in the early 1990s. Methamphetamine use has stabilized in recent years at about 10% of the drug user population, and approximately 16 to 21% of reported drug users under the age of 21 (HKNB 2011). The number of arrests related to crystalline methamphetamine remain low and have declined for two consecutive years. Seizures of crystalline methamphetamine have fluctuated during the past few years. In 2010, approximately 102 kg of methamphetamine and 73 lt. of liquid methamphetamine were seized in Hong Kong, China, up from 40 kg seized in 2009 (HKNB 2011).

Most illicit ATS manufacture in Hong Kong, China, has consisted of tableting and repackaging operations. However, in 2010, Hong Kong police reported the dismantling of a larger crystalline methamphetamine manufacturing facility housed in an industrial estate (HKNB 2011). In 2009, two small-scale clandestine crystalline methamphetamine manufacturing facilities were seized (HKNB 2010).

Ecstasy use and seizures have declined in recent years, possibly due to the growing popularity of the significantly less expensive ketamine. Much of the

Table 42. Seizures of selected drugs in Hong Kong, China, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	6.7	40.8	23.9	40.1	101.8**
Ecstasy	pills	104,296	65,539	11,984	7,146	5,810
Ketamine	kg	1,006.1	96.4	423.3	472.3	189.1
Cannabis herb	kg	195.8	537.2	244.1	84.6	8.8*
Cannabis resin	kg	2.9	31.8	16.5	22.5	5.5
Cocaine	kg	14.9	197.1	63.7	102.9	579.7
Heroin	kg	52.2	37.4	46.4	37.1	68.5

*Reported as 8.8 kg and 58 cannabis plants. **Reported as 101.8 kg of crystalline methamphetamine and 73 lt. of liquid methamphetamine.

Source(s): HKNB 2011

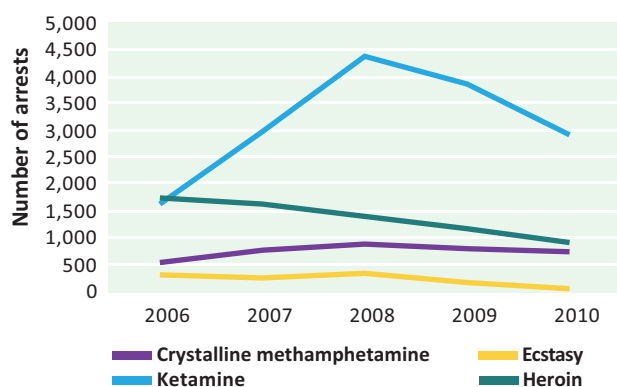
‘ecstasy’ seized actually contains substances other than MDMA, such as ketamine and methamphetamine, and, more recently, trifluoromethylphenylpiperazine (TFMPP) (HKNB 2011). In 2010, 34 ecstasy-related arrests were reported in Hong Kong, China.

Ketamine users account for nearly 38% of all drug users in Hong Kong, China. Among drug users below the age of 21, an estimated 84% used ketamine (CRDA 2011). A total of 2,910 persons were arrested for ketamine-related offences in 2010. During the year, the amount of ketamine seized in Hong Kong, China, decreased by 62% (HKNB 2011).

The quantities of heroin seized in Hong Kong, China, have fluctuated during the past five years, with an average of about 48 kg seized each year (HKNB 2011). The number of arrests related to heroin have declined for five consecutive years, totaling 888 in 2010.

Cocaine seizures in Hong Kong, China, have grown continuously during the past five years. In 2010, cocaine seizures showed a five-and-a-half-fold increase, due to several large single seizures, including one seizure of more than 300 kg in April (HKNB 2011).

Figure 27. Drug-related arrests in Hong Kong, China, 2006-2010



Source(s): HKNB 2011



Emerging trends and concerns

- Crystalline methamphetamine use continued to increase, and in 2010 it surpassed cannabis in terms of new treatment admissions and arrests.
- The number of reported drug users in Indonesia has increased and is expected to rise further in 2011. The increasing rates of drug use highlight the need for adequate treatment facilities as well as for improved rehabilitation and demand reduction programmes.
- Although the number of injecting drug users (IDUs) in the country declined in 2010, the proportion of IDUs infected with HIV remains alarmingly high in Indonesia.
- In 2010, there was a notable increase in the number of persons who underwent drug treatment for ATS. Methamphetamine and ecstasy users accounted for 44% of all persons in treatment during the year.
- There are indications ATS use is expanding among Indonesian women. In 2010, women accounted for 56% of all persons treated for ecstasy use compared with less than 10% in 2009. Moreover, 77% of all Indonesian women arrested for drug-related offences in 2010 were arrested for crystalline methamphetamine.
- Significant quantities of crystalline methamphetamine and ecstasy continue to be manufactured domestically in Indonesia. The continuing high levels of ecstasy manufacture in Indonesia indicate that the country may be replacing Europe as the primary source of MDMA in the region.

Overview of the drug situation

Formerly primarily a transit country for amphetamine-type stimulants (ATS), Indonesia has swiftly developed significant problems with ATS manufacture and use in recent years. Whereas a decade ago illicit ATS manufacture in Indonesia was limited to the re-pressing of ecstasy pills from Europe, the number of both large and small-scale crystalline methamphetamine and ecstasy manufacturing facilities seized during the past six years suggests that substantial ATS manufacture is taking place in the country. ATS use has also increased. In 2010, crystalline methamphetamine was identified as being the primary drug of use in Indonesia, surpassing cannabis, which had long been the most widely used illicit drug in the country. In addition, the proportion of drug-related arrests and drug treatment admissions related to crystalline methamphetamine increased considerably in 2010.

The high rates of HIV infection among injecting drug users in Indonesia pose a serious public health risk. While the injection of heroin has been in decline for the past decade, the injecting use of crystalline methamphetamine has expanded in recent years. In addition, the number of overall drug users in the country continues to increase.

International drug trafficking organizations continue to operate in Indonesia on a significant scale. As with a number of countries in the region, a considerable amount of crystalline methamphetamine has been trafficked into the country from the Islamic Republic of Iran by Iranian couriers during the past two years. Ethnic Chinese drug trafficking organizations and criminal groups from West Africa also continue to smuggle ATS and other illicit drugs into Indonesia.

Patterns and trends of drug use

Drug use – Crystalline methamphetamine use continued to increase, and in 2010 it surpassed cannabis for the first time as the most prevalent drug of use in Indonesia, according to government expert perception. The primary mode of administration for crystalline methamphetamine is smoking. Use of methamphetamine in pill form is less common in Indonesia; much of the ecstasy found in the country contains quantities of methamphetamine. Use of ecstasy, which during the past five years had been reported as the second or third most widely used drug in the country, remained stable in 2010.

Cannabis herb is the second most commonly used drug in Indonesia but its use showed a decline in 2010. At the same time, however, the 2010 National Household Survey, conducted by the National Narcotics Board and Center for Health Research, University of Indonesia, showed that cannabis had the highest annual prevalence rate with nearly 0.5% of the general population aged between 10 and 59 years having used the drug in the previous year, followed by ecstasy (0.19%) and methamphetamine (0.18%). In addition, cannabis also had the highest lifetime prevalence rate, with 1.97% of the general population reporting having ever used the drug, followed by methamphetamine (0.76%) and ecstasy (0.73%).

Heroin continues to be a drug of concern in Indonesia. In 2010, heroin use increased for the first time in five

years. The primary mode of administration for heroin is injection, followed by snorting.

The use of benzodiazepines, which are often used in association with methamphetamine for their sedative effects, decreased considerably in 2010. In addition, Indonesia reported a sharp decline in the number of seizures, arrests and drug treatment admissions related to benzodiazepines during the year.

In 2010, there were an estimated 4.02 million drug users in Indonesia, or roughly 2.21% of the population aged between 10 and 59 years, according to the National Household Survey. This is an increase from 3.6 million total drug users, or 1.99% of the same population in 2009. The average age of drug users in Indonesia in 2010 was 25 years.

Injecting Drug Use

Injection is the most common mode of administration for heroin, and the second most common mode of administration for crystalline methamphetamine (the primary mode being smoking) and buprenorphine¹ (the primary mode being ingestion).

In 2010, there were an estimated 105,784 injecting drug users (IDUs) in Indonesia.² This is fewer than the estimated 126,429 IDUs reported in 2009, primarily due to the deaths of IDUs during the year. Of the population living with HIV in Indonesia in

Table 43. Rank of use of selected drugs in Indonesia, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	4	•	2	2	1
Methamphetamine pills*	•	•	•	•	3
Ecstasy	3	•	2	3	5
Ketamine	•	•	7	6	9
Barbiturates	•	•	•	•	6
Benzodiazepines	•	•	3	4	7
Cannabis herb	1	•	1	1	2
Cannabis resin	•	•	•	•	8
Cocaine	•	•	•	•	10
Heroin	2	•	4	5	4

• = Not reported. *Primarily 'ecstasy' pills containing methamphetamine.
Source(s): DAINAP

¹ Buprenorphine is a semi-synthetic opioid used for substitution treatment. It is available in tablet and liquid forms.

² Figures based on a behaviour rapid survey conducted by the National AIDS Commission of Indonesia in 2010. The survey covered 33 provinces in Indonesia and used the Poisson Regression Modeling estimation methodology.

Table 44. Trend in use of selected drugs in Indonesia, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	●	●	↑	↑	↑
Methamphetamine pills	●	●	●	●	↑
Ecstasy	●	●	↑	↓	↔
Ketamine	●	●	↔	↑	↓
Barbiturates	●	●	●	●	↑
Benzodiazepines	●	●	↑	↑	↓
Cannabis herb	●	●	↔	↑	↓
Cannabis resin	●	●	●	●	↑
Cocaine	●	●	●	●	↔
Heroin	●	●	↓	↓	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported

Source(s): DAINAP

2010, 28% were IDUs. In addition, approximately half of all IDUs in Indonesia were infected with HIV. HIV prevalence among those who injected drugs for two years or less was substantially lower than among those who had injected drugs for more than two years (NAC 2010).

According to a survey of prisoners conducted by the Ministry of Justice and Human Rights in 2010, 8% of men and 6% of women reported ever having injected drugs (DOCMJHR 2011). Of those prisoners who had a history of injecting drug use, a higher proportion of female respondents (12%) tested positive for HIV compared with male respondents (8%). By comparison, the prevalence of HIV among all prisoners was 6% for women and 1.1% for men (DOCMJHR 2011).

Drug treatment

In 2010, a total of 12,427 drug users underwent drug treatment in the country, 16% less than the number of persons who underwent drug treatment in 2009. However, in 2010 there was a marked increase in the number of persons treated for the use of methamphetamine and ecstasy. The total number of methamphetamine users in treatment in 2010 was 2,963, roughly three times higher than the 2009 figure. The 2,524 ecstasy users who underwent drug treatment in 2010 represent a five-fold increase from the 490 ecstasy users in treatment during the previous year.

In 2010, ATS were the primary drugs of use for 44% of all persons in treatment (24% for meth-

amphetamine and 20% for ecstasy). By comparison, in 2009, ATS users accounted for about 12% of all drug users in drug treatment. For persons newly admitted to treatment programmes in 2010, 26% were admitted for methamphetamine use and 40% for ecstasy use. Significantly, the number of women who underwent treatment for ecstasy use surged in 2010 to 1,421 persons, accounting for 56% of all persons treated for ecstasy use during the year. In 2009, the proportion of women in treatment for ecstasy use was less than 10% (42 women) of the total. Overall, in 2010 women accounted for 17% of all persons in drug treatment and 29% of all persons newly admitted to treatment during the year.

The most common locations for treatment for ATS users were specialized drug treatment facilities, psychiatric clinics and general hospitals. These facilities offer detoxification, medical care and counseling.

In 2010, the number of cannabis users in drug treatment nearly doubled to 3,325 persons, accounting for 27% of the total number of persons in treatment during the year.

The number of heroin users in drug treatment in 2010 declined by 73% compared with the previous year. The 2,935 heroin users in treatment in 2010 accounted for 24% of all persons in treatment, whereas in 2009 heroin users (10,768 persons) accounted for 73% of all persons in drug treatment.

Drug treatment in Indonesia is offered at 53 hospitals, 97 government-run facilities, 177 non-governmental organization centres and 23 prisons (BNN 2011b).

Drug-related arrests, seizures and prices

Drug-related arrests – A total of 23,401 drug-related arrests were reported in 2010 representing a 12% decline compared with the 26,721 such arrests reported in 2009. However, the number of arrests involving crystalline methamphetamine (12,361 persons) in 2010 showed a 23% increase over the previous year. Crystalline methamphetamine-related arrests accounted for about 53% of all drug-related arrests in 2010 compared with 38% of all such arrests in 2009. Women accounted for 9% of all persons arrested for crystalline methamphetamine. However, 77% of women arrested for drug-related offences in 2010 were arrested for offences related to crystalline methamphetamine. The total number of arrests related to ecstasy (1,078 persons) declined by 44%, accounting for less than 5% of all drug-related arrests in 2010.

In 2010, 27 Iranian nationals were arrested at Soekarno-Hatta International Airport in Jakarta for attempting to smuggle methamphetamine into Indonesia (Jakarta Post 2011a). This figure is slightly higher than the number of Iranian couriers arrested in Indonesia in 2009.

In 2010, Indonesia also reported the arrest of five men and one woman for the illicit possession of ephedrine, in two separate cases, seizing a total of 917 g of the substance.

The second largest portion of all drug-related arrests in 2010 involved cannabis herb, accounting for 41% of all drug-related arrests. However, the total number of cannabis-related arrests in 2010 declined by 21% compared with the previous year.

Table 45. Drug treatment admissions in Indonesia by drug type, 2010

Drug type	New admissions			All admissions		
	Men	Women	Total	Men	Women	Total
Methamphetamine	1,396	257	1,653	2,642	321	2,963
Ecstasy	1,103	1,421	2,524	1,103	1,421	2,524
Benzodiazepines	52	2	54	52	2	54
Cannabis	1,417	94	1,511	3,187	138	3,325
Cocaine	27	23	50	101	33	134
Dextrometorphan	1	0	1	1	0	1
Heroin	0	0	0	2,764	171	2,935
Opium	479	12	491	479	12	491
Total	4,475	1,809	6,284	10,329	2,098	12,427

Source(s): DAINAP

Table 46. Drug-related arrests in Indonesia, 2010

Drug type	National			Non-national		
	Men	Women	Total	Men	Women	Total
Crystalline methamphetamine	11,197	1,085	12,282	64	15	79
Ecstasy	925	136	1,061	7	0	7
Ketamine	1	0	1	2	0	2
Barbiturates	167	2	169	0	0	0
Benzodiazepines	154	9	163	0	0	0
Cannabis herb	9,432	177	9,609	10	0	10
Cannabis plants	11	0	11	0	0	0
Cannabis resin	0	0	0	3	0	3
Cocaine	4	0	4	0	0	0
Total	21,891	1,409	23,300	86	15	101

Source(s): DAINAP

The vast majority of persons arrested for drugs in Indonesia are Indonesian men. In addition, the survey of prisoners conducted by the Ministry of Justice in 2010 estimated that 36% of all male prisoners and 59% of female prisoners were incarcerated for drug-related crimes (DOCMJHR 2011).

Drug seizures – ATS seizures in Indonesia have fluctuated in recent years but have shown an overall decreasing trend. Seizures of crystalline methamphetamine in 2010 totaled 354 kg. This represents an increase of one third compared with the 238 kg seized in 2009 but is less than half of the total 710 kg of crystalline methamphetamine seized in 2008. Ecstasy seizures totaled 352,515 pills in 2010. Although this figure is 14% higher than the number of pills seized in 2009, it is still approximately two thirds below the quantities of ecstasy seized in 2007 and 2008, when more than one million pills were seized each year.

While the level of illicit ATS manufacture is considerable in Indonesia, reported seizures of precursor chemicals remain low. In 2010, a total of 917 g of ephedrine were seized in two separate cases in addition to the seizure of 21.2 lt. of sulfuric acid, 44.3 lt. of hydrochloric acid and 24.7 lt. of toluene.

The 12,656 kg of cannabis seized in 2010 is 89% lower than the amount seized in 2009 and is the lowest total reported since 2006. At the same time, the number of cannabis plants seized in 2010 is considerably higher compared with the previous year, despite the fact that overall, seizures of cannabis plants have shown a sharp declining trend since 2007. In 2010, the National Narcotics Board (BNN)

of Indonesia reported that of the estimated 535 ha under cannabis cultivation during the year, 178.4 ha of cannabis had been eradicated.

Heroin seizures more than doubled in 2010, with 25 kg seized during the year. This represents the second highest seizure total reported during the past five years. Over the past decade, however, seizures of heroin have shown an overall declining trend.

There was a notable increase in ketamine seizures in 2010 with 117 kg seized during the year, representing the highest total seized during the past five years.

Drug prices – The retail prices for most illicit drugs showed an increase in Indonesia in 2010, indicating a possible decrease in availability due to successful law enforcement efforts. The retail price for a gram of crystalline methamphetamine nearly tripled in 2010. During the year, the retail price for one ecstasy pill increased compared with the price in 2009. The retail price for a gram of amphetamine showed a slight increase in 2010. Table 48 shows the price ranges of selected illicit drugs in Indonesia from 2008 to 2010.

Sources of illicit drugs

Significant quantities of crystalline methamphetamine and ecstasy are manufactured domestically in Indonesia. A considerable number of both large illicit laboratories and smaller scale ATS manufacturing facilities located in private residences have been seized in the country during the past six years. In 2010, a total of 26 illicit ATS manufacturing facilities were seized in Indonesia, including 11 crystalline metham-

Table 47. Seizures of selected drugs in Indonesia, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	1,241.0	492.9	709.9	224.5	354.1
Ecstasy	pills	466,908	1,247,302	1,045,105	309,363	352,515
Ketamine	kg	●	●	19.8	6.1	116.9
Barbiturates	pills	●	●	●	●	100,932
Benzodiazepines	pills	617,442	3,200,495	6,485,246	2,369,720	785,936
Cannabis herb	kg	11,718.0	35,464.0	140,496.0	110,723.0	12,656.0
Cannabis plantations*	ha	289.6	242.0	128.1	241.9	178.4
Cannabis plants	plants	1,019,307	1,858,342	720,774	11,755	407,448
Cannabis resin	kg	4.4	0.6	0.3	0.04	4.9
Cocaine	kg	1.1	0.2	0.5	0.2	0.1
G-List**	tablets	●	●	●	973,999	●
Heroin	kg	11.9	17.2	29.1	12.3	25.0

● = Not reported. **G-List refers to other unspecified psychotropic substances.

Source(s): DAINAP; *BNN 2011a

Table 48. Retail prices of illicit drugs in Indonesia (USD), 2008-2010

Drug type	Measurement	2008	2009	2010
Crystalline methamphetamine	Per gram	87-130	50-70	150-200
Amphetamine	Per gram	17	20	20
Ecstasy	Per pill	7-9	8-10	10-15*
Cannabis herb	Per kg	174-217	200-250	350-650
Cannabis resin	Per gram	6.5	6	7.5
Cocaine	Per gram	87	100	100
Heroin	Per gram	61-87	50-70	70-100

Source(s): DAINAP; *BNN 2011b

phetamine laboratories. Of these, two were large-scale crystalline methamphetamine manufacturing facilities and nine were small-scale facilities. In addition, 15 ecstasy manufacturing laboratories were seized in 2010, of which three were large facilities and 12 were small-scale facilities. Of the 15 ecstasy facilities seized, three were ecstasy pill re-pressing operations. The continuing high levels of ecstasy manufacture in Indonesia indicate that the country is possibly replacing Europe as the primary source of MDMA in the region.

By comparison, in 2009, drug law enforcement authorities in Indonesia dismantled a total of 37 ATS manufacturing operations, the highest figure reported to date. The seized facilities included 12 small-scale 'kitchen type' laboratories in private residences, indicating that drug manufacturers were beginning to reduce the size of their facilities in an attempt to avoid detection by the law (BNN 2010a).

Most of the cannabis found in Indonesia is grown domestically, cultivated in Aceh Darussalam and other parts of northern Sumatra.

Trafficking – Although the high level of illicit manufacture of ATS has partially eliminated the need for the trafficking of ATS into Indonesia, large amounts of crystalline methamphetamine and ecstasy are also trafficked into the country by transnational drug trafficking organizations. Chinese criminal groups primarily traffic methamphetamine, most of which originate from Malaysia, into Indonesia by air or sea. Ecstasy and crystalline methamphetamine are trafficked by a range of organized crime groups from China, Nigeria and Malaysia (BNN 2010b). In addition, significant amounts of crystalline methamphetamine have been smuggled into the country from the Islamic Republic of Iran by Iranian couriers during the past two years. Prior to 2008, most foreign drug traffickers arrested in Indonesia were reportedly from Taiwan Province of China (Jakarta Post 2011a).

Since the early 1990s, West African organized crime groups have been involved in the trafficking of crystalline methamphetamine, ecstasy and heroin to Indonesia. These groups often use Phnom Penh in Cambodia as a centre for financial transactions and for the distribution of illicit drugs to Indonesia. Most of the heroin trafficked by drug trafficking groups from West Africa appears to come from Afghanistan. In addition, significant quantities of crystalline methamphetamine, ecstasy and heroin have also been seized from air passenger couriers from flights coming from New Delhi, India (BNN 2009).

Forensic data

Large methamphetamine samples (more than 10 kg) analysed in 2010 showed a range of purity of 47 to 74% methamphetamine with an average purity of 61% methamphetamine. The three small samples of methamphetamine (less than 10 kg) analysed showed a range of purity of 18 to 95% methamphetamine with an average of 65% methamphetamine.



Emerging trends and concerns

- Crystalline methamphetamine remains the most commonly used drug in Japan. Since 2005, approximately 80% of all drug-related arrests have involved crystalline methamphetamine.
- Source countries for methamphetamine continue to diversify, with increasing amounts of the drug being trafficked from West Africa to Japan in recent years. In addition, international drug traffickers appear to be targeting Japan as a destination for smuggled methamphetamine due to the large market and high price for the drug.

Overview of the drug situation

In Japan, crystalline methamphetamine continues to be the main drug of use, although use of the drug has stabilized of late. The country first experienced widespread methamphetamine use in the 1950s, and again in the mid-1980s and late 1990s (NPA 2011a). Illicit manufacture of methamphetamine in Japan had previously been extremely rare. However, in June 2010, the Sagami-hara, Kanagawa Prefecture police arrested two Iranian nationals on suspicion of manufacturing methamphetamine in their home, seizing quantities of the drug, precursor chemicals and equipment (SMART 2010).

Traditionally, China has been the primary source of methamphetamine seized in Japan, but in recent years methamphetamine from other countries around the world has been trafficked into Japan (NPA 2010a). More than half of the arrests related to methamphetamine during the past five years have involved local 'Boryokudan' ('Yakuza') organized crime members. As with many countries in East Asia, a large number of nationals from the Islamic Republic of Iran have been arrested in Japan in methamphetamine-related cases in the past few years, including 85 in 2009 and 50 in 2010 (NPA 2011a).

Japan has recently placed national controls on 51 so-called 'designer drugs' – synthetic substances not under international control – including mephedrone and salvinorin A, a substance obtained from the plant *Salvia divinorum* (INCB 2010a).

Cannabis is the second most commonly used drug in Japan. Compared to 2009, when the number and ratio of drug-related arrests involving cannabis reached an all-time high, figures showed a decline in 2010. In addition, the indoor cultivation of cannabis in Japan continues to take place (NPA 2011a). In 2009, the latest year for which data are available, 243 persons were arrested for the cultivation of cannabis (NPA 2010b).

Patterns and trends of drug use

Drug use – Crystalline methamphetamine use in Japan has remained generally stable during most of the past decade. Methamphetamine pill use is not reported in Japan, although limited use in the country is likely. Use of ecstasy pills is more common although the declining number of arrests and declining seizures of the drug in the past several years suggest that ecstasy use is likely declining (NPA 2011a).

Cannabis remains the second most commonly used drug. Since 2001, about half of new drug dependents in Japan have been identified as cannabis dependents (MOLHW 2010).

There has been little demand for cocaine, heroin and opium in Japan, each of which accounted for less than 1% of total drug-related arrests in 2010 (NPA 2011b).

Injecting drug use

Injecting is the primary mode of administration for crystalline methamphetamine in Japan. Some crystalline methamphetamine users also smoke and, to a lesser degree, orally ingest the drug (NPA 2010a).

Injecting drug users and persons infected through mother-to-child transmission combined account for less than 2% of all persons living with HIV and AIDS. In 2008, the latest year for which data are available, there were 10 newly reported cases of persons living with HIV and AIDS where the exposure route was injecting drug use, the same number as the previous peak in 2005 (UNGASS 2010).

Drug treatment

Consolidated drug treatment data are not available from Japan. The last reported (2005) proportion of drug abuse and dependence cases for ATS use in the country was estimated at more than 50% of all drug-

related treatment demand from clients in psychiatric facilities (MOLHW 2007).

Publicly available government statistics for drug-related consultations at clinics and mental health centres show that in fiscal year 2009 (April-March), 11,651 persons had received drug-related services. This was a 4.5% increase from the number of persons requiring drug consultations in 2008 and the largest number reported in the new millennium (MOLHW 2010).

In Japan, counsellors for drug users are part-time employees appointed by the governor of each prefecture. In 2009, there were 121 counsellors in 9 prefectures and metropolitan areas in Japan (MOLHW 2010).

Drug-related arrests, seizures and prices

Drug-related arrests – Drug-related arrest figures have remained stable during the past five years in Japan. In 2010, a total of 14,536 drug-related arrests were recorded, the majority of which was related to crystalline methamphetamine. In 2010, the number of persons arrested for crystalline methamphetamine in the country totaled 11,999, accounting for nearly 83% of all drug-related arrests during the year and representing a 3% increase compared with 2009. Since 2005, approximately 80% of all drug-related arrests have involved crystalline methamphetamine (NPA 2011a).

Table 49. Rank of use of selected illicit drugs in Japan, 2006-2010

Drug type	2006	2007*	2008*	2009**	2010**
Crystalline methamphetamine	1	1	1	1	1
Ecstasy	4	4	4	3	•
Cannabis	3	3	2	2	2
Heroin	6	6	6	•	•

• = Not reported

Source(s): UNODC 2007; *UNODC Annual Reports Questionnaires; **NPA official communication

Table 50. Trend in use of selected illicit drugs in Japan, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	↔	↔	↑	↔	↔
Ecstasy	↑	↓	↔	↓	↓
Cannabis	↑	↔	↓	•	↓
Heroin	•	↔	↔	•	•

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

Source(s): NPA official communication

Japanese organized criminal syndicates continue to play a major role in drug trafficking in the country. In 2010, a total of 6,317 'Boryokudan' members and associates were arrested on methamphetamine-related charges, which accounted for almost 53% of all methamphetamine-related arrests during the year. The proportion of methamphetamine-related arrests with ties to organized crime has remained stable during the past five years (NPA 2011a).

In 2010, a total of 50 nationals of the Islamic Republic of Iran were arrested for methamphetamine-related offences, compared with 85 Iranian nationals arrested in 2009. Since 2006, a total of 240 Iranian nationals have been arrested on methamphetamine-related offences in Japan, although the number of Iranian nationals arrested in Japan has declined in each of the past two years (NPA 2011a).

Arrests related to ecstasy and other synthetic drugs have continued to decline each year since their peak in 2004. In 2010, a total of 62 persons were arrested for ecstasy-related offences, representing less than 1% of all drug-related arrests during the year (NPA 2011a).

Cannabis-related arrests amounted to 2,216 in 2010, accounting for 15% of all drug-related arrests during the year. The number of cannabis-related arrests in 2010 was 24% lower compared with the previous year and represented the first decrease in such arrests since 2007. In 2009, arrests involving cannabis reached an all-time high with 2,920 persons arrested, or nearly 20% of all drug-related arrests. In contrast with methamphetamine offenders, persons arrested for cannabis offences are more likely to be first-time offenders. In 2010, first-time offenders accounted for 81% of the total cannabis-related arrests (NPA 2011a) compared with 85% in 2009 (NPA 2011b).

Arrests related to cocaine, heroin and opium combined accounted for approximately 1% of the total drug-related arrests in 2010 (NPA 2011a).

Drug seizures – Crystalline methamphetamine and cannabis remain the two major drugs seized in Japan. In 2010, a total of 302.3 kg of crystalline methamphetamine was seized in the country, representing a 15% decline compared with the previous year and the lowest total seized in the past four years (NPA 2011a). The National Police Agency of Japan (NPA) has not reported the seizure of methamphetamine pills in the country. However, a large proportion of the seized pills reported as 'other synthetic drugs' are likely methamphetamine pills.

The amount of ecstasy seized in Japan has dropped sharply since 2007 when nearly 1.2 million pills were seized. The 15,653 ecstasy pills seized in 2010 is 57% lower than the number of pills seized in 2009. In addition, the number of pills seized reported as 'other synthetic drugs' also declined sharply in 2010, with a total of 1,673 pills seized compared with 49,221 such pills seized in 2009 (NPA 2011a).

With the exception of opium, there was a general decline in the amounts of drugs seized.

Drug prices – The prices of methamphetamine and other drugs depend greatly on the region of sale, the route of the trafficked drugs and the size of the purchase. Illicit drug prices for 2010 were not available. However, market price ranges for 2007 to 2009 are reported below, and are calculated on average exchange rates of Japanese Yen to USD for each year. Price ranges are based on statements given by persons arrested by the Narcotics Control Departments in Japan. Crystalline methamphetamine prices declined slightly in 2009 compared with the previous year. The price range for

Table 51. Drug-related arrests in Japan, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine	11,606	12,009	11,025	11,655	11,999
Ecstasy	370	296	281	107	62
Cannabis	2,288	2,271	2,758	2,920	2,216
Cocaine	72	99	98	116	105
Heroin	22	13	13	15	17
Opium	27	41	14	28	21
Other illicit drugs	55	61	99	106	116
Total	14,440	14,790	14,288	14,947	14,536

Source(s): NPA 2011a

Table 52. Drug seizures in Japan, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	126.8	339.3	397.5	356.3	302.3
Ecstasy	pills	185,773	1,187,434	202,886	36,467	15,653
Other synthetic drugs	pills	453	46,449	14,286	49,221	1,673
Cannabis herb	kg	225.8	437.8	375.1	195.1	144.7
Cannabis resin	kg	96.7	20.1	33.1	17.2	8.8
Cocaine	kg	9.8	18.5	5.5	11.3	6.9
Heroin	kg	2.3	1.8	1.0	1.2	0.2
Opium	kg	17.2	19.4	6.6	3.2	3.7

Source(s): NPA 2011a; NPA 2011c

ecstasy has decreased in each of the past two years. In 2009, cannabis herb prices declined from the previous year with the minimum price range reported as far lower than in previous years. Cannabis resin prices continued to increase in 2009. Heroin prices increased considerably in 2009 (MOLHW 2010).

Sources of illicit drugs

Nearly all of the methamphetamine seized in Japan is trafficked into the country from overseas, by drug trafficking organizations. These organizations primarily involve domestic 'Boryokudan' organized crime groups as well as drug trafficking groups from the Islamic Republic of Iran and West Africa. However, the number of Iranian nationals arrested in Japan for smuggling methamphetamine, while notable, has declined in each of the past two years.

China remains the primary source of methamphetamine seized in Japan in recent years and in 2010 it accounted for some 35% of the total amount of methamphetamine seized in Japan (NPA 2011b). One emerging trend identified by Japanese authorities was that of methamphetamine trafficking from

Africa to Japan (JCITC 2010). The proportion of methamphetamine seized in Japan that originated in Africa increased from 7.4% in 2009 to 36% in the first half of 2010 (UNODC 2011). Of the methamphetamine seized in Japan in all of 2010, Nigeria and Benin were the source countries for 7.4% and 5.2% respectively (NPA 2011b). Other prominent source countries in Africa were Cameroon and Senegal (UNODC 2011). Although the domestic manufacture of methamphetamine is extremely rare in Japan, the seizure of a small-scale methamphetamine manufacturing operation in 2010 and the occasional diversion of precursor chemicals in Japan indicate the possibility that illicit methamphetamine manufacture takes place.

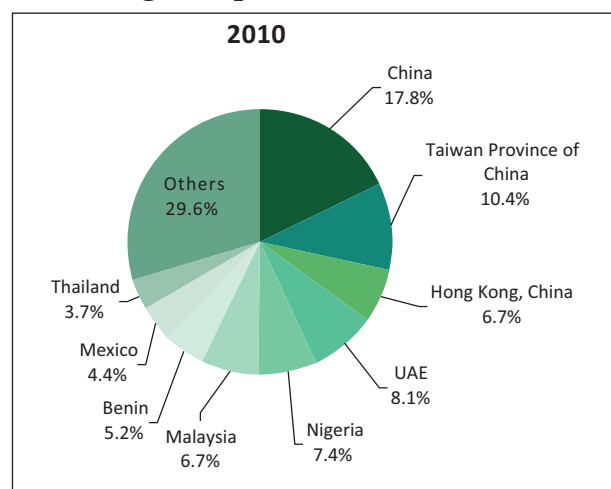
European countries remain the major source of ecstasy seized in Japan, although the quantities of ecstasy smuggled into the country continue to decline. This decreasing trend reflects the declining manufacture and trafficking of ecstasy in Europe in recent years and the stricter precursor controls in China (NPA 2011b). During the past few years, the main countries of origin for ecstasy seized in Japan were the Netherlands, Belgium, Germany, France and Canada (NPA 2010a).

Table 53. Retail price range per gram of drugs in Japan (in USD), 2007-2009

Drug type	2007		2008		2009	
	Min	Max	Min	Max	Min	Max
Crystalline methamphetamine	115	918	127	1,376	107	1,007
Ecstasy (one pill)	17	115	7.4	105	5	85
Cannabis herb	34	126	16	211	5	160
Cannabis resin	57		106		107	134
Heroin	344	459	338		641	
Cocaine	172	287	74	423	128	214
LSD (1 tab)	29	57	32	63	43	

Source(s): MOLHW 2010 (and previous years)

Figure 28. Sources of methamphetamine trafficking to Japan, 2010



Source(s): NPA 2011b

The indoor cultivation of cannabis was reported to be on the rise in Japan in 2008 and 2009 but declined in 2010 (NPA 2011a). In 2009, the latest year for which data are available, most of the cannabis herb that entered Japan came from the United States, France and South Africa. Most cannabis resin was trafficked from India and Thailand (NPA 2010a).

Trafficking – Methamphetamine trafficking to Japan has increased considerably during the past five years, with 164 such cases in 2009 and 135 cases in 2010. These figures represent the highest number of smuggling cases recorded in Japan during the past two decades. The number of methamphetamine smuggling cases by air passenger couriers, in particular, has increased sharply with 127 such cases recorded in 2009 compared with just 49 cases in 2008, 46 cases in 2007 and 41 cases in 2006. In 2010, a total of 115 methamphetamine smuggling cases by air passenger couriers were recorded in the country. Methamphetamine is usually concealed inside false compartments of luggage, clothing or shoes. Methamphetamine is also smuggled into the country by post and some bulk quantities are smuggled into the country by vessel, with one such case reported in 2010 and four cases reported in 2009 (NPA 2011b).

In 2010, a number of persons from Nigeria, Taiwan Province of China and Hong Kong, China were arrested at international airports for attempting to smuggle methamphetamine into Japan (Japan Customs 2010).

The large number of seizures of smaller quantities of methamphetamine carried by air passengers indicates that organized trafficking networks are diversifying

not only their sources of methamphetamine but their smuggling methods (NPA 2011b).

Forensic data

No forensic data are available.



Emerging trends and concerns

- Trafficking of illicit drugs through Lao PDR has increased significantly. A total of 24.5 million methamphetamine pills was seized in 2010, the highest amount ever reported from the country.
- Most of the methamphetamine that transits Lao PDR is destined for Thailand. However, significant amounts of methamphetamine are also being trafficked into Viet Nam and Cambodia.
- Lao PDR remains vulnerable to the relocation of methamphetamine manufacturing facilities from Myanmar to the remote northern part of Lao PDR.
- Methamphetamine pills are the primary drug of use in Lao PDR and the methamphetamine market continues to expand.
- While opium cultivation and potential production are far below the levels seen earlier in the decade, they have increased for three successive years. In 2010, the amounts of heroin (84.3 kg) and opium (86.5 kg) seized in the country were higher than the total amounts seized in the previous four years combined.
- Lao PDR is a major source of cannabis for the illicit markets in Thailand and Malaysia.

Overview of the drug situation

The manufacture, trafficking and use of illicit drugs are growing threats in Lao PDR. Methamphetamine pills continue to be the most commonly used drug in the country. Lao PDR has been used as a transit country for amphetamine-type stimulants and precursor chemicals since the late 1990s (LCDC 2010a). In 2010, a record number of methamphetamine pills was seized in the country, suggesting that increased amounts of drugs are being trafficked through the country from manufacturing centres in Myanmar and, possibly, China. While some of the methamphetamine pills are for the domestic market, the majority of the methamphetamine trafficked through Lao PDR is destined for Thailand, and some quantities are also trafficked to Cambodia and Viet Nam. Illicit methamphetamine manufacture has not been officially reported in Lao PDR.

Since 2007, both the cultivation and production of opium in Lao PDR have continued to rise. In

2010, opium poppy cultivation increased by 22% compared with the previous year to an estimated 3,000 ha while potential opium production increased by 58% to 18 mt (UNODC 2010b). There is a risk of continued growth in opium poppy cultivation as a livelihood strategy, largely due to the absence of other development initiatives. In addition, heroin has reemerged as a threat.

Large-scale cannabis cultivation continues. Lao PDR is a major source of cannabis for illicit drug markets in Thailand and Malaysia (INCB 2010a; RMP 2011b).

Patterns and trends in drug use

Drug use – The use of methamphetamine in pill form continues to be ranked by Lao officials as the primary drug use problem in the country. Both the trend in use and availability of methamphetamine continue to rise. The primary mode of administration

of methamphetamine pills is smoking.¹ Lao PDR first reported the injecting use of methamphetamine pills, which are crushed and dissolved, in 2008. However, the injecting use of methamphetamine is not considered to be common in Lao PDR. In 2010, the official estimated number of methamphetamine pill dependents in the country was 44,000 (LCDC 2011c). Methamphetamine pill use is highest in urban areas and shows an increasing trend among youths in major cities as well as in some rural areas that formerly cultivated opium poppy (LCDC 2011a). While crystalline methamphetamine and ecstasy are available in the capital Vientiane and major tourist destinations, their use is insignificant (INSCR LPDR 2011).

Since 2009, when it overtook opium, cannabis has been the second most commonly used drug.

Opium had been the primary drug of use prior to the expansion of ATS use in Lao PDR in the early part of the millennium, and it ranked as the third most commonly used drug in 2010. However, opium use has increased in each of the past two years. Lao authorities estimate that there are 12,000-15,000 opium dependents, most of which live in the northern part of the country (UNODC 2010b).

Heroin ranked as the fourth most commonly used drug in 2010. Cocaine use was first identified as a drug of concern in 2008 but no cocaine use was reported in 2010. Inhalant use also remains a problem, particularly among young drug users (UNODC 2009b).

Injecting drug use

Limited data are available concerning the prevalence of injecting drug use or HIV among drug users in Lao PDR. Injecting use of heroin is most prevalent in border areas and major cities (LCDC 2011b). Injecting use of methamphetamine and opium was first reported in 2008. However, the injecting use of methamphetamine is not widespread.

Lao PDR is the only country in the Greater Mekong Subregion² with a continuing low prevalence of HIV in the general population. Most recent estimates of prevalence (2009) are approximately 0.2% among Lao nationals aged 15-49 years with an estimated 8,000 persons living with HIV (NCCA 2010). However, injecting drug users living in the border regions remain at particularly high risk of HIV infection (NCCA 2010).

Table 54. Rank of use of selected drugs in Lao PDR, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine pills	1	1	1	1	1
Cannabis herb	4	4	3	2	2
Opium	2	2	2	3	3
Heroin	3	3	4	4	4
Cocaine	•	•	5	5	•

• = Not reported
Source(s): DAINAP

Table 55. Trend in use of selected drugs in Lao PDR, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine pills	↑	↑	↑	↑	↑
Cannabis herb	↔	↑	↓	↓	↑
Opium	↔	↑	↓	↑	↑
Heroin	↑	↑	↓	↑	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable
Source(s): DAINAP

¹ The pills are typically crushed and then vaporized in glass pipes or on aluminium foil heated by a flame underneath so that the user can inhale the resulting fumes.

² The Greater Mekong Subregion includes Cambodia, China, Lao PDR, Myanmar, Thailand and Viet Nam.

Drug treatment

There are eight Drug Treatment and Rehabilitation Centres (DTRC) in Lao PDR. Treatment centres are located in Champasak, Savannaket, Oudomsay, Sayaboury, Luang Prabang and Bokeo provinces, and two centres are located in Vientiane (LCDC 2010b). The Somsanga Treatment and Rehabilitation Centre, in Vientiane, is the only facility that provides services specifically for ATS users. In 2010, a total of 2,154 persons underwent treatment at the centre, including 123 women (LCDC 2011d). Since 2004, some 95% of the persons admitted to the centre have been methamphetamine users, with the remaining 5% admitted for alcohol, opium, inhalants and heroin use (UNODC 2009b).

Drug-related arrests, seizures and prices

Drug-related arrests – Lao PDR did not provide disaggregated arrest data for 2010. During the year, the total number of drug-related arrests was 1,007, representing a 40% increase from the previous year and a 140% increase compared with 2008. Of the 1,007 persons arrested in 2010 (including 16 non-nationals), 814 were men and 193 were women (LCDC 2011d). Over the past few years, the vast majority of drug-related arrests have involved methamphetamine pills. In 2009, the total number of drug-related arrests was 718, of which 581, or nearly 81%, were for methamphetamine pills. In 2008, 72% of total

drug-related arrests involved methamphetamine pills compared with 94% in 2006 and 2007.

Drug seizures – In 2010, the number of methamphetamine pills seized in Lao PDR was more than 24.5 million, the highest total ever reported from the country. Some 21.8 million pills originating from Myanmar were seized in a single seizure north of Vientiane in February 2010. The pills were likely to have been destined for Thailand. Methamphetamine pill seizures in previous years totaled 2.3 million in 2009, 1.2 million in 2008 and 1.3 million in 2007. In addition, in 2010 Lao PDR reported the seizure of nearly 196 kg of methamphetamine powder – an intermediary form of methamphetamine which is pressed into pills – which is enough to manufacture approximately 2.1 million methamphetamine pills. The methamphetamine powder was likely to have been destined for illicit manufacturing centres in Lao PDR or Myanmar. No crystalline methamphetamine has been reported seized in the country since 2005 when 4.8 kg were seized. Lao PDR has not reported any seizures of ecstasy.

Opiate seizures in Lao PDR have shown a considerable increase in the past two years. In 2010, the amounts of heroin (84.3 kg) and opium (86.5 kg) seized in the country were higher than the total amounts seized in the previous four years combined. This is either a reflection of expanding domestic opiates production, increased trafficking from Myanmar, or both.

Table 56. Number of patients at Somsanga Treatment and Rehabilitation Center, 2005-2010

	2005	2006	2007	2008	2009	2010
Total no. of patients	1,376	1,177	1,894	1,682	1,964	2,154
Women	25	28	137	105	118	123

Source(s): LCDC 2010b; LCDC 2011d

Table 57. Seizures of selected drugs in Lao PDR, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine pills	pills	1,755,989	1,272,815	1,227,205	2,335,330	24,530,177
Methamphetamine powder	kg	•	•	•	•	195.8
Cannabis herb	kg	291.5	2302.8	804.6	976.0	3,521.0
Cocaine	kg	•	•	2.0	0.1	•
Heroin	kg	9.2	23.8	17.5	29.2	84.3
Opium	kg	1.2	14.2	11.8	50.0	86.5

• = Not reported
Source(s): DAINAP

Cannabis seizures in 2010 totaled more than 3.5 mt. In early 2010, Lao PDR recorded the largest ever single seizure of cannabis in the country, of more than 2 mt at Khammouane province in the central part of the country near the Thai border (INCB 2011a).

Drug prices – Lao PDR has not reported drug prices to DAINAP.

Sources of illicit drugs

The majority of methamphetamine in Lao PDR originates from Myanmar. Illicit methamphetamine manufacture in Lao PDR has not been officially reported. However, given the lack of technical and financial resources to effectively police the remote border regions and the increasing methamphetamine demand in the region, the country remains at risk of becoming the next manufacturing centre in the region.

Most of the opium poppy is cultivated in the remote northern highlands in areas near the borders with China and Viet Nam, in particular in Phongsaly and Houaphanh provinces (UNODC 2010b).

Large-scale cannabis cultivation takes place primarily in the central provinces of Lao PDR, particularly in areas near the Mekong River for illicit export to neighbouring countries (LCDC 2011b).

Trafficking – Lao PDR has become a key transit country for methamphetamine originating (primarily) from Myanmar to international markets. Much of the methamphetamine trafficked into Thailand and Cambodia transits through Lao PDR, with significant quantities smuggled along the Mekong River. Most of the methamphetamine trafficked along this route enters Thailand through the northern and northeastern parts of the country. Both methamphetamine pills and crystalline methamphetamine are also trafficked overland through Lao PDR into the northern part of Viet Nam (SODC 2011b).

Large quantities of heroin and opium from Myanmar as well as domestically produced opium are trafficked from Lao PDR to international markets (LCDC 2011a).

Forensic data

Lao PDR has not reported forensic data to DAINAP.



Emerging trends and concerns

- The market for amphetamine-type stimulants (ATS) in Malaysia is expanding steadily, which is reflected by the rising numbers of drug-related arrests, seizures and treatment demand related to ATS.
- Methamphetamine was the second most commonly used drug by persons in drug treatment in 2010. Most users of methamphetamine and other ATS in Malaysia are considerably younger than users of heroin and cannabis.
- Drug trafficking organizations from West Africa and the Islamic Republic of Iran have expanded their activity in Malaysia and continue to diversify their trafficking methods to avoid detection.
- Seizures of crystalline methamphetamine in 2010 and 2009 are the highest totals on record.
- Injecting drug use is the primary mode of HIV transmission in Malaysia. While the vast majority of injecting drug users inject heroin, there are some indications that the injecting use of methamphetamine is taking place in the country.

Overview of the drug situation

Opiates remain the primary drug threat in Malaysia. However, the market for amphetamine-type stimulants (ATS) in the country continues to expand, which is reflected by the growing portion of drug-related arrests, seizures and treatment demand related to ATS. In 2010, methamphetamine was the second most common drug of use among persons who received drug treatment, after heroin. The quantities of crystalline methamphetamine seized in Malaysia in 2009 and 2010 are the highest on record. In addition, arrests related to amphetamine and methamphetamine, primarily in crystalline form, increased more than six and a half times in 2010.

Heroin remains the most commonly used drug in Malaysia. Opiate users accounted for about half of all drug users arrested in 2010, and the amount of heroin seized was the highest total reported during the past five years. The injecting use of heroin is the primary mode of HIV transmission in Malaysia.

Malaysia has long served as a transit country for trafficking of crystalline methamphetamine, ecstasy and ketamine destined for lucrative ATS markets in Australia, China, Indonesia, Japan, Singapore and Thailand (RMP 2010a; RMP 2010b). Over the past five years, however, the manufacture of methamphetamine, and, to a lesser extent, ecstasy has been significant. In addition, the illicit manufacture of nimetazepam¹ and illicit cultivation of the local plant kratom² takes place in Malaysia (NADA and RMP 2011).

Patterns and trends of drug use

Drug use – The use of ATS and other synthetic drugs has increased considerably in Malaysia during the

¹ Nimetazepam, a benzodiazepine, is known on the street as Erimin 5 and is available in 5 mg pill form. It is legally available as a pharmaceutical preparation from Japan. The substance is also regularly counterfeited.

² Kratom refers to the *mitragyna speciosa* plant, commonly known locally as *ketum* or *kratom*.

past few years. In 2010, an estimated 36% of all drug users in the country used ATS compared with 8% in 2009 and 14% in 2008 (NADA and RMP 2010). Crystalline methamphetamine ranked as the fourth leading drug of concern in 2010. The primary mode of administration for crystalline methamphetamine in Malaysia is snorting. Ecstasy use remained stable in 2010 and it ranked as the sixth most commonly used drug. Methamphetamine pill use increased in 2010; however, it remains at far lower levels than the use of other ATS in the country.

Heroin remains the primary drug of concern in Malaysia. The primary mode of administration for heroin is snorting, although it is also injected. Heroin use increased in 2010. However, the percentage of reported opiate (primarily heroin and morphine)

dependents has declined steadily in recent years. Compared with 54% of all drug users dependent on opiates in 2009 (NADA 2010), that figure had dropped to 50% in 2010.

Cannabis herb ranked as the fifth most commonly used drug in Malaysia in 2010 and its use decreased. An estimated 13% of all drug dependents are dependent on cannabis.

Drugs such as ATS, ketamine and nimetazepam are becoming increasingly affordable and widespread among young drug users in Malaysia (RMP 2010a).

Table 58. Rank of use of selected drugs in Malaysia, 2006-2010

Drug type	2006	2007	2008	2009	2010
Amphetamine ³	7	8	7	5	3
Crystalline methamphetamine	4	4	4	4	4
Methamphetamine pills	•	•	•	•	9
Ecstasy	6	6	6	6	6
Ketamine	•	•	•	7	7
Cannabis herb	3	3	3	2	5
Heroin	1	1	1	1	1
Kratom	•	•	•	8	8
Morphine	2	2	2	3	2

• = Not reported

Source(s): DAINAP

Table 59. Trend in use of selected drugs in Malaysia, 2006-2010

Drug type	2006	2007	2008	2009	2010
Amphetamine	↓	↓	•	↓	↑
Crystalline methamphetamine	↓	↓	•	↑	↑
Methamphetamine pills	•	•	•	↑	↑
Ecstasy	↓	↓	•	↔	↔
Ketamine	•	•	•	↑	↑
Cannabis herb	↓	↓	•	↑	↓
Heroin	↓	↓	•	↓	↑
Kratom	•	•	•	↑	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported

Source(s): DAINAP

³ Information on reported amphetamine use may in part reflect some confusion about the substance consumed as there have been no amphetamine seizures since 2007 and no cases of treatment admissions for amphetamine.

Injecting drug use

Malaysia has an estimated 170,000 injecting drug users (IDUs), according to a range of estimates available from studies of rehabilitation centres, harm reduction programmes and situation assessments. Cumulative reported cases of HIV transmission have been predominantly through drug use (70.6%) (MOH Malaysia 2010). In 2010, a total of 3,652 new HIV cases were reported to the Ministry of Health Malaysia. Of these, 1,737 cases (47.5%) were among IDUs. By comparison, in 2009, it was estimated that 55% of all new HIV infections reported during the year were caused by injecting drug use, with 1,699 new cases reported among IDUs during the year. The HIV prevalence among male IDUs is estimated at about 20%. Women comprise just 2% of IDUs in Malaysia (MOH Malaysia 2010). There are some indications that the injecting use of methamphetamine is taking place in Malaysia, however, thus far, no injecting users of methamphetamine have registered in drug treatment facilities. The vast majority of IDUs in Malaysia inject heroin.

Drug treatment

A total of 6,918 persons underwent drug treatment in Malaysia in 2010 (6,754 men and 164 women). Of these, more than half (3,975) had been newly admitted to treatment in 2010.

Methamphetamine was the second most commonly used drug by persons in drug treatment in 2010,

accounting for 12.5% of all persons who underwent drug treatment during the year and 18% of all newly admitted patients. By comparison, in 2009 methamphetamine was the fourth most commonly used drug by patients in treatment. This trend suggests the rapid expansion of methamphetamine use, particularly problem use, in Malaysia during the past few years.

The majority of persons who underwent drug treatment in 2010 were heroin users.

Cannabis users accounted for 7% of all drug users who underwent treatment in 2010. In 2009, however, cannabis accounted for the largest portion of persons in drug treatment.

The average ages of drug users who underwent treatment in 2010 are as follows: methamphetamine (30 years), ecstasy (23), cannabis (32), heroin (36), opium (26) and ketamine (37).

Most ATS users who enter drug treatment enter community-based treatment or Matrix Model treatment,⁴ both of which are offered for users of methamphetamine, ecstasy and ketamine. Biopsychosocial treatment⁵ is offered for users of cannabis and heroin. Most users of non-ATS drugs sought treatment at specialized drug treatment services, psychiatric facilities and general health clinics.

Table 60. Drug treatment admissions in Malaysia by drug type, 2010

Drug type	New admissions			All admissions		
	Men	Women	Total	Men	Women	Total
Methamphetamine	618	46	664	813	53	866
Ecstasy	35	6	41	40	6	46
Ketamine	24	2	26	30	3	33
Cannabis	317	2	319	458	2	460
Heroin	2,850	75	2,925	5,412	100	5,512
Opium	0	0	0	1	0	1
Total	3,844	131	3,975	6,754	164	6,918

Source(s): DAINAP

⁴ The Matrix Model is a comprehensive, evidence-based manualised outpatient drug treatment programme for stimulant dependence.

⁵ The biopsychosocial treatment model posits that problematic drug use derives from the complex interaction of biological, psychological and social variables. Understanding addiction as a biopsychosocial disease in its origins and expression shapes the assessment and, in turn, the treatment offered.

Table 61. Rank of order of drug type by drug users in treatment in Malaysia, 2009-2010

Drug type	2009	2010
Heroin	2	1
Methamphetamine	4	2
Cannabis	1	3
Ketamine	6	4
Ecstasy	5	5
Opium	3	6

Source(s): DAINAP

Drug-related arrests, seizures and prices

Drug-related arrests⁶ – A total of 23,642 persons were arrested for drug use in 2010, representing a 50% increase compared with the 15,736 drug users arrested in 2009 and the highest total during the past five years. This increase was driven by the six-and-a-half-fold jump in the number of persons arrested for the use of ATS, primarily crystalline methamphetamine. In 2010, 8,551 persons were arrested for ATS use compared with 1,298 persons arrested during the previous year. The number of ATS users arrested in 2010 is the highest total reported during the past five years.

Arrests of ATS users accounted for 36% of all drug-user arrests in 2010. Ecstasy users accounted for 1% of the total. The 240 ecstasy users arrested in 2010 represent a near tripling of the number from the previous year (NADA and RMP 2011). In 2009, arrests of ATS users dropped considerably from the

previous year, accounting for 8% of all drug-user arrests compared with 14% in 2008.

A total of 6,483 persons were arrested for heroin use in 2010, which accounted for 27% of all drug-user arrests during the year. The number of heroin users arrested is 28% higher compared with the figure from the previous year. Arrests for morphine use increased by 53% in 2010 and accounted for 22% of all drug-user arrests during the year. In 2010, 31 persons were arrested for opium use compared with five persons during the previous year.

Arrests of cannabis users decreased by 42% in 2010 to 3,011 persons and accounted for 13% of total drug-user arrests during the year.

Of the 23,642 persons arrested in 2010, the number of new drug users – those detected for the first time by the National Drugs Information System (NDIS)⁷ – accounted for 73% of the total; repeat users – those previously detected by the NDIS – accounted for 27%. Compared with 2009, the number of new users arrested in 2010 increased by 142% while the number of repeat users declined by 26% (NADA and RMP 2011).

In addition, from January to November 2010, Malaysian authorities arrested significant numbers of other foreign nationals for smuggling illicit drugs into the country. These include China (48 persons), Singapore (46), India (27), Viet Nam (20), Philippines (18), Bangladesh (14) and Pakistan (12) (RMP 2010b).

Table 62. Drug-related arrests in Malaysia by drug type, 2006-2010

Drug type	2006	2007	2008	2009	2010
ATS	2,865	1,490	1,787	1,298	8,551
Cannabis	5,275	3,385	1,726	5,207	3,011
Codeine	180	91	70	50	71
Heroin	7,963	4,752	4,974	5,047	6,483
Morphine	5,889	4,312	3,640	3,386	5,181
Opium (raw & prepared)	7	14	9	5	31
Psychotropics*	621	442	145	39	94
Not specified	11	3	1	704	220
Total	22,811	14,489	12,352	15,736	23,642

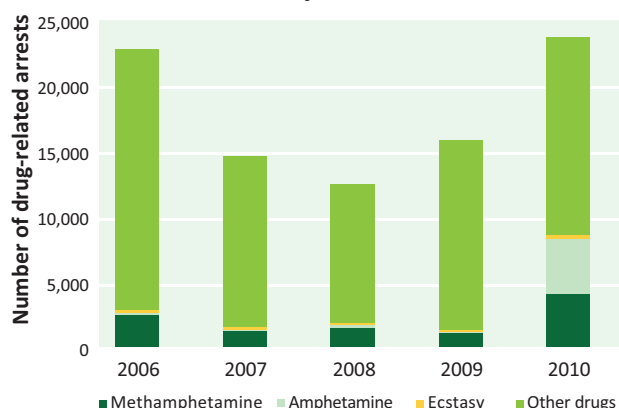
*Includes different brands of diazepam.

Source(s): DAINAP

⁶ Drug-related arrest data for Malaysia refer only to the number of drug users arrested and do not include drug traffickers and manufacturers.

⁷ The National Drug Information System was established in Malaysia in the 1980s to collect data and report on the drug use situation in the country.

Figure 29. ATS as a portion of all drug-related arrests in Malaysia, 2006-2010



Source(s): DAINAP

Drug seizures – In 2010, crystalline methamphetamine seizures declined by about 24% to 887 kg. The quantities of methamphetamine seized in Malaysia during the past three years are significantly higher than the quantities seized in previous years. The 887 kg of crystalline methamphetamine seized in 2010 is the second highest seizure total ever reported in the country. The highest total was reported in 2009 when 1,160 kg were seized, due to the single seizure of 972 kg of crystalline methamphetamine in May of that year. Total methamphetamine seizures in 2009 were 70% higher than seizures in 2008. In 2008, crystalline methamphetamine seizures in Malaysia increased five-fold compared with the 69 kg seized in 2007. It is likely that crystalline methamphetamine seizures in Malaysia will remain at high levels given that, in the first three months of 2011, authorities have already reported the seizure of 297 kg of crystalline methamphetamine (NADA and RMP 2011).

Methamphetamine pill seizures have remained relatively stable in Malaysia since significant quantities of the drug were first reported seized in 2007. In 2010, the number of methamphetamine pills seized in the country totaled 107,963, largely stable compared to 2009. In 2008, authorities seized a record 281,343 methamphetamine pills in Malaysia, due primarily to increased law enforcement efforts.

There have been no reported seizures of amphetamine in Malaysia since 2006, when 2 kg were seized.

Ecstasy seizures in 2010 decreased for the third successive year with 60,713 ecstasy pills seized, representing a 20% decline from the previous year. The continuous decline in ecstasy seizures in Malaysia reflects the lower availability of ecstasy on the global market and may also be attributed to lower demand for ecstasy in the country due to the growing popularity of ketamine and methamphetamine.

Ketamine seizures in 2010 totaled 334 kg, roughly two-thirds lower than the 1,071 kg seized in 2009. Seizures of ketamine, most of which is trafficked into Malaysia from India, may continue to decline in 2011 given that the Government of India placed stricter controls on the distribution of ketamine in November 2010.

Seizures of nimetazepam (Erimin 5) in 2010 totaled more than two million tablets, which represents a 30% decline compared with the previous year, although the number of pills seized in each of the past three years is far higher than the amounts seized in previous years.

Table 63. Seizures of selected drugs in Malaysia, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	145.2	69.2	357.0	1,160.0	887.3
Methamphetamine pills	pills	•	121,629	281,343	107,952	107,963
Amphetamine	kg	2.0	•	•	•	•
Ecstasy	pills	227,932	709,888**	80,778	75,515	60,713
Ketamine	kg	110.0	268.0	553.0	1,071.0	334.1
Nimetazepam (Erimin 5)	pills	49,952	172,965	1,502,233	2,909,587	2,032,183
Cannabis herb	kg	2,379.0	1,483.0	875.0	2,352.0	1,064.0
Cocaine	kg	•	•	7.1	18.6	20.6
Codeine	lt.	10,802.0	9,630.0	•	13,131.7	1,925.1
Heroin	kg	156.0	243.0	297.0	283.4	299.3
Opium (raw and prepared)	kg	0.5	7.4	14.0	10.1	4.4
Other benzodiazepines*	pills	173,003	455,407	306,611	268,888	311,123

• = Not reported. *Mostly diazepam. **Reported in combination of pills and kg, converted at 1 pill = 300 mg.

Source(s): DAINAP; NADA and RMP 2010; NADA and RMP 2011

(NADA and RMP 2011). This is likely an indication of the increasing illicit manufacture of the substance in Malaysia. Nimetazepam is often used in association with methamphetamine for its sedative effects.

In 2010, the amount of cannabis herb seized in Malaysia totaled 1.06 mt, representing a decline of more than half compared with the 2.35 mt seized in 2009. These figures are consistent with the decreasing arrests for the drug.

Heroin seizures have remained relatively stable during the past five years; however, the 299 kg seized in 2010 represents the highest amount seized during the past five years (NADA and RMP 2011).

While cocaine use is limited in Malaysia, seizures of the drug have increased for three successive years. In 2010, nearly 21 kg of cocaine were seized in the country compared with seizures of nearly 19 kg in 2009, 7 kg in 2008 and no seizures reported in 2007 and 2006 (NADA and RMP 2011). Increases in cocaine seizures have also been reported in other countries in the region, such as China, Philippines and Thailand which suggests that cocaine trafficking organizations are attempting to develop new markets for the substance.

In addition, more than 2 mt of kratom were seized in Malaysia in 2010, including 1,053 kg of kratom in liquid form and 1,150 kg of kratom leaves.

Malaysian law enforcement authorities seized 16 clandestine manufacturing laboratories in 2010. These included six methamphetamine manufacturing facilities capable of large-scale manufacture, one unspecified ATS pill re-pressing operation and one ecstasy manufacturing laboratory. In addition, one large ketamine manufacturing facility and four small heroin facilities were seized. The other three seized clandestine facilities were manufacturing unspecified ATS. By comparison, a total of 11 illicit ATS manufacturing laboratories were seized in 2009 and 12 such laboratories were seized in 2008.

ATS precursors have been seized in Malaysia in recent years. Seizures of ephedrine and pseudoephedrine amounted to 50 kg each in 2010, compared to 80 kg of each substance in 2009. In addition, 25 lt. of acetic anhydride, used primarily for the manufacture of heroin, were seized in 2010 compared with 50 lt. seized in 2009.

Table 64. Seizures of main precursor chemicals in Malaysia, 2010

Precursor type	Measurement	2010
Ephedrine	kg	50
Pseudoephedrine	kg	50
Acetic anhydride	lt.	25
Solvents	lt.	1,229
Acids	lt.	685

Source(s): DAINAP

Drug prices – Retail prices of illicit drugs remained largely stable in 2009 and 2010. It should be noted that for crystalline methamphetamine, the price reportedly offered by Iranian drug trafficking organizations for 1 kg (USD 49,760) was nearly 40% lower than the price offered by Malaysian drug traffickers (USD 77,750) (NADA and RMP 2011). The prices for other drugs in 2010 remained relatively stable compared with prices in 2009.

Sources of illicit drugs

Some of the crystalline methamphetamine seized in Malaysia is domestically manufactured. Significant quantities are trafficked into the country from the Islamic Republic of Iran. Myanmar is the primary source of methamphetamine pills trafficked into Malaysia and is also a source of some of the crystalline methamphetamine found in the country. Ecstasy is manufactured in Malaysia but tends to be of low purity. Some ecstasy is smuggled into the country from Europe (RMP 2010a). However, seizures of ecstasy have declined sharply since 2008.

Since 2008, authorities have reported the dismantling of more than 30 large and small-scale ATS manufacturing laboratories. In 2010, Malaysia reported the seizure of six large methamphetamine manufacturing laboratories, one large ecstasy manufacturing facility and one large nimetazepam (Ermin 5) manufacturing operation. In 2009, authorities seized 11 such facilities, primarily located in Kuala Lumpur and southern Malaysia. In 2010 and 2009, at least three illicit methamphetamine processing facilities operated by Iranian nationals were seized in Kuala Lumpur (RMP 2011c).

Malaysia is not a producer of ephedrine, pseudoephedrine or acetic anhydride, chemicals which are frequently used in the manufacture of methamphetamine and heroin. Precursor chemicals seized in Ma-

Table 65. Retail prices of selected drugs in Malaysia (USD), 2007, 2009 and 2010

Drug type	Measurement	2007	2009	2010
Crystalline methamphetamine	per kg	43,290	78,370	77,750
Methamphetamine pills	per pill	6	•	•
Ecstasy	per pill	14	16	16
Ecstasy powder	per kg	•	•	31,100
Ketamine	per kg	10,101	3,448	3,421
Nimetazepam (Erimin 5)	per pill	6	6	6
Cannabis herb	per kg	692	752	746
Cocaine	per kg	57,680	62,696	62,200
Heroin	per kg	49,350	•	•
Heroin (No. 3)*	per kg	•	9,404	9,330
Opium (prepared)	per kg	5,772	6,270	6,220
Kratom (leaf)	per kg	•	•	12
Kratom (liquid)	per lt.	•	•	1.6

• = Not reported. *Low purity substance processed by adulterating heroin with other substances.

Source(s): Drug prices for 2007 are from DAINAP. Drug prices for 2009 and 2010 were reported by the National Anti-Drugs Agency of Malaysia and Royal Malaysia Police (NADA and RMP 2010; NADA and RMP 2011) and DAINAP. No data are available for 2008.

Malaysia are reportedly trafficked into the country from China and India (RMP 2010b; RMP 2011c).

Most of the ketamine seized in Malaysia originates from southern India (RMP 2010a). The heroin in Malaysia originates from Myanmar, Lao PDR and from West Asia (RMP 2010a; UNODC 2011a), although some quantities of low-purity heroin are also processed domestically. The primary source of cannabis found in Malaysia is Lao PDR and it is smuggled through Thailand (RMP 2011b).

Nimetazepam is manufactured illicitly in Malaysia, as mentioned earlier. In March 2009, authorities dismantled a nimetazepam manufacturing operation and seized 435 kg in powder form, 547 kg in pill form and 311 kg in capsule form (NADA and RMP 2011).

Trafficking – Some quantities of crystalline methamphetamine, as well as heroin and ketamine, are trafficked out of the country from Kuala Lumpur to Indonesia and onward to Australia (RMP 2010b). In addition, five Malaysian drug couriers have been arrested in Japan since 2008 for attempting to smuggle 7 kg of methamphetamine into the country (RMP 2011a).

West African drug trafficking syndicates operating in South-East Asia previously targeted Malaysia as a transit country for the trafficking primarily of cocaine and heroin from South American countries to markets

in Australia, Indonesia and Thailand. However, these syndicates have increasingly trafficked crystalline methamphetamine into Malaysia in recent years (RMP 2011a). West African syndicates have diversified their methods during the past few years to avoid detection by using increasing numbers of couriers from countries in the Middle East, Eastern Europe and Asia (RMP 2011a) and by diversifying their trafficking routes. Among the key trafficking routes used by West African syndicates for the smuggling of crystalline methamphetamine into Malaysia are for couriers to fly from Mali to Bangkok, Thailand and then to Penang in north-western Malaysia. Heroin is also trafficked along this route. Another route is from Johannesburg, South Africa to Kuala Lumpur. Some of the methamphetamine trafficked along this route is further trafficked to Bangkok. Another route, primarily for methamphetamine smuggled in air cargo, is from Dubai to Singapore and then to Kuala Lumpur (RMP 2011b). Lagos is also a major embarkation location and flights typically enter Kuala Lumpur via Dubai, Doha and Cairo (NADA and RMP 2011). Some quantities of methamphetamine are trafficked by West African syndicates through Germany, Syria and Egypt before entering Malaysia (NADA and RMP 2011).

Malaysia is also being targeted by Iranian drug trafficking organizations, which had previously trafficked primarily heroin and opium to Malaysia in the 1990s before diversifying into the

methamphetamine trade (NADA 2011). A total of 228 couriers from the Islamic Republic of Iran have been arrested during the past two years (20 in 2009, 208 in 2010) for attempting to smuggle crystalline methamphetamine into Malaysia and through the country to other destinations via air passengers (RMP 2011b). There are also indications that Iranian drug syndicates have established illicit ATS processing operations in Malaysia in recent years.

In 2010, there was also a significant increase in the number of drug couriers arrested from West Africa. The number of drug couriers from West Africa arrested in 2010 almost doubled, from 35 in 2009 to 65 in 2010. Nationals of Nigeria accounted for the largest portion in both years, with 50 Nigerians arrested in 2010 and 29 arrested in 2009. Couriers from South Africa (3), Kenya (2), Togo (2), Zimbabwe (2), Botswana (1), Guinea (1), Liberia (1), Sudan (1), United Republic of Tanzania (1) and Uganda (1) were also arrested. Couriers from European and other Asian countries were also arrested in 2010 – from Uzbekistan (5), Bulgaria (2), Georgia (2), Russian Federation (2), Turkey (2) and Kazakhstan (1). As Malaysia reported no arrests of couriers from these countries in 2009, it is possible that these couriers were recruited by drug trafficking organizations from the Islamic Republic of Iran and West Africa (RMP 2011a). This trend points to a diversification of sources of ATS and other illicit drugs to supply the Malaysian market and to a significant expansion of transnational drug syndicate activity in the country.

A large portion of the cannabis seized in Malaysia is trafficked from Lao PDR overland by bus via Bangkok (RMP 2011b).

Ketamine is primarily smuggled into Malaysia from Chennai, India by air passengers and by sea routes by Indian nationals (RMP 2010b). Some ketamine is first trafficked to Bangkok and then further trafficked into Malaysia overland by bus (RMP 2011b).

Whereas in previous years most seizures of smuggled drugs seized at international airports involved large quantities of drugs concealed in luggage and electrical appliances, in 2010 an increasing number of arrested couriers were found carrying smaller quantities of drugs concealed on the person or ingested (RMP 2010b).

Forensic data

Approximately 60% of the crystalline methamphetamine samples tested in 2010 showed purities of 70-80% methamphetamine. A total of 265 methamphetamine pill samples were analysed in 2010 with an average weight of 95 mg and showed purities of 15-25% methamphetamine. Most of the ecstasy pills analysed showed a medium purity of 20-30% MDMA. However, 15% of the pills sold as 'ecstasy' in Malaysia in 2010 contained ketamine and no MDMA.

Ketamine samples analysed in 2010 showed high purity of 70-80% ketamine.

The majority of heroin samples analysed in 2010 were of low purity, ranging between 5-10% heroin.

Most cocaine samples analysed in 2010 showed high purity of around 80% cocaine.



Emerging trends and concerns

- Myanmar remains a major source of methamphetamine pills and opiates in South-East Asia, most of which are manufactured in Shan State in the eastern part of the country.
- Seizures of methamphetamine declined in Myanmar in 2010. However, this does not necessarily indicate that methamphetamine manufacture is on the decline. In 2010, neighbouring China, Lao PDR and Thailand all reported significant increases in seizures of methamphetamine originating from Myanmar.
- No illicit crystalline methamphetamine manufacturing facilities have been seized in Myanmar. However, drug control authorities in Myanmar and Thailand confirm that crystalline methamphetamine manufacture takes place in the country.
- Opium poppy cultivation has increased in Myanmar for four consecutive years.

Overview of the drug situation

The Shan State in the eastern part of Myanmar remains a major source of methamphetamine manufacture and opiates production in South-East Asia. Most of the illicit drugs manufactured in Myanmar are destined for international markets. However, some quantities also supply the domestic drug market. Domestic demand for ATS remains at lower levels than for opium and heroin, but it has expanded steadily during the past decade or so.

Opium poppy cultivation is at far lower levels than in the mid-1990s but has increased in each of the past four years. In 2010, the total area under opium poppy cultivation in Myanmar was estimated at 38,100 ha, a 20% increase from the estimated 31,700 ha under cultivation in 2009 (UNODC 2010b). In 2010, potential opium production increased by 76% to 580 mt, accounting for 12% of the global opium production during the year (UNODC 2011a). In 2010, an estimated 1.2 million persons (206,000 households) were involved in opium poppy cultivation in Myanmar (UNODC 2010b).

In the past few years, drug criminal groups have diversified their manufacturing methods and trafficking routes. Methamphetamine manufacturers have increasingly relied upon pharmaceutical preparations containing ephedrine and pseudoephedrine and have continued to procure the substances in bulk. Increasing quantities of methamphetamine were trafficked into neighbouring China, Lao PDR and Thailand in 2010. In addition, illicit drugs are also trafficked from Myanmar by air and sea to international markets.

Patterns and trends of drug use

Drug use – Heroin and opium remain the primary drugs of use in Myanmar but the use of these drugs has shown a declining trend over the past six years. Methamphetamine pill use, on the other hand, has increased each year since 2005. Methamphetamine pills have ranked as the third most commonly used drug in Myanmar over the past seven years. Most methamphetamine users smoke the drug.¹ There is no

¹ The pills are typically crushed and then vaporized in glass pipes or on aluminum foil heated by a flame underneath so that the user can inhale the resulting fumes.

Table 66. Rank of use of selected drugs in Myanmar, 2006-2010

Drug type	2006	2007	2008	2009	2010
Heroin	1	1	1	1	1
Opium	2	2	2	2	2
Methamphetamine pills	3	3	3	3	3
Cannabis	●	4	4	4	4

● = Not reported
Source(s): DAINAP

Table 67. Trend in use of selected drugs in Myanmar, 2006-2010

Drug type	2006	2007	2008	2009	2010
Heroin	↓	↔	↓	↓	↓
Opium	●	●	↓	↓	↓
Methamphetamine pills	↑	↑	↑	↑	↑
Cannabis	●	↔	↔	↔	↔

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported
Source(s): DAINAP

official reported use of crystalline methamphetamine in Myanmar.

Consolidated information on ATS use in Myanmar is unavailable. However, a survey of more than 500 methamphetamine users at drug treatment centres and drop-in centres conducted by the Central Committee for Drug Abuse Control (CCDAC) in 2010/2011 suggests that most drug users in Myanmar are poly-drug users (CCDAC 2011d).

Injecting drug use

The estimated number of injecting drug users (IDUs) in Myanmar is 75,000 (range: 60,000-90,000), of which approximately 36% are infected with HIV (SAPC 2011). The highest rate of HIV among IDUs is in Myitkyina, Kachin State, where more than half of all IDUs are infected with HIV (SAPC 2011).

Injection is the primary mode of administration for heroin. Of the 1,142 heroin users who underwent drug treatment in 2010, 72% were IDUs. There is no reported injecting use of methamphetamine in Myanmar.

Drug treatment

Compulsory drug treatment is required for persons arrested for drug possession in Myanmar. This means

that a drug user has to be registered and entered into the drug treatment centres operated by the Ministry of Health. There are 69 such centres throughout the country (CCDAC 2011d). The Myanmar Anti-Narcotics Association operates nine drop-in centres (DICs), and there are an additional 16 DICs run by the United Nations and non-governmental organizations. Most of the DICs are located in Shan State (CCDAC 2011d). In addition, the Social Welfare Department operates eight rehabilitation centres for former drug users located in Yangon, Mandalay, Phekhon, Namlat, Kyaing Tong, Lashio, Myitkyina and Wet Hti Khan (CCDAC 2011a).

Most ATS users in Myanmar do not voluntarily seek treatment (CCDAC 2011d), and there are no treatment facilities specifically focusing on ATS dependency in the country. Many methamphetamine users who voluntarily seek treatment do so at (in ranking order) psychiatric facilities, specialized drug treatment services and general hospitals. In 2010, only 43 persons underwent treatment for methamphetamine, with an average age of 26 years.

The majority of drug users admitted to treatment in 2010 continued to be heroin users. The average age of heroin users in treatment during the year was 30 years. The average age of opium users in treatment was 29 years. Official drug treatment figures do not include data from privately run facilities.

Table 68. Drug treatment admissions in Myanmar by drug type and gender, 2010

Drug type	New admissions		
	Men	Women	Total
Methamphetamine	41	2	43
Heroin	1,127	15	1,142
Opium	226	4	230
Cannabis	•	•	12

• = Not reported
Source(s): DAINAP

Drug-related arrests, seizures and prices

Drug-related arrests – Most drug-related arrests in Myanmar continue to involve opiates and ATS. Of the 3,465 total drug-related arrests in 2010, 1,008 arrests involved methamphetamine pills. The number of women arrested for methamphetamine pills in 2010 (277) accounted for more than one quarter of all arrests related to the drug. Since 2006, arrests related to methamphetamine pills have accounted for 24-29% of all drug-related arrests in Myanmar. The number of arrests related to other ATS in Myanmar is low, with fewer than 20 arrests for crystalline methamphetamine and ecstasy combined in each of the past five years. Women accounted for about 22% of all drug-related arrests in 2010.

The number of heroin-related arrests declined by 8% in 2010 to 981 persons. The number of arrests for all

forms of opium (raw and prepared, low grade, and brown opium) declined by more than half in 2010.

In 2010, cannabis-related arrests reached their lowest level in five years. Arrests related to other drugs, including precursor chemicals, totaled 622 during the year.

Drug seizures – In 2010, only 2.2 million methamphetamine pills were seized in Myanmar, which represents just under one-tenth of the number of pills seized during the previous year (23.9 million). At the same time, however, neighbouring China, Lao PDR and Thailand have all reported significantly high seizures of methamphetamine pills during the year. This may indicate that some traffickers deliberately avoided trafficking illicit drugs along established routes directly to Thailand and instead increasingly used alternative routes, including through China and Lao PDR. The comparatively small number of pills seized in Myanmar in 2010 may also indicate that drug criminals may be using new concealment methods to avoid detection.

The 226 kg of crystalline methamphetamine seized in Myanmar in 2010 represent an 82% increase from the 124 kg seized in 2009, and is far higher than the quantities seized in previous years. The crystalline methamphetamine seized in 2010 was seized in 12 separate cases, indicating that traffickers were

Table 69. Drug-related arrests in Myanmar, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine pills	1,053	740	933	1,307	1,008
Crystalline methamphetamine	6	•	9	6	•
Methamphetamine powder	10	5	1	4	•
Ecstasy	4	8	6	•	•
Ketamine	6	•	•	•	•
Cannabis herb	232	217	240	490	146
Heroin	1,542	1,084	1,040	1,067	981
Opium	534	931	1,019	1,546	708
<i>Mitragyna speciosa</i> ²	28	89	120	323	•
Not identified/other drugs	450	•	•	•	622*
Total	3,865	3,074	3,368	4,743	3,465

• = Not reported. *Includes arrests related to precursor chemicals. Precursors are categorized as 'drugs' under the Myanmar Narcotics Control Law. Source(s): DAINAP

² A plant indigenous to South-East Asia that contains the alkaloid mitragynine. The most frequent mode of administration is making tea out of the dried leaves. It is a controlled substance in several Asian and European countries.

trafficking large quantities of the drug during the year. Most of the crystalline methamphetamine seized in Myanmar was reportedly intended for international markets rather than for local use (UNODC 2010a). The largest amount of crystalline methamphetamine seized in Myanmar was in 2001 when 518 kg were seized (CCDAC 2011c).

Ecstasy seizures in Myanmar over the past five years have been small, and in 2010 no ecstasy was reported seized.

Heroin seizures in 2010 totaled 88.5 kg, a small fraction of the amount seized in 2009 (1,076 kg). Seizures of opium slightly increased by 3% in 2010 with 773.8 kg seized during the year. However, overall seizures of opium have shown a declining trend during the past five years. In 2010, seizures of morphine declined significantly to just less than one-third of the amount seized in 2009 while opium oil seizures increased by 29%. Opium oil is frequently used by injecting opium users. An estimated 75% of all opiate seizures in Myanmar occur in Shan State (CCDAC 2011a).

Cannabis seizures have fluctuated considerably during the past five years. In 2010, about 206 kg of cannabis were seized, representing a 28% decrease from the previous year but the second highest total reported from Myanmar since 2003.

Since 2008, there has been a notable shift in the forms of precursor chemicals trafficked into Myanmar.

In response to the increased controls over bulk ephedrine and pseudoephedrine, traffickers are using pharmaceutical preparations containing ephedrine and pseudoephedrine and then extracting the active ingredients for illicit ATS manufacture. In Myanmar, this trend began in 2008 when 9.8 million pseudoephedrine preparations were seized. In 2009 and 2010, seizures totaled 9.4 million and 4.4 million tablets respectively. In addition, in 2009, more than 120,000 small bottles of liquid nasal drop preparations containing ephedrine were seized. In 2010, total seizures of ephedrine in Myanmar dropped to 34 kg, the lowest level recorded in the past decade, compared with more than 1.6 mt seized during the previous year. Pseudoephedrine seizures in 2010 decreased by more than 75% to 766 kg compared with nearly 3.3 mt seized in 2009. All major seizures of precursors in 2010 were made near the north-east and eastern border areas of Myanmar.

Sources of illicit drugs

Myanmar remains a major manufacturer of methamphetamine pills, most of which are manufactured in the eastern part of the country in Shan State. Although no crystalline methamphetamine manufacturing facilities have ever been reported seized in Myanmar, authorities in Myanmar and Thailand confirm that manufacture takes place and that the majority of crystalline methamphetamine seized in northern Thailand in the past few years originated from this area. Drug law enforcement authorities

Table 70. Seizures of selected drugs in Myanmar, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine pills	pills	19,065,674	1,666,141	1,102,199	23,899,156	2,192,263
Crystalline methamphetamine	kg	3.2	3.4	14.4	124.3	226.1
Methamphetamine powder	kg	136.3	470.8	3.9	329.9	•
Ecstasy	pills	54	2,690	108	5	•
Ketamine	kg	•	•	•	14.9	•
Heroin	kg	192.3	68.4	88.2	1,076.1	88.5
Morphine	kg	1,370.8	1,121.0	206.1	325.7	98.2
Opium	kg	2,320.9	1,173.8	1,463.4	752.0	773.8
Opium, low grade ***	kg	6,153.6	10,972.3	2,452.8	465.4	148.1
Opium oil	kg	29.0	•	•	27.5	35.5
Cannabis	kg	72.9*	104.3	170.2	284.6	205.6
<i>Mitragyna speciosa</i>	kg	97.0	407.2	308.5	597.5**	375.1

• = Not reported. *Combined herb and resin. **Plus two litres of liquid speciosa. ***Low potency opium resulted from processing opium.

Source(s): DAINAP

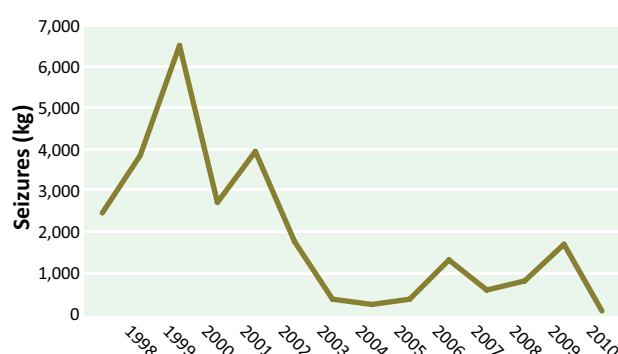
Table 71. Seizures of precursor chemicals in Myanmar, 2006-2010

Precursor type	Measurement	2006	2007	2008	2009	2010
Acetic anhydride	lt.	1,401.0	959.0	1,142.0	•	14.0
Ammonium chloride	kg	1,611.0	•	•	1,589.0	•
Ephedrine	kg	1,283.0	530.0	751.0	1,646.0	33.6
Pseudoephedrine	kg	•	•	•	3,272.0	766.2
Unknown liquids	lt.	11,230.0	10,372.0	8,193.0	27,307.0	3,202.0
Unknown powder	kg	1,611.0	•	•	1,589.0	•

• = Not specified

Source(s): DAINAP

Figure 30. Seizures of ephedrine in Myanmar, 1997-2010



Source(s): DAINAP

of Thailand also confirm that the crystalline methamphetamine manufactured in Shan State is of high purity (UNODC 2010a).

Most of the illicit methamphetamine manufacturing facilities seized in Myanmar have consisted primarily of small-scale laboratories and pill pressing machines, which is inconsistent with the high number of pills seized in Myanmar and neighbouring countries. Between 1998 and 2010, the government reported seizures of only 39 manufacturing facilities and pill pressing operations, of which only two facilities were reported to be large-scale operations (UNODC 2010a).

Extensive profiling of methamphetamine in Thailand suggests that there are 12 likely methamphetamine manufacturing sites in Myanmar (UNODC 2010a). The appearance of different types of methamphetamine pills with different chemical compositions, prices, colours and logos, along with the seizure of pill pressing machines in different parts of Shan State, suggests that there are several different groups involved in illicit methamphetamine manufacture in various locations in Myanmar (UNODC 2010a).

Myanmar is the world's second largest producer of heroin, after Afghanistan. In 2010, the estimated 580 mt of opium produced in Myanmar accounted for about 12% of total global production (UNODC 2011). In 2010, only one small heroin manufacturing facility was reported seized. During the 2006-2009 period, a total of 23 illicit heroin facilities were seized (CCDAC 2011a).

Myanmar does not have a significant chemical industry and does not produce the precursor chemicals required for the illicit manufacture of methamphetamine. Whereas India and China used to account for most of the ephedrine and pseudoephedrine trafficked into Myanmar, in recent years, the Republic of Korea, Malaysia and Thailand have emerged as sources of these precursors (NSB 2011b). Ephedrine is frequently smuggled to Myanmar from India through Chin State, trafficked on to Mandalay and subsequently to manufacturing centres in Shan State.

Most of the cannabis cultivation in Myanmar takes place in the central and southern regions of the country, in particular Bago Division, Kayin State and Tanintharyi Division and is cultivated for the domestic market (CCDAC 2011a).

Trafficking – Methamphetamine in both pill and crystalline form which originates from Shan State is trafficked overland to neighbouring Thailand, China and Lao PDR. Trafficking to these countries has increased substantially in the past two years. In 2010, a total of 50.4 million methamphetamine pills were seized in Thailand, the highest amount reported from the country since 2002. Most of the methamphetamine smuggled into Thailand is smuggled directly from Shan State. However, recent indicators point to the smuggling of large amounts of methamphetamine into Thailand from the Kayin State. In Lao PDR, a record amount of 24.5 million pills was seized in 2010,

the majority of which originated from Myanmar. Most of the methamphetamine trafficked through Lao PDR is trafficked through the country, in particular to Thailand, Cambodia and more recently Viet Nam. In China, 4.6 mt of methamphetamine were seized in Yunnan, a large portion of which originated from Myanmar. Chinese nationals are also involved in manufacturing and trafficking large amounts of methamphetamine from Myanmar into China and other countries

Methamphetamine has also been seized in the western part of Myanmar as well as in India and Bangladesh.

Transnational organized criminal groups are involved in trafficking methamphetamine from Myanmar to international markets. In September 2010, two suspects from the Philippines and Malaysia were arrested at Yangon International Airport with 1.42 kg of methamphetamine in their luggage (CCDAC 2011b). The methamphetamine was destined for the Philippines (CCDAC 2011c).

A large portion of the heroin manufactured in Shan State is trafficked to China. Some quantities are further trafficked to international markets. There have been several attempts by Malaysian drug criminals to traffic large amounts of heroin and methamphetamine through Thailand to Malaysia.

Drug prices – Street retail prices of methamphetamine vary considerably. Prices in Shan State towns are generally lower than prices in cities such as Yangon and Mandalay which are located further away from illicit methamphetamine manufacturing centres. In 2010, the retail price of one methamphetamine pill in urban areas was approximately USD 5.

Table 72. Retail prices of illicit drugs in Myanmar (USD), 2010

Drug type	Measurement	Price range
Methamphetamine pills	per pill	3 - 6
Crystalline methamphetamine	per kg	8,500 – 10,000
Ecstasy	per pill	70 - 80
Cannabis herb	per kg	150 - 250
Heroin	per kg	75,000 - 90,000
Opium	per kg	2,000 - 2,500

Source(s): DAINAP

Forensic data

Methamphetamine pill samples analysed in 2010 had an average weight of 99.5 mg and contained unspecified amounts of methamphetamine and caffeine. In 2009, the Chemical Examiner's Office in Myanmar reported that methamphetamine pills were composed of 25% methamphetamine and 75% caffeine.

Qualitative analysis was only conducted on heroin samples in Myanmar in 2010.



Emerging trends and concerns

- There are indications that clandestine drug laboratories where poly-drug manufacture occurs will become an increasing feature of illicit drug production in New Zealand.
- The diversion of precursor chemicals, both from the domestic chemical industry and illegal imports, will likely continue. In addition, it is likely that a greater variety of ephedrine and pseudoephedrine products will be smuggled into the country by using a variety of new sources and trafficking routes.
- It is possible that the Pacific islands region will increasingly be used as a transit point for methamphetamine and precursor chemicals bound for New Zealand.
- It is likely that an increasing range of amphetamine analogue substances and other substances with similar effects will be used by ecstasy suppliers.
- International drug trafficking organizations could expand the cocaine market in New Zealand, particularly West African groups and expatriate South Americans.
- Cannabis remains the most widely used illicit drug in New Zealand, and as a result of this high prevalence, will continue to cause the most illicit drug-related hospitalizations.

Overview of the drug situation

Since the late 1990s, the market for amphetamine-type stimulants (ATS) has grown rapidly, driven by the increase in domestic ATS manufacture, primarily of methamphetamine in powder form (known locally as 'P'). This expanding market is supplied primarily by local ATS manufacture using diverted and illicitly imported pharmaceutical preparations containing ephedrine and pseudoephedrine. Some methamphetamine is also trafficked into the country in its final form. Previously, New Zealand's drug markets were dominated by domestic cannabis cultivation and use and, to a lesser degree, 'homebake' heroin, a street substance derived from pharmaceutical preparations containing morphine.

In 2010, a total of 130 clandestine ATS manufacturing facilities were dismantled in New Zealand, compared with more than 200 in 2006 and fewer than 10 laboratories in 2000. The New Zealand Government

has identified the reduction of the availability and use of methamphetamine as its highest law enforcement priority (ARQ 2011).

In 2010, there were no demonstrable changes to the price, purity or availability of methamphetamine in New Zealand. However, the overall amount of methamphetamine seized in 2010 is 46% more than that seized in 2009, which could be due to greater law enforcement efforts (NDIB 2011a). In addition, pills sold as 'ecstasy' are widely used in New Zealand but mostly contain stimulants such as BZP, mephedrone,¹ TFMPP² and 4-MEC.³ It is believed that these analogue substances are being trafficked to the country

¹ Mephedrone, 4-methylmethcathinone, is a synthetic cathinone that mimics the effects of cathinone, one of the psychoactive substances in the khat plant.

² TFMPP refers to the piperazine 1-(3-trifluoromethyl-phenyl).

³ 4-MEC refers to 4-methylethcathinone, a synthetic cathinone.

in powder form and pressed into pills in New Zealand (ARQ 2011).

Cannabis remains the most common drug of use in New Zealand and its domestic cultivation remains widespread. The prevalence and use of cannabis remained stable in 2010; however, hospital admissions related to cannabis increased considerably during the year. In addition, an increasing range of synthetic cannabinoids products had been widely available in the country until August 2011, when the New Zealand Government placed a temporary ban on the substances for 12 months to assess the effects of their use (NZG 2011).

Trafficking and use of heroin or opium is not widespread in New Zealand. Most opiate and opioid users in the country use 'homebake' heroin or diverted pharmaceutical preparations containing oxycodone. The use of opioids among young people may be on the rise.

National controls over ketamine came into effect on 1 December 2010 (ARQ 2011).

Patterns and trends of drug use

Drug use – According to the latest triennial drug use prevalence survey,⁴ published by the Ministry of Health in 2010, the percentage of the New Zealand population aged 16-64 years who used methamphetamine in 2008 was 2.1% (2.9% for men and 1.4% for women), and at least 0.4% used methamphetamine monthly during the past year (PAG 2011). The percentage of the population who

used crystalline methamphetamine in the last year was 0.6% in 2008, down from 0.8% in 2006 and 0.9% in 2003 (MOHNZ 2010).

Ecstasy use in New Zealand has increased steadily over the past ten years (NDIB 2010). The prevalence rate for past year ecstasy use in the general population aged 16-64 in 2008 was 2.6% (ARQ 2011). However, the availability of MDMA has declined in recent years, a trend which has been accompanied by the increased availability and use of a number of other substances, such as BZP, TFMPP and mephedrone which are used as a substitute for and marketed as ecstasy. In 2010, a number of new analogue substances were found that had not previously been encountered in New Zealand (NDIB 2011a).

Cannabis remains the most commonly used drug in New Zealand (NDIB 2011a), although its use appears to have declined slightly in recent years. The annual prevalence of cannabis use in 2008 was 14.6% compared with 13.3% in 2006 and 20.4% in 2003. Nearly half (46%) of New Zealanders aged 16-64 (about 1.2 million persons) had used cannabis in their lifetime (NDIB 2010). Annual cannabis use prevalence was highest for users (both men and women) between the ages of 18 to 24 (MOHNZ 2010). However, cannabis use among young drug users has declined of late (NDIB 2010), which may indicate a preference for new stimulant drugs such as methamphetamine and ecstasy or a growing awareness of the health risks related to smoking.

'Homebake' heroin, or the misuse of pharmaceutical preparations containing opiates or opioids is common in New Zealand (NDIB 2011a). 'Homebake' heroin

Table 73. Rank of use of selected drugs in New Zealand, 2006-2010

Drug type	2006	2007	2008	2009	2010
Cannabis herb	1	1	1	1	1
Ecstasy	4	2	2	•	2
Methamphetamine	3	3	3	•	3
BZP	2	4	5	•	•
Opioids (Heroin, morphine and opiates)	5	5	4	•	4
Hallucinogens	•	•	•	•	5
Cocaine	•	•	•	•	6

• = Not reported

Source(s): ARQ 2011 and previous years

⁴ 'Drug Use in New Zealand: Key results of the 2007/08 New Zealand Alcohol and Drug Use Survey.' The next survey results will be available in 2012-2013.

Table 74. Trend in use of selected drugs in New Zealand, 2006-2010

Drug type	2006	2007	2008	2009	2010
Cannabis herb	↔	↔	↔	↔	↔
Ecstasy	↔	↑	↑	↔	↑
Methamphetamine	↑	↔	↔	↔	↔
BZP (Benzylpiperazine)	↑	↔	↓	●	●
Heroin, morphine and opioids	↔	↔	↔	↔	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported

Source(s): ARQ 2011 and previous years

Table 75. Prevalence in use of selected drugs in New Zealand (16-64 years), 1998-2008

Drug type	Prevalence (%)	1998	2001	2003	2006	2008*
Methamphetamine and amphetamine	Lifetime	7.6	11.0	9.0	9.3	7.2
	Past year	2.9	5.0	4.0	3.4	2.1
Ecstasy	Lifetime	3.1	5.4	5.5	8.0	6.2
	Past year	1.5	3.4	2.9	3.9	2.6
Heroin, morphine and opioids	Lifetime	1.2	1.5	1.2	1.0	3.6
	Past year	0.6	0.6	0.3	0.2	1.1
Cannabis	Lifetime	50.4	52.1	53.8	44.1	46.4
	Past year	19.9	20.3	20.4	17.9	14.6
Cocaine	Lifetime	3.7	3.3	3.1	4.5	3.6
	Past year	0.8	0.7	0.5	1.1	0.7
LSD	Lifetime	8.9	9.7	8.1	8.5	7.3
	Past year	3.9	3.2	1.9	1.8	1.3
Party pills (BZP)	Lifetime	●	●	●	21.4	13.5
	Past year	●	●	●	16.1	5.6

● = Not reported. *Note: there was a difference in the survey methodology used in 2008.

Source(s): Wilkins and Sweetsur 2007; Ministry of Health 2010; ARQ 2011

is made by extracting heroin from pharmaceutical preparations containing morphine and codeine. Analysis by the National Drug Intelligence Bureau (NDIB) highlights some similarities between the current growth in the market for opiates and synthetic opioids and the early indicators of an emerging methamphetamine market in the 1990s.

Injecting drug use

New Zealand has an estimated 40,000 injecting drug users (IDUs), most of which inject multiple drugs. In 2010, an estimated 20% of amphetamine and methamphetamine users injected the drug,

while approximately 90% of prescription stimulant users injected the drug.⁵ Among frequent injecting drug users, an increasing proportion had injected methamphetamine in recent years, from 66% in 2007 to 90% in 2010 (of those who had recently used methamphetamine) (Wilkins 2011).

About 90% of all heroin and opium users injected the drug, while approximately 80% of all prescription opioid users injected them.⁶ About half of all cocaine users injected it. Of all IDUs in the country, an estimated 0.5% of them are infected with HIV (ARQ 2011). By comparison, HIV prevalence among the general population is estimated at 0.1% (NDIB 2011b).

⁵ Prescription stimulants may include preparations containing amphetamine, fenethylamine, methylphenidate, pemoline, phenmetrazine and phentermine.

⁶ Prescription opioids may include preparations containing buprenorphine, codeine, dextropropoxyphene, fentanyl, hydrocodone, hydromorphone, methadone, morphine, oxycodone and pethidine.

The injecting use of ATS (amphetamine, methamphetamine and prescription stimulants) increased slightly in 2010. The injecting use of opiates remained stable during the year; however, a slight increase was reported for the injection of prescription opioids. There was also a slight increase in the injecting use of cocaine in 2010 (ARQ 2011).

Drug treatment⁷

The number of persons admitted to public hospitals (excluding emergency department figures) for the use of methamphetamine (as the cause of or a factor in their admission) in 2010 totaled 306 persons during the year. Of the 690 persons admitted to hospital for ATS use in 2009, 310 persons were admitted for methamphetamine use (NDIB 2011b).

Cannabis users account for the largest portion of persons admitted to public hospitals for drug-related causes. The 2,625 persons admitted to treatment for cannabis use in 2010 represent half of the total number of drug-related admissions in 2010 and a 20% increase from the previous year. The 2,301 persons admitted in 2010 for use of heroin, morphine and opiates accounted for 43% of the total number of drug-related hospital admissions during the year (NDIB 2011b).

Drug-related arrests, seizures and prices

Drug-related arrests – In 2010, a total of 10,578 persons were arrested on drug-related charges, representing

a 12% decline from the previous year. ATS-related arrests accounted for roughly 13% of all drug-related arrests in 2010. The 1,280 methamphetamine-related arrests during the year represents a 9% decrease from the 1,404 such arrests in 2009. Ecstasy-related arrests declined by approximately 8% in 2010 compared with the previous year. The 141 ecstasy-related arrests in 2010 is the lowest total reported during the past five years (NDIB 2011b).

Nearly 86% of all drug-related arrests in 2010 involved cannabis. The 9,051 persons arrested on cannabis-related charges during the year represents a 13% decrease from the 10,361 persons arrested on such charges in 2009 (NDIB 2011b).

The number of cocaine-related arrests tripled in 2010 from the previous year; however, cocaine-related arrests remain low. In addition, the number of arrests related to heroin, LSD and opium all declined in 2010 compared with the previous year (NDIB 2011b).

Drug seizures – New Zealand reported seizures of 30.7 kg of methamphetamine in 2010, a 46% increase compared with the 20.8 kg seized in 2009 and the highest total reported since 2007. The increase may be in response to increased law enforcement pressure on precursor imports and clandestine laboratories. It may also be a result of international criminal groups targeting New Zealand given that the price for methamphetamine is comparably high in the country. The largest amount of methamphetamine seized in one year was 122 kg in 2006, which was largely accounted for by a single seizure of 95 kg. Organized criminal groups from Asia, West Africa and the Islamic

Table 76. Drug-related hospital admissions in New Zealand, 2006-2010

Drug type	2006	2007	2008	2009	2010*
ATS	783	739	610	690	306**
Heroin, morphine and opiates	1,967	1,938	1,976	2,083	2,301
Cannabis	2,071	2,185	2,001	2,185	2,625
Cocaine	9	15	16	21	13
Hallucinogens	68	59	38	59	72
Total	4,898	4,936	4,641	5,038	5,317

*Data are provisional only and relate to admissions to publicly funded hospitals. Data do not include admissions to emergency departments for drug-related conditions, i.e. those who are not actually admitted to hospital. The data do not include admissions to private hospitals or individuals referred or directed to publicly or privately-funded drug treatment programs. **The figure refers to the number of persons admitted to treatment for methamphetamine use; New Zealand did not report total ATS treatment admissions for 2010.

Source(s): PAG 2010; NDIB 2008; *NDIB 2011b

⁷ Drug treatment data for New Zealand refers to drug-related hospital admissions. Specific drug treatment figures are not available.

Table 77. Drug-related arrests in New Zealand, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine (crystalline/powder)	1,353	1,280	1,187	1,404	1,280
Ecstasy	165	178	179	154	141
Cannabis	7,273	7,604	8,664	10,361	9,051
Cocaine	23	16	14	10	30
Heroin	14	12	13	22	15
LSD	95	72	99	86	59
Opium	5	12	2	4	2
Total	8,928	9,174	10,158	12,041	10,578

Source(s): NDIB 2011b

Republic of Iran are involved in the manufacture, supply and distribution of methamphetamine in New Zealand (ARQ 2011).

In 2010, Customs seized 19.5 kg of methamphetamine at the border, representing an 81% increase in seizures at the border compared with the previous year. In the first two months of 2011, Customs seized 6.1 kg of methamphetamine at the border, which is more than half of the total amount seized in New Zealand in 2009 (PAG 2011). The increasing seizures of methamphetamine at the border appear to be linked to expanding activity by overseas transnational organized crime organizations. Drug trafficking groups from West Africa usually traffic multiple smaller consignments of methamphetamine into New Zealand (PAG 2011).

In 2010, a total of 130 clandestine manufacturing laboratories were dismantled (NDIB 2011b), slightly down from the 135 laboratories seized in 2009 and 133 laboratories dismantled in 2008 (PAG 2011). These totals are far lower than the number of clandestine laboratories seized in the years 2002 through 2007. Most of the clandestine laboratories seized in 2010 were manufacturing methamphetamine or were pseudoephedrine extraction laboratories and were located on the Upper North Island. Most illicit laboratories were located on private premises, followed by industrial or commercial facilities (ARQ 2011). All laboratories were using ephedrine or pseudoephedrine as the main precursor.

In 2010, two 'combined ATS' laboratories were involved in the manufacture of methamphetamine and possibly ecstasy (ARQ 2011). These laboratories

were blending substances including mephedrone, ketamine, BZP, butylone, 2C-D⁸ and DXM⁹ and pressing them into pills. One of these laboratories was likely to have been supplying significant quantities of illicit drugs in New Zealand and was possibly established to meet an increasing demand for pills sold as 'ecstasy'. A pill press was found at the facility. There are no legislative or regulatory controls on the import, possession, and use of pill presses, or tooling equipment exclusively for use in pill presses, in New Zealand (ARQ 2011).

Intelligence suggests that criminals are increasingly undertaking pseudoephedrine extraction and methamphetamine manufacture at different sites, then dispersing the equipment and chemicals to multiple sites (PAG 2011).

In 2010, the quantity of precursors seized by Customs declined by about 20% compared with the quantity seized during the previous year, which was a record high. In 2010, approximately 4.3 million pill equivalents of ephedrine and pseudoephedrine were seized in 783 incidents. This compares with almost 5.4 million pill equivalents seized in 923 incidents in 2009 and a range of between 1.7 million and 3.3 million pills seized annually between 2006 and 2008 (PAG 2011). In addition, fewer large multi-kilo seizures of ephedrine and pseudoephedrine were made in 2010, which is a possible indication that criminal groups are importing small weight but multiple packages (PAG 2011).

The New Zealand Government has tabled legislation that will restrict the availability of domestically produced pharmaceutical preparations containing pseudoephedrine by making them available only by prescription (NDIB 2011a). However, as indicated earlier, the manufacture and supply of methamphetamine in New

⁸ 2C-D refers to 2,5-dimethoxy-4-methyl-phenethylamine.

⁹ DXM refers to dextromethorphan, a cough suppressant.

Zealand is already showing early signs of fundamental changes. Organized crime groups are experimenting with alternative methods of manufacture, including methods, such as the P-2-P method, that do not require the use of ephedrine or pseudoephedrine (PAG 2011).

Cannabis herb seizures in 2010 totaled 719 kg, representing a 14% decrease compared with the 840 kg seized in 2009. In addition, nearly 160,000 cannabis plants were seized in 2010 compared with more than 184,000 plants seized in the previous year. In 2010, approximately three-fourths of the seized cannabis plants were cultivated outdoors (ARQ 2011).

Almost 10 kg of cocaine were seized in New Zealand in 2010, a three-fold increase from the 3 kg seized in 2009 and the highest total reported since 2006 (NDIB 2011b).

Seizures of GHB/GBL¹⁰ totaled nearly 120 lt. in 2010,

representing a 14% increase from the previous year. In 2008, a significant jump in seizures of GHB/GBL was reported with 853 lt. seized that year, four times higher than the previous record year (2006).

Heroin seizures remain low - 20 g of heroin were seized in 2010, a decline of 62% compared to 2009 (53 g) (NDIB 2011a).

Drug prices – In 2010, prices for methamphetamine powder decreased slightly to USD 562 per gram (PAG 2011). From 2006 to 2010, the price for methamphetamine rose significantly, from roughly USD 420 to USD 562, and a mean price of USD 526 (PAG 2011).

The drop in the retail price of ecstasy in 2010 is likely due to the declining MDMA content of ecstasy pills, which have been found to contain various substances other than MDMA. Some changes in illicit drug prices may be due to fluctuating exchange rates.

Table 78. Seizures of selected illicit drugs in New Zealand, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine	kg	121.8	39.3	24.0	20.8	30.7
Ecstasy	pills	8,769	4,123	25,806	15,063	16,589
Cannabis plants**	plants	144,039	128,414	158,058	184,160	159,734
Cannabis herb*	kg	752.0	522.0	916.0	840.0	718.5
LSD	no. of doses	3,483	1,031	2,672	53,225***	836
GBL / GHB	lt.	202.0	5.0	853.0	105.3	119.8
Heroin	grams	11.5	●	42.0	53.0	20.0
Cocaine	kg	33.0	0.03	0.8	3.0	9.9

● = Not reported. *Does not include cannabis oil, cannabis resin or cannabis seeds. **Includes cannabis plants eradicated during the National Cannabis and Crime Operation or seized. ***The spike in LSD seizures in 2009 is due to a large seizure in November 2009 of 2.5 g of LSD powder (equivalent to approximately 50,000 doses of LSD). It is possibly the first occasion where a solid form of LSD has been found in New Zealand (NDIB 2010c).

Source(s): NDIB 2009a; NDIB 2009b; NDIB 2010a; 2010 data from NDIB 2011b and ARQ 2011

Table 79. Border seizures of ephedrine and pseudoephedrine, 2006-2010

	2006	2007	2008	2009	2010
Amount seized (tablets) – converted to equivalent of 90 mg tablets	2,667,068	1,766,200	3,336,978	5,392,886	4,336,195
Equivalent in kilos of precursors	594	393	744	1,203	967
Number of seizures	284	454	831	923	783
Potential methamphetamine yield (kg)*	120 – 168	79 – 111	150 – 210	243 – 340	195 – 273

*Methamphetamine yield is calculated on 50-70% purity

Source(s): PAG 2011, information obtained from the New Zealand Customs Service CusMod database.

¹⁰ GBL refers to Gamma-Butyrolactone. GHB refers to Gamma-Hydroxybutyrate. GHB is a clear odourless liquid or white powder usually made into tablets or capsules. GBL is also a liquid and is used as a precursor for the production of GHB. GHB is often used by bodybuilders as an alternative to anabolic steroids.

Table 80. Median (mean) street retail drug prices (USD) in New Zealand, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine powder	per gram	420 (427)	420 (473)	700 (489)	700 (517)	504 (562)
Crystalline methamphetamine	per gram	•	490	560	•	576
Ecstasy	per pill	42	42	42	•	29
Cannabis herb	per 1.5 grams	14	14	14	•	22
Heroin (homebake)	per millilitre	0.7	0.7	0.7	•	•
Cocaine	per gram	210	245	280	•	180

• = Not reported

Source(s): IDMS 2009; PAG 2010; ARQ 2011

Sources of illicit drugs

Methamphetamine found in New Zealand is manufactured domestically but significant quantities are also trafficked into the country, primarily from Hong Kong, China (76%), Indonesia (11%) and Australia (5%). Amphetamine seized in New Zealand originates primarily from Thailand (44%), China (22%) and the United States (8%). Organized criminal groups from Asia (particularly China), the Islamic Republic of Iran and West Africa (particularly Nigeria) are involved in trafficking methamphetamine into New Zealand. In addition, there are indications that Vietnamese drug trafficking networks are involved in the domestic manufacture of methamphetamine in New Zealand (ARQ 2011).

ContacNT[®], a pharmaceutical preparation containing pseudoephedrine, is the primary product precursor encountered by Customs and is mainly sourced directly from China (PAG 2011). However, the domestic extraction of pseudoephedrine also takes place in New Zealand.

Most of the cannabis in New Zealand is cultivated domestically, both indoors and outdoors. There is no evidence of large-scale illicit imports or exports of cannabis or any of its derivatives. Hydroponic cultivation (indoor, under lights, in a water solution without soil) of cannabis accounts for 4-11% of all cultivated plants seized in New Zealand (NDIB 2011a).

Most of the cocaine smuggled into New Zealand enters the country from Argentina (48%), Chile (48%) and Thailand (2%). The LSD found in New Zealand enters the country from the Netherlands when able to be identified (ARQ 2011).

Trafficking – Methamphetamine is smuggled into New Zealand by air passengers and in cargo, fast freight and mail, often by organized criminal groups from Asia (PAG 2011). In 2010, there was a large increase in the amount of methamphetamine smuggled into the country. At the same time, the amounts of amphetamine and ecstasy trafficked into New Zealand decreased in 2010 compared with the previous year (ARQ 2011).

ContacNT[®] preparations are brought into New Zealand illegally by using methods similar to those used for the trafficking of methamphetamine into the country (PAG 2011). However, there are signs of an increasing divergence of sources and trafficking routes for methamphetamine precursors, including the continued diversification of exporting countries of ephedrine and pseudoephedrine. This is primarily in the form of pharmaceutical products which are trafficked from China and other countries in South-East Asia (PAG 2011).

Substances that mimic the effect of controlled drugs such as BZP, mephedrone and 4-MEC, likely originate from China; however, suppliers based in the UK and Ireland remain the most prominent traffickers to New Zealand (NDIB 2011a).

Most of the cocaine seized in New Zealand is smuggled into the country by couriers arriving on flights from South America. Internal concealment, which was not previously seen regularly in New Zealand, was a common modus operandi employed in 2010. The country also has been identified as a transit country for cocaine consignments to Australia; however, evidence from the cocaine seized in 2010 suggests that most of it was destined for the New Zealand market (NDIB 2011a). West African drug trafficking networks are involved in the trafficking of cocaine into the country (ARQ 2011).

Domestic criminal groups are particularly involved in the manufacture and trafficking of methamphetamine and cannabis (ARQ 2011).

Forensic data

The Institute of Environmental Science and Research (ESR) reported that methamphetamine samples tested from 2006 to 2009 had a purity level of almost 69% methamphetamine (PAG 2011). In 2010, ESR reported that 20 methamphetamine samples tested had purities ranging from 20-80% methamphetamine, with the majority of samples showing purity of 70-80% methamphetamine (PAG 2011), and the median methamphetamine purity across all samples was 74% (PAG 2011).

Of the two cocaine samples analysed in 2010 (border seizures greater than 1 kg), the purity ranged from 56-81% cocaine (ARQ 2011).

Some of the ecstasy seized in 2010 contained substances such as 4-MEC, Bk-MBDB,¹¹ BZP, cathinone, mephedrone, methenamine, methylone and TFMPP (ARQ 2011).

¹¹ Butylone, also known as β -keto-N-methylbenzodioxolylpropylamine



Emerging trends and concerns

- Crystalline methamphetamine remains the primary drug threat in the Philippines. However, declines in seizures and drug treatment admissions are indications that the threat has been contained in recent years.
- Crystalline methamphetamine continues to be manufactured in the Philippines. Law enforcement agencies dismantle small and large-scale laboratories every year. Seizures of ephedrine and pseudoephedrine, the main precursors for methamphetamine, have also been reported.
- The number of foreign nationals arrested on drug-related charges in the Philippines has risen considerably during the past two years. This may be an indication of increased activity by international drug trafficking networks in the Philippines.

Overview of the drug situation

The use of amphetamine-type stimulants (ATS) first emerged in the Philippines in the late 1980s and swiftly changed the drug use patterns in the country. For the past two decades, crystalline methamphetamine (known locally as 'shabu') has been the most commonly used drug in the Philippines, although its use has declined of late. During the past few years, approximately two-thirds of all drug-related arrests and drug treatment admissions have been related to crystalline methamphetamine.

Ecstasy has been identified as a key concern for drug law enforcement authorities, although its use remains limited. In addition, the use of tablets sold as 'ecstasy' but which contain BZP instead of MDMA (or its analogues) has also been identified as an emerging threat in the country (PDEA 2010c).

Illicit methamphetamine manufacture has expanded in the Philippines since it was first reported in 1996. From 2002 to 2010, a total of 72 illicit crystalline methamphetamine laboratories were dismantled in the Philippines, including seven such laboratories in 2010. During the past few years, a shift to smaller

illicit crystalline methamphetamine laboratories has been detected.

Cannabis is the second most commonly used illicit drug in the Philippines. The outdoor cultivation of cannabis is prevalent in some areas of the country, particularly in the mountainous regions of the north and south.

The Philippines has an estimated 1.7 million past year drug users in the country, or roughly 2% of the total population between the ages of 10 and 64 years (PDEA 2011a), according to the most recent national household survey conducted in 2008 by the Dangerous Drugs Board (DDB). Most drug users in the Philippines reportedly use multiple drugs (DDB and PDEA 2011).

Of the total number of persons in prison in the Philippines (57,553 persons as of December 2009), about 36% were jailed for drug-related offences, according to a study conducted by the Bureau of Jail Management and Penology (PDEA 2011a).

There are indications that the methamphetamine situation in the Philippines has improved in recent years.

Large industrial-scale methamphetamine manufacture appears to be in decline and arrests, seizures and drug treatment admissions related to crystalline methamphetamine have shown a decreasing trend. Efforts of Philippine law enforcement agencies have contributed to these positive results.

Patterns and trends of drug use

Drug use¹ – Crystalline methamphetamine remains the most commonly used drug in the Philippines, although its use has remained relatively stable of late. Snorting was indicated to be the primary mode of administration for crystalline methamphetamine. Use of the drug was first reported in the Philippines in 1985 (PDEA 2011a). In 2009, crystalline methamphetamine users accounted for 62% of all drug users arrested in the country (PDEA 2009), showing a 10% increase from the previous year (PDEA 2010c). There is no reported use of methamphetamine pills in the Philippines.

The ecstasy market has expanded among young night-club goers in major cities. However, its use remains limited due to the high price and low availability of the drug (PDEA 2011). The use of other synthetic substances, in particular BZP, has also been identified as an emerging concern (PDEA 2010c, p. 2).

Cannabis herb remains the second most widely used drug in the Philippines. Prior to the emergence of crystalline methamphetamine, cannabis was the most dominant drug of use in the country.

Inhalants, specifically contact cement, ranked as the third most commonly used substance in 2010.

Although cocaine use in the Philippines remains limited, the cocaine market has expanded since 2008, as reflected by the number of treatment admissions related to cocaine during the past three years (PDEA 2011).

Injecting Drug Use

The number of injecting drug users (IDUs) in the Philippines is estimated to be between 7,000 and 14,500 persons. The estimated HIV prevalence among IDUs is between 0 and 7% (PNAC 2008). The most commonly injected drug in the Philippines is Nalbuphine hydrochloride, a synthetic opioid (PNAC 2010). An estimated 11.5% of all IDUs in the country have been reached with HIV prevention programmes (PNAC 2010). There is no reported injecting use of methamphetamine in the Philippines.

Table 81. Rank of use of selected drugs in the Philippines, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	●	●	●	●	1
Benzodiazepines	●	●	●	●	4
Cannabis herb	●	●	●	●	2
Inhalants	●	●	●	●	3

● = Not reported

Source(s): DAINAP

Table 82. Trend in use of selected drugs in the Philippines, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	●	●	●	●	↓
Benzodiazepines	●	●	●	●	↓
Cannabis herb	●	●	●	●	↓
Inhalants	●	●	●	●	↓

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported

Source(s): DAINAP

¹ Drug use data in the Philippines are based on drug-related arrests during the year.

Drug treatment

The number of persons who underwent drug treatment in the Philippines continued to decline in 2010. During the year, a total of 2,745 persons² underwent drug treatment, representing a slight decline compared with 2009. The majority of those entering treatment are first-time admissions. Only a small number of drug users in the Philippines receive drug treatment and rehabilitation. This is often either because most individuals refuse to admit they have drug problems or because families choose to keep the drug problem of a family member secret for fear of public humiliation (PDEA 2011).

Of those in drug treatment in 2010, 60% were crystalline methamphetamine users. Over the past decade, about 63% of all persons in drug treatment used crystalline methamphetamine and just over 1% were ecstasy users. The number of crystalline methamphetamine users entering drug treatment in the country declined each year from 2004 to 2009. In 2010, however, the number of admissions for crystalline methamphetamine was slightly higher compared with 2009. Ecstasy users accounted for less than 2% of all persons who underwent drug treatment in 2010.

Approximately one-third of all drug users admitted to drug treatment facilities since 2004 have been cannabis users. The 938 cannabis users who underwent treatment in 2010 represent a 14% decline from the previous year.

Most persons who enter treatment facilities are poly-drug users and have been taking drugs for six years or more. Crystalline methamphetamine and cannabis are the predominant drugs of use. Of those who enter treatment, approximately 57% are single and 34%

are unemployed. The ratio of male-to-female users in treatment is 9 to 1 and most users are between the ages of 20 and 29 years (PDEA 2011).

Drug-related arrests, seizures and prices

Drug-related arrests – In 2010, a total of 8,259 drug-related arrests were reported in the country, which is 9% lower than the 9,052 drug-related arrests in 2009. The Philippines does not disaggregate drug arrest data by drug type to DAINAP. However, according to DDB estimates, of the total drug-related arrests in 2010, crystalline methamphetamine accounted for roughly 77%, and cannabis accounted for 22% (DDB and PDEA 2011).

Of the 8,259 persons arrested in 2010, approximately 84% were men and 16% were women. The majority were street-level traffickers (53%), followed by users (29%) and persons arrested for possession (16%). Only three persons were arrested for manufacturing during the year (PDEA 2010a). Of the street-level traffickers, the majority are married and employed with an average age of 29 years, and the male-to-female ratio is 6 to 1 (PDEA 2011). In addition, the number of minors arrested for drug trafficking offences has increased from 42 in 2008 to 62 in 2009 to 86 in 2010 (PDEA 2010a).

From 2005 to 2010, a total of 244 non-nationals were arrested in the Philippines, 81 of which (33%) were arrested for trafficking, 86 (35%) for possession, 61 (25%) for manufacture, and 16 (7%) on other drug-related charges. The number of non-nationals arrested in the Philippines increased considerably in 2009 and 2010, after remaining stable from 2005 to 2008 (PDEA 2011). In 2010, 69 non-nationals were

Table 83. Drug treatment admissions in the Philippines by drug type, 2010

Drug type	New admissions			All admissions		
	Men	Women	Total	Men	Women	Total
Crystalline methamphetamine	1,221	133	1,354	1,624	153	1,777
Ecstasy	25	11	36	37	12	49
Ketamine	4	0	4	4	0	4
Cannabis	718	59	777	871	67	938
Cocaine	29	7	36	44	8	52
Inhalants	115	8	123	124	8	132

Source(s): DAINAP

² Due to poly-drug users who received treatment for more than one drug type, the total number of admissions in Table 83 is higher than 2,745.

Figure 31. Drug-related arrests in the Philippines, 2006-2010



Source(s): DAINAP

arrested on drug-related charges (PDEA 2010a). A total of 23 non-nationals associated with West African drug trafficking syndicates were arrested in the Philippines from January 2010 through June 2011 (DDB and PDEA 2011).

Drug seizures – In 2010, a total of 63.6 kg of crystalline methamphetamine was seized in the Philippines. This represents a 57% decline from the previous year and is considerably lower than the totals reported in each of the previous four years. In addition, 46.4 lt. of liquid methamphetamine were seized in 2010. In 2009, 149.3 kg of crystalline methamphetamine were seized in the country in addition to 831.5 lt. of liquid methamphetamine. The largest amount of crystalline methamphetamine seized during the past five years was in 2008, when

single seizure of 745 kg in Subic Bay Freeport, west of Manila, in May 2008 (SMART 2009).

The market for ecstasy in the Philippines is limited. In 2010, only 336 ecstasy pills were seized. The highest number of ecstasy pills seized in the country was reported in 2009, when 2,090 pills were seized.

In 2010, 207 cannabis cultivation sites were eradicated (PDEA 2010a) compared with 187 in 2009 (PDEA 2009) and 106 in 2008 (PDEA 2008). The amount of cannabis herb seized in 2010 totaled 1.1 mt, representing a 32% decrease from the previous year.

The Philippines has reported large seizures of cocaine in each of the past two years, after having reported no cocaine seizures during the 2006-2008 period. In December 2009, two tons of cocaine of Colombian origin were recovered in waters off Borongan, Eastern Samar. The shipment was reportedly bound for China via the Hong Kong Special Administrative Region from an unknown port in South America. In the same month, 15.5 kg of cocaine were discovered inside an automobile at Sasa Wharf in Davao City (PDEA 2011). Although use of cocaine has increased, these large cocaine seizures in the country more likely indicate that the country is being used as a transit country for cocaine shipments to China.

Benzodiazepine seizures increased more than five-fold in 2010 with 5,818 pills seized compared with 1,060 pills seized in the previous year.

Table 84. Seizures of selected illicit drugs and precursors in the Philippines, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	54.1	368.9	853.5	149.3	63.6
Liquid methamphetamine	lt.	712.7	•	72.0	831.5	46.4
Ecstasy	pills	83	122	513	2,090	336
Ketamine	kg	98.0	325.1	10.2	0.002	0.002
Benzodiazepines	pills	99	1,376	3,926	1,060	5,818
Cannabis herb	kg	6,249.0	1,200.0	3,724.0	1,660.0	1,128.0
Cannabis resin	kg	24.5	7.7	•	•	1.4
Cannabis plants	plant	2,124,424	2,492,878	3,290,974	4,779,271	9,941,977
Cannabis seeds	kg	58.4	4.7	14.1	31.8	8.2
Cannabis seedlings	seedlings	588,544	57,674	644,441	3,003,275	558,233
Cocaine	kg	0.002	0.004	0.001	259.3	342.0
Ephedrine	kg	71.1	57.1	53.0	9.1	0.6
Pseudoephedrine	lt.	•	•	2.0	241.0	•

• = Not reported

Source(s): DAINAP

Table 85. Retail prices of ATS in the Philippines (USD), 2008-2010

Drug type	Measurement	2008	2009	2010
Crystalline methamphetamine	per gram	262	254	210
Ecstasy	per pill	26	26	34

Source(s): PDEA 2010a

Drug prices – Crystalline methamphetamine prices have declined steadily during the past two years (PDEA 2011).

The retail price for one ecstasy pill increased by about 30% in 2010 to USD 34 compared with USD 26 in the previous two years (PDEA 2010a).

Sources of illicit drugs

From the early 1990s through 2001, illicit drugs were smuggled into the Philippines in the form of finished products. Since then, drug trafficking organizations have shifted to bringing the drug supply closer to the market which has led to the expansion of the domestic manufacture of methamphetamine in the country. From 2002 to 2010, a total of 72 illicit crystalline methamphetamine laboratories were dismantled by drug law enforcement authorities (PDEA 2011a). In 2010, seven illicit methamphetamine manufacturing operations were seized in the Philippines: one large-scale industrial type facility, two medium-sized operations and four small-scale kitchen-type labs (DDB and PDEA, 2011). By comparison, nine laboratories were seized in 2009 and 10 laboratories were seized in 2008. Philippines law enforcement authorities have encountered multiple manufacturing sites segmenting the various stages of methamphetamine manufacture (PDEA 2011).

In addition to domestically manufactured crystalline methamphetamine, some of the crystalline methamphetamine seized in the country originates from China (DDB and PDEA 2011).

Much of the cannabis seized in the country is cultivated in the mountainous areas of Northern Luzon, Eastern Visayas and the southern island of Mindanao and is grown primarily for the domestic market (PDEA 2010a).

Trafficking – Crystalline methamphetamine is smuggled into the Philippines through seaports, airports as well as mail and parcel services. Crystalline methamphetamine from other Asian countries is smuggled into the country through the shorelines of

Luzon, which are long and difficult for law enforcement to monitor (PDEA 2011). In 2010, a total of 38 kg of crystalline methamphetamine was seized at Ninoy Aquino International Airport in Manila, smuggled by Malaysian nationals on flights originating in Bangkok and Kuala Lumpur (PDEA 2011).

Domestically manufactured methamphetamine is also trafficked to countries in Asia, such as Cambodia, Indonesia and Thailand as well as to countries outside the East and South-East Asia region (PDEA 2010b).

Ecstasy is believed to be smuggled into the Philippines from Canada and Europe, using sea ports, airports and post (DDB and PDEA 2011). There is no known ecstasy manufacture in the Philippines.

Forensic data

The purity of crystalline methamphetamine has steadily been increasing. Samples analysed in the Philippines showed an average purity of 71%, compared with 67% methamphetamine in 2009 and 55% methamphetamine in 2008 (DDB and PDEA 2011).³

³ The figures are based on laboratory analysis of crystalline methamphetamine at the PDEA Laboratory Service, National Headquarters, Quezon City, Metro Manila.



Emerging trends and concerns

- Crystalline methamphetamine remains the most commonly used drug. The majority of drug-related arrests and nearly all drug treatment admissions have been related to crystalline methamphetamine in the past several years.
- There are indications that the illicit manufacture of methamphetamine and other synthetic drugs is expanding in the country.
- The Republic of Korea has been targeted by drug traffickers as a transit country for increasing amounts of illicit drugs and precursor chemicals destined for illicit markets and manufacturing countries in the region.
- The amount of cannabis seized in each of the past three years is considerably higher than the amounts seized earlier in the decade.
- In 2010, the Republic of Korea reported the seizure of quantities of the synthetic cannabinoid JWH-018¹ and the plant kratom,² suggesting that new drugs, which are not under international control, are gaining a foothold in the country.

Overview of the drug situation³

Crystalline methamphetamine remains the most commonly used drug in the country. Since 2004, methamphetamine has accounted for about 65-80% of all drug-related arrests (SPO 2011a and previous years) and more than 95% of admissions to drug treatment (SPO 2011d; ARQ 2010 and previous years). However, reported use of crystalline methamphetamine is on the decline.

Limited clandestine methamphetamine manufacture has been reported in the Republic of Korea since the late 1990s. However, in 2010 authorities reported the seizures of four small-scale 'kitchen-type' clandestine methamphetamine manufacturing operations (SPO 2011a). No seizures of precursor chemicals have been reported in the Republic of Korea in the past few years, although the Republic of Korea has been indicated as one of the source countries for ephedrine trafficked to Australia (INCB 2010a) and the source of large quantities of pharmaceutical preparations containing pseudoephedrine trafficked to countries in South-East Asia (SMART 2010). In addition, the country has also been targeted by drug traffickers as a transit country for drugs in recent years.

Most of the methamphetamine found in the Republic of Korea has historically come from mainland China, but increasing amounts of the drug are entering the country from Cambodia, Malaysia, South Africa and Taiwan Province of China (SPO 2011a; ARQ 2010). Cannabis is the second most common drug of use in

¹ JWH-018 refers to 1-pentyl-3-(1-naphthoyl) indole or AM-678 and is a substance not under international control. It has been identified in various herbal smoking blends and in substances sold as 'plant food'.

² Kratom refers to *mitragyna speciosa*, a plant indigenous to South-East Asia that contains the alkaloid mitragynine.

³ All data and information, unless otherwise specified, were submitted by the narcotics division of the Korean Supreme Prosecutors' Office to UNODC in August 2011. As the Republic of Korea does not routinely submit data through the Drug Use Network for Asia and the Pacific (DAINAP), the terminology that is used may vary from other country chapters.

the Republic of Korea. Heroin and cocaine are not indicated to be commonly used in the country as reflected by drug seizure and arrest data (SPO 2011a).

Patterns and trends of drug use

Drug use – Crystalline methamphetamine, commonly known locally as ‘philopon’ or ‘hiropon’ in the Republic of Korea, remains the most commonly used drug in the country as perceived by experts. Reported use of crystalline methamphetamine declined in 2010 for the third consecutive year. Ecstasy use also declined during the year (SPO 2011d).

Cannabis is the second most common drug of use, and the use of cannabis was reported to have increased in 2010 for the second successive year. In 2009, government experts reported a strong increase in cannabis use in the country (ARQ 2010).

The use of ketamine, heroin and opium reportedly declined in 2010 (SPO 2011d).

Injecting drug use

Injecting use of methamphetamine has been reported but no estimates are available of the number of injecting drug users in the Republic of Korea. Injecting drug use accounts for approximately 0.04% of the total reported HIV cases in the country (UNGASS ROK 2007).

Drug treatment

In 2010 and 2009, users of ATS, primarily methamphetamine, accounted for 98% of all persons admitted to drug treatment in the Republic of Korea (SPO 2011d). In 2010, 231 persons were treated for ATS use and four persons were treated for cannabis use (SPO 2011d), compared with the previous year when 317 persons were treated for ATS use and seven persons were treated for cannabis use (ARQ 2010).

In 2008, drug treatment and rehabilitation services were transferred from the Korea Food and Drug Administration to the Ministry for Health and Welfare (INCB 2010a). The Ministry operates 24 treatment and rehabilitation centres across the country (ARQ 2010).

Drug-related arrests, seizures and prices

Drug-related arrests – In 2010, a total of 9,732 drug-related arrests were recorded, of which nearly 70% were related to crystalline methamphetamine. By comparison, 67% of the 11,875 drug-related arrests in 2009 were related to methamphetamine. The number of women arrested for ATS in 2010 totaled 871 (13% of total ATS-related arrests), representing a 35% decrease from the 1,339 women arrested for ATS in the previous year. The number of women arrested for ATS in 2008 and 2007 was 727 and 943 respectively. The total number of drug-related arrests

Table 86. Rank of use of selected drugs in the Republic of Korea, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	1	1	1	1	1
Cannabis herb	2	2	2	2	2
Ecstasy	•	•	•	•	3
Opium	•	•	•	•	4

• = Not reported
Source(s): SPO 2011d

Table 87. Trend in use of selected drugs in the Republic of Korea, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	↑	↑	↓	↓	↓
Cannabis herb	↑	↑	↓	↑	↑
Ecstasy	•	•	•	•	↓
Opium	•	•	•	•	↓

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported
Source(s): SPO 2011d

in 2010 declined by 18% compared with the previous year (SPO 2011c).

The number of non-nationals arrested for drugs in the Republic of Korea has shown a slight decline for two consecutive years. In 2010, a total of 858 non-nationals were arrested for drugs in the Republic of Korea, a 3.5% decrease compared with 2009 (890 non-nationals arrested) and a 7.5% decrease compared with 2008 (928 non-nationals arrested). In 2007, a total of 298 non-nationals were arrested for drugs. In 2010, 390 non-nationals were arrested for ATS, representing nearly 6% of the total number of persons arrested for ATS during the year (SPO 2011d; SPO 2011b).

Drug seizures – Seizures of crystalline methamphetamine amounted to 11.9 kg in 2010, a decrease for the second successive year and the lowest amount reported during the past five years. The amount of

methamphetamine pills seized in the country remains insignificant (SPO 2011c).

In 2010, four small-scale ‘kitchen-type’ clandestine methamphetamine manufacturing laboratories were seized (SPO 2011a). Authorities also arrested an executive of a major electronics company and seized 2 kg of methamphetamine which the suspect was believed to have manufactured in a laboratory of his company (SPO 2011d). In 2007, two illicit manufacture cases were reported, one for the manufacture of methamphetamine and one for the manufacture of GHB⁴ (SPO 2011a). Prior to this, no clandestine manufacture had been reported in the Republic of Korea since the late 1990s.

The Republic of Korea is also indicated as a source as well as a transit country for precursor chemicals. In August 2010, approximately 12.8 million pharmaceutical preparations containing pseudoephedrine and

Table 88. Drug-related arrests in the Republic of Korea, 2006-2010

Drug type	2006	2007	2008	2009	2010
ATS*	6,006	8,521	7,457	7,965	6,771
Cannabis herb	835	1,170	1,045	1,712	1,837
Cocaine	7	4	7	9	0
Heroin	1	0	0	18	11
Opium**	860	954	1,389	2,171	1,113
Total	7,709	10,649	9,898	11,875	9,732

*Refers primarily to crystalline methamphetamine. This may also include a small number of arrests related to methamphetamine pills and ecstasy, although the Republic of Korea did not report disaggregated data for ATS. **Opium-related arrests in the Republic of Korea are primarily related to opium poppy cultivation for traditional medicines.

Source(s): SPO 2011c; SPO 2011d

Table 89. Seizures of selected drugs in the Republic of Korea, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	21.5	23.7	25.6	15.2	11.9
Methamphetamine pills	pills	0	196	151	1	5
Ecstasy	pills	356	18,323	714	894	486
Cannabis herb	kg	20.9	22.2	92.7	122.5	44.5
Cannabis resin	kg	0.2	0.8	2.0	0.5	0.04
Cannabis seeds	kg	62.2	10.7	61.2	218.0	37.0
Cocaine	kg	4.8	0.1	8.9	0.3	0.0
Heroin	kg	0.02	0.0	0.0	1.9	0.1
Raw opium	kg	0.1	0.1	0.2	0.2	0.1

Source(s): SPO 2011c; SPO 2011d

⁴ GHB refers to Gamma-Hydroxybutyrate. GHB is a clear odourless liquid or white powder usually made into pills or capsules.

originating from the Republic of Korea were seized in Cambodia after having been trafficked across the land border with Thailand. However, it is unclear whether these products were intended for direct consumption or for use in illicit methamphetamine manufacture (SMART 2010). The Republic of Korea has also been indicated as one of the source countries for ephedrine trafficked to Australia (INCB 2010a).

While cannabis herb seizures declined by nearly 64% in 2010 to 44.5 kg compared with 122.5 kg seized in 2009, the amount of cannabis seized in each of the past three years remains far higher than the amounts seized earlier in the decade. The considerable rise in overall cannabis seizures since 2008 is due in large part to strengthened law enforcement efforts, particularly against household cultivators of cannabis (SPO 2010a).

In addition, in 2011, law enforcement authorities also seized 30 g of ketamine, 10,569 pills of the internationally controlled substance phenobarbital, approximately 0.2 kg of JWH-018, a synthetic cannabinoid, and 80 g of kratom (SPO 2011d).

Drug prices – Prices remained generally stable. The wholesale price for 1 g of crystalline methamphetamine in 2010 ranged from USD 69 to USD 345 and the street-level retail price ranged from USD 173-952, unchanged from prices during the previous year. The reported average retail price for 1 g of crystalline methamphetamine in 2010 was USD 693, a 1% increase from the previous year and a 29% increase from the average retail price in 2008. One dose (0.03 g) of crystalline methamphetamine in 2010 and 2009 retailed for about USD 87 (SPO 2011a).

In Seoul, the average street-level retail price for ecstasy in 2010 was USD 86 per pill. The average retail price for 1 g of cannabis was USD 10.3. In 2009, the retail price for one ecstasy pill ranged between USD 26-86 and the retail price for 1 g of cannabis ranged between USD 2-10. In 2010, 1 g of heroin retailed for about USD 89 in Seoul (SPO 2011b).

Sources of illicit drugs

Most of the crystalline methamphetamine found in the Republic of Korea has historically come from China (SPO 2010a), but increasing amounts of the drug are entering the country from Cambodia, Malaysia, South Africa, Taiwan Province of China as well as the Philippines (ARQ 2010). In 2009, nearly 58% of the methamphetamine seized in the country originated from China and 41% originated from South Africa (ARQ 2010). There are also indications that Cambodia has become a source of methamphetamine found in the country (INCB 2010a).

Sources for cannabis smuggled into the Republic of Korea are Sri Lanka, Thailand, the United States and the Russian Federation (SPO 2011c; ARQ 2010). Indoor cultivation of cannabis in private residences also occurs in the Republic of Korea (SPO 2010a). Libyan Arab Jamahiriya (45.8%) and the Netherlands (23.8%) were identified as the main sources of cannabis resin seized in the Republic of Korea in 2009 (ARQ 2010).

The Republic of Korea reported that 81.7% of the heroin seized in the country in 2009 originated from Cambodia. However, Cambodia has not officially reported any heroin manufacturing facilities and most of the heroin found in Cambodia originates from Myanmar (NACD 2010b). India was reported as another main source of heroin in the Republic of Korea, accounting for 17.5% of the heroin seized in the country (ARQ 2010).

Small-scale opium poppy cultivation occurs in the Republic of Korea, primarily for traditional medicine (SPO 2010a).

Trafficking – In 2009, 82% of the methamphetamine seized in the Republic of Korea was trafficked into the country by air and 18% was trafficked by sea. Methamphetamine traffickers who boarded flights in key source countries China and South Africa were reported to have transited in Qatar, Japan and Singapore. The Republic of Korea reported a strong decrease in methamphetamine trafficking into the

Table 90. Average retail price of crystalline methamphetamine in the Republic of Korea (USD), 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	Per gram	860	770	536	684	693

Source(s): SPO 2011a

country in 2009 (ARQ 2010). In recent years, several nationals of China, Philippines and Thailand have been arrested in the Republic of Korea for trafficking methamphetamine (SPO 2011a). Law enforcement authorities also report that methamphetamine originating in Taiwan Province of China is being trafficked to the Republic of Korea via Malaysia (SPO 2011c).

The Republic of Korea has also become a transit country for precursor chemicals used in the manufacture of methamphetamine and heroin. Several large consignments of acetic anhydride, the main precursor in the illicit manufacture of heroin, have been seized. The Republic of Korea has also been named as one of the source countries for ephedrine trafficked to Australia (INCB 2010a). In addition, the Republic of Korea is a source country for pharmaceutical preparations trafficked to countries in South-East Asia (SMART 2010).

Some of the heroin that is smuggled into the Republic of Korea is trafficked via Thailand and Cambodia by traffickers from Taiwan Province of China (SPO 2011c).

Forensic data

The 30 methamphetamine samples analysed in the Republic of Korea in 2010 had an average purity of 93.15% methamphetamine (SPO 2011d). Methamphetamine samples analysed in the Republic of Korea in 2009 had purities ranging from 36 to 98% methamphetamine. The average purity was 87.2% methamphetamine during the year. Common impurities found in the samples analysed in 2009 included acetic acid, benzaldehyde, dimethylamphetamine and P-2-P (ARQ 2010).



Emerging trends and concerns

- Crystalline methamphetamine is a significant and growing problem in Singapore. Use of the drug has increased for four consecutive years and seizures have increased for five consecutive years. In addition, the proportion of persons admitted to drug treatment for crystalline methamphetamine use continues to rise. Moreover, methamphetamine was the most commonly used drug among new drug users arrested in 2010.
- Heroin remains the primary drug threat in Singapore. In 2010, the amount of heroin No.3¹ seized in the country increased by 68%, and 62% of the drug users arrested during the year were heroin users. More than half of all drug users in drug treatment in 2010 were heroin users.
- Although there was a 40% increase in ketamine seizures in 2010, ketamine use and arrests have declined since 2006.
- Inhalant use has stabilized during the past few years. Inhalants were the second most commonly abused substance in Singapore in 2009 and the third most commonly abused substance in 2010.

Overview of the drug situation

The drug threat in Singapore has been contained, largely because of intensive law enforcement efforts and strict laws against drug trafficking and consumption. In addition, Singapore is not a producer of narcotic drugs or precursor chemicals. Drug traffickers in the country generally operate on a small scale with the majority of them trafficking drugs in small amounts (CNB 2011a).

Crystalline methamphetamine is a growing problem in Singapore. Methamphetamine use was first detected in the country in 1996. In 2009, the crystalline form of the drug replaced buprenorphine, a narcotic analgesic used in some countries to treat opium dependence, as the third most commonly used drug in the country. Methamphetamine pill use remains at far lower levels than crystalline methamphetamine use. Use, arrest and drug treatment figures related to ecstasy all have

shown an overall declining trend during the past few years.

Heroin use was first detected in Singapore in 1972 and heroin has been the main drug of use for most of the past few decades. Prior to 2004, heroin was the most commonly used drug in the country, but in that year the use of ketamine, nimetazepam², inhalants, methamphetamine and cannabis surpassed heroin. However, heroin use has increased each year since 2006, and in 2008 heroin reemerged as the primary drug of use in the country. In 2010, seizures, arrests and drug treatment admissions related to heroin all increased compared with the previous year.

Buprenorphine in the form of the pharmaceutical preparation Subutex was introduced in Singapore in 2004 to assist heroin users wean off of the drug and its introduction contributed to the considerable

¹ Low purity substance processed by adulterating heroin with other substances.

² A benzodiazepine group substance, known commonly on the street as Erimin 5, and available in 5 mg tablet form. It is legally available as a pharmaceutical in Japan. However, counterfeit products are also available.

decrease in the number of heroin users arrested in 2004 and 2005. However, buprenorphine was subsequently being diverted to the illicit market and many heroin users began to use buprenorphine. As a result, buprenorphine was classified as a Class A controlled drug³ in August 2006. While in 2006 and 2007 buprenorphine users accounted for the majority of drug users arrested, the number of buprenorphine users has significantly declined since, with buprenorphine users accounting for only 2% of all drug users arrested in 2010.

While seizures of ketamine increased by 40% in 2010, ketamine use and ketamine-related arrests have shown an overall declining trend since 2006. Use patterns of inhalants, the third most commonly used substance in the country, have shown a stable or declining trend during the past three years. The majority of inhalant users are below the age of 20 years.

In November 2010, the Government put mephedrone (4-MMC or 4-methylmethcathinone), as well as BZP and TFMPP⁴ under national control (CNB 2011b).

Patterns and trends of drug use

Drug use – In 2010, the use of methamphetamine, primarily in crystalline form, increased for the fourth consecutive year, with smoking being the main mode of administration. Methamphetamine was the most commonly used drug among new drug users arrested in 2010. Crystalline methamphetamine replaced buprenorphine as the third most commonly used drug

in Singapore in 2009. Ecstasy is not indicated to be a significant problem in the country and its use has declined for two successive years.

Heroin and methamphetamine were the top two substances of use in Singapore in 2010. Heroin use has increased each year since 2006. In 2010, heroin continued to be the most commonly used drug and accounted for approximately 62% of all drug-related arrests during the year. In addition, the number of new heroin users arrested during the year increased by 31% from the previous year.

In 2010, buprenorphine users accounted for 2% of all drug users arrested during the year.

The use of inhalants remains high, particularly among young drug users, but has shown a declining trend since 2008. Of the inhalant users arrested in 2010, 69% were under the age of 20 (CNB 2011b).

Ketamine was ranked as the number one drug of concern in 2004 but its use has shown a general decline since 2005, and it has been ranked as the fourth or fifth most commonly used drug during the past four years.

The use of nimetazepam, a benzodiazepine-related substance sold under the brand name Erimin, was reported as decreasing in 2010. In 2005, nimetazepam ranked as the most commonly used illicit substance. Nimetazepam, which is included in Schedule IV of the 1971 Convention on Psychotropic Substances, has been a controlled substance in Singapore since

Table 91. Rank of use of selected drugs in Singapore, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine	5	4	4	3	2
Ecstasy	8	8	7	8	8
Ketamine	3	5	5	5	4
Buprenorphine	1	1	3	4	7
Cannabis herb	6	7	8	6	5
Heroin	7	2	1	1	1
Inhalants	2	3	2	2	3
Nimetazepam	4	6	6	7	6

Source(s): DAINAP

³ The Misuse of Drugs Act (MDA) classifies controlled substances into 'Class A', 'Class B' and 'Class C'. Examples of Class A substances include amphetamine, buprenorphine, cannabis, cocaine and methamphetamine (AGCMEQ 2010).

⁴ 3-trifluoromethylphenylpiperazine

Table 92. Trend in use of selected drugs in Singapore, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine	↓	↑	↑	↑	↑
Ecstasy	↓	↑	↑	↓	↓
Ketamine	↓	↓	↓	↑	↓
Buprenorphine	●	↑	↓	↓	↓
Cannabis herb	↑	↓	↓	↑	↔
Heroin	↑	↑	↑	↑	↑
Inhalants	↑	↑	↓	↔	↓
Nimetazepam	↓	↓	↑	↓	↓

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, ● = Not reported

Source(s): DAINAP

1992 and there have been reports of its availability on the streets in combination with methamphetamine.

Cannabis herb was the fifth ranked drug of use and its use was reported as stable in 2010.

Injecting drug use

Injection remains the primary mode of administration for buprenorphine and the secondary mode of administration for heroin and crystalline methamphetamine (smoking is the primary mode of administration for both drugs). The number of self-declared injecting drug users in Singapore declined by approximately 12% to 291 persons in 2010 compared with 330 persons in 2009. At the end of 2010, the cumulative total of Singapore nationals reported to have contracted HIV/AIDS since 1985 was 4,845. Of these, 4,359 were men and 486 were women. Injecting drug use accounted for about 2% of all HIV cases in Singapore in the period 1985-2010 (105 cases) (MOH Singapore 2011).

Drug treatment

The Misuse of Drugs Act (MDA) of 1973 stipulates the compulsory committal of all arrested first and second time drug use offenders to a Drug Rehabilitation Centre (DRC) for treatment and rehabilitation.⁵ Treatment services for users of ATS and other synthetic drugs were offered for the first time in 2005. Treatment services were also extended to buprenorphine users in 2006 and to users of cocaine and cannabis in 2007 (CNB 2011a).

The number of persons treated for drug use increased in 2010 to 688, a 29% increase compared with the number of persons treated in 2009 and a 43% increase compared with 2008. Of those 688 persons, 209 persons (30%) were treated for methamphetamine use. The proportion of methamphetamine users among new treatment admissions is higher, about 43%, or 145 of 340 persons. Percentages show an increase compared to 2009 when 27% of all treatment admissions and 36% of new treatment admissions were for methamphetamine use. The number of women admitted to treatment for methamphetamine use

Table 93. Drug treatment admissions in Singapore, 2010

Drug type	New admissions			All admissions		
	Men	Women	Total	Men	Women	Total
Methamphetamine	107	38	145	158	51	209
Ecstasy	5	1	6	5	1	6
Ketamine	7	0	7	16	6	22
Buprenorphine	1	0	1	11	2	13
Cannabis	30	4	34	45	4	49
Heroin	99	34	133	297	67	364
Nimetazepam	12	2	14	22	3	25
Total	261	79	340	554	134	688

Source(s): DAINAP

⁵ Treatment is provided only to Singapore nationals and permanent residents.

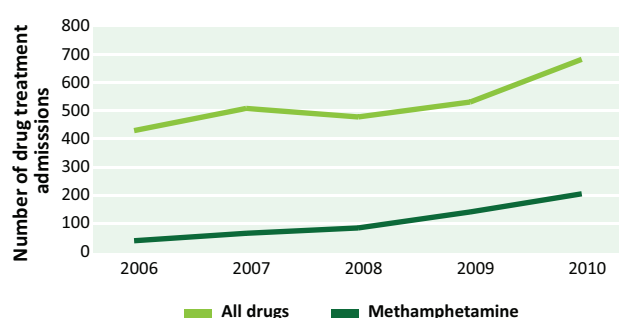
Table 94. Drug treatment admissions by drug type in Singapore, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine	41	69	87	143	209
Ecstasy	36	35	23	7	6
Ketamine	77	48	31	42	22
Buprenorphine	165	140	75	26	13
Cannabis herb	0	10	27	27	49
Heroin	32	154	201	242	364
Nimetazepam	82	54	37	48	25
Total	433	510	481	535	688

Source(s): DAINAP

is comparatively high in Singapore. In 2009 and 2010, women accounted for roughly one quarter of all persons treated for methamphetamine use. In addition, there was a slight increase in the number of women in drug treatment for methamphetamine in 2010 (51) compared with 2009 (40).

Figure 32. Methamphetamine and all drugs treatment admissions in Singapore, 2006-2010



Source(s): DAINAP

Since 2007, heroin has been the primary drug of use among persons in drug treatment in Singapore. In 2010, the 364 persons who received treatment for heroin use accounted for 53% of all persons who received drug treatment during the year. By comparison, 45% (242 persons) of all persons admitted to drug treatment in 2009 were heroin users. The number of buprenorphine users admitted to drug treatment continued to decline and in 2010 accounted for less than 2% of persons in drug treatment.

Drug-related arrests, seizures and prices

Drug-related arrests⁶ – The total number of drug-related arrests has remained comparatively stable since 2007. However, the number of methamphetamine users arrested has increased each year since 2007, increasing more than five-fold since 2006, when 124 methamphetamine users were arrested. The 702 persons arrested for methamphetamine use in 2010 represent 24% of all drug users arrested during the year, which represents a 30% increase in the total number of methamphetamine users arrested in 2009. In addition, of the 1,327 new drug users arrested in 2010, 531 persons, or 40%, were new methamphetamine users, representing a 45% increase from the previous year. The number of persons arrested for ecstasy use during the past few years totaled 78 in 2007, 110 in 2008, 39 in 2009 and 17 in 2010.

In 2010, repeat offenders continued to make up the majority of arrested drug users, accounting for 54% of all drug-related arrests in 2010. Overall, a total of 2,887 drug users were arrested in 2010, 10% higher than the 2,616 drug users arrested during the previous year and more than double the number of arrested drug users in 2006.

In 2010, the number of buprenorphine users arrested declined for the fourth successive year and accounted for only 2% of the total drug users arrested during the year. The 54 buprenorphine users arrested in 2010 represent a 73% decrease compared with the previous year.

Arrests for heroin use increased in 2010 for the fifth consecutive year. The 1,787 heroin users arrested during the year represent 62% of all drug users arrested in 2010, a 25% increase compared with 2009. Of the 1,787 heroin users arrested in 2010, 71% (1,264 persons) were repeat offenders.

⁶ Drug-related arrest data for Singapore refer to the number of drug users arrested and do not include drug traffickers and manufacturers.

Table 95. Drug-related arrests in Singapore, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine	124	221	404	542	702
Ecstasy	67	78	110	39	17
Ketamine	186	151	138	162	138
Buprenorphine	419	841	444	202	54
Cannabis herb	122	102	88	126	131
Heroin	116	690	1,216	1,425	1,787
Nimetzapam	181	128	137	120	58
Opium (raw and prepared)	3	0	0	0	0
Total	1,218	2,211	2,537	2,616	2,887

Source(s): DAINAP

Arrests of ketamine users continued to show a downward trend in 2010 with 138 ketamine users arrested during the year compared with 162 ketamine users arrested in 2009, representing a 15% decline.

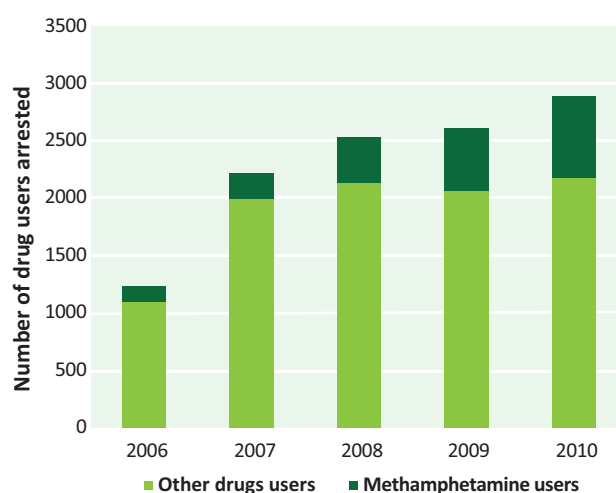
In 2010, about 87% of drug users arrested were men. This was roughly the same number as in preceding years.

Table 96. Drug-related arrests in Singapore by drug and gender, 2010

Drug type	Men	Women	Total
Methamphetamine	582	120	702
Ecstasy	11	6	17
Ketamine	111	27	138
Buprenorphine	48	6	54
Cannabis herb	125	6	131
Heroin	1,579	208	1,787
Nimetzapam	55	3	58
Total for all drugs	2,511	376	2,887

Source(s): DAINAP

Figure 33. Number of drug users arrested in Singapore, 2010



Source(s): DAINAP

Drug seizures – The total number of drug seizures and the quantities seized by law enforcement officials in Singapore are small in comparison with the quantities seized in neighbouring countries. However, overall drug seizures have shown an increasing trend during the past five years. In 2010, an estimated SGD 10.4 million worth of drugs were seized in the country compared with SGD 6.7 million in 2009, representing an increase in value of about 55% (CNB 2011b).

Seizures of crystalline methamphetamine in Singapore have continuously increased over the past five years. In 2010, a total of 5.6 kg were seized compared with approximately 3.7 kg in the previous year, representing a 50% increase. The number of crystalline methamphetamine seizure cases has also increased each year since 2006 when 96 cases were reported compared with 300 cases reported in 2010. Seizures of methamphetamine pills, however, declined by 72% in 2010, with 352 pills seized during the year compared with 1,237 pills seized in 2009, while the number of ecstasy pills seized in 2010 decreased by 10% compared with the previous year.

Ketamine seizures increased in 2010, to 12 kg which represents a 40% increase from the quantity seized in 2009.

Heroin seizures also rose in 2010 with 49 kg of the drug seized, an increase of 68% compared with the previous year. In October 2010, officials from the Central Narcotics Bureau (CNB) arrested three suspects - including the suspected leader of a local drug trafficking organization - and seized almost 5 kg of heroin. It was the largest single heroin seizure recorded in the country since 2008 (CNB 2011b).

Cannabis herb seizures increased by 21% in 2010 compared with the previous year. Seizures of

nimetazepam increased by 3% in 2010 compared with 2009.

The general increase in drug seizure figures since 2006 can be attributed to the sustained law enforcement efforts in Singapore, in particular the enhanced border security measures and improved detection of contraband items, including drugs, at national borders. In addition, the rise in arrests related to seizures of methamphetamine and heroin could also be attributable to the increasing supply of the two drugs in the region (CNB 2011b).

Drug prices – Street retail prices of crystalline methamphetamine remained relatively stable in 2010 at about USD 145 to USD 270 per gram. Prices were lowest in the first quarter of 2010, ranging between USD 145 and USD 253, and in 2009 prices were lowest in the fourth quarter, ranging between USD 143 and USD 200. Retail methamphetamine pill prices edged upward in 2010 to USD 8 to USD 14 per pill, after showing a decline in 2009. The retail price of ecstasy pills has remained stable during the past few years.

The street price for heroin ranged from about USD 22 to USD 24 per 0.2 grams (one 'straw') in 2010, with prices lowest in the first quarter of the year. Cannabis herb prices dropped in the first quarter of 2010, ranging

from USD 14 to USD 18 per 1.5 grams compared with USD 29 to USD 46 during 2009. However, the price of cannabis herb rose to between USD 31 and USD 40 for the next three quarters of 2010.

Sources of illicit drugs

Illicit drugs are mainly trafficked into Singapore from neighbouring countries and are usually concealed on the person or in vehicles. Larger quantities are smuggled into the country in specially constructed compartments of motor vehicles (CNB 2011a).

Trafficking – Illicit manufacture of drugs or precursor chemicals has not been reported from Singapore. Drugs are primarily trafficked into Singapore from neighbouring countries either by sea, road or air.

Forensic data

Crystalline methamphetamine samples analysed in 2010 showed an average purity of 78% methamphetamine, in line with average purity figures since 2006. Methamphetamine pill composition was approximately 3% methamphetamine in 2010. The low and declining purity of methamphetamine pills in Singapore, compared with methamphetamine

Table 97. Seizures of selected illicit drugs in Singapore, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Crystalline methamphetamine	kg	0.5	1.5	1.8	3.7	5.6
Methamphetamine pills	pills	22	498	1,135	1,237	352
Ecstasy	pills	4,236	7,034	7,415	8,985	8,085
Ketamine	kg	5.3	11.0	14.0	8.7	12.2
Buprenorphine	tablets	6,432	3,359	2,037	1,094	296
Cannabis herb	kg	14.9	30.8	3.3	7.1	8.5
Heroin	kg	6.1	17.2	44.5	29.1	49.0
Nimetazepam	tablets	38,230	24,926	38,362	42,236	43,504

Source(s): DAINAP

Table 98. Retail prices of selected drugs in Singapore (USD), 2008-2010

Drug type	Measurement	2008	2009	2010
Methamphetamine pills	per pill	12 – 22	7 – 11	8 – 14
Crystalline methamphetamine	per gram	138 – 266	143 – 274	145 – 270
Ecstasy	per pill	17 – 25	17 – 24	16 – 24
Ketamine	per gram	27 – 36	21 – 34	22 – 32
Buprenorphine	per tablet	55 – 83	55 – 86	58 – 91
Cannabis herb	per 1.5 grams	33 – 37	29 – 46	14 – 40
Heroin	per 1 'straw' of 0.2 grams	20 – 36	21 – 24	22 – 24
Nimetazepam	per tablet	5 – 6	5 – 6	5 – 6

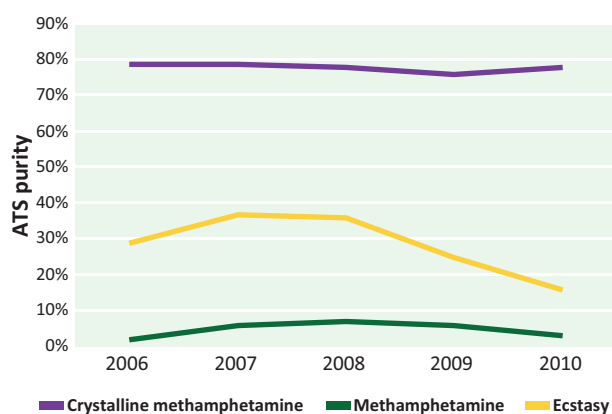
Source(s): DAINAP (Note: figures are not adjusted for inflation or currency fluctuations)

pills analysed in Thailand (which contain roughly 10-25% methamphetamine) may indicate that methamphetamine pills found in Singapore are being repressed and adulterated before being smuggled into the country (CNB 2011c).

Pills sold as 'ecstasy' had an average composition of approximately 16% MDMA. MDMA content in ecstasy pills in Singapore has declined for three consecutive years (CNB 2011c). This may be related to a shortage of MDMA reported in Europe.

Singapore reported a low purity of 4% for heroin No. 3 (from 710 samples of less than 15 grams) in 2010 compared with 3.8% in 2009 and 4.4% in 2008. Ketamine has also remained largely unchanged at high purity of about 80% in 2010 compared with 83% in 2009.

Figure 34. Purity of ATS in Singapore, 2006-2010



Source(s): DAINAP; CNB 2011c



Emerging trends and concerns

- Methamphetamine pills remain the primary drug of use in Thailand and their use continues to rise.
- The market for crystalline methamphetamine in Thailand shows signs of expansion as indicated by the significant and continual increases in seizures, arrests and treatment demand related to crystalline methamphetamine.
- Transnational organized criminal syndicates, particularly from West Africa and the Islamic Republic of Iran, continue to pose a threat.
- Thai law enforcement agencies have reported the dismantling of about 10 small-scale methamphetamine pill re-pressing operations in Thailand during the past two years.
- The trafficking of pharmaceutical preparations containing pseudoephedrine into and through Thailand to methamphetamine manufacturing centres in neighbouring Cambodia and Myanmar has risen significantly during the past few years.

Overview of the drug situation

Thailand has one of the largest markets for methamphetamine in the region. Methamphetamine pills remain the most commonly used drug in the country. In addition, the market for crystalline methamphetamine continues to expand. Seizures of methamphetamine in both forms have increased significantly in recent years and this trend continued in 2010.

The majority of methamphetamine seized in Thailand is from Myanmar. However, trafficking by transnational organized criminal groups from the Islamic Republic of Iran and West Africa has been on the rise during the past few years. In addition, small amounts of methamphetamine are domestically manufactured in Thailand and this trend appears to have accelerated in recent years. Since 2008, large quantities of pharmaceutical preparations containing pseudoephedrine, the primary precursor used in the manufacture of methamphetamine, have been seized in the country. Thailand continues to be used

as a transit country for the smuggling of precursor chemicals and illicit drugs to countries in the region.

The illicit cultivation of opium poppy and cannabis continues on a limited scale. The use of kratom¹ continues to be widespread in the southern part of Thailand.

Patterns and trends of drug use

Drug use – Methamphetamine in pill form remained the most commonly used drug in Thailand in 2010, according to government expert perception. Methamphetamine pills have ranked as the most commonly used drug in Thailand each year since 2004, except in 2008, when it ranked third, behind cannabis and kratom. The primary mode of administration

¹ Kratom is a substance derived from *mitragyna speciosa* and produces both stimulant and sedative effects. Kratom is used primarily in the southern part of Thailand.

for methamphetamine pills is smoking, followed by oral ingestion and, more recently, injection. In 2010, an estimated 78% of all drug users in Thailand used methamphetamine pills. This figure has remained stable during the past few years (ONCB 2011e).

Crystalline methamphetamine ranked as the seventh most commonly used drug in Thailand in 2010 and its use has expanded considerably in recent years. In 2010, an estimated 4.3% of all drug users in the country used crystalline methamphetamine, which is double the percentage of estimated crystalline methamphetamine users in 2009 and nearly four times higher than the figure in 2006 (ONCB 2011e).

Ecstasy use remains limited in Thailand and has been in decline for the past five years, reflecting the global trend.

Cannabis use continues to be widespread in Thailand. In 2010, cannabis was the second most

commonly used drug in the country and its use was reported to have increased in each of the past five years.

The use of opium and heroin in Thailand remains far lower than in previous decades. However, heroin use has increased in each of the past two years.

Ketamine use, first reported in Thailand in 1989, is generally limited to younger drug users and has declined of late (ONCB 2011a). The use of inhalants remains a problem in Thailand. In 2010, inhalants ranked as the third most common substance of use.

Kratom use is predominantly a problem in the southern part of Thailand. Traditionally, kratom users chewed fresh kratom leaves or orally ingested the leaves in powder form. More recently, however, it has become increasingly popular for users to boil the kratom leaves and then mix the resulting liquid in a cocktail with cough syrup, a soft drink and ice cubes.

Table 99. Rank in use of selected drugs in Thailand, 2006-2010

Drug type	2006	2007	2008	2009	2010*
Crystalline methamphetamine	3	3	8	7	7
Methamphetamine pills	1	1	3	1	1
Ecstasy	6	6	7	9	9
Ketamine	3	6	9	•	•
Cannabis herb	2	2	1	2	2
Heroin	8	5	6	5	5
Inhalants	4	3	4	3	3
Kratom	10	4	2	6	6
Opium	9	9	5	4	4

• = Not reported. *Thailand conducts drug use prevalence surveys every two years. Hence, drug use rankings for 2010 are unchanged from the previous year.

Source(s): DAINAP

Table 100. Trend in use of selected drugs in Thailand, 2006-2010

Drug type	2006	2007	2008	2009	2010*
Crystalline methamphetamine	↑	↓	↑	↑	↑
Methamphetamine pills	↓	↑	↑	↔	↑
Ecstasy	↓	↑	↓	↓	↓
Ketamine	↑	↓	↑	•	•
Heroin	↓	↑	↓	↑	↑
Cannabis herb	↑	↑	↑	↑	↑

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported. *Thailand conducts drug use prevalence surveys every two years. Hence, drug use trends for 2010 are unchanged from the previous year, with the exception of methamphetamine pill use, which increased in 2010 as indicated by increasing arrests, seizures and treatment demand related to methamphetamine pills during the year.

Source(s): DAINAP

Injecting drug use

Most injecting drug users in Thailand inject opiates as well as midazolam.² Injection is the primary mode of administration for heroin and the second most common mode of administration for opium (smoking being the primary mode). In addition, the injecting use of methamphetamine has emerged in recent years. Injection is the second most common mode of administration for crystalline methamphetamine and the third most common mode of administration for methamphetamine pills (smoking and oral ingestion being the most common modes).

There are approximately 30,000 injecting drug users (IDUs) in Thailand, according to the Bureau of Epidemiology in Thailand. During the 2008-2009 period, the estimated HIV prevalence among IDUs in Thailand was 48-52% (NAPAC 2010). According to a survey conducted by Khon Kaen University in Thailand, of the IDUs who underwent drug treatment in compulsory treatment facilities in Thailand in 2009, an estimated 35% were infected with HIV (ONCB 2010c).

Of the 468 IDUs surveyed by the Mitsampan Community Research Project in 2008 and 2009, 37% had reported injecting methamphetamine twice or more per week during the previous six months. A total of 57% of the participants reported injecting midazolam on a daily basis during the previous six months (MCRP 2011).

Drug treatment

In 2010, a total of 117,184 persons underwent drug treatment in Thailand, a 10% increase from the number of persons who underwent drug treatment in 2009. Methamphetamine pills continued to be the most common drug of use among persons who underwent drug treatment in 2010 and were the primary drug of use for 84% of the drug users who received treatment in specialized treatment facilities and correctional institutions during the year. This figure has remained relatively stable since 2004. However, the total number of persons who received treatment for methamphetamine pill use in 2010

(98,077 persons) represents a 13% increase from the previous year (86,816 persons). In addition, there was a notable increase in the number of crystalline methamphetamine users admitted to drug treatment in 2010. The 2,019 persons who received treatment for crystalline methamphetamine use during the year represent a near two-and-a-half-fold increase compared with the 843 persons treated for crystalline methamphetamine use in 2009. Treatment admissions related to ecstasy remain low and declined by 35% in 2010 to 184 persons compared with 284 persons in 2009 (ONCB 2011c).

Most ATS users who enter drug treatment in Thailand are treated at general hospitals, followed by general health clinics, specialized drug treatment services and general practitioners. ATS treatment services are also offered at psychiatric facilities, religious institutions, and non-governmental organization centres. Drug dependency treatment programmes are also available through the correctional system in Thailand.

Table 101. Drug treatment admissions in Thailand, 2010

Drug type	New admissions		
	Men	Women	Total
Methamphetamine pills	89,822	8,255	98,077
Crystalline methamphetamine	1,214	805	2,019
Ecstasy	102	82	184
Ketamine	6	5	11
Cannabis	6,664	77	6,741
Cocaine	11	7	18
Heroin	1,276	62	1,338
Opium	1,451	436	1,887
Inhalants	4,037	115	4,152
Kratom (leaf and liquid)	2,136	53	2,189
Psychotropic substances*	71	12	83
Others	415	70	485
Total	107,205	9,979	117,184

* Psychotropic substances include benzodiazepines such as nimetazepam, diazepam and midazolam as well as other unspecified substances and illicit drugs.

Source(s): ONCB 2011c

² Midazolam (often sold under the brand name Dormicum) is a drug in the benzodiazepine class which is often used as a sedative. Midazolam is a controlled substance under Schedule IV of the 1971 Convention on Psychotropic Substances.

Drug-related arrests, seizures and prices

Drug-related arrests – The total number of drug-related arrests in Thailand amounted to 174,725 in 2010, representing a 28% increase from the previous year. ATS-related arrests accounted for almost 81% of all drug-related arrests in 2010. By comparison, the proportion of all drug-related arrests involving ATS was 86% in 2009, 81% in 2008, 78% in 2007 and 72% in 2006.

The number of persons arrested for methamphetamine pills in 2010 totaled 132,413, representing nearly 76% of all drug-related arrests during the year and a 17% increase compared with the number of persons arrested for methamphetamine pills in 2009. Arrests related to crystalline methamphetamine have increased each year since 2006. In 2010, that figure jumped to 8,053 persons, the highest total ever reported. An increasing number of drug couriers from the Islamic Republic of Iran have been arrested for attempting to smuggle crystalline methamphetamine into Thailand. In 2010, 75 Iranian couriers were arrested at Suvarnabhumi International Airport (NSB 2011a) compared with 12 Iranian couriers arrested at the airport in 2009 (ONCB 2010b).

Arrests related to ecstasy have shown a declining trend during the past five years. In 2010, the number of ecstasy-related arrests was 208, representing a 42%

decline from the 357 persons arrested in 2009 and the lowest total reported in the past five years.

The number of arrests related to kratom has increased in each of the past four years. This is most likely due to increased law enforcement efforts targeting the illicit trafficking and use of kratom. In 2010, the 14,556 persons arrested for kratom accounted for 8% of all drug-related arrests.

The number of arrests related to heroin has risen for three successive years, and in 2010 showed a 21% increase from the previous year. However, despite this increase, the number of persons arrested for opiates (heroin and opium) in Thailand remained comparatively small, accounting for less than 1% of the total drug-related arrests during the year.

Ketamine-related arrests totaled 244 persons in 2010, representing a 41% increase from the previous year and the highest total reported in five years.

Drug seizures – Seizures of methamphetamine pills in 2010 totaled 50.4 million, representing an increase of 89% compared with 2009 and the highest total since 2003 when approximately 64.2 million pills were seized. The sharp rise in seizures is primarily due to the increase in methamphetamine pill trafficking from neighbouring Myanmar.

Table 102. Drug-related arrests in Thailand, 2006-2010

Drug type	2006	2007	2008	2009	2010
Methamphetamine pills	60,680	79,149	118,613	112,956	132,413
Crystalline methamphetamine	1,136	1,574	2,163	2,967	8,053
Ecstasy	459	410	550	357	208
Ketamine	164	85	194	173	244
Cannabis herb	10,544	9,821	11,677	12,485	12,116
Cannabis resin	5	12	12	17	28
Cocaine	192	132	105	86	128
Codeine	79	350	•	8	4
Heroin	459	443	461	647	784
Inhalants	7,429	6,015	5,908	3,427	4,078
Kratom	2,895	4,683	4,940	•	14,556
Opium	736	835	1,018	608	768
Psychotropics*	1,419	726	595	1,177	1,213
Others	•	112	3,679	1,068	132
Total	86,197	104,347	149,915	135,976	174,725

• = Not reported. *Psychotropics include benzodiazepines such as nimetazepam, diazepam, midazolam and other types.

Source(s): DAINAP

Seizures of crystalline methamphetamine increased for the third successive year in 2010. The 733 kg seized in 2010 represent a three-and-a-half-fold increase from the previous year and the highest total ever reported from Thailand. The increase is possibly a reflection of international drug trafficking networks targeting Thailand as both a destination for crystalline methamphetamine and as a regional hub for the further trafficking of the drug to third countries in the region. In 2010, 167 kg of crystalline methamphetamine were seized from couriers from the Islamic Republic of Iran (NSB 2011a).

In 2010, ecstasy seizures dropped sharply for the second consecutive year. The 16,081 pills seized during the year represent a 72% decline from the number of pills seized in 2009 and the lowest total reported during the past five years. The drop in the quantity of ecstasy seized is likely due to the declining manufacture and availability of ecstasy from large manufacturing regions such as Europe.

From 2008 through 2010, a total of 37 million pharmaceutical preparations containing pseudoephedrine and 192 kg of bulk pseudoephedrine were seized in Thailand, including 33.4 million pseudoephedrine tablets seized in 13 separate cases in 2010 (ONCB 2011e; ONCB 2011b). This is an indication that drug traffickers are smuggling larger quantities of pharmaceuticals through Thailand to illicit methamphetamine manufacturing centres. The first

seizure of pseudoephedrine preparations in Thailand was reported in 2008.

Ketamine seizures increased nine-fold in 2010, to 172 kg compared with 19 kg seized in the previous year. The sharp increase is due to the seizure of roughly 150 kg at Suvarnabhumi International Airport from air passenger couriers in 2010 (ONCB 2011a).

In 2010, the amounts of cannabis herb and cannabis resin seized were the highest totals reported during the past five years. Cannabis herb seizures in 2010 amounted to almost 19 mt, representing an 8% increase from the previous year. Cannabis resin seizures increased five-fold in 2010, to more than 55 kg compared with almost 11 kg seized in 2009.

Cocaine seizures increased considerably in 2010 to more than 35 kg compared with 9 kg seized in 2009. The amount of cocaine seized was the highest total reported in four years.

Seizures of heroin declined for the third consecutive year in 2010. However, opium seizures increased nearly three-fold in 2010, totaling 304 kg, the highest total reported in the past four years.

In 2010, seizures of kratom, in both raw leaf and liquid forms, showed the highest total reported in five years.

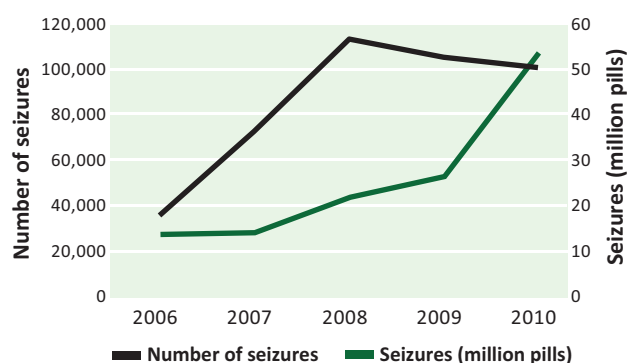
Table 103. Seizures of selected drugs in Thailand, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010
Methamphetamine pills	pills	13,820,000	14,340,000	22,115,911	26,640,206	50,400,000***
Crystalline methamphetamine	kg	92.2	47.4	52.9	209.0	733.0
Ecstasy	pills	26,656	315,444	486,533*	58,024	16,081
Ketamine	kg	22.7	2.8	18.1	18.9	172.0
Benzodiazepines	kg	•	•	•	•	3,212.8
Cannabis herb	kg	11,865.0	15,384.0	18,862.0	17,548.0	18,927.1
Cannabis resin	kg	10.3	0.6	29.9	10.8	55.4
Cocaine	kg	36.8	18.0	11.5	9.2	35.3
Codeine	kg	13.5	861.0	•	4.7	14.0
Heroin	kg	92.5	293.4	199.8	142.8	138.8
Inhalants	kg	294.0	129.3	165.3	116.5	113.0
Kratom	kg	3,942.0	36,367.0	12,156.0	•	39,076.4**
Opium	kg	767.5	139.7	111.3	102.3	304.4

• = Not reported. *2008 pill seizures converted into kg equivalents at 1 pill = 300 mg. **Includes 28,653.3 kg of kratom leaves and 10,723.1 kg of kratom liquid (boil).

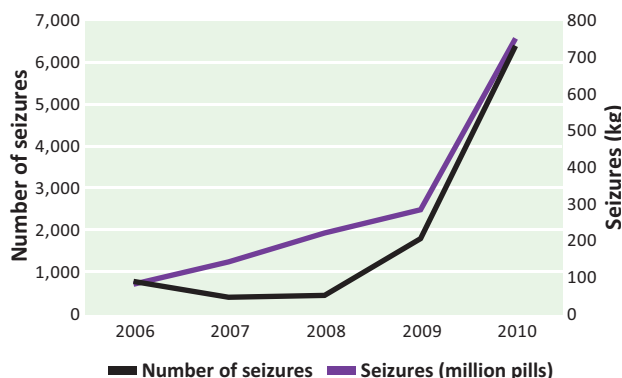
Source(s): DAINAP; ***ONCB 2011a

Figure 35. Methamphetamine pill seizures in Thailand, 2006-2010



Source(s): DAINAP

Figure 36. Crystalline methamphetamine seizures in Thailand, 2006-2010



Source(s): DAINAP

Table 104. Retail prices for ATS in Thailand (USD), 2006-2010

Drug type	Measurement*	2006	2007	2008	2009	2010**
Methamphetamine pills	per pill	6-9	3-14	6-10	7-8.5	5-10
Crystalline methamphetamine	per gram	72-86	43-86	71-86	71 – 86	67-100
Ecstasy	per pill	14.5-19.5	9-25	23-29	23-35	12-18

Calculated based on the exchange rate of 1 USD = 35 Baht. *Assumes price at retail purity levels, not per pure gram.

Source(s): DAINAP; **2010 data from ONCB 2011a and ONCB 2011f

Drug prices – The price of methamphetamine pills has remained relatively stable during the past few years. Prices continued to be lowest in the northern parts of the country, which are located nearer to illicit manufacturing centres in Myanmar.

Sources of illicit drugs

Myanmar is the origin of the vast majority of methamphetamine pills seized in Thailand, although some quantities may also originate from Lao PDR (INCB 2010a). In addition, the small-scale domestic manufacture of methamphetamine pills in Thailand continues. Since 2009, law enforcement authorities have seized approximately 10 small-scale methamphetamine pill pressing operations located on the outskirts of Bangkok and in surrounding provinces as well as in the northern province of Chiang Rai (ONCB 2010a). In 2010, two single-punch methamphetamine pressing machines were seized in separate incidents in Pathum Thani province, adjacent to Bangkok, in February and in July. In May 2010, two self-made hydraulic pill press machines were seized along with chemicals and various equipment used in the illicit manufacture of methamphetamine. Authorities also arrested 11 suspects who were believed to have been part of a drug-trafficking network that was operating from Khlong Prem prison in Bangkok. The

network is believed to have segmented the different stages of manufacture across three provinces. In July 2010, a Swedish national was arrested in the eastern province of Rayong for manufacturing crystalline methamphetamine in his home (ONCB 2011d). The seizure of methamphetamine manufacturing equipment continued to be seen in Thailand in 2011.

Most of the crystalline methamphetamine seized in Thailand originates from Myanmar, and, to a much lesser extent, Cambodia (ONCB 2010b). Since 2009, sizeable quantities of methamphetamine in crystalline and liquid form smuggled from the Islamic Republic of Iran have been seized at Suvarnabhumi International Airport in Bangkok. Crystalline methamphetamine manufacture remains relatively uncommon in Thailand but a few small illicit manufacturing facilities have been seized since 2009. Ecstasy seized in Thailand is believed to originate primarily from the Netherlands (ONCB 2010b).

Cannabis cultivation continues in Thailand but has declined sharply over the past two decades. Most cannabis seized in Thailand is smuggled through the country from neighbouring countries, Lao PDR in particular, destined for domestic and international markets (INCB 2010a; ONCB 2010b).

Over the past decades, opium cultivation in Thailand has declined to insignificant levels. During the 2009-2010 period opium poppy cultivation was estimated at 288 ha, of which about 96% was eradicated by Thai law enforcement authorities. Most of the opium and heroin available on the illicit market in Thailand originates from Myanmar. However, some quantities also originate from West Asia, in particular Afghanistan (UNODC 2011).

Trafficking – Methamphetamine pills are mostly trafficked into Thailand across the northern border with Myanmar, with smaller quantities smuggled in from Lao PDR and Cambodia.

Crystalline methamphetamine is trafficked into Thailand from Myanmar and Cambodia both for domestic use and for further trafficking to Malaysia, Philippines, Japan and Hong Kong, China. Increasing quantities of crystalline methamphetamine are trafficked into Thailand from the Islamic Republic of Iran, often by air couriers on flights that originate in Tehran and either enter Bangkok directly or transit through, *inter alia*, Bahrain, Iraq, Jordan, Qatar, Syria and Turkey (ONCB 2010b).

West African drug trafficking organizations also traffic methamphetamine into Thailand, primarily by air passenger couriers. The key embarkation locations used include Benin, Ethiopia, Ghana, Kenya, Mali, Nigeria and South Africa (ONCB 2010b; ONCB 2011a). Couriers are typically nationals of Thailand, Nigeria, Ghana, Malaysia and the Philippines (NSB 2011a).

Malaysian-Chinese syndicates are also involved in trafficking crystalline methamphetamine from northern Thailand to Bangkok, for further trafficking to Indonesia and the Philippines (NSB 2011a).

Some quantities of diverted pharmaceutical preparations containing pseudoephedrine that have been seized in Thailand since 2008 are manufactured domestically. However, most of the pharmaceutical preparations originate from Malaysia, Singapore and, increasingly, the Republic of Korea. Most seizures have occurred near border areas and at Suvarnabhumi International Airport (ONCB 2010b). Pharmaceutical preparations containing pseudoephedrine (e.g. TRIDIN-P) produced in Malaysia and Singapore are smuggled overland into Thailand. In 2010, several large consignments were trafficked into Thailand from the Republic of Korea by air and sea

routes (ONCB 2011b). The Office of the Narcotics Control Board (ONCB) estimates that at least 100 million pseudoephedrine preparations were shipped through Thailand to Cambodia and Myanmar in 2010 (ONCB 2011b).

Ecstasy is primarily smuggled into Thailand from Europe by air passenger couriers. However, a large portion of the ecstasy found in Thailand is trafficked across its land border with Malaysia by drug trafficking organizations based in Malaysia and Singapore (ONCB 2010b).

Heroin is trafficked into Thailand primarily from across its northern border with Myanmar. Thailand is also a transit country for heroin trafficked from Myanmar to the global market. Increasing amounts of heroin are being trafficked into Thailand from Afghanistan by air passenger couriers recruited by West African drug trafficking organizations (ONCB 2010c). Key trafficking routes include flights that originate in India and transit through the United Arab Emirates, as well as flights that originate in Pakistan and transit through Malaysia. Some of the heroin trafficked along these routes is destined for China (ONCB 2010b).

African drug trafficking groups continue to play a key role in the trafficking of cocaine from South America to Thailand by air passenger couriers (ONCB 2010b). Key trafficking routes for cocaine include flights that originate from Peru and Brazil and transit through the United Arab Emirates, Philippines, Benin and India before arriving in Thailand (ONCB 2010b). Nationals of Thailand, Philippines and Nigeria are often used as cocaine couriers (NSB 2011a). Cocaine has also been trafficked from South America by West African drug trafficking groups via Malaysia and Cambodia before entering Thailand (NSB 2010).

Ketamine, in both liquid and powder form, is primarily smuggled into Thailand overland from Malaysia and Cambodia. In 2010, seven Indian ketamine couriers were arrested at Suvarnabhumi International Airport for attempting to smuggle 150 kg of ketamine powder into Thailand (ONCB 2010b).

Forensic data

Methamphetamine pills in Thailand typically weigh about 90 mg, contain 10 to 25% methamphetamine

and 60 to 70% caffeine (ONCB 2010a). In 2009, methamphetamine pill samples analysed in Thailand showed purities of 10 to 28% methamphetamine.

Crystalline methamphetamine trafficked into Thailand from the Islamic Republic of Iran is of very high purity (NSB 2010).



Emerging trends and concerns

- The methamphetamine market in Viet Nam continues to expand.
- Limited data are available regarding the extent of use, seizures, arrests and treatment demand for amphetamine-type stimulants (ATS).
- Treatment services for the growing number of users of ATS remain inadequate.
- The prevalence rate of injecting drug users reported to be living with HIV/AIDS remains alarmingly high.
- International drug trafficking organizations, in particular from West Africa, continue to target Viet Nam for the trafficking of ATS, cocaine and heroin into and through Viet Nam to international markets.

Overview of the drug situation

Heroin emerged in the 1990s as the primary drug of use in Viet Nam, overtaking opium which had long been the dominant drug of use in the country. Since 2003, however, the market for methamphetamine and ecstasy in Viet Nam has expanded continuously. In 2010, ATS overtook opium as the second most commonly used drug type, after heroin. Crystalline methamphetamine use, which was first reported in Viet Nam in 2008, has since risen significantly, especially among young persons in urban areas (SODC 2010a). ATS seizures continue to increase in Viet Nam, due in part to expanding regional manufacture and trafficking and also because of increased drug interdiction efforts at the border. The emergence of a number of other synthetic drugs on the drug market in Viet Nam during the past few years is a growing concern.

Patterns and trends of drug use

Drug use—In 2010, ATS overtook opium as the second most common drug of use in Viet Nam, according to government experts. Heroin remains the most commonly used drug. The use of methamphetamine

pills and ecstasy has increased every year in Viet Nam since 2003. Crystalline methamphetamine use was first reported in the country in 2008 and has since expanded considerably. ATS use is concentrated primarily among young drug users living in large cities, border areas and industrial zones (SODC 2011; SODC 2011c).

According to a survey of more than 10,000 secondary students and university students living in the five largest cities in Viet Nam (Ha Noi, Ho Chi Minh City, Da Nang, Hai Phong and Quang Ninh) conducted by the Standing Office on Drugs and Crime (SODC) and UNODC in 2011, 46% of respondents said that the availability of ATS is increasing. Approximately 56% of university students were of the view that many persons in their communities used ATS. At the same time, however, there was a lack of knowledge about the different types of ATS and their effects (SODC and UNODC 2011).

The number of registered drug users in Viet Nam in 2010 was 143,196, although the actual number of drug users is considerably higher. Ninety-seven per cent of registered drug users were men and 3% were women. An estimated 68% of all drug users were under the age of 30 years (SODC 2011c).

In addition to ATS, the market for other illicit synthetic drugs continues to expand in Viet Nam. Ketamine has been a controlled substance in Viet Nam since 2003. However, the illicit market for ketamine is considerable. Ketamine is typically used in crystalline form. Ketamine in pill form is often sold on the street as 'ecstasy' (CSI 2010). In addition, the use of TFMPP,¹ BZP, 2C-B² and 'Sea Water' (Gamma Hydroxybutyric Acid, or GHB), often used in combination with cannabis, is becoming increasingly widespread in entertainment venues and has been identified by Vietnamese authorities as a new trend. Several reports state that these drugs are easily available for purchase on the Internet (SODC 2010b; CSI 2010).

Injecting drug use

In 2009, the latest year for which data are available, there were an estimated 66,125 injecting drug users

(IDUs) in Viet Nam (ARQ 2010). The SODC estimates that half of all persons living with HIV in Viet Nam were infected with HIV through injecting drug use (SODC 2010b).

There are no official reports of injecting use of methamphetamine in Viet Nam, however there are indications that the injecting use of crystalline methamphetamine takes place in the country (SODC and UNODC 2011). Injection is the primary mode of administration for heroin and the secondary mode of administration for opium (smoking being the primary mode) in Viet Nam.

Drug treatment

Viet Nam has a total of 123 Compulsory Drug Treatment Centres throughout the country, which are managed by the Ministry of Labour, Invalids and Social Affairs (MOLISA) and local authorities. Ten

Table 105. Rank of use of selected drugs in Viet Nam, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	•	•	4	3	2
Methamphetamine pills	2	4	4	3	2
Ecstasy	3	•	4	3	2
Ketamine	•	•	4	•	3
Cannabis herb	•	3	3	4	4
Heroin	1	1	1	1	1
Opium	•	•	2	2	3

• = Not reported
Source(s): DAINAP

Table 106. Trend in use of selected drugs in Viet Nam, 2006-2010

Drug type	2006	2007	2008	2009	2010
Crystalline methamphetamine	•	•	↑	↑	↑
Methamphetamine pills	↑	•	↑	↑	↑
Ecstasy	↑	•	↑	↑	↑
Ketamine	•	•	↑	•	↑
Cannabis herb	•	•	↓	↓	↓
Heroin	↑	•	↑	↑	↑
Opium	↓	•	↓	↓	↓

↑ = Increasing, ↓ = Decreasing, ↔ = Stable, • = Not reported
Source(s): DAINAP

¹ Trifluoromethylpennyloperazine.

² 2-(4-bromo-2,5-dimethoxy-phenyl) ethanamin. 2C-B was listed as a controlled substance in 2007 (CSI 2010).

compulsory drug treatment centres are managed by the Youth Union. Clinical care and effective evidence-based drug treatment in the majority of these centres remain rudimentary. Most of the residents are drug users who have been sent to compulsory treatment by local authorities for a maximum period of two years, and the detention period is sometimes extended for an additional two years for post-treatment monitoring and management. The centres have the capacity to provide drug treatment to 55,000 to 60,000 drug users per year. In addition, there are also compulsory community-based drug treatment centres which provide detoxification services but few other treatment services (MOLISA 2011). In 2010, a total of 29,535 drug users were admitted to treatment, of which 24,155 were admitted to compulsory treatment centres and 5,380 were admitted to community and home-based treatment. Most drug users who undergo drug treatment in Viet Nam are poly-drug users. In general, the relapse rate at drug treatment centres in Viet Nam remains very high (SODC 2011c).

Drug-related arrests, seizures and prices

Drug-related arrests – In 2010, the total number of drug-related arrests in Viet Nam was 23,497, of which approximately 1,600 involved ATS (SODC 2011b; SODC 2011c). The total number of drug-related arrests in 2010 was about 9% lower than in 2009. In 2010, a total of 129 non-nationals were arrested (MPS 2011). Unfortunately, reported arrest data are not disaggregated by drug type, gender or nationality.

Drug seizures – In 2010, a total of 221,685 methamphetamine pills and 22 kg of methamphetamine (in pill and crystalline form) was seized in the country. Since late 2007, the proportion of crystalline

methamphetamine of all methamphetamine seized in Viet Nam has increased considerably. Most of the crystalline methamphetamine is seized in the southern part of Viet Nam while most methamphetamine pills are seized in the north. However, the full extent of the methamphetamine situation is unclear due to the lack of available data.

During the past few years, an increasing amount of other synthetic drugs, as well as hallucinogens which are not controlled by the Government of Viet Nam, has been seized by police in major provinces and cities (SODC 2010b).

Cannabis herb seizures have fluctuated during the past few years. In 2010, a total of about 211 kg of cannabis was seized in addition to 8.6 kg of cannabis plants. Heroin seizures increased by about half with nearly 317 kg seized in 2010 (SODC 2011c).

Drug prices – Viet Nam did not report drug price data to DAINAP in 2010.

Sources of illicit drugs

The first illicit methamphetamine manufacturing facility was seized in June 2005 (SODC 2008). Most of the crystalline methamphetamine seized in Viet Nam is trafficked across its borders with Cambodia and China. Methamphetamine pills originate primarily from Myanmar and are trafficked into Viet Nam from Lao PDR (CSI 2010). There have been no reports of methamphetamine laboratories since 2005.

There have been no official reports of ecstasy manufacture in Viet Nam. However, in 2008, ecstasy pill pressing equipment was reportedly seized from an

Table 107. Seizures of selected drugs in Viet Nam, 2006-2010

Drug type	Measurement	2006	2007	2008	2009	2010*
Crystalline methamphetamine	kg	•	0.7	•	3.9	•
Methamphetamine pills	pills	62,870	29,679	850,000 *	564,515**	221,685
Ecstasy	pills	•	•	19,000	•	•
Ketamine	kg	•	•	5.7	•	•
Cannabis herb	kg	•	•	128.8	332.0	211.3
Cannabis resin	kg	645.0	8,000.0	8,800.0	•	•
Heroin	kg	276.6	160.2	156.2	213.0	316.8
Opium	kg	184.0	63.4	18.8	69.8	28.2

• = Not reported. *Reported as 60 kg plus 70,000 pills. **Reported as 500,000 pills and 5.87 kg.

Source(s): DAINAP; *SODC 2011c; SODC 2011d

undisclosed location in the country. While the ecstasy found in Viet Nam that contains a large amount of MDMA is most likely trafficked into the country, a large portion (37.5%) of the ecstasy pills found in the northern part of the country over the past few years has likely been pressed domestically and contains just 10 to 25% MDMA. In addition, fake 'ecstasy' containing large amounts of caffeine and ketamine and only about 0 to 5% MDMA seized in recent years in East and South-East Asia is believed to have been pressed in Viet Nam (AFSN 2010).

Viet Nam has a large number of chemical wholesalers, suppliers and manufacturers in the country, which provides an opportunity for the diversion of precursor chemicals into illicit ATS manufacture. Precursor management and control measures have been undertaken by a number of government agencies, including the Ministry of National Defense, Ministry of Health Care, Ministry of Industry and Commerce and the General Department of Customs (Ministry of Finance) (SODC 2011c).

A small amount of opium poppy is cultivated in the northern mountainous areas of Viet Nam. In 2010, a total of 31 ha of opium poppy cultivation was detected in the country (SODC 2010b). Cannabis cultivation occurs in provinces in the north and the south of the country (SODC 2009).

Trafficking – Large quantities of opiates and methamphetamine are trafficked by land into Viet Nam across its north-western border from Lao PDR and Myanmar. In both 2008 and 2009, most ATS seizures were made along the Ha Noi to Quang Tri route, in the north-west of the country (SODC 2011b). Some quantities of methamphetamine are also smuggled into the country by land from Cambodia (SODC 2011a). In addition, significant quantities of crystalline methamphetamine and ecstasy are trafficked into Viet Nam across its north-eastern border with China (CSI 2010). An estimated 50-70% of the heroin and opium seized in Viet Nam is trafficked into the country along the north-western route to Ha Noi (SODC 2010b).

Since 2009, Vietnamese law enforcement authorities have arrested several persons involved with West African drug trafficking organizations operating in Viet Nam for the trafficking of crystalline methamphetamine, heroin and cocaine. West African groups often operate remotely from Cambodia, Malaysia and

Thailand, as well as from other countries in the region, and primarily recruit Vietnamese women as drug couriers. In November 2010, two Vietnamese women couriers were arrested when boarding a flight from Phnom Penh, Cambodia for attempting to smuggle 3 kg of crystalline methamphetamine into Malaysia. The suspects had traveled overland by bus from Ho Chi Minh City to Cambodia before attempting to board the flight to Kuala Lumpur, Malaysia and had confessed to having previously trafficked illicit drugs along this route on several occasions (MPS 2011).

Criminal organizations based in West Africa are involved in trafficking heroin into Viet Nam using air passenger couriers. A large portion of the heroin is trafficked onwards to China and Australia (SODC 2010b). In January 2011, Vietnamese authorities arrested a Vietnamese national recruited by a West African group and seized 4.3 kg of heroin at Noi Bai International Airport in Ha Noi following the arrival of the suspect on a flight from Kuala Lumpur. The drugs were concealed in his luggage (MPS 2011).

In addition, Viet Nam reports the involvement of a significant number of overseas Vietnamese in Australia, Canada, China and United States in the trafficking of methamphetamine and heroin from the East and South-East Asian region to international markets (MPS 2011).

Drug trafficking organizations from South America are attempting to use Viet Nam as a transshipment point for cocaine destined for international markets (MPS 2011). In May 2010, law enforcement authorities in Peru seized a container with 103 kg of cocaine destined for Hai Phong port in Viet Nam (MPS 2011).

Forensic data

Methamphetamine samples analysed in Viet Nam contain approximately 5 to 20% methamphetamine and an unspecified amount of caffeine and often contain other substances such as ketamine. Crystalline methamphetamine in Viet Nam generally contains 45 to 72% methamphetamine (CSI 2010). The ecstasy samples analysed showed content of 3 to 32% MDMA and usually contained other substances such as MDA, 2C-B and ketamine (CSI 2010).

Annexes

Data Annex
References

Data annex (East and South-East Asia) and guide to interpretation of drug control data

Arrest data

In most countries drug-related offences recorded by law enforcement agencies typically reflect drug-related possession/use and drug trafficking (sale), and to a much lesser degree illicit drug manufacture offences. Similar to drug seizure statistics, the number of drug offences recorded is related to both illicit drug activity in a particular country and drug enforcement activity. Additionally, reported drug offences vary dramatically between countries because of vast differences in national definitions of crimes involving drugs. For example, national definitions of illicit drugs for personal use commonly vary based on threshold amounts of drugs involved, i.e. greater amounts may reflect drug trafficking versus personal use, the type of drug and nature of the drug, whether governments utilize administrative drug offences which may or may not be recorded and reported together with criminal offences, varying levels of law enforcement resources and priorities related to drug offences, and how a country records and manages its administrative drug data – all of which vary from country to country. These issues and others make it possible for countries

with relatively minor drug problems to have drug offence rates higher compared to those countries with severe drug problems, making comparison between countries difficult, if not inadvisable.

This problem can be mitigated by focusing the analysis on multi-year trends within countries and with the utilization of additional data sources, such as drug seizures or representative surveys of illicit drug use. For example, if there is an increasing trend in reported personal use offences together with a decreasing trend in self-reported illicit drug use, as reflected in representative national surveys, an increase in enforcement activity is likely. However, if an increase in reported personal use offences occurs with an increase in self-reported drug use levels, increases in actual drug activity is likely. Drug-related arrests for countries in East and South-East Asia reported for the years 2006-2010 are shown in Table 108. Annual comparisons cannot be made in this table or in subsequent tables in this section because of the different years in which countries began reporting.

Table 108: Drug-related arrests in East and South-East Asia, 2006-2010

Country	Methamphetamine					Ecstasy					Opiates				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	407	174	500	411	489	2	0	0	3	10	1	0	0	1	0
Cambodia	561	246	371	•	•	0	1	•	7	•	28	8	6	•	•
China	•	•	•	31,907	39,231	•	•	•	•	1,287	•	•	•	•	•
<i>Hong Kong, China</i>	509	747	874	788	726	283	224	315	157	34	1,713	1,601	1,378	1,145	888
Indonesia	8,589	11,731	8,683	10,183	12,361	0	2,274	1,984	1,919	1,068	2,610	3,561	1,813	925	759
Japan	11,606	12,009	11,025	11,655	11,999	370	296	281	107	62	49	54	27	43	38
Lao PDR	479	147	344	581	•	•	•	•	•	•	0	36	45	94	•
Malaysia	2,637	1,308	1,668	1,215	8,311	228	182	119	83	240	14,039	9,169	8,693	8,488	11,766
Myanmar	1,069	745	943	1,317	1,008	4	8	6	•	•	2,076	2,015	2,059	2,613	1,689
Philippines	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Republic of Korea	6,006	8,521	7,457	7,965	6,771	•	•	•	•	•	861	954	1,389	2,189	1,124
Singapore	124	221	404	542	702	67	78	110	39	17	119	690	1,216	1,425	1,787
Thailand	61,816	80,723	120,776	115,923	140,466	459	410	550	357	208	1,195	1,278	1,479	1,255	1,552
Viet Nam	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Total	93,803	116,572	153,045	182,487	222,064	1,413	3,473	3,375	3,959	2,445	22,691	19,366	18,105	18,178	19,603

• = Not reported.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Table 108: Cont. Drug-related arrests in East and South-East Asia, 2006-2010

Country	Cannabis					Total*				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	31	27	28	5	44	475	772	591	556	565
Cambodia	8	8	6	•	•	608	263	394	615	684
China	•	•	•	•	•	56,217	68,109	73,360	91,859	101,748
<i>Hong Kong, China</i>	567	541	544	543	325	4,980	6,791	8,089	7,009	5,432
Indonesia	12,865	18,142	11,581	12,001	9,630	25,012	38,235	40,569	26,721	23,401
Japan	2,288	2,271	2,758	2,920	2,216	14,440	14,790	14,288	14,947	14,536
Lao PDR	0	2	26	40	•	479	182	418	718	1,007
Malaysia	5,275	3,385	1,726	5,207	3,011	22,811	14,489	12,352	15,736	23,642
Myanmar	232	217	240	490	146	3,865	3,074	3,368	4,743	3,465
Philippines	•	•	•	•	•	11,535	10,710	10,530	9,052	8,259
Republic of Korea	835	1,170	1,045	1,712	1,837	7,709	10,649	9,898	11,875	9,732
Singapore	122	102	88	126	131	1,218	2,211	2,537	2,616	2,887
Thailand	10,549	9,833	11,689	12,502	12,144	86,197	104,347	149,915	135,976	174,725
Viet Nam	•	•	•	•	•	16,686	14,800	24,739	21,086	23,497
Total	32,772	35,698	29,731	35,546	29,484	252,232	289,422	351,048	343,509	393,580

• = Not reported.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Seizure data

Drug seizure data represent the most commonly reported data available for most countries and, in some cases, are the only data available to assess illicit drug supply and to infer patterns and trends in use. The quantity of illicit drugs seized annually, both in total weight and number of cases, is influenced by many factors, but is largely a result of the amount of drugs available in the market and the effectiveness of interdiction efforts. There is often considerable annual variability in both of these key factors and, thus, considerable volatility in the amounts of illicit drugs reported seized annually. For example, drug traffickers often adopt new trafficking routes and concealment techniques to avoid detection without any real change in the amount of drugs available on the market. In addition, the results of a government's interdiction efforts vary dramatically based on a number of factors, such as the availability of properly trained and equipped personnel; a government's stability and its control over its territories and borders; a country's physical location and geography; and how a country records, manages, analyzes and reports its administrative data.

An assessment of drug supply of a single drug based on seizure data from a single year, from just one country, without regard to the form or composition of a drug – e.g. methamphetamine pills versus methamphetamine in powder or crystalline forms – can be misleading. To understand drug supply, it is useful to have indicators other than simply seizures, such as drug prices and purity. Trends in a drug's price per pure gram are a sign of real changes in their market supply. For example, if there is an increasing trend of seizures together with a decreasing trend in price per pure gram, a real increase in supply is likely. However, if an increase in seizures occurs along with an increase in price per pure gram, increased effectiveness of interdiction efforts is more likely. The ability to assess drug purity accurately depends on the capacity of a country's forensic laboratories. Unfortunately, very few countries in the region have the resources and capacity to regularly and properly collect price and purity data, making this level of assessment challenging. Seizures data for the years 2006-2010 for countries in East and South-East Asia are shown in Table 109.

Table 109: Drug seizures in East and South-East Asia, 2006-2010

Country	Methamphetamine pills				Crystalline methamphetamine (kg)				Ecstasy pills						
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	157	•	•	•	•	0.43	0.39	0.38	0.32	0.76	50	•	•	3.3g ***	15
Cambodia	428,553	420,287	116,772	137,249	82,746	16.20	6.75	1.90	4.60	9.90	•	300	33	3,352	1,056
China	4,021,492	7,620,322	6,255,658	40,460,038	58,443,666	5,946.00	5,863.00	5,523.00	2,479.00	4,186.00	454,145	2,219,353	1,077,552	1,062,173	1,272,904
Hong Kong, China	•	•	•	•	•	6.70	40.80	23.92	40.08	101.80	104,296	65,539	11,984	7,146	5,810
Indonesia	466,907	•	•	•	•	1,241.20	492.87	709.90	224.50	354.10	466,908	1,247,302	1,045,105	309,363	352,515
Japan	•	•	•	•	•	126.80	339.30	397.50	356.30	302.30	185,773	1,187,434	202,886	36,467	15,653
Lao PDR	1,755,989	1,272,815	1,227,205	2,335,330	24,530,177	•	•	•	•	•	•	•	•	•	•
Malaysia	•	121,629	281,343	107,952	107,963	145.20	69.20	357.00	1,159.66	887.30	227,932	709,888****	80,788	75,515	60,713
Myanmar	19,065,674	1,666,141	1,102,199	23,899,156	2,192,263	3.20	3.40	14.40	124.00	226.10	54	2,690	108	5	•
Philippines	•	•	•	•	•	54.10	368.90	853.50	149.30	63.60	83	122	513	2,090	336
Republic of Korea	•	196	151	1	5	21.50	23.70	25.60	15.20	11.90	356	18,323	714	894	486
Singapore	22	498	1,135	1,237	352	0.54	1.52	1.83	3.72	5.59	4,236	7,034	7,415	8,985	8,085
Thailand	13,820,000	14,340,000	22,115,911	26,640,206	50,400,000	92.20	47.40	52.90	209.00	733.00	26,656	315,444	486,553*****	58,024	16,081
Viet Nam	62,870	29,679	850,000 *	564,515 **	221,685	•	0.70	•	3.90	•	•	•	19,000*****	•	•
Total	39,621,664	25,471,567	31,950,374	94,145,684	135,978,857	7,654.07	7,257.93	7,961.83	4,769.58	6,882.35	1,470,489	5,773,429	2,932,651	1,564,029	1,733,639

• = Not reported. * Reported as 60 kg plus 70,000 pills. ** Reported as 500,000 pills and 5.67 kg. *** Reported as 3.28 g. **** Reported as 167.55 kg and 151,211 pills. ***** Pill seizures converted into kg equivalents at 1 pill = 300 mg. ***** Reported as 19,000 pills and 7.6 kg.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Table 109: Cont. Drug seizures in East and South-East Asia, 2006-2010

Country	Ketamine (kg)				Heroin (kg)				Opium (kg)				Cannabis (kg)							
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	•	0.005*	0.001**	0.01	0.04	0.01	•	•	1.10	•	•	•	•	•	•	2.30	0.10	0.60	1.60	6.30
Cambodia	•	•	495***	1.14	0.00	21.30	10.70	5.30	26.70	2.40	1.80	•	•	•	•	•	10.00	5.00	3.80	1.20
China	1,788.50	6,101.70	5,271.10	5,323.00	4,905.00	5,792.10	4,594.00	4,332.30	5,838.00	5,353.00	1,691.00	1,184.60	1,375.00	1,303.00	1,015.00	•	•	•	•	•
Hong Kong, China	1,006.10	96.40	423.30	472.30	189.10	52.20	37.40	46.40	37.10	68.50	•	•	•	•	•	467.30	257.40	261.00	107.00	14.30
Indonesia	•	•	19.80	6.10	116.90	11.90	17.20	29.10	12.30	25.00	•	•	•	•	•	11,722.40	35,464.60	140,496.30	110,723.00	12,661.00
Japan	•	•	•	•	•	2.30	1.80	1.00	1.20	0.20	17.20	19.40	6.60	3.20	3.70	322.50	457.90	408.20	212.30	153.50
Lao PDR	•	•	•	•	•	9.20	23.80	17.50	29.20	84.30	1.20	14.17	11.80	5000	86.50	291.50	2,302.80	804.60	976.00	3,521.00
Malaysia	109.50	267.90	553.10	1,070.59	334.10	155.70	243.30	297.10	283.35	299.30	0.50	7.40	13.90	10.14	4.40	2,378.80	1,482.60	874.80	2,351.79	1,064.00
Myanmar	•	•	•	14.85	•	192.40	68.40	88.20	1,076.13	88.50	2,321.00	1,173.80	1,463.40	752.04	922.00	72.90	104.30	170.20	284.60	205.60
Philippines	98.00	325.05	10.20	0.00	0.00	•	•	•	•	•	•	2.50	•	•	•	6,273.50	1,207.70	3,724.00	1,660.00	1129.40
Republic of Korea	•	•	•	•	•	0.02	•	•	1.90	0.08	0.10	0.14	0.20	0.20	0.05	21.10	23.00	94.70	123.00	45.00
Singapore	5.26	11.00	14.04	8.65	12.15	6.13	17.20	44.50	29.14	49.02	•	•	•	•	•	14.94	30.80	3.31	7.06	8.53
Thailand	22.70	2.80	18.10	18.90	172.00	92.50	293.40	199.80	142.80	138.80	767.46	139.70	111.30	102.30	304.40	11,875.30	15,384.60	18,891.90	17,558.80	18,983.00
Viet Nam	•	•	5.71	•	•	276.60	160.20	156.20	213.00	316.80	184.00	63.40	18.80	69.80	28.20	645.00	8,000.00	8,928.80	332.00	211.30
Total	3,030.06	6,804.86	6,315.35	6,915.54	5,729.29	6,612.36	5,467.40	5,217.40	7,691.92	6,425.90	4,984.26	2,605.11	3,184.20	2,290.68	2,364.25	34,087.54	64,775.80	174,663.41	134,340.95	38,004.13

• = Not reported. * Reported as 9 pills and 0.005 kg. ** Reported as 2 pills and 0.001 kg. *** Reported as small bottles, undefined weight.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Treatment data

Drug treatment data often represent the only source of data available to assess illicit drug demand in a country. Systematically collected, drug treatment trend data are useful in understanding both emerging and existing drug problems, their extent and patterns of use. However, accurately interpreting treatment data is difficult because the definition of drug ‘treatment’ varies between countries and the treatment services provided are often under-reported or incomplete.

Countries provide various types of drug ‘treatment’ which are defined differently based on a variety of social, cultural, political and medical contexts. Treatment focused on addressing the medical aspects of addiction may reflect a different population of drug users than services focused on the social or public health of a community. Therefore, treatment-based statistics could be misleading. For example, if services are primarily designed for the needs of opiate users, an increase in problematic methamphetamine use may not necessarily reflect increased demands for methamphetamine treatment. Additionally, the lag between onset of use and first treatment demand may take some time to occur in a population, particularly for emerging drugs and for drugs that do not cause acute reactions. This appears to be the case in some countries in East and South-East Asia.

Countries typically have a combination of treatment programmes that are provided or sponsored by gov-

ernment agencies, non-government organizations and private providers, which can result in administrative data that are often incomplete, under-reported or simply not collected. For example, the administrative costs associated with collecting treatment data often result in providers avoiding the activity altogether. In addition, treatment providers may be unwilling to disclose the collected data due to concerns about the privacy and confidentiality of drug treatment patients. When reported, treatment data are often limited to geographic areas, such as a particular province or metropolitan area, or to specific treatment modalities, such as in-patient treatment hospitals or government-run treatment programmes, or only reflect treatment figures for a specific substance, such as opiate-based detoxification or maintenance programmes.

Even when defined and consistently reported, interpretation based on treatment services poses additional challenges. For example, while an increase in persons seeking treatment may indicate an increase in drug demand, it may also indicate an increase in treatment capacity or reflect a successful initiative to intervene earlier in the progression of a drug user’s dependence. Therefore, interpretation of treatment demand data is best done in the context of additional indicators of drug use and the policy responses for a given country. Table 110 shows annual drug treatment admissions in East and South-East Asia for the years 2006-2010.

Table 110: Total annual treatment admissions in East and South-East Asia, 2006-2010

Country	Methamphetamine					Ecstasy					Heroin & opium				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	56	59	50	102	133	0	0	0	0	0	0	0	0	0	0
Cambodia	•	•	•	1,175	•	•	•	•	4	•	•	•	•	56	•
China	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Indonesia	580	•	•	984	2,963	•	•	•	490	2,524	2,151	•	•	10,768	3,426
Japan	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Lao PDR	•	•	1,150	•	•	•	•	•	•	•	•	•	•	•	•
Malaysia	•	•	•	•	886	•	•	•	•	46	•	•	•	•	5,513
Myanmar	33	23	21	23	43	•	•	•	•	•	1,281	879	949	1,024	1,372
Philippines	3,256	2,562	2,014	1,678	1,777	71	62	36	45	49	12	0	0	0	0
Republic of Korea	420	461	397	317	231	•	•	•	•	•	3	4	•	•	•
Singapore	41	69	87	143	209	36	35	23	7	6	32	154	201	242	364
Thailand	29,235	45,847	70,005	86,816	100,096	105	589	214	284	184	2,427	2,705	3,071	3,261	3,225
Viet Nam	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Total	33,621	49,021	73,724	91,238	106,338	212	686	273	830	2,809	5,906	3,742	4,228	15,351	13,900

• = Not reported.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Table 110: Cont. Total annual treatment admissions in East and South-East Asia, 2006-2010

Country	Cannabis					Total*				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	1	0	0	0	0	57	59	50	103	135
Cambodia	•	•	•	4	•	1,090	1,719	2,382	1,305	•
China	•	•	•	•	•	340,003	•	11,267	173,000	175,000
Indonesia	900	•	•	1,774	3,325	6,313	•	•	14,852	12,427
Japan	•	•	•	•	•	8,942	9,386	•	11,130	11,651
Lao PDR	•	•	2	•	•	1,177	1,894	1,682	1,964	2,154
Malaysia	•	•	•	•	460	22,748	14,489	•	15,645	6,918
Myanmar	0	57	2	12	12	1,314	959	974	1,066	1,427
Philippines	1,807	1,421	1,264	1,086	938	5,161	4,287	3,372	2,863	2,745
Republic of Korea	19	12	•	7	4	442	477	418	324	235
Singapore	0	10	27	27	49	433	510	481	535	688
Thailand	4,043	5,765	5,765	7,898	6,741	38,676	58,812	84,575	106,408	117,184
Viet Nam	•	•	•	•	•	80,368	•	45,261	64,809	29,535
Total	6,770	7,265	7,060	10,808	11,529	506,724	92,592	150,462	394,004	360,099

• = Not reported. (Note: Includes drug-related treatment admissions for all illicit drug types in the country. Duplication of total treatment data may occur in individual cases.)

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Drug use data

Accurately measuring how many persons engage in an illicit behavior, such as drug use, is a challenging endeavor. Two broad approaches often used are direct survey and indirect estimation, each with benefits and limitations. The direct method for estimating drug use prevalence utilizes population surveys, either for general or specialized groups, such as students. Drug use surveys usually ask a sample of participants if drugs were used at least once in the past month, at least once in the past year, or in their lifetime, in order to estimate total drug use in the general or specialised population. The approach generates accurate estimates if and when a representative population sample of drug users is obtained equitably from around the country (i.e. metropolitan drug use levels are typically higher than rural drug use levels) and interviewees honestly and accurately disclose their drug use. However, this approach leads to underestimates of the actual levels of drug use because it typically excludes marginalized groups, such as severe or problematic drug users who are unable to take part in either a household or a school-based survey, and because persons may feel uncomfortable disclosing their illicit drug use.

The indirect method of estimating drug use prevalence uses multiple data sources to estimate the population of drug users. The multiplier method is a common approach which uses two independent pieces of data: one data source, for example, the number of persons receiving treatment in a year, is multiplied with another, for example, the proportion of a sample of drug users who received treatment, to estimate the drug-using population. While this approach is both less expensive and technically challenging than general population surveys and does not require persons to admit to drug use, it does require multiple sources of data to perform multiple estimates, which many countries do not collect.

Because of the limitations noted above and others, estimates of illicit drug use sometimes have a wide range. Ranges of estimated drug use reflect the likely levels of use and the amount of uncertainty related to estimates of use. For example, amphetamine and methamphetamine past year drug use as reported in 2009 for adults aged 15-64 was between 14 and 56 million people globally (UNODC, 2011). The wide range in this estimate is partly due to countries in Asia, notably China and India, that contain a significant proportion of the world's population, but where nationally representative population surveys of illicit drug use may not be conducted regularly. In contrast, the smaller ranges in the estimated number of users in regions such as North America and Europe reflect the longstanding and relatively well-funded research programmes in some of the countries in those regions.

For several countries in East and South-East Asia, there are few or no prevalence estimates on either direct or indirect measurements. In the event that no survey data are available, qualitative judgments of prevalence and changes in patterns and trends often can be made by drug experts and key informants who are familiar with available data sources, although limited, and country specific nuances of change in population size and behaviour. In this regard, UNODC requests all national counterpart agencies to make a qualitative assessment of the extent of use by providing a hierarchical ranking of drugs from the most commonly used to the least commonly used as well as a report on the trend in use of each drug, based on available law enforcement agency statistics, treatment and public health office reports, social service agency information and other sources of drug use indicator data.

Rank and trend data for East and South-East Asian countries for the years 2006 through 2010 are shown in Tables 111 and 112.

Table 111: Rank in use of selected drugs in East and South-East Asia, 2006-2010

Country	Methamphetamine pills					Crystalline methamphetamine					Ecstasy					Heroin					Cannabis				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	•	•	•	•	•	1	1	1	1	1	3	•	•	•	•	•	•	•	6	•	2	2	2	2	2
Cambodia	1	•	•	2	1	2	•	•	1	2	4	•	•	•	•	2	•	•	•	•	3	•	•	•	4
China	3	5	2	2	2	2	•	2	2	2	4	4	3	3	3	1	1	1	1	1	7	•	•	•	•
Indonesia	•	•	•	•	3	4	•	2	2	1	3	•	2	3	5	2	•	4	5	4	1	•	1	1	2
Japan	•	•	•	•	•	1	1	1	1	1	4	4	4	3	•	6	6	6	•	•	3	3	2	2	2
Lao PDR	1	1	1	1	1	•	•	•	•	•	•	•	•	•	•	3	3	4	4	4	4	4	3	2	2
Malaysia	•	•	•	•	9	4	4	4	4	4	6	6	6	6	6	1	1	1	1	1	3	3	3	2	5
Myanmar	3	3	3	3	3	•	•	•	•	•	•	•	•	•	•	1	1	1	1	1	•	4	4	4	4
Philippines	•	•	•	•	•	•	•	•	•	1	•	•	•	•	•	•	•	•	•	•	•	•	•	•	2
Republic of Korea	•	•	•	•	•	1	1	1	1	1	•	•	•	•	3	•	•	•	•	•	2	2	2	2	2
Singapore	•	•	•	•	•	5	4	4	3	2	8	8	7	8	8	7	2	1	1	1	6	7	8	6	5
Thailand	1	1	3	1	1	3	3	8	7	7	6	6	7	9	9	8	5	6	5	5	2	2	1	2	2
Viet Nam	2	4	4	3	2	•	•	4	3	2	3	•	4	3	2	1	1	1	1	1	•	3	3	4	4

• = Not reported.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

Table 112: Reported drug use trends for selected drugs in East and South-East Asia, 2006-2010

Country	Methamphetamine pills					Crystalline methamphetamine					Ecstasy					Heroin					Cannabis				
	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010	2006	2007	2008	2009	2010
Brunei Darussalam	•	•	•	•	•	↓	↓	↓	↓	↑	↑	•	•	↑	•	•	•	•	•	•	↑	↓	↑	↑	↑
Cambodia	↑	•	•	•	↑	↑	•	•	•	↑	↑	•	•	•	•	↑	•	•	•	•	↓	•	•	•	•
China	↑	↑	↑	↑	↑	↑	•	↑	↑	↑	↑	↑	↑	↑	↓	↓	↓	↑	↑	↑	↑	↑	•	•	•
Indonesia	•	•	•	•	↑	•	•	↑	↑	↑	•	•	↑	↓	↑	•	•	↓	↓	↓	•	•	↑	↑	↓
Japan	•	•	•	•	•	↑	↑	↑	↑	↑	↑	↑	↑	↑	↓	•	↑	↑	↑	•	↑	↑	↓	•	↓
Lao PDR	↑	↑	↑	↑	↑	•	•	•	•	•	•	•	•	•	•	↑	↑	↓	↑	↑	↑	↑	↓	↓	↑
Malaysia	•	•	•	↑	↑	↓	↓	•	↑	↑	↓	↓	•	↑	↑	↓	↓	•	↓	↓	↓	•	•	↑	↓
Myanmar	↑	↑	↑	↑	↑	•	•	•	•	•	•	•	•	•	•	↓	↑	↓	↓	↓	•	↑	↑	↑	↑
Philippines	•	•	•	•	•	•	•	•	•	↓	•	•	•	•	•	•	•	•	•	•	•	•	•	•	↓
Republic of Korea	•	•	•	•	•	↑	↑	↓	↑	↓	•	•	•	•	↓	•	•	•	•	•	↑	↑	↓	↑	↑
Singapore	•	•	•	•	•	↓	↑	↑	↑	↑	↑	↑	↑	↓	↓	↑	↑	↑	↑	↑	↑	↓	↓	↑	↑
Thailand	↓	↑	↑	↑	↑	↑	↓	↑	↑	↑	↑	↑	↓	↓	↓	↓	↑	↓	↑	↑	↑	↑	↑	↑	↑
Viet Nam	↑	•	↑	↑	↑	•	•	↑	↑	↑	↑	•	↑	↑	↑	↑	•	↑	↑	↑	•	•	↓	↓	↓

↑ = Increasing, ↓ = Decreasing, ↑↓ = Stable, • = Not reported.

Source(s): DAINAP and multiple resources; see relevant country chapters for details

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