

ASEAN

DRUG MONITORING REPORT

2017



ASEAN-NARCO
ASEAN Narcotics Cooperation Center





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August 2018

ASEAN DRUG MONITORING REPORT 2017

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Foreword

ASEAN Drug Monitoring Report 2017 is the 3rd publication of ASEAN Drug Monitoring Network. This Report was jointly formulated by ASEAN Member States to present the drug situation in ASEAN as well as specific issues on drug policy, research and innovation and implementing programmes. Realizing that methamphetamine tablet is a big problem in most member states; Myanmar, Thailand and Viet Nam agreed to share their profiles of ATS tablets in the Annex of this report. It is hoped that these profiles would help other ASEAN Member States as well as other nations in the suppression of illicit drugs in their countries.

Drug situation in ASEAN region remains alarming with the influx of methamphetamine tablets and crystalline methamphetamine from illicit drug production sites in the Golden Triangle. Large seizures of methamphetamine tablets and crystalline methamphetamine were reported by Myanmar and Thailand. Different kinds of NPS abuse have been emerging in the region as some ASEAN Member States reported on the rising of NPS abuse as well as some psychotropic substances. West African syndicates remain active in smuggling cocaine into ASEAN region by air routes. Illicit drugs smuggling by

sea routes seemed to receive increasing attention since the seizures of ICE were made at the ports and in the vessels. The important role of Border Liaison Offices and information exchanges were emphasized by many member states as a key suppression measure.

The problem of illicit drug production and trafficking from the Golden Triangle has affected the illicit drug situation and consumption of ASEAN Member States. Five ASEAN Member States, namely Cambodia, Lao PDR, Myanmar, Thailand and Viet Nam together with China that have faced the direct impact of illicit drug trafficking from and to the Golden Triangle jointly participated in the Safe Mekhong Operation Project which was aimed to intercept illicit precursor chemicals from entering the illicit drug production sites in the Golden Triangle and at the same time to blockade the finished products, illicit drugs to come out from the Golden Triangle. The Safe Mekhong Operation Centre (SMCC) was set up in 6 member countries of the Safe Mekhong Operation. To jointly solve the problem of illicit drug production and trafficking in the Golden Triangle, ASEAN Member States had formulated the ASEAN Cooperation Plan in





Tackling Illicit Drug Production and Trafficking in the Golden Triangle 2017-2019. This is also to support the work of five ASEAN Member States and the Safe Mekhong Operation. The ADM Report also made use of information on drug seizures in the Golden Triangle area collected by the SMCC for the analysis of illicit drug trend to be more complete. The representatives of the SMCC from five ASEAN Member States were invited to participate at the 5th ASEAN Drug Monitoring Network Operational Workshop to share information with the ADMN Team on drug seizures. The SMCC allowed the ADMN to use its information on drug seizures for ASEAN illicit drug trend analysis. The ADMN Team had the opportunity to observe the geographical characteristics of the Mekhong River that passed Lao PDR, Myanmar and Thailand during the 6th ASEAN Drug Monitoring Operational Workshop on 10-12 July 2018 in Chiang Rai.

Much development has been carried out on the ADM Report System as the online ADM Report System was developed on ASEAN-NARCO website. The introduction and test of the online ADM Report System was conducted during the 5th ASEAN Operational Workshop on Drug Monitoring Network on 7-9 March 2018 in Bangkok. This is to facilitate the key-in and sharing of information according to the ADMN questionnaires of the ASEAN Member

States. However, some ASEAN Member States experienced some technical problems for online data input. The ADMN Focal Points as well as the ADMN Contact Persons on Supply and Demand of ASEAN Member States were given the password for online data inputs. The ADMN Focal Points could look into the information provided by other ASEAN Member States so that they could make use of the information for their situation analysis and drug monitoring in each respective country.

Intensive information was shared by ASEAN Member States during the 6th ASEAN Drug Monitoring Network Operational Workshop in Chiang Rai. The whole session of the workshop was devoted to the review of the ADM Report and the sharing of information as well as to discuss about the improvement of the ADM Report System and the work plan for the ADM Report of 2018. All ASEAN Member States contributed and participated more actively in the drafting of the ADM Report 2017 before coming to the workshop where the ASEAN Editorial Board met. Thailand also shared her experiences on sustainable alternative development at Doi Tung Development Project where the late King Bhumibol Adulyadej's and the late Princess Mother's Philosophy on Alternative Development had been successfully implemented.





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Thailand as the coordinator and facilitator for the ASEAN-NARCO and the ADMN would like to thank all stake holders who contributed to the success of the ASEAN Drug Monitoring Report of 2017, particularly, members of ADMN Team for their valuable contribution and support for the data inputs including the formulation of the Report, ASEAN Secretariat for the editorial assistance to the Report, Thailand Substance Abuse Academic Network for data analysis and Office of the Narcotics Control Board for continual financial support. We would also like to thank the Narcotics

Control Bureau (NCB) of Brunei Darussalam for organizing the launch of the ADM Report of 2017 at the 39th ASEAN Senior Officials Meeting on Drug Matters (ASOD) hosted by the Narcotics Control Bureau (NCB) on 28 August 2018 in Bandar Seri Begawan. The ADMN Team hopes that the Report will be useful to all ASEAN Member States as an early warning for the current drug situation and a comparative study including to the general public who are interested in drug situation and implementation in ASEAN region.

"Securing ASEAN Communities Against Illicit Drugs"

**ADMN Team
August 2018**





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Chapter 1

Overview of ASEAN Drug Trends and Pattern





The ASEAN Drug Monitoring (ADM) Report 2017 presents a comprehensive annual overview of the latest drug situation in ASEAN by focusing on the demand and supply of illicit drug types encountered in the region. Chapter 1 of the Report provides an overview of the drug situation in ASEAN. Chapter 2 focuses on ASEAN Member States' individual report on their national drug situations. Chapter 3 presents major drug problems in ASEAN namely plant-based such as opium, cannabis and kratom (*Mitragyna speciosa*), synthetic drugs such as heroin, methamphetamine tablet (Yaba), and crystalline methamphetamine (ICE). Chapter 4 introduces research knowledge and innovations undertaken by the Member States. Chapter 5 highlights ASEAN's best practices in policy and implementation programmes.

ASEAN covers a land area of 4.4 million square kilometres, approximately 3% of the total land area of the Earth. In addition, ASEAN covers water three times larger than its land. Based on the world population data by the United Nations Department of Economic and Social Affairs (UN DESA) and ASEAN Statistical Yearbook, the population of ASEAN has increased from around 186.4 million in 1955 to around 643.1 million in 2017 with a rate of 1.09%-2.83% per annum, ranging from 0.42 million in Brunei Darussalam to 263.99 million in Indonesia.

ASEAN population accounts for 8.5% of the world population, with Indonesia representing 41.06% of the ASEAN population. ASEAN population density is 146.1 people per square kilometre, where 48.8% of the population lives in urban area. Sex ratio (males: females) in ASEAN is about 1:1 and median age is 29.1 years. Approximately 60% of ASEAN population is under the age of 35 and 43% is under the age of 24. Life expectancy at birth in ASEAN Member States varies, ranging from 66.6 years in Cambodia to 83.1 years in Singapore (source: Department of Statistics, Singapore). Singapore and Thailand are two countries of ageing societies (elderly over 7% of its population).

ASEAN is the sixth largest economy in the world, behind the United States, China, Japan, France and Germany. Working age (15-64 years) proportion in ASEAN Member States ranges from 72% in Brunei Darussalam and Singapore to 63% in Lao PDR and the Philippines. In 2015, the GDP had grown to more than USD \$2.8 trillion. ASEAN Vision 2020 as a means for the realization of a single ASEAN community, becoming "outward looking, living in peace, stability and prosperity" (Julio Amador 2015).

The average economic growth of ASEAN Member States from 1989 to 2009 was between 3.8% and 7%. ASEAN countries

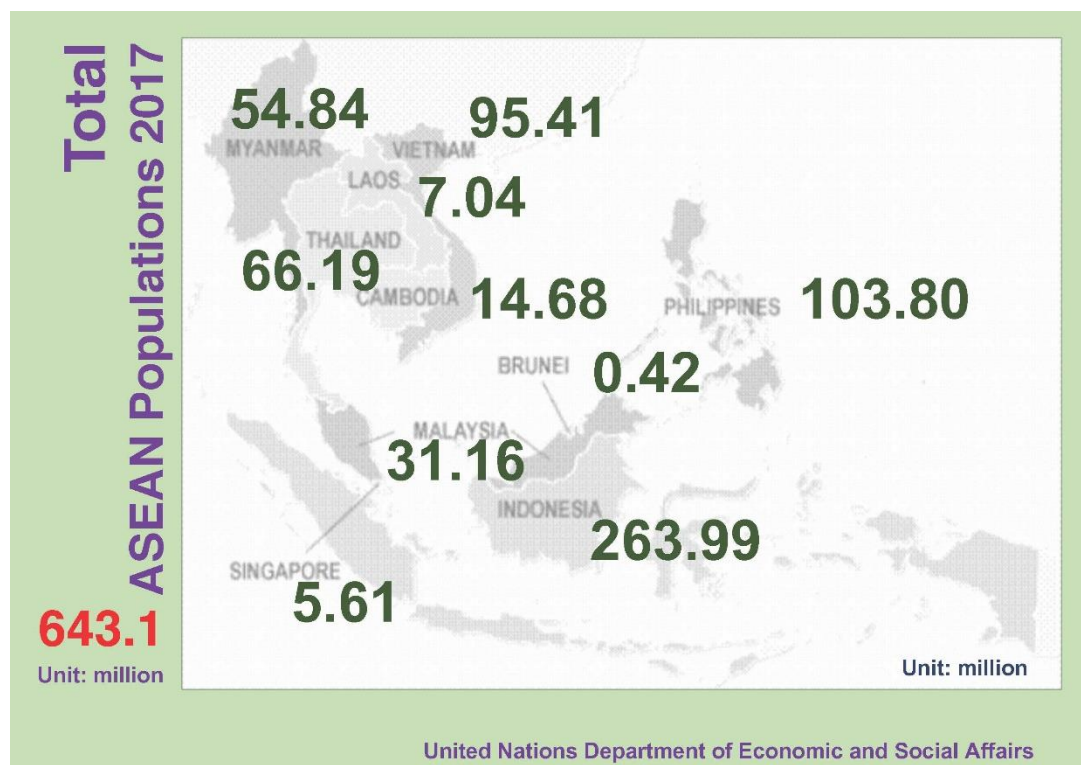


have various economic zones ranging from industrial parks, eco-industrial parks, special economic zones, technology parks to innovation districts. In 2015, United Nations Industrial Development Organization (UNIDO) Viet Nam has compiled a list of economic zones in the ASEAN Economic Community in a report titled "Economic Zones in the ASEAN".

However, there is still a threat of unemployment. The rate of unemployment has increased by 2.9% across Southeast Asia and the Pacific. In ASEAN, several countries are releasing workers from state-owned enterprises as there are insufficient opportunities for them. Almost 57% of all

workers in the region remain below the poverty line. The inability to find legitimate employment makes them vulnerable to risk or indecent work (ILO 2007).

The Human Development Index (HDI), a composite statistic of life expectancy, education and income per capita indicators, cited in the United Nations Development Programme (UNDP) Human Development Report 2016, varies from 0.556 for Myanmar to 0.925 for Singapore with an average of 0.684 for ASEAN in 2015. (A country scores higher HDI when the life expectancy at birth is longer, the education period is longer, and the income per capita is higher).





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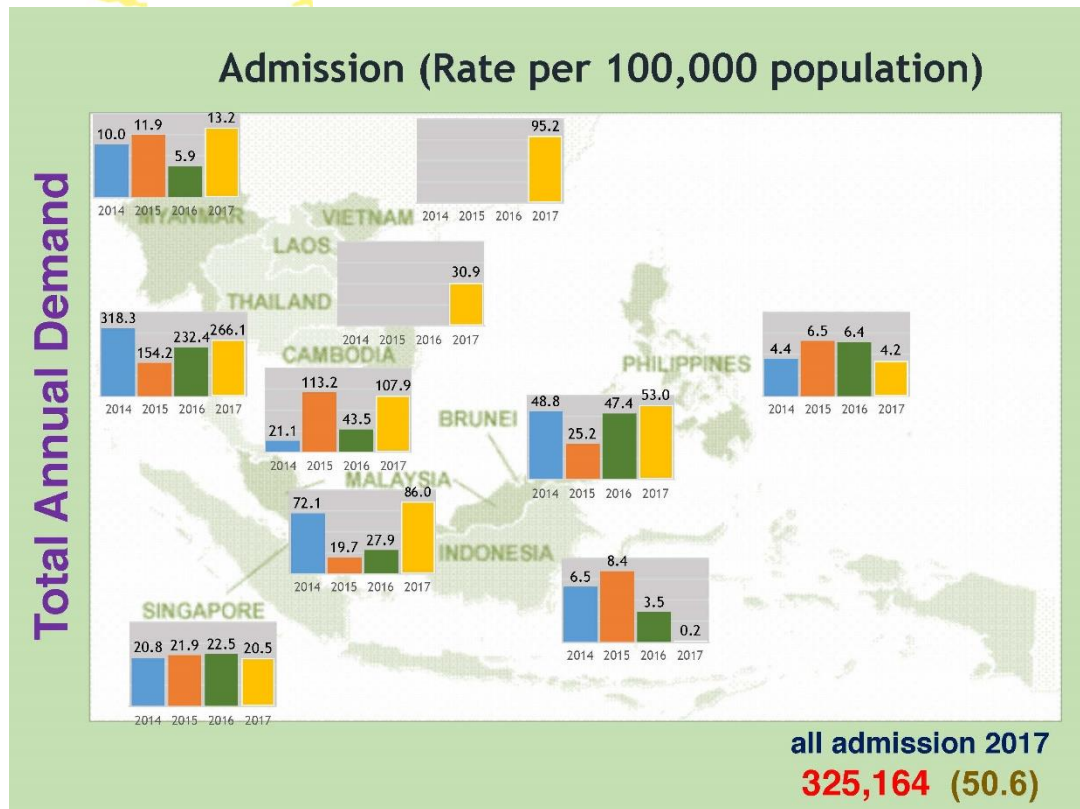
ASEAN has mechanisms for cooperation with other Asian countries such as the ASEAN Plus Three which include cooperation in combating illicit drugs problem.

The United Nations Office on Drugs and Crime (UNODC) estimated that around 5.6% of the global adult population used drugs at least once in 2016. The situation is worsened by the fact that about 31 million of those drug users suffer from drug use disorders (UNODC 2018). Moreover 167,750 died from directly associated with drug use disorders (mainly overdoses).

In ASEAN, drug use could be estimated from national representative surveys and information gathered through studies that use indirect methods to estimate the number of drug users. Household surveys could be carried out every three to five years in some

ASEAN Member States. The most recent survey was conducted in Indonesia in 2017. However, many countries do not conduct such surveys on a regular basis and some others do not conduct them.

In the absence of data on overall drug use, data on drug users admitted to treatment was used as an estimate for comparison among member states instead. In 2017, over 300,000 drug users in ASEAN were admitted into drug treatment. Criteria for admission may vary from country to country. The overall ASEAN admission rate was 50.6 per hundred thousand population (1.8 times increased from previous year). Indonesia had the lowest rate in contrast to Thailand. Admission rate in Malaysia, Philippines, Singapore and Indonesia decreased compared to 2016 whilst Thailand, Cambodia, Myanmar and Brunei Darussalam increased.



In 2017, over 50% of the people who received treatment were amphetamine type stimulants (ATS) users (amphetamine, methamphetamine, ecstasy, and synthetic cathinones such as bath salt). Most of the people seeking treatment in Brunei Darussalam, Cambodia, Philippines, Malaysia and Singapore were ICE or crystalline methamphetamine users while in Thailand and Lao PDR were methamphetamine tablet users. Countries around the Golden Triangle area (Myanmar, Lao PDR and Thailand) seem to be an endemic area of methamphetamine tablet.

One-fourth of drug users used opium and its derivatives (heroin, morphine, methadone,

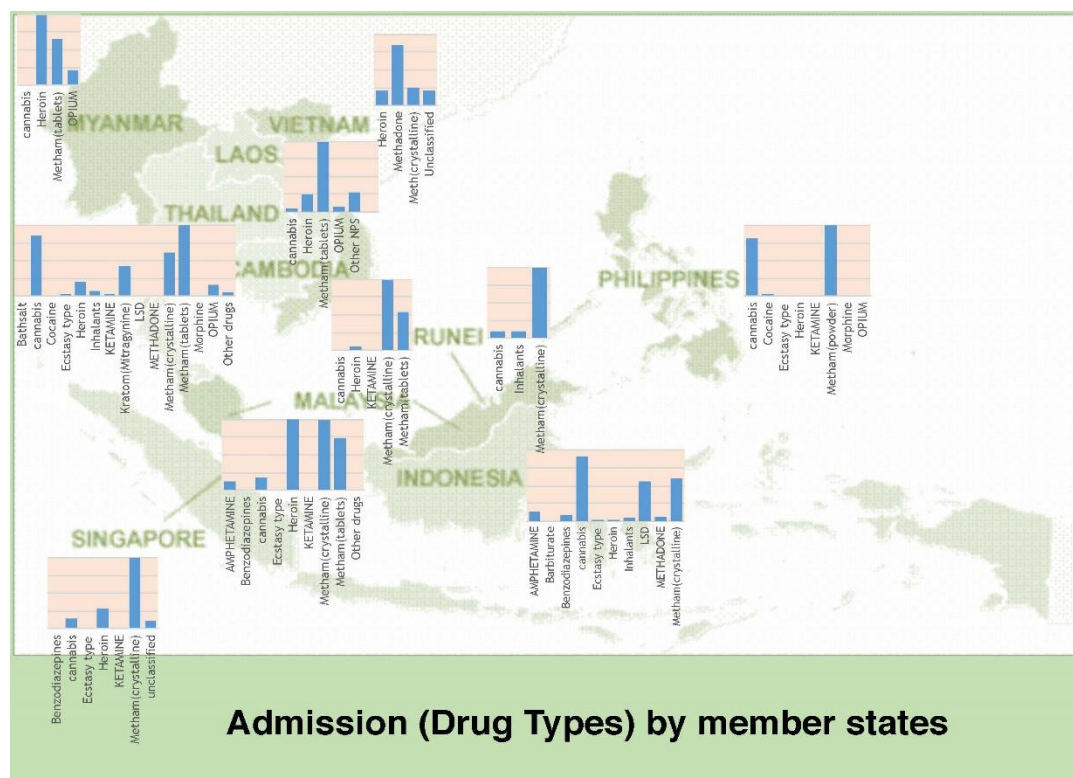
and alphaprodine). Myanmar had a large number of heroin users. In Viet Nam there were methadone users seeking treatment. Cannabis users formed less than 5% of all admission. The remainders were kratom, cocaine, hallucinogen (inhalants, ketamine, LSD), benzodiazepine, and other drugs users. The volume of admission to drug treatment programmes by drug types in 2017 varied across member states. Member States provided the drug treatment programmes tailored to the needs of their drug users. Hence, there would be different content provided in the treatment and rehabilitation of drug users, who may vary in their profiles and eligibility for such programmes.



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The rise of methamphetamine use was alarming as well as NPS and methadone abuse. Around 6.4% of the overall

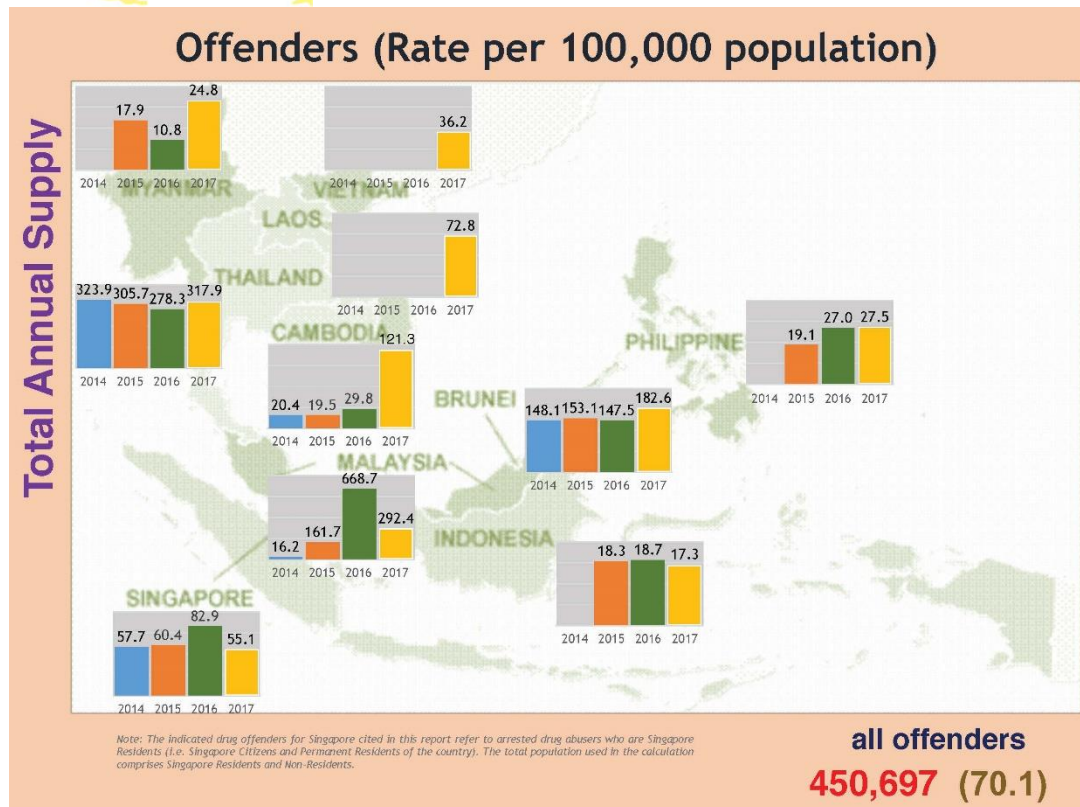
admissions were females. Of these females, 90% received treatment for the first time.



ASEAN is situated closely to areas where the cultivation, manufacturing, and trafficking of drugs is prevalent. The Golden Triangle is an area of approximately 950,000 square kilometres overlapping mountains of three Southeast Asian countries of Myanmar, Lao PDR and Thailand. It is well recognized worldwide as a narcotic drugs producing area.

Overall ASEAN drug offenders' rate was 70.1 per hundred thousand population, ranging from 17.3 in Indonesia to 317.9 in Thailand. The offender rates increased in Brunei

Darussalam, Cambodia, Thailand and Myanmar whilst Malaysia, and Singapore decreased. 69.1% of all offenders were related to Amphetamine Type Stimulants (ATS). In 2017, there were 357,443 illicit drugs cases in ASEAN. 64.6% of all cases were ATS including amphetamine, methamphetamine, ecstasy, cathinones, and pseudoephedrine. 11.0% of all cases were kratom and 5.2% were cannabis. ATS seizures accounted over 90% of all seizures in ASEAN in 2017. Interestingly, 1% of seizure was CNS Depressants (both Benzodiazepines and Barbiturates).

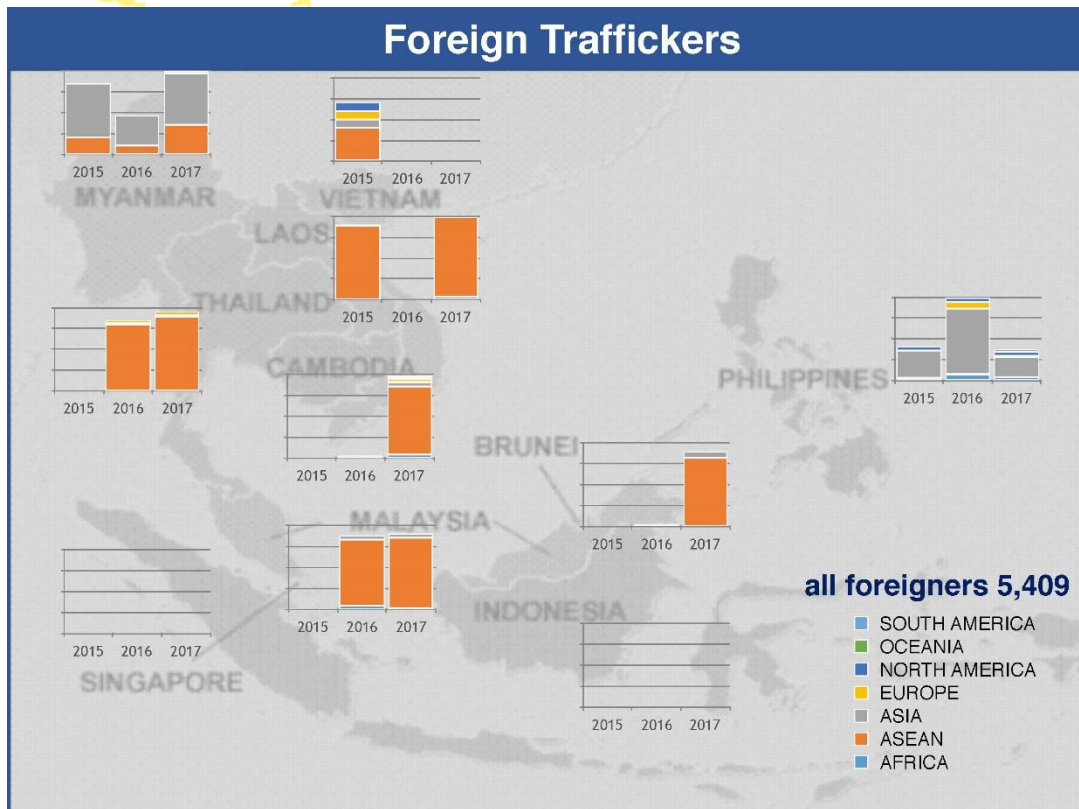


Apart from the five major drugs of the region, namely, dried cannabis, heroin, opium, methamphetamine tablet (Yaba) and crystalline methamphetamine (ICE), the emergence of New Psychoactive Substances (NPS) and other drugs is of increasing concern. In 2017, over 60% of the offenders arrested by ASEAN Member States were involved in drug-related offences

with methamphetamine (both tablet and crystalline). Lao PDR, Viet Nam, and Malaysia are countries where the number of methamphetamine offenders was less significance. Out of 230,990 ATS cases reported by ASEAN Member States, 98% were methamphetamine-related cases with the total seizure of over 200 metric tons.



trafficked drugs across borders were ASEAN nationals, 7% were from countries in Asia and Europe, and the rest of the world accounted for 3%. 90% of the traffickers from ASEAN were reported by Thailand.



Historically, ASEAN Member States faced the problem of illicit drugs from opium cultivation and heroin production to methamphetamine manufacturing along the Golden Triangle area. To jointly address the problem, Thailand, Myanmar and Lao PDR collaborated with China in the Safe Mekong Operation Project (SMOP) in 2013. This project aimed to suppress drug trafficking activities along the Mekong River and around the area of the Golden Triangle. In 2015, this international law enforcement initiative has been expanded to include Viet Nam and Cambodia. At present, this cooperative measure emphasizes intelligence exchange, joint investigation and operation on

interdiction of essential chemicals and precursors. The efficiency of the project has been well recognized. In addition, alternative development measures have been undertaken. Recently, community leaders of the selected twin villages and local officers from Cambodia, Lao PDR and Thailand were met to pursue common development goals as an alternative to solve drug problems. It is expected that this collaboration will reduce drug production and trafficking activities in the Golden Triangle, resulting in ASEAN drug situation being under control within the next few years.



Chapter 2

ASEAN COUNTRY REPORT





BRUNEI DARUSSALAM

Overview

In 2017, Narcotics Control Bureau (NCB) had made 772 drug arrests with 479 cases investigated under the Misuse of Drugs Act, Chapter 27. In comparison to 2016, this is an increase of 20.4% from the 641 persons arrested in 2016. Statistics compiled by NCB shows that 53% of the total arrests made were new arrests. The drug users arrested constitute about 0.17% of the total population.

illicit manufacturing, abuse and trafficking of drugs and other drug-related crimes through vigorous enforcement activities and prevention of the entry of narcotic drugs either through legal or illegal point of entry.

Out of the total 772 arrests, 642 were males and 130 were females. Majority of the arrests were locals and of Malay ethnicity. 63% of the arrests were unemployed, 35% were employed and subsequently 1.4% are students.

Drug Supply Reduction

The Law Enforcement and Intelligence Division of the Bureau is responsible in implementing the strategy of reduction of

Drug abusers of age group 30-39 years makes up the largest group of arrests. Below is the tabulated statistic for arrests made according to age group:

Age group	No. of Person
14 years and below	3
15 - 19 years	45
20 - 29 years	260
30 - 39 years	286
40 - 49 years	143
50 - 59 years	34
60 years and above	1



Joint operations are aimed at further strengthening inter-agency efficiency in combating criminal related activities in Brunei Darussalam. NCB had made 353 nationwide land operations and 93 marine operations in 2017, inclusive of joint operations with other enforcement agencies.

Only a small percentage of drug arrests made were of drug trafficking offences. The following are the different types of drug trafficking offences committed under the Misuse of Drugs Act (MDA), Chapter 27:

Misuse of Drugs Act (MDA) Chapter 27	Offence	No. of arrests
Section 3(a)	Trafficking in controlled drug	0
Section 3A	Possession of controlled drug for the purpose of trafficking	40
Section 5	Importation and exportation of controlled drug	31

Note: *Misuse of Drugs Act (MDA) Chapter 27*

- Section 3(a) - Trafficking in controlled drug
- Section 3A - Possession for purpose for trafficking
- Section 5 - Importation and exportation of controlled drug
- Section 6(a) - Possession of controlled drug
- Section 6(b) - Smoke, administer to oneself or otherwise consume a controlled drug
- Section 7 - Possession of pipes and utensils
- Section 8 - Cultivation of cannabis, opium and coca plant

In the effort to intercept the trafficking of drugs at the border, NCB are also stationed at the six border control posts in Brunei Darussalam namely at Brunei International Airport, Kuala Lurah Control Post, Ujung Jalan Control Post, Labu Control Post, Sungai Tujoh Control Post and Serasa Ferry Terminal. In 2017, 71 arrests were made at the various border check points for a number of drug offences. Out of the total arrests, 42

were of Brunei nationality and 54 were of Malay ethnicity. 91% were charged under Section 6(b) of MDA, Chapter 27 for consumption of controlled drugs as they were tested positive for drugs. About one third of the total arrests made at the border check points were charged under Section 5 of MDA, Chapter 27 for the illegal import and export of controlled drug.



Drug Seizures

Syabu (Methylamphetamine) remains to be the most commonly abused drug in 2017 as 714 out of 772 arrests were caught for consumption and possession of Syabu. The 787.76 gm of syabu seized is estimated to be worth BND153,613 (about USD 111,954). Cannabis remains to be the second most

abused drug with a total of 35 arrests and about 1,103.65 gm of cannabis seized is estimated to be worth BND16,554 (about USD 12,064). Majority of the drugs users involved in syabu and cannabis were from the Malay ethnic group within the age range from 31 years old and above and are unemployed.

The table below shows the seizure of drugs made throughout the year:

CLASSIFICATION	DRUG TYPE	GROSS WEIGHT
ATS (Amphetamine-Type Stimulants)	Syabu (gramme)	787.76
	Ecstasy (gramme)	1.60
	Ecstasy (tablet)	31.00
CANNABIS	Cannabis (gramme)	1,103.65
	Cannabis (seeds)	94.00
	Cannabis (plant)	3.00
BENZODIAZEPINE	Erimin 5 (tablet)	453.00
	Erimin 5 (gramme)	11.80
OTHERS	Ketamine (tablet)	50.00
	Ketamine (gramme)	54.50

In 2017, there was an increase in arrest made for youth involved with drugs below the age of 20 years old. 66 youths abusers were arrested in 2017 compared to 18 youth abusers arrested in 2016. This group of drug users is a concern for NCB so NCB will continue to urge parents and guardians to closely monitor the movement and activities of their own children in an effort of protecting

them from negative influences and social issues.

Drug Demand Reduction

Drug demand reduction strategy comprising of Preventive Drug Education, Treatment and Rehabilitation as well as aftercare efforts continues to be a key focus of NCB's strategy. Preventive Drug Education efforts to increase



the outreach. Throughout 2017, NCB had reached 23,536 students through school-based activities, 2,169 workforce through workplace-based activities and 5,589 citizens through community based activities.

In 2017, NCB had received 238 individuals to undergo supervision scheme in which 9 supervisees were registered voluntarily. At the same time, Al-Islah Rehabilitation and Treatment Centre received 105 individuals to undergo treatment and rehabilitation where 25 were admitted voluntarily. NCB hopes for recovering drugs users to be able to guide themselves towards a successful recovery and reintegration into society.



CAMBODIA

Overview

Cambodia is not a drug producing country but it has continuously been affected by illicit drugs production and trafficking in the region and the globe. Geographically located in the surrounding area of the Golden Triangle, Cambodia is a transit country whereas large amount of illicit drugs were, through various methods used by drug trafficking syndicates, smuggled, transported, stocked, processed and manufactured for third country markets, some other amount has been supplied to local market.

1. Drug Situation in Cambodia;

1.1 Manufacturing, Producing and Cultivating

Recently Cambodian authority found few cases of emerging marijuana plantation where the plantation is hiding in remote mountainous area and a few cases of reprocessing with small amount of illicit drugs.

1.2 Drugs Trafficking;

- Cambodia continues to be affected by the regional and international drugs trafficking all through land, water and air routes. In 2017, Cambodia had suppressed 7 cocaine cases for 11,015.58 grammes via air routes arranged by foreign syndicates;
- Cambodia continues to notice that land border of the provinces in the north-east region of the country is a very important gateway for importing synthetic drugs particularly ATS (WY-ICE) and heroin from Lao PDR into Cambodia. Cambodia had suppressed a significant case of heroin and methamphetamine (WY and ICE) with an amount of over 50 kg.
- In 2017 total seizures of illicit narcotic substances came up to 180,230.00 grammes, a 35.10% increase from the total seizure of 133,497.65 grammes of narcotic substances (excluded dried cannabis) last year.



1.3 Drugs Abuse;

Cambodia has been affected by the illicit drugs transiting, thus local consumption is somehow supplied. Local consumption trend seemed to be an outspread from urban to rural areas. Cambodia official record noted some 46.20% increasing number of drug abusers compared to 2016. 48% of the drug abusers were in communities without treatment, whereby only 52% of drug population have enrolled for treatment services. Majority of the drug population are methamphetamine (ICE+WY) users and accounted for 88% with the age of 18 to 35 years old. From the official record, there were 18,104 drug users in 2017, whereby 20,621 drug users had been recorded in 2016.

2. Achievement;

In summary, ministries and institutions of the NACD's members have put great effort in fulfilling each of their duties to implement the Drug Control Action Work Plan in parallel with the Anti-Drug Campaign of 2017 (Phase I: January- June 2018 and Phase II: July-December 2018), with great results. However, there remain a number of issues that should be strengthened and considered for next intake.

2.1 Drug Prevention;

Drug prevention have been implemented in four different forms which are: education through media; education through technical expertise of the ministries and institutions

(aiming to make general citizens better understand the duties and responsibilities of relevant ministries and institutions); education through community focusing on raising public awareness on the issues and the impacts caused by drugs; and training of the key persons in order that they have the basis in passing on the education to members of the community. As a result, in 2017 there were 9,640,021 participants, in comparison to 13,774,739 participants in 2016, which is a slight decrease, but reached target of the most high risk group and increased the number of peers or trainees.

2.2 Drug treatment, rehabilitation, vocational training, enhancing life skills, social integration, and abstinent from drugs;

The official statistic shown that, the number of total drug users in 2017 was 18,104 persons, decreased by 12.20% compared to 2016. Among those;

- 8,944 persons integrated back into community;
- 3,101 persons enrolled and received treatment under community-base treatment services;
- 3,751 persons remained in rehabilitation centres;
- 2,308 persons were without treatment.

Cambodia also discovered that:

- a) Drug users aged between 18 – 35 years constituted about 89.43%;



- b) The major types of drug most commonly used were crystalline methamphetamine or ICE about 88.23% followed by methamphetamine (WY) tablets at 7.33%.

- 17,800 accused persons (1,586 females) were detained, which has increased by 79.20% in comparison to 9,933 persons of 2016.

2.3 Strengthening of Law Enforcement

Institutions:

- Capacity building for all types of law enforcement officers by training. In 2017, there were 2,163 officers in total trained domestically and abroad.
- 8,173 cases of arrested drug crimes, which is an increase by 92.48% in comparison to 4,246 cases in 2016.

Seized vital evidences of illicit narcotic substances in total amount of 296,521.00 grammes (methamphetamine ICE, WY tablets, ecstasy, heroin, cocaine, ketamine and cannabis); an increase by 74.06% compared to 2016 where total drugs seizure was 179,858.85 grammes.

2.4 Main Drugs Seizures by Cambodian Law Enforcement (in grammes):

Drug	2010	2011	2012	2013	2014	2015	2016	2017
WY	7,448.76	21,509.40	10,660.61	17,334.91	8,703.09	26,485.39	44,162.46	3,440.07
ICE	9,924.11	19,120.10	28,066.47	32,448.82	29,009.38	72,791.36	66,332.07	80,125.42
Ecstasy	103.05	103.05	0	0	3,159.43	21.26	1,652.60	25,063.35
Heroin	2,356.91	2,070.89	319.06	38,337.86	1,837.42	2,464.79	6,271.95	22,534.46
Cocaine	920.67	1,130.00	41,077.50	12,851.00	7,890.20	5,250.00	14,004.86	12,813.38
Ketamine	1.31	0	1,051.10	1,016.00	620.07	106.06	1,073.71	6,253.32
Cannabis	4,142.98	2,350.90	2,460.00	168,537.00	19,901.62	1,511,454.49	36,861.69	116,291.00
Total	24,897.79	46,284.34	83,634.74	270,525.59	71,121.21	1,618,573.35	170,359.34	296,521.00

2.5 Drug related cases in association with offenders:

Year	2009	2010	2011	2012	2013	2014	2015	2016	2017
Case	309	400	1,005	818	889	1,337	3,061	4,246	8,173
Offenders	615	864	2,381	1,788	1,830	3,142	7,008	9,933	17,800



2.6 Purity of drugs

Nº	Drug	Form	2010	2011	2012	2013	2014	2015	2016	2017
1	Meth	Tablet	15-28%	14-20%	3-19%	3-18%	10-19%	1.34-22.95%	0.46-22.42%	16%
2	Meth ICE	Crystal	75-83%	70-85%	10-84%	4-84%	3-86%	0.71-89.27%	1.34-97.31%	73%
3	Ecstasy	Capsule	75%	-	78%	-	-	-	-	
4	Ecstasy	Tablet	-	17-40%	40%	6%	23-39%	34-37%		34%
5	Heroin	Powder	20-85%	50-85%	10-70%	20-84%	33-71%	33.66-77.78%	41.59-80.29%	68%
6	Cocaine	Powder	60-70%	60-80%	70-80%	50-80%	58-62%	52.15-58.13%	-	78%
7	Ketamine	Tablet	10-20%	8-30%	-	-	-	-	-	
8	Ketamine	Powder	-	-	10-75%	50%	46-57%	1.04-54.89%	1.90-81,51%	54%

3. Precursors Control;

NACD has cooperated with the Ministry of Industry and Handicraft, Ministry of Health, and Council for the Development of Cambodia in managing, controlling, and following closely the data controlling chemical substances related to List IV of the Law on Drugs Control. These are chemical substances with license from the Council for the Development of Cambodia, technical standard required by Ministry of Industry and Handicraft, and the license from Ministry of Health.

4. International Cooperation;

NACD has continued to facilitate and strengthen the bilateral and trilateral cooperation mechanism with Thailand, Lao PDR and Viet Nam through a visit to study and experience the training courses and workshops with great results. NACD has a better cooperation with Lao PDR than the year before which led to the targeting and suppressing a number of drug major groups. NACD has continued to focus on strengthening and increasing international cooperation through annual meeting and the strengthening of mechanisms in implementing many action plans with the Greater Mekong Sub-region countries, regional countries, and other development partners



INDONESIA

Overview

There are economic, geographic and demographic factors influencing drug situation in Indonesia. For economic factors, there were disparity of price, high demand, gap in income – easily recruited couriers and free trade agreement of ASEAN Economic Community. As for geographic and demographic factors, there were 17,508 islands and 85,000 km length of beach with great number of population at 250 million. Method of transportation between 10 neighbouring countries includes by sea (39 international seaports), by air (17 international airports), by land cross border (3 countries) and by postal.

The global influence on Indonesia drug response started since 1961 by the Single Convention on Drug to consider drug addicts as a serious crime and subject to legal penalty. In 1972, Amended by Protocol 1971 and Ratified by Act No 9/1976 on Narcotics,

drug addicts needed to receive treatment and rehabilitation. In 1988, Ratified by Act No. 22/1997 on Narcotics and Act No. 5/1997 on Psychotropic Substances, drug addicts were given rehabilitation as an alternative to penalty. In 1998, UNGASS Meeting in New York led to a political declaration on solving narcotic problems with a balanced approach between law and health. In 2009, by the enactment of Act No. 35/2009 on Narcotics that ratified Act No. 22/1997 on Narcotics, Indonesia has reached political declaration and strategic action plan on balancing law and health approaches. In 2014, Indonesia considered penalty on drug misuses as useless and reconsidered measures on money laundering from narcotic crimes.

Indonesia emphasizes both drug supply and demand reduction strategies. For supply reduction, there are 4 strategies covering eradication of illicit drug trafficking, carrying out international and domestic cooperation,



strengthening interdiction operation for deterrence of smuggling drugs and assets forfeiture of drug dealers and their syndicates. For demand reduction, there are 4 strategies covering preventing people from drug misuse, strengthening communities, encouraging drug addicts to self-report to be rehabilitated and providing medical and social rehabilitation as well as post rehabilitation programs.

Drug Supply Reduction

In 2017, National Narcotics Board and Indonesian National Police have uncovered 51,464 drug cases along with 64,526 suspects. Total seized 151.5 tons of cannabis, 3.8 tons of crystalline methamphetamine (shabu), and 3 million tablets of ecstasy, along with other drugs. For suppression of money laundering related to narcotic crimes, there were 20 cases with 27 suspects and assets worth for more than 7.7 million USD.

Mainly small scale clandestine labs have been uncovered in Indonesia and most of them were used to produce crystalline methamphetamine (shabu). However, in 2017 law enforcement uncovered a medium scale clandestine lab hidden inside one of the nightclubs producing tenamfetamine (3,4-Methylenedioxyamphetamine or MDA) for the first time in Indonesia.

NPS abused and trafficking has become more and more alarming since the previous year. In 2017, the law enforcement seized almost 95 kg of khat, 45 kg of synthetic cannabinoids and 50 litres of 4-CMC (chloromethcathinone). Additionally, there was 4.15 litres of synthetic cannabinoids inside liquid vape sold via internet. This raised concern on how far drug traffickers have done to corrupt younger generations.

Until December 2017, 68 types of NPS has been detected, back then rapid development of NPS detected mainly because NPS drug abusers and traffickers were difficult to punish. However, in addition to narcotics and psychotropic drugs already controlled by Act No. 35/2009 on Narcotics and Act No. 5/1997 on Psychotropic substances, by the enactment of Minister of Health Regulations, up to 65 types of these NPS have been classified as narcotics or psychotropic substances group.

Drug Demand Reduction

In the demand reduction approach, preventive measures are taken as efforts to form a society that has resistance and immunity to drugs. Programmes and activities undertaken in reducing the prevalence of drug abuse targeting young people (children, adolescents, students, and college students) who are the target markets of the drug syndicate. Therefore, in 2017 BNN has developed an Anti-Drug Education



Module for five targets, such as children, students, workers, families and communities. This Anti-Drug Educational Module is a national priority programme that is in line with national policies on mental revolution. The module has been launched in four regions, namely North Maluku, Bali, Surabaya, and East Kalimantan.

The number of prevention activities that have been carried out by BNN, in a form of advocacy, socialization and campaign of STOP Drug in 2017 is 10,939 activities involving 2,525,131 people from various communities; both community groups, workers, and students. Prevention of drug abuse is also done through community empowerment. In 2017, BNN also worked with the Aceh provincial government to launch a feature programme, Alternative Development (AD) to replace the narcotic crop and marijuana plantation into a prime producer. This programme was claimed to have succeeded in several narcotic crops growing countries.

In the long run, Grand Design AD is expected to make Aceh clean from marijuana production and be able to change the current drug problem state of emergency. Through the AD; BNN, ministries/agencies, provincial governments, local governments, business community, and the nation's components are invited to synergize in the development of socio-culture, uphold security and order,

preserve the environment and forests, and improve food security and initiate the creation of agro-tourism in Aceh province.

Drug Abuser Rehabilitation

Drug Rehabilitation is one effort to save drug abusers from drugs. In 2017, BNN has rehabilitated 18,311 drug abusers, both in rehabilitation centres and in prisons, and has provided post-rehabilitation services to 7,829 former drug abusers. Abusers who have passed the primary rehabilitation period then follow the ongoing rehabilitation programme at Rumah Damping with several programmes designed for the recovering drug abusers to prevent relapses.

In addition to providing rehabilitation services for drug abusers, BNN is also developing a rehabilitation centre in Lido, Bogor, as a center of assessment, service centre and training centre (Centre of Excellence) in the field of drug abuser rehabilitation. As the first step, in 2017 BNN through the Deputy for Rehabilitation has made a roadmap of development, using the SWOT analysis of strengths, weaknesses, opportunities and challenges that the National Narcotics Rehabilitation Centre will face. The procurement process will be done in 2018.

Hopefully this featured service centre can be a reference for the rehabilitation of drug abusers not only for Indonesia herself but also for foreign countries.

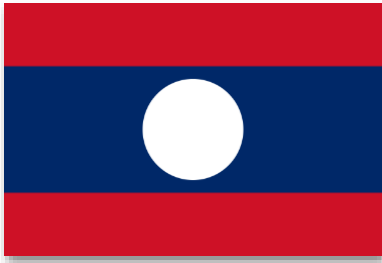


Synergize to overcome drug problems

Facing the heavy duty in handling drug problems, BNN opens itself to cooperate and synergize with all components of the nation in order to deal with the threat from drug problems. In 2017, BNN has established one cooperation with Lao PDR relevant official and 33 domestic cooperation with other government institutions, private sectors, educational institutions, and communities that have committed and take concrete actions in the effort of Prevention and Eradication of Drug Abuse and Illicit Trafficking (P4GN). This cooperation is expected to encourage other agencies and components to joint and support efforts in handling drug problems.

Strengthening institutions

In addition to synergize with all elements of the nation to deal with the threat of drugs, in 2017 BNN officially recruited 4 military officers to officiate strategic positions in the organizational structure of BNN. The involvement of military elements in handling drug problems is a part of the synergy of organizational dynamics. This is a form of seriousness of Indonesia in facing the threat of drugs. The addition of internal strength is also done by the establishing of another twenty eight BNN City/Regency level offices to expand the coverage of areas prone to illicit trafficking and drug abuse. So currently BNN has 34 BNN provincial level offices and 177 BNN city/regency level offices spread throughout Indonesia.



LAO PDR

Overview

Lao PDR locates in the centre of the Great Mekong Sub-region with long border with all MOU signatory countries. The government of Lao PDR is concerned about this geographic location which is very sensitive and has made Lao PDR increasingly attractive as a transit country for ATS, heroin as well as precursor chemicals. The drug trafficking through Lao PDR has been increasing with higher frequency and volume. Northern border is still the main gateway of drug inflow to Lao PDR, while border in the southern part of the country has been increasingly used for drug outflow. Methamphetamine tablet (ATS) remains the main drug of abuse, while the number of opium users remains almost stable.

The Government of Lao PDR prioritizes the fight against drug trafficking and use, and instructed line sectors, local administration and the general public to focus on the

successful implementation of national legislative strategies against drugs such as the Law on Narcotics and the National Drug Control Master Plan 2016-2020.

Measures taken on drug control include (1) civic awareness campaign (2) alternative development (3) drug demand reduction (4) law enforcement and (5) international cooperation.

Civic Awareness Campaign

LCDC (Lao National Commission for Drug Control and Supervision) has mobilized communities through effective civic awareness campaigns to prevent drug abuse, production, and trafficking. Local drug control agencies have worked actively towards drug prevention by means of drug education and anti-drug campaign at different levels to raise awareness in society, primarily among youth population, of negative impact and danger of drugs in



various forms and methods. LCDC and local authorities have strived for establishing families, villages, educational institutes, firms, and other organizations to be drug-free places.

Alternative Development (AD)

Lao PDR has integrated AD programmes into national drug control plans and policies and jointly with China and UNODC conducted an annual opium crop monitoring and assessment survey. Lao PDR has also implemented AD programme in Houaphan Province in the northern part of the country. There are 2,881 households with 20,419 people residing in the 38 target villages of 4 districts.

Drug Demand Reduction

In order to save victims of drug use, currently amounting to about 70,000 persons, the authorities of the Lao PDR provide 12 standard and non-standard of rehabilitation and vocational training centres while two are under construction. Due to this enhanced efforts, the number of rehabilitated and reintegrated drug users has increased, Lao PDR annually treated 3,000 to 4,000 users of different kinds of drug. At present, there are 13 community-based treatment (CBT) based at district hospitals, and still expanding the availability principally for ATS users. Counseling services have been provided to a much larger part of population by enabling

hospitals, clinics, doctor offices and high schools across the country to offer such services.

Law Enforcement

In 2017, Laos law enforcement agencies have achieved in suppressing 3,035 drug trafficking cases throughout the country, the total number of drug-related arrests was 4,549 offenders (527 females) including 103 non-nationals. The number of methamphetamine tablets seized was 1,001. 96 kg, 149.55 kg of heroin, 124.45 kg of ICE, 142.98 kg of opium, and 4,810.05 kg of cannabis. Over the past few years, the vast majority of drug-related arrests have involved methamphetamine tablets. However, it seems that the trafficking of heroin has now gained new impetus.

Drug problems that Lao PDR is currently facing include being a transit country from locating in the Golden Triangle and lacking of resources. Lao is still used as a transit country for ATS, heroin and precursor chemicals. Lao is still the main gateway of drug inflow via the west-northern border of the Golden Triangle while border in the southern part of the country has been increasingly used for drug outflow. Methamphetamine tablet (ATS) remains the main drug of abuse while the number of opium users remains almost stable and the use of ATS seems to have increased but there is no solid data to confirm this



observation. So a comprehensive survey on ATS, heroin and NPS use is needed. At a national level, opium production increased but in the area where alternative development projects were implemented, both opium production and use declined or stopped. Lastly, Lao PDR lacks capacity building, financing, materials and data/information to support various implementations.

Drug trafficking/smuggling methods

Most smuggle cases were via land routes by cars. Some cases smuggled via water routes by boats and few cases smuggled via air routes by passenger flights. As for drug price, it was recorded that 1 package of heroin = 350 grammes = 8,500 USD, cannabis 1 kg = 125 USD, opium 1 kg = 1,800 USD, ATS 1 tablet = 2 USD and ICE 1 kg = 18,000 USD. Drug syndicates operate as a dynamic gang, who knows only their network for trafficking. There is a commander, who monitors the transportation of drugs. They use several techniques such as modification of expensive cars, passenger buses, trucks, commercial cars for transport drugs and use modern communication technology for contact and making deals.

Drugs of abuse in 2017

Methamphetamine tablet (ATS) remains the main drug of abuse followed by opium, heroin

and cannabis. The number of ATS users is higher in urban and rural areas and rise in major cities. Currently Lao PDR has 13 drug treatment and vocational training centres in total for medical treatment, rehabilitation, vocational training and counseling.

Precursors used in illicit drug production

Recent data showed that there has no any moving precursor chemicals used to produce drugs. When drug traffickers were arrested, they were detected and seized white and red powder and the number has increased each year yet there is no analysis to identify these precursors/chemicals.

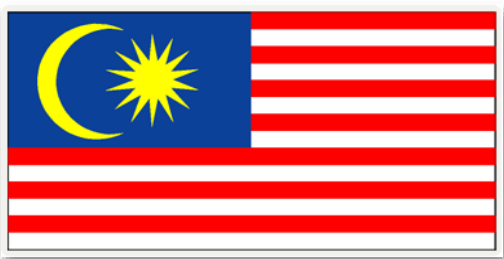
Border Liaison Offices (BLOs)

BLOs have been set up at border checkpoints along neighboring countries to assure safe international borders against illicit drug trafficking and smuggling. Lao government has implemented existing bilateral and multilateral agreements on drug control cooperation, exchange of information and intelligence and against drug trafficking with ASEAN and friendly countries. The regional cooperation such as the Joint Operation or 'Safe Mekong' to strengthen the network and collaboration at regional level between Lao PDR, China, Myanmar, Thailand, Viet Nam and Cambodia has been established. For other international cooperation, Lao PDR always pays high attention to regional and



international collaboration to combat drug menace and tackle challenges. As drug prevention is taken as a first priority task, Lao Government pays serious attention to strengthening international cooperation to fight against drugs. Lao PDR has signed bilateral agreements on cooperation against illicit trafficking of narcotic drugs and psychotropic substances and precursor chemicals control with a number of friendly countries namely: ASEAN, China, Cuba, India, Russia, USA and UNODC.

In conclusion, as Lao PDR is well aware that the solution to this drug issue is not an individual responsibility of any particular country, cooperation in the field of law enforcement must include among others, the exchange of information and intelligence as well as share of good practices and experiences. Much of the success in fighting drugs would not have been possible without such international cooperation.



MALAYSIA

Overview

Since 1983, Malaysia has declared the drug problem as the number one enemy of the nation as it is not only regarded as a social problem but also a threat to the national security. Therefore, Malaysia views drug abuse with grave concerns and strongly advocates maximum and uncompromised effort of securing communities from illicit drug. Failure in tackling drug menace in the right and effective approach would lead to negative consequences on Malaysia's aspiration to become a developed nation. It is for this reason, Malaysia stands firm against any legalization of illicit drugs and continues to work in solidarity with all its ASEAN Members to achieve the vision of a society free of drug abuse.

In an effort to deal with the development of the drug situation and acknowledge the

implementation of evidence-based approaches, the Ministry of Home Affairs and the National Anti-Drugs Agency conducted a review of the National Drug Policy (NDP 2017) which was approved by the Cabinet in March 2017. NDP 2017 is an extensive policy that incorporates both demand and supply reduction approaches and underlines the following five thrusts of action; Preventive Education, Treatment and Rehabilitation, Law Enforcement, Harm Reduction and International Cooperation.

The NDP 2017 now serves as a guideline for all relevant governmental organisations, non-governmental organisations and various community sectors involved in tackling drug-related issues. It provides a more holistic and comprehensive approach in reducing the supply and demand of drugs so as to significantly reduce the drug threats and protects our nation from the scourge of drug.



Scenario of Drug Addiction

Table 1: Number of drug dependents by case status, Malaysia, 2013–2017

Year	New	Relapse	Total
2013	13,481	7,406	20,887
2014	13,605	8,172	21,777
2015	20,289	6,379	26,668
2016	22,923	7,921	30,844
2017	18,440	7,482	25,922

Table 1 shows the time series for the number of drug dependents by case status for the year of 2013 until 2018 (January-May). As for 2017, a total of 25,922 drug dependents were detected, showing a decrease of -16.0% compared to the year of 2016 (30,844 drug dependents). They are consisted of 18,440

new drug dependents, a decrease of -19.6% compared to 22,923 of those for the same period a year before. The rest were 7,482 relapse drug dependents, indicating a decrease of -5.5% compared to the previous year (7,921 addicts).

Table 2: Number of drug dependents by category of age, Malaysia, 2013–2017

Category of age	Range of age	2013	2014	2015	2016	2017
Teenager	13-15	18	28	45	85	72
	16-17	168	206	246	301	248
	18	219	388	426	440	374
Youth	19	460	579	703	854	678
	20-24	3,212	3,751	4,986	5,572	4,706
	25-29	3,968	4,154	4,977	5,719	4,735
	30-34	4,022	3,961	4,936	5,849	4,820
	35-39	3,191	3,247	3,976	4,715	3,884
Adult	40-44	2,261	2,364	2,724	3,130	2,790
	45-49	1,672	1,512	1,729	1,972	1,680
	≥ 50	1,696	1,587	1,920	2,207	1,935
Total		20,887	21,777	26,668	30,844	25,922



According to the above Table 2, youth aged 19-39 have dominated the number by 72.6% (18,823 drug dependents). However, the overall numbers of drug dependents detected among youth, teenagers (aged 13-

18) and adult (aged 40 and over) have showed a decrease by -17.1%, -16.0% and -12.4%, respectively for the period of 2016 and 2017.

Prevalence of Drugs

Table 3: Number of drug dependents by category of drug/substance group, Malaysia, 2013–2017

Year	Opiate ¹	Marijuana	Methamphetamine (crystalline)	Methamphetamine (tablets)	Amphetamine-type stimulants (ATS) ²	Psychotropic Group ³	Others ⁴	Total
2013	16,041	1,885	2,901	107	369	18	40	21,361
2014	14,502	1,919	4,117	1,239	535	8	35	22,355
2015	16,616	1,389	8,133	674	635	7	25	27,479
2016	16,985	1,236	10,107	2,631	764	18	23	31,764
2017	10,154	1,066	10,419	4,366	764	9	13	26,791

In 2017, the main trend in drug use in Malaysia has changed from opiate-based (heroin and morphine) to the amphetamine type stimulant (ATS) category. The use of ATS especially methamphetamine and ATS tablets has substantially increased in recent year. According to the table above, a total of 14,785 drug dependents were detected using methamphetamine (in form crystalline & tablets), indicating an increase of 16.1% compared to 12,738 drug dependents in 2016. In the same period, 10,154 drug dependents were detected using heroin and

morphine compared to 16,985 drug dependents in year 2016, indicating a decrease of -40.2%. However, the use of ATS tablets (includes methamphetamine tablets, ecstasy type and amphetamine) have shown significant increase by 51.1% (5,130 drug dependents in 2017 compared to 3,395 drug dependents in 2016). Marijuana use indicates a decrease about -13.8% for 2017 compared to the previous year (1,066 drug dependents in recent year compared to 1,236 drug dependents in 2016).



Drug Supply Reduction

Malaysia remains vulnerable to the drug threat due to its close proximity to the drug-producing region of the Golden Triangle. As a result, the illicit drug trafficking syndicates (IDTS) have taken this opportunity to exploit Malaysia as a temporary hub to transport drugs to other countries especially Indonesia, China, Japan, Korea and Australia. In response, Narcotics Crime Investigation Department (NCID) continues to monitor these illicit activities with active enforcement actions and joint operations with local authorities and cooperation from international drug enforcement agencies. This resulted in the numerous successes in operation which contributes to the increased figure of seized drugs in 2017.

Heroin - a low - grade heroin (heroin no.3) in Malaysia is made by altering heroin base with acid, caffeine and various colouring agents where the purity is reduced tremendously. Heroin seizures showed an increase from 440.17 kg in 2016 to 603.07 kg in 2017. The price of heroin no.3 is at RM 8,000 per pound (450 grammes) with the average purity of 5%. Heroin base is pricing about RM 73,000 per slab (450 grammes) while a high - grade heroin (no.4) is RM 65,000 per pair (700 grammes).

Methamphetamine - syndicates hired foreign chemists to set up clandestine lab and assist in manufacturing methamphetamine in the country. The price is at RM 55,000 per kg with the average purity of 79%.

Cannabis - seizure of cannabis showed significant decrease to 2,696.27 kg as

compared to 2,945.46 kg in 2016. The price is at RM 2,800 per kg with the average purity of 85%.

Erimin 5 and Benzodiazepines - seizure of erimin 5 and benzodiazepines tablets showed significant increase to 2,756,552 tablets compared to 1,891,852 tablets in 2016. The price is at RM 15.00 per tablet with the average purity of 3.7%.

Ecstasy - seizure of ecstasy showed an increase from 200,763 tablets in 2016 to 329,594 tablets in 2017. The price is at RM 30.00 per tablet with the average purity of 55%.

Kratom - significant decrease on the seizures of kratom leaves from 81,028.57 kg in 2017 compared to 124,717.89 kg in 2016. The price is at RM 10.00 per leaf. From the overall kratom seizures in 2017, 66% or 53,542.33 kg of kratom leaves is believed meant for Thailand market. Intensified enforcement efforts done by the NCID had resulted in numerous successes in tackling the supply of kratom into Thailand.

Overall, the wholesale pricing of certain drugs; for example methamphetamine is slightly decreased due to oversupply from the source countries into Malaysia. IDTS continues to adapt their manufacturing and smuggling strategies in order to avoid detection. This caused the syndicates to change their modus operandi. Rather than conducting their operations in a state-of-the-art drug producing facilities, these syndicates conducts their operations in smaller labs to avoid detection by authorities. With drug



processing methods at their fingertips, these syndicates resorts to constructing 'kitchen labs' in order to produce the drugs to cater to their customers. These labs, easily constructed and require less manpower to operate than an advanced clandestine, pose a threat for the local drug enforcement agencies as it is far more difficult to be located. The construction of these kitchen labs contributes to the higher number of

clandestine laboratories dismantled by NCID as well as the increase in the number of people arrested in recent years. In 2017, a total of 18 manufacturing facilities and tablets processing operations, primarily crystalline methamphetamine and ecstasy facilities, were dismantled. Meanwhile, a total of 73 syndicate members were arrested in connection with the manufacturing facilities.



MYANMAR

Overview

Myanmar gained independence from British colonial rule in 1948 and since then, has inherited the dire legacy of poppy cultivation in its northern territories. Although successive Governments have strived to eliminate this problem, poppy cultivation thrived in various forms taking advantage of political instabilities, weak prevalence of law and order, poverty and underdevelopment of ethnic population residing along border areas, occurrence of ethnic armed conflicts, and the inability to have complete control over border areas. Additionally, with the illegal inflow of precursor chemicals used for manufacturing narcotic drugs from neighbouring countries, Myanmar is also faced with challenges of methamphetamine (ATS) problem in some parts of its border areas.

Enacting Laws

As a member of the United Nations, Myanmar is a signatory to the Single

Convention on Narcotic Drugs (1961), the Convention on Psychotropic Substances (1971), the Protocol Amending the Single Convention on Narcotic Drugs (1972) and, the Convention against Illicit Traffic of Narcotic Drugs and Psychotropic Substances; and has been implementing the provisions contained in these International Conventions. Accordingly, Myanmar has enacted Narcotic Drugs and Psychotropic Substances Law in 1993, Rule Relating to Narcotic Drugs and Psychotropic Substances Law in 1995, and Rule Relating to Supervision of Controlled Precursor Chemicals in 2004 respectively.

To effectively manage the problem of narcotic drugs, the Central Committee for Drug Abuse Control (CCDAC) was formed in 1976 headed by the Union Minister for Home Affairs as Chairman and together with 16 members; the Central Committee is taking measures to control narcotic drugs. CCDAC has not only formed Drug Abuse Control



Committee at all Region/State, District, Township, Ward and Village levels but has also subdivided itself into following ten sectors namely, Law Enforcement and Administration, Alternative Development, Substituted-Crops, Livestock Breeding, Medical Treatment, Rehabilitation, Educating Students and Youths, Public Awareness, International Relations, and Supervising Controlled Precursor Chemicals. All sectors are actively engaged in reducing the production and use of narcotic drugs.

Supply Reduction

Annual Opium Surveys are being undertaken jointly with UNODC since 2002 and satellite survey of poppy cultivated areas is being undertaken in cooperation with China since 2006. This bilateral survey has enabled Myanmar to destroy poppy fields based on satellite imageries provided by China.

According to the survey report on Illicit Crop Monitoring developed in cooperation with UNODC, opium production that stood at 1,760 metric tons in 1996 was reduced to 315 metric tons in 2006. However, production increased up to 870 metric tons in 2013 but later in 2014 the production was considerably decreased to 670 metric ton and was further decreased down to 647 metric ton in 2015. Due to unforeseen circumstances; UNODC could not take Illicit Crop Monitoring Survey for 2016.

Total opium poppy cultivation in Myanmar currently is 41,000 ha, 25% decreased, with potential opium production at 550 tons, 14% decreased comparing to Afghanistan where poppy is cultivated in 328,000 ha with potential opium production at 9,000 tons. Reported poppy eradication in Myanmar in 2017 showed 3,533 ha or estimated 47.34 tons in total of the whole country.

	1995-96	2005-06	2008-09	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Cultivated (Hectares)	163,000	21,500	31,700	38,100	43,600	51,000	57,800	57,600	55,500	-	41,000
Production (Tons)	1760	315	330	580	610	690	870	670	647	-	550
Destroyed (Hectares)	1,937	4,188	4,088	8,274	7,058	23,771	12,258	15,188	13,237	7,562	3,533



The Supervision Committee for Controlled Precursor Chemicals was formed in 1998 and has been able to supervise the importation, production, exportation, transportation, utilization and trading of these chemicals. These precursor chemicals are

however, smuggled into Myanmar from neighbouring countries across the borders in many ways and due to the diligence of Anti-Narcotic Units, the volume of controlled substances uncovered and confiscated are as follows;

Type of Precursor	2012	2013	2014	2015	2016	2017
Caffeine (kg)	1,441.27	13,482.60	431.46	9,932.26	19,847.48	5,885.000
Ephedrine (kg)	358.37	133.36	32.10	111.94	534.204	0.0015
Pseudoephedrine (kg)	6,946.99	3,580.76	1,945.24	1,271.97	119.20	390.100
Acetic anhydride (lt)	9.50	55.00	1,297.53	260.00	16.00	1,318.340
Hydrochloric acid (lt)	-	173.50	1,702.59	7,950.00	3,494.8	106,720.00
Sulphuric acid (lt)	2,585.50	924.00	280.00	2,197.65	2,8476.8	11,034.90
Ethyl Ether (lt)	-	-	4,1995.58	8,188.00	250	-

Demand Reduction

Drug addiction is being viewed as a public health issue and thus, the Ministry of Health is providing treatment for drug users at 26 major drug treatment centres and 47 minor treatment centres. There are also community based drug treatment centres in many parts of the country. Additionally, there are 46 methadone centres – 15 in Kachin State, 14 in Shan State, 12 in Sagaing, 3 in Mandalay and 2 in Yangon Region – providing substitution therapy. CCDAC itself has set up 3 youth rehabilitation centres where both treatment and rehabilitation are being provided to drug users. The transmission of

blood-borne diseases including HIV, which is a negative consequence of injecting drug use, is also being addressed through harm reduction interventions.

Under the supervision of the Ministry of Social Welfare, there are 6 rehabilitation centres in Yangon, Mandalay, Myitkyina, Lashio, Kyaing Tong and Tachileik that are helping drug users - who have undergone treatment - to reintegrate back into the social main stream. Campaigns are being launched to encourage drug users to get treated at drug treatment centres. While getting treated, they themselves and their dependents can receive necessary support, undergo physical



and mental rehabilitation, receive vocational training programmes and be part of reintegration programmes that are linked to continuum of care interventions. If they so desires, they can even get trained to become volunteer drug wardens.

The Ministry of Education takes the lead in raising awareness on the dangers of narcotic drugs among school children and youths. Information on dire consequences of drug use has already been included in the life skills curriculum for children at basic education level. Public debates, exhibitions, competitions and refresher training courses for teachers on the perils of narcotic drugs are also held for in-school youths whereas,

community based awareness raising programmes are conducted for out of school youths.

Enforcement Measures

The Myanmar Military, Myanmar Police Force and the Customs Department are the responsible entities to combat narcotic drugs in Myanmar. Drug Enforcement Division is being formed under Myanmar Police Force and its 3 sub divisions and 50 units are placed in areas around the country where production and trafficking of drugs are found to be highest and along the border areas and are undertaking effective anti narcotic drugs enforcement measures.

The following chart illustrates the seizures of narcotic drugs in Myanmar.

Type of drugs	2012	2013	2014	2015	2016	2017
Opium (Kg)	1,470.35	2,356.93	1,828.40	888.84	945.7096	1,256.169
Heroin (Kg)	335.79	238.93	435.46	186.04	769.2589	570.622
ATS Tablet (Million)	18.16	10.18	12.65	49.95	98,353,462.5	72.816
ICE (Kg)	426.66	173.00	47.11	2,261.69	2,464.0834	1,107.491
Mitragyna speciosa (Kg)	330.15	218.95	605.31	687.35	1,409.4324	651.127
Cannabis (Kg)	80.27	40.94	205.54	87.70	188.7805	198.826
Case	4,006	4,928	6,696	6,414	8,800	9,544
Suspect	5,740	7,137	9,425	9,188	13,591	14,000



The following chart illustrates the number of heroin refineries and ATS tablet manufacturing machines seized between 2005 and 2017.

Types	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Heroin Refineries	4	10	8	5	3	1	-	1	3	2	-	2	-
Tablet Machines	2	8	5	1	1	-	2	6	2	2	3	-	1

Cooperation with the general population and other organizations

The Ministry for Information is in charge of raising awareness among the general population on the perils of narcotic drugs and the need to avoid abuse of it. Educational programmes on this menace are disseminated nationwide using all forms of media including radio, television, newspapers, journals, articles, cartoons and posters with members of Myanmar Anti-Narcotic Association (MANA) travelling far and wide within the country holding preventive education talks and distributing educational booklets that are published on a monthly basis. Additionally, narcotic drugs preventive interventions are also undertaken in cooperation with various UN Agencies, NGOs and CBOs.

International Cooperation

Myanmar is cooperating closely with countries within the Greater Mekong Sub-Region as well as with ASEAN Member States in striving to combat narcotic drugs. Myanmar has also signed bilateral

agreements with India, Bangladesh, Viet Nam, Russia, Lao PDR, China, Thailand and the United States of America to jointly combat narcotic drugs.

Myanmar, as a member of Mekong MoU Countries, enhances drug elimination and obligates objectives of Safe Mekong Operations. During the Safe Mekong Operation in 2015, Myanmar has been successfully seized and apprehended many drugs and drug related cases and has prosecuted accordingly. Myanmar also actively participated in 3-year Safe Mekong Operation and shared responsibilities with the Member States. Safe Mekong Coordination Centre was established in 2013. Myanmar also dispatched two officers to work full-time at the centre. Myanmar hosted the SMCC operation centre at Kyaing Tong, Shan State during 1st July to 30th September 2017. Other Member States also sent 2 officers from their respective country to work in the centre.



Myanmar actively participated as an observer at the ASEAN Senior Officials on Drug Matters meetings before Myanmar joined the ASEAN in 1997. ASEAN Senior Officials on Drug Matters Meeting is held annually and ASEAN member countries take turn alphabetically in hosting the meeting. Delegates from all member states and delegates from UNODC and IFNGO also attend in every meeting. Moreover, other back to back meetings are simultaneously held with India, Korea, Japan and China during the above mentioned meeting.

The first meeting of the BIMSTEC Counter-Terrorism and Transnational Crime was held on 9 December 2004 in New Delhi, India. At that meeting BIMSTEC Sub-Group on Prevention of Illicit Trafficking in Narcotic Drugs, Psychotropic Substances and Precursor Chemical was established and was led by Myanmar. The 4th Meeting of the BIMSTEC Sub-Group on Prevention of Illicit Trafficking in Narcotic Drugs, Psychotropic Substances and Precursor Chemicals was held on 12-13 September 2016 in Yangon, the Republic of the Union of Myanmar.

Additionally, there are joint endeavours with Yangon based US Drug Enforcement Administration (DEA), Office of the Narcotics Control Board (ONCB) Thailand, Australian Federal Police (AFP) and with National

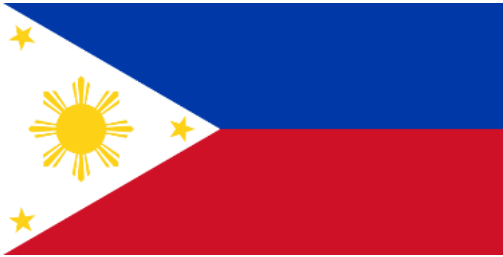
Narcotics Control Commission (NNCC) of China and have set up Border Liaison Offices (BLOs) along Myanmar-China, Lao PDR and Thailand borders. These serve as main centres for exchanging information relevant to combat narcotic drugs.

Myanmar herself is not only carrying out its resolution adopted by CND, the country is also carrying out its elements adopted from the resolutions of UNGUSS which was conducted in New York, USA in April 2016.

Myanmar existing law, that is 1993 Narcotic Drugs and Psychotropic Substances Law, was amended in line with international standard and norms.

Conclusion

The problem of narcotic drugs is intrinsically linked to ethnic armed conflicts. Thus, in order to attain peace within the country through reducing armed conflicts, Myanmar has formed a Union Level Central Committee on Peace with the President as the Chairperson and is striving to secure a nationwide ceasefire agreement by holding political dialogues with all parties concerned. Myanmar is trying its best to face and overcome these constraints and challenges by adopting plans and programmes that conforms to the country's reality.



THE PHILIPPINES

Overview

For the year 2017, reports from the treatment and rehabilitation facilities showed that a total of 4,045 admissions were registered. Out of this, 3,256 are new cases, 633 are relapsed or readmitted cases and 156 have sought treatment in an out-patient facility.

A significant decrease in admission of 33% was noted as compared to the previous year. The reasons for the decline may be attributable to the following: a) the continuous and relentless efforts of the law enforcement, coupled with action and immediate response of local government units on their all-out campaign, to assist identified individuals with

problems on drug use that availed of the community-based treatment and rehabilitation programmes. The latter being offered by the LGUs through their City/Municipality/Barangay Anti-Drug Abuse Councils (CADACs/MADACs and BADACs); b) continuous conduct of advocacy seminars on drug abuse prevention and control to include treatment and rehabilitation, available facilities and services for individuals with substance abuse disorders and interventions that provide assistance to both the drug user and their families; and c) love and support of the family in the treatment, rehabilitation and recovery of their love ones who became victims of these illegal drugs.



The profile of drug users based on the treatment and rehabilitation facilities for the year 2017 is as follows:

Profile of Drug Abusers (Facility-Based)

Demographic Indicator	2017
Mean Age	31years old
Sex Ratio (Male to Female)	10:1
Civil Status	Single (53.52%)
Status of Employment	Unemployed (45.96%)
Educational Attainment	High School Level (27.32%)
Average Monthly Family Income	P 12,337.57 (approximately USD244.60)
Place of Residence	Mostly Urban (NCR 43.31%)
Duration of Drug Use	More than 6 years
Nature of Drug Use	Mono Drug-Use
Drugs/Substances of Abuse	Meth, Marijuana, Contact Cement

Trends of illegal drug smuggling in the Philippines

There are three main illicit drug trafficking activities considered as major threat sources in the Philippine context namely: smuggling, manufacturing, and cultivation.

Illegal drugs enter the country through these major avenues: seaports, international airports, mail and parcel services, and the vast expanse of the Philippine coastlines. Vulnerability of the country for drug smuggling is due to various entry and exit points.

Methamphetamine Hydrochloride or Shabu are transported within the country via several

modes of transportation depending on the area of transaction i.e. airplane, Roll-on/Roll-off (RORO) vessels, ship/yacht, mail and parcel, private and public utility vehicles.

The most recent major smuggling operation was on May 26, 2017, wherein 604 kilogrammes of methamphetamine hydrochloride or shabu, hidden in five cylindrical roller printing machines from China, were seized in Valenzuela City as a result of joint cooperation by Chinese and Philippine authorities.



Abuse of illegal drugs in the country

Methamphetamine Hydrochloride or shabu is the main drug of abuse which was used to be smuggled into the country in processed form. However, since 1997, there has been a trend to manufacture shabu in the country. Meth/Shabu price is Php 5,000.00 or USD 99.13 per gramme, methylenedioxy methamphetamine (MDMA) or ecstasy is another prevalent drug affecting the affluent members of the society. MDMA/ecstasy price is Php 1,500.00 or USD 29.74 per tablet.

Additionally, marijuana/cannabis is a perennial plant that naturally grows in high altitude areas in the Philippines. Marijuana/cannabis was predominant before it was overtaken by the introduction of shabu in the early 1990's. Marijuana cultivation is largely concentrated in Northern Luzon with most of the producing areas located in the Cordillera Administrative. Marijuana/cannabis price is Php 100.00 or USD 1.98 per gramme.

Modus Operandi and Concealment methods

As law enforcers intensified their operations against illegal drugs, drug traffickers also find ways to hide their operations and transactions from authorities.

The use of hotels, inns and related rented establishments are allegedly being utilized as venues for illegal drugs trade. The laxity in security as to the entry of illegal drugs in the said establishments and the guarantee for customers' privacy are some of the considerations why such transactions are taking place in these venues aside from the comfort of hiding from law enforcers.

Use of "bitcoin" as mode of payment, Bitcoin is an innovative payment network and a new kind of money. It uses peer-to-peer technology to operate with no central authority or banks; managing transactions

and the issuing of bitcoins are carried out collectively by the network. Three (3) separate operations were conducted by law enforcement units in the country which resulted in the seizure of a total of 223 tablets of 'fly high' and 1,044 tablets of bitcoin ecstasy. The drugs were ordered from the Netherlands and the arrested suspect was an Indian national.

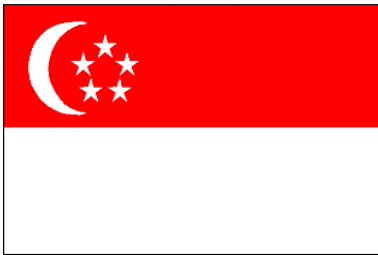
African drug syndicates are found to involve in bringing methamphetamine hydrochloride into the country for distribution. These syndicates use drug couriers in exchange of huge amount of money. They befriend or marry potential recruit then later turn them into couriers or cohorts. The couriers are recruited either through the internet or by casual acquaintances, usually fellow Filipinos, who are connected to these



syndicates. Moreover, some of these syndicates engage in travel & tours businesses/agencies and use fraudulent documents to recruit couriers more easily.

Most of the illegal drugs being transported are hidden in false compartment of luggage/suitcases or placed in the bottom part of luggage, in sole of shoes, inside the

hand-bags of the courier, in milk boxes, in chocolate pellets in a tin can, in sealed ceramic boxes, tea bags, shampoo bottles, the use of Transport Network Vehicle Services or TNVS (e.g. GRAB, UBER) delivery services to transport illegal drugs to their intended customer and lastly, through ingestion or swallowing.



SINGAPORE

Overview

Main drug problem

Methamphetamine, heroin and cannabis continued to be the most commonly abused drugs. 98% of drug abusers arrested abused at least one of these three drugs. For new drug abusers, methamphetamine (80%) and cannabis (13%) continued to be the most commonly abused drugs.

A total of 3,091 drug abusers were arrested by the Central Narcotics Bureau (CNB) in Singapore in 2017. This was a 5% decrease from the 3,265 drug abusers arrested in 2016. The number of repeat drug abusers arrested decreased by 4% from 1,917 in 2016 to 1,842 in 2017.

The number of new drug abusers arrested also decreased by 7% from 1,348 in 2016 to 1,249 in 2017. However, they continued to form a significant proportion (40%) of all abusers arrested. Close to two-thirds of the new abusers arrested were under 30 years old.

Drug type

- Methamphetamine and heroin remained the two most commonly abused drugs in Singapore. 1,991 methamphetamine abusers (64%) and 848 heroin abusers (27%) were arrested in 2017.
- Cannabis was the third most commonly abused drug, with 204 cannabis abusers (7%) arrested in 2017. Of the 3,091 drug abusers arrested in 2017, 521 abusers (17%) were poly drug abusers who abused more than one type of drug.
- Methamphetamine abusers made up the largest proportion of all new abusers. Of the 1,249 new abusers arrested in 2017, 999 (80%) had abused methamphetamine. Cannabis was the second most commonly abused drug among new abusers, with 157 new cannabis abusers (13%) arrested in 2017.



Age group

- 40% (1,234) of all drug abusers arrested in 2017 were below 30 years old. Drug abusers in the 20 to 29 age group continued to form the largest group of abusers in 2017 at 31% (956).
- Close to two-thirds (800 or 64%) of all new abusers arrested in 2017 were aged below 30. Nearly half (565 or 45%) of all new abusers arrested in 2017 belonged to the 20 to 29 age group.
- There was a decrease in new abusers aged below 40. New youth abusers aged below 20 decreased by 4% from 244 in 2016 to 235 in 2017, while young adults aged 20 to 29 decreased by 13% from 650 in 2016 to 565 in 2017. Those aged 30 to 39 saw a 4% decrease from 313 in 2016 to 301 in 2017.

Sustained enforcement efforts to curb drug supply and demand

Singapore's primary drug enforcement agency, CNB continued to maintain intensive enforcement efforts against drugs and

worked closely with its Home Team counterparts to keep Singapore streets drug-free. In 2017, CNB supported by the Singapore Police Force (SPF), conducted 19 island-wide operations targeting drug traffickers and abusers. Together with SPF and the Immigration and Checkpoints Authority (ICA), CNB also conducted 1,661 operations at the land, air and sea checkpoints to intercept drugs entering Singapore. Major operations led by CNB crippled 23 drug syndicates.

CNB actively worked with its regional counterparts to tackle the drug menace. In 2017, CNB conducted 12 joint operations with its counterparts, of which seven operations were conducted with the Narcotics Crime Investigation Department (NCID) of the Royal Malaysian Police (RMP).

Drug Seizures in 2017

There was a 21% increase in seizures of crystalline methamphetamine - more commonly known as 'ICE' - from 18.27 kg in 2016 to 22.18 kg in 2017. Heroin and cannabis seizures decreased compared to 2016. Heroin seizures saw a 30% decrease to 36.92 kg in 2017. Cannabis seizures saw an 18% decrease to 44.05 kg in 2017.



Drug type	2016	2017	% change in seizure
Heroin No.3	52.41 kg	36.92 kg	- 29.6%
Methamphetamine ('ICE')	18.27 kg	22.18 kg	+ 21.4%
Cannabis	54.01 kg	44.05 kg	- 18.4%
Cocaine	2 g	66.41 g	+ 3,220.5%
'Ecstasy'	3,891 tablets + 97.94 g	4,743.5 tablets + 11.43 g	+ 21.9% (tablets) - 88.3% (weight)
Methamphetamine tablets	242 tablets	827 tablets	+ 241.7%
Ketamine	1.53 kg	1.01 kg	- 34.0%
Nimetazepam	19,550 tablets + 9.41g	19,580 tablets	+ 0.2% (tablets) - 100.0% (weight)
Buprenorphine ('Subutex')	NIL	NIL	-
New Psychoactive Substances (NPS) (e.g. synthetic cannabinoids, synthetic cathinones etc.)	1,769 tablets + 87.17 g	642 tablets + 3,543.93 g	- 63.7% (tablets) + 3,965.5% (weight)



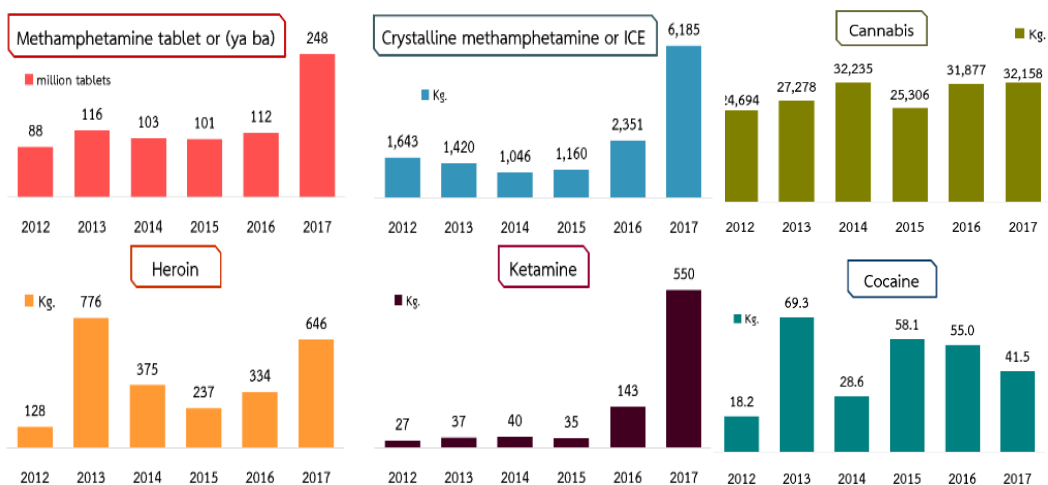
THAILAND

Overview

In 2017, crystalline methamphetamine was the most seized drug at 6,056.4 kg, followed by heroin at 616.4 kg and ketamine at 502.8 kg while 238.7 million methamphetamine

tablets were also seized. In term of quantity, these four drug types seized were all higher than in 2016.

Statistics of seized drugs by type of drug

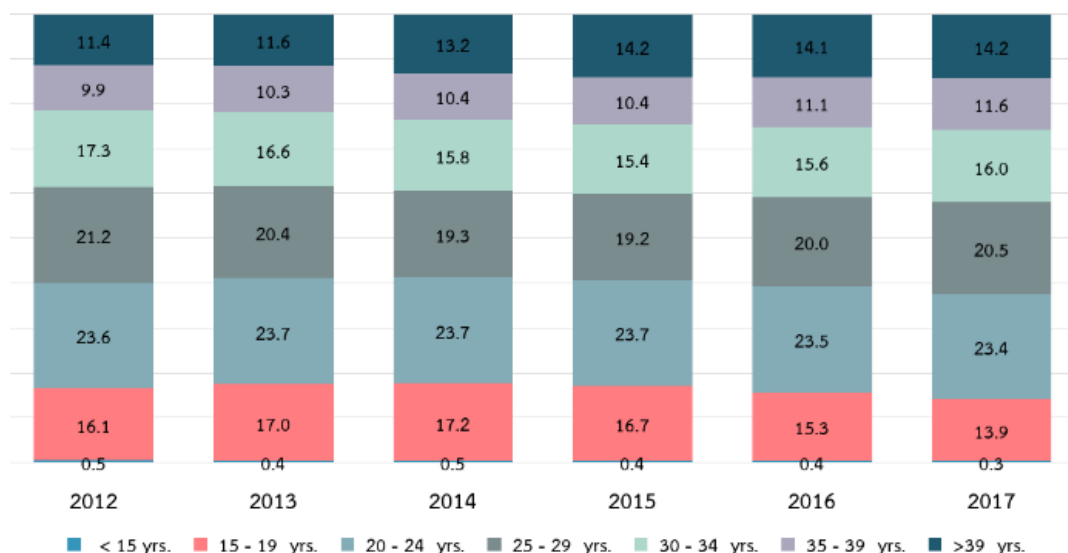


Thailand faced a problem of narcotics influx particularly methamphetamine tablet or ya-ba and crystalline methamphetamine or ICE, as well as heroin from the Golden Triangle. In addition, the smuggling in of ketamine in crystal form was also found.

Some of these drugs were for domestic consumption especially methamphetamine tablet, the most widespread drug in Thailand. Some of ICE and heroin were also so for local market but the majority was further exported to external markets.



Statistics of offenders by age group



Methamphetamine tablet, ICE, heroin and crystalline ketamine were mainly smuggled in across the northern border, followed by across the northeastern border. Cannabis was all smuggled in via the northeastern border whereas cocaine was mainly smuggled through Suvarnabhumi International Airport by the West African syndicates.

The number of drug case increased in 2017. There were 172,252 drug seizures with 174,943 arrestees. 248 million tablets of methamphetamine tablet, 6,185 kg of ICE, 646 kg of heroin, 550 kg of ketamine 41.5 kg of cocaine and 32,158 kg of dried cannabis were seized. The majority (63%) were new offenders. Age-wise, it was found that the

offenders were most in the 20-24 years age-group at 23.4%, a little decrease from 23.5% in 2016. 87% of the offenders were male.

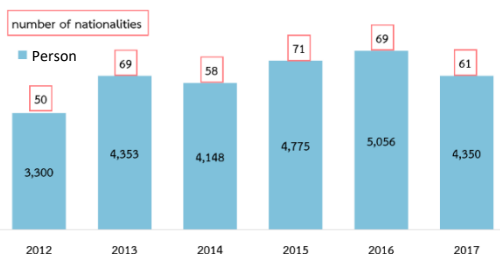
Besides Thai drug syndicates, there were drug traffickers or couriers from various nationals who committed drug crimes in Thailand. In 2017, there were 4,350 foreigners from 61 nationals arrested under narcotics laws. Most of foreign drug offenders were from neighbouring countries. Another group of major foreign drug traffickers was the African cartel who had a big role in conducting transnational drug trafficking by using Thai women or Asian women as well as other foreigners in trafficking drugs via international airports or international postal or cargo services.



Modus Operandi

Drug traffickers used various techniques in concealing drugs for trafficking. Some interesting examples are; cover up and transport together with perishable agricultural produces, conceal drugs in special compartments in vehicles, conceal in private cars, conceal and transport by buses, trains, logistic services, postal packages, etc. Drug syndicates also took advantages from modern communication technology such as Line or Facebook to share information and make network contacts. Drug syndicates also conduct fraud and complicated financial transactions by using nominees in conducting transactions to cover or protect themselves from being traced back to the masterminds or financiers.

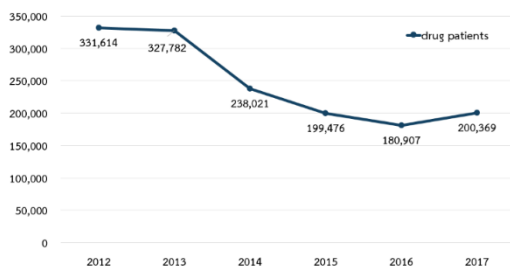
Number of foreign offenders and number of nationalities



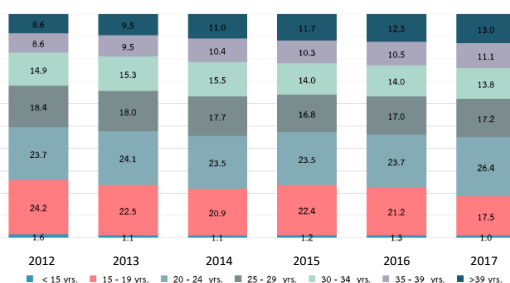
Drug use situation

In the past decade, the number of drug users who received treatment services constantly increased from 62,377 persons in 2007 to 331,614 persons in 2012 and 327,782 in 2013. Then drug use situation began to cool down and the number of users who went into treatment decreased to 180,907 persons in 2016. In 2017, there were 200,396 drug users who received treatment.

Number of drug patients



Statistics of drug patients by age-group



Characteristics of drug users

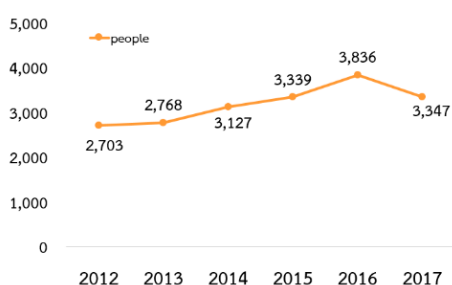
The majority (92%) of reported drug users were male. The main group (44%) remained youths in the 15-24 years age group. The majority of drug users were employed persons, followed the unemployed and students. For the employed drug users, more than 42.9% were general employees, followed by labourers, agriculturists, and merchants at 23.2%, 18.0% and 6.5% respectively.



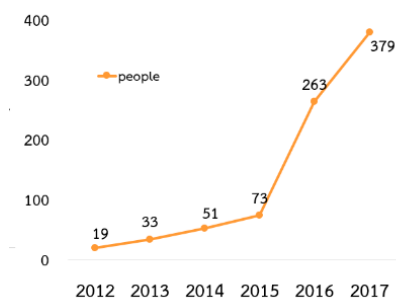
Methamphetamine tablet remained the most widespread drug at 79% followed by cannabis, ICE, kratom or mitragyna speciosa and heroin. Heroin was found to be increasingly used among children and youth particularly in Bangkok and Chiang Mai. Club

drugs or party drugs such as ecstasy and ketamine should be monitored closely due to the increasing trend of use. In 2017, there were 516 drug patients who used ketamine. For the supply reduction, approximately the total 550 kg of ketamine were seized in 2017.

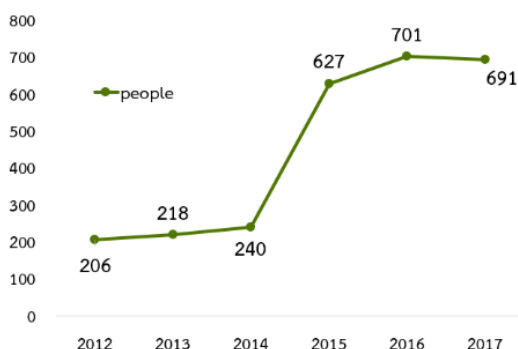
Number of heroin patients (Overall)



Number of ketamine patients (Overall)



Number of heroin patients (In Bangkok)





VIET NAM

Overview

Drug situation in Viet Nam is well-controlled but it still contains many unpredictable factors. Drug trafficked into Viet Nam via northwest, central, north border lines, international air routes and sea routes. The Northwest and North Central of Viet Nam bordered with Lao PDR continue to be the key area for drug trafficking. Functional forces have stopped dozens of drug trafficking cases with hundred blocks of heroin. Viet Nam-China border was found to have heroin trafficking and trading from Viet Nam to China and ICE from China to Vietnam. Activities along Viet Nam-Cambodia border are still complicated. Viet Nam uncovered synthetic drug (ICE) trafficking routes to the Southern provinces and then pressed into tablet for consumption. The drug trafficking by express mail service, air routes, sea routes have signs of increasing.

Synthetic drug trafficking situation

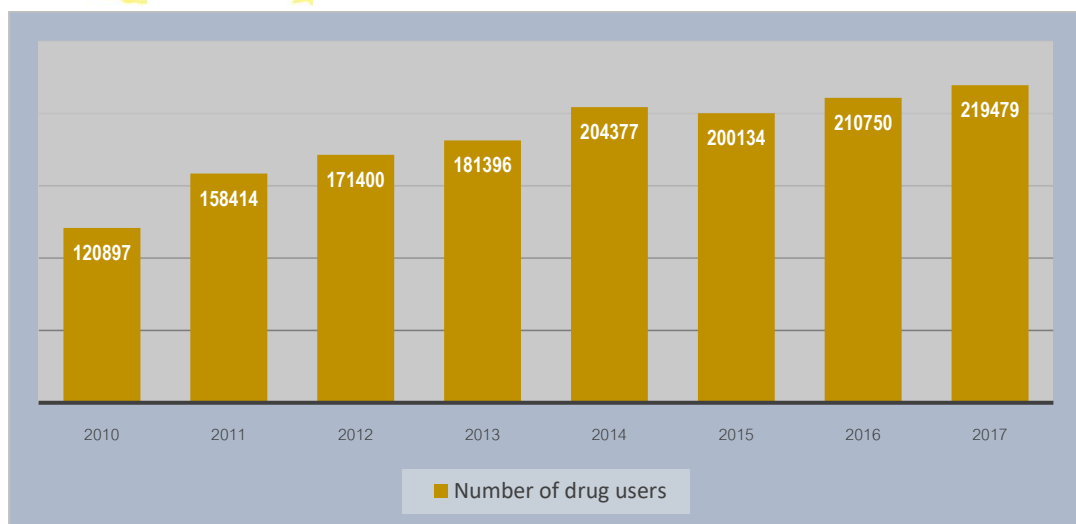
The trafficking of synthetic drugs has increased rapidly. In addition to trafficking via the border between Viet Nam-China, the amount of synthetic drug trafficking via Viet Nam-Lao border has also increased dramatically. Illegal trade and manufacture of drug in the country is still complicated. Some suspects have searched for formulas online to produce synthetic drugs in a large scale with the precursors available in the market.

1. Drug use situation

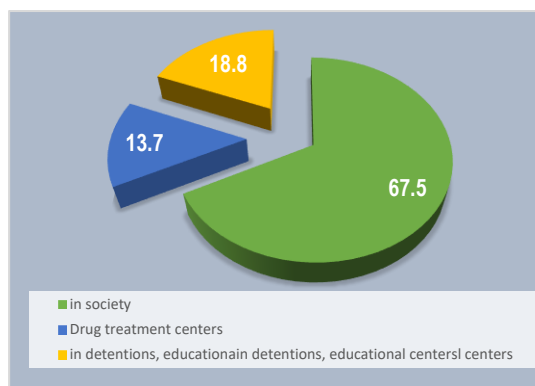
In 2017, there are 219,479 drug users, an increase of 8,764 compared with 2016, most of whom are living in society accounting for 67.5%.



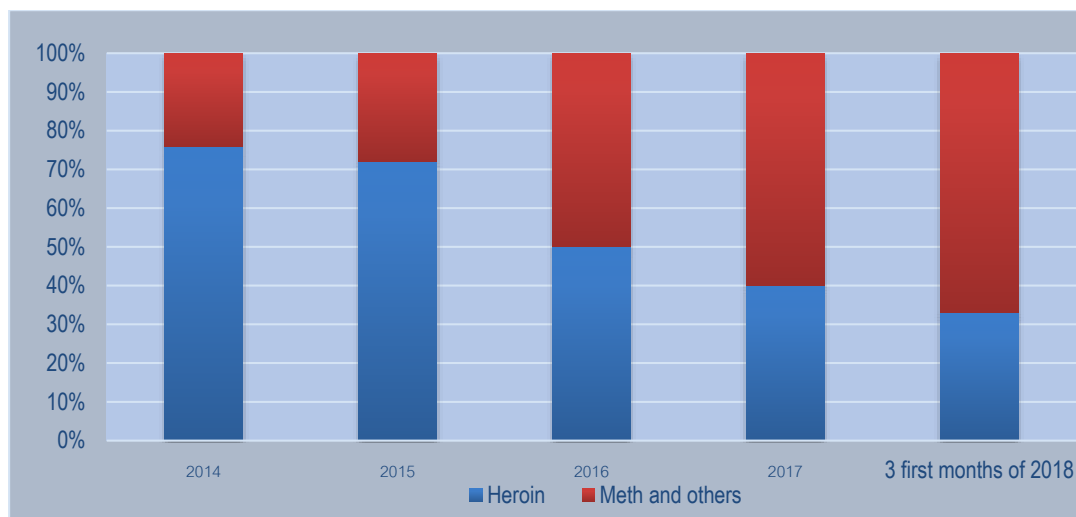
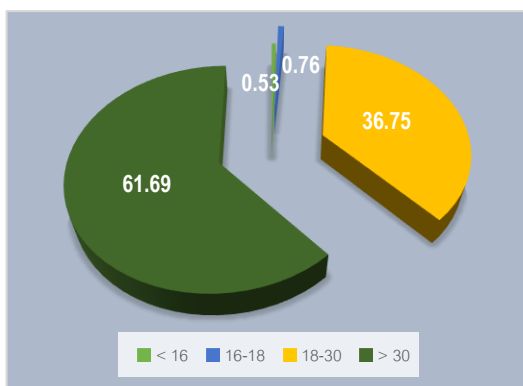
ASEAN DRUG MONITORING REPORT 2017



Statistics of Drug addict



Age of drug users





2. Drug-related crimes

2.1. Drug trafficking

In the past years, given the complicated drug-related crimes situation, the activity of drug control in Viet Nam has been carefully directed by the Party, the Government, as well as positively supported by the People, branches and organizations. As a result, Viet Nam functional forces have gained many notable achievements and dismantled a lot of large-scale and transnational drug trafficking networks. However, due to the influence of domestic, regional and international situation, plus the super profits obtained from the illicit drug trafficking, the drug situation in Viet Nam still remains complicated.

Illegal drugs smuggled into Viet Nam come mainly from foreign countries. The number of foreign-related case has been rising, their scope has become wider, and the drugs have been transported from not only the countries in the Asia-Pacific region but also West African and South American countries in increasingly sophisticated ways.

Land route (accounted for 90%)

On the Viet Nam-Laos borderline, drugs have been trafficked from the Golden Triangle through Lao PDR into and consumed in Viet Nam or transported to other countries. On the Viet Nam-China borderline, drug trafficking has been conducted in two very complex ways: heroin is transported from abroad to Viet Nam and then to China; conversely,

synthetic drugs, mostly methamphetamine, are transported from China into Viet Nam to be consumed. On the Viet Nam-Cambodia borderline, a number of drug trafficking networks have emerged, transporting synthetic drugs from Cambodia to Viet Nam and from South America to Viet Nam via Cambodia.

The mainly bought and used drugs are heroin and synthetic drugs while methamphetamine case tends to increase sharply in frequency and quantity. Cocaine, some new addictive medicines, opium and cannabis cases have a tendency to decrease. In Viet Nam, the number of synthetic drugs users has been growing, leading to an increasing number of illicit drug trafficking, synthetic drug possession and production crimes. Due to the development of Viet Nam's chemical industry, the number and the type of trading, importing, exporting and purchasing chemicals and precursors are increasing more and more.

Air route

Drug trafficking by air route is getting more and more complicated. The criminals often take advantage of travelling to transport drugs with a variety of sophisticated tricks. Particularly, in recent times, the transport of drugs through air cargo delivery services has tended to increase.

Main air routes include,

+ Viet Nam to Australia and vice versa,



- + Viet Nam to China, Taiwan;
- + Viet Nam to some countries in Southeast Asia such as Thailand, Malaysia, Indonesia, Singapore, Cambodia and vice versa;
- + West Africa through Doha (United Arab Emirates), India into Viet Nam.

Sea route

Due to the impact of international, regional and domestic drug-related crimes, the diversity and convenience of sea transport along with the high profits from illegal drug trade, the situation of drug-related crimes through sea route in Viet Nam has unpredictable factors.

In light of the fight against drug-related crimes on sea route, the following transportation routes are recorded:

- Entry: From Africa, South America, South Asia to Viet Nam
- Exit: from Viet Nam to Australia; Viet Nam-China; Viet Nam-Taiwan.

2.2 The *modus operandi* is increasingly sophisticated and frequently changing, especially in the ways of hiding, transporting, delivering as well as exchanging information on drug trafficking. Several examples to be mentioned are: dissolving the drugs in water, then bottle it for disguise; making holes to hide drugs in the ceiling of cars; delivering drugs via courier services without specific address of the senders and the recipients;

using modern means of communication, etc. In addition, realizing the high demand for synthetic drugs in provinces and big cities, some criminals have searched for the formulas available on the internet in order to extract and produce synthetic drugs from precursors, new uncontrolled medicines and veterinary drugs widely sold in the market.

3. Precursor trade in Viet Nam

Viet Nam now has 43 precursors under control.

Controlling legal activities

Apart from a few types of precursors Viet Nam could already self-produce such as H₂SO₄, HCl; most of the precursors are now imported, mainly from China, Singapore, Taiwan and India; to be used for production and business purpose in export production zones and industrial zones.

Trading, exporting, importing and business enterprises of precursors are usually large-scale ones with many years of experience in trading precursors. They are regularly appraised by functional agencies and have legal status to sell and buy precursors. In 2017, Ministry of Health authorizes the import of 350,000 tons and 400,000 liters of precursors and chemicals contain precursors, about 10-15% higher than in 2016, mainly acetone, toluene and methylethyl ketone.



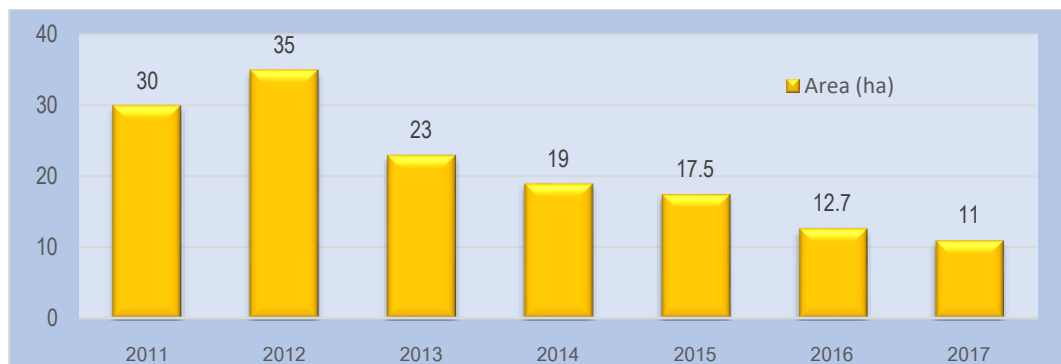
Controlling illegal Activities

In the past few years, there has been an increase in the illicit precursor trade in and out of Viet Nam, especially the high-risk types used in the production of illicit synthetic drugs such as pseudoephedrine and ephedrine. Viet Nam has detected and cracked down several cases in which new medicines containing precursors are collected, extracted for illegal production of synthetic drugs or illegal transportation to foreign countries. The criminals' main modus operandi is to extract low-content precursors found in new medicines for illicit purposes (illegal synthetic drug production in Viet Nam or illegal transportation to foreign country). For instance, in April, 2017, Viet Nam functional forces broke the case of producing synthetic drugs from precursors in Ho Chi Minh City, arresting Tran Ngoc Hieu and his accomplices, seizing 500,000 ecstasy tablets, 85 kilograms of MDMA powder and 2.5 tons of precursors including safrole-rich oil, methylamine, acetone, and methanol.

Drug seizure:

In 2017, the Counter-Narcotics Police Department has cooperated with functional forces to arrest 22,346 cases, 34,494 subjects related to drug crimes, an increase of 3,013 cases (equivalent to 15%), 3,493 subjects (equivalent to 11%) in comparison to 2016. Besides, the functional forces have seized 906.7 kilogrammes of heroin; 856.9 kilogrammes and 979,487 tablets of synthetic drugs (the amount of heroin increased by 50%, the amount of synthetic drugs increased by 130% compared to 2016); 2.39 kilogrammes of cocaine; 167.1 kilogrammes of opium; 376.4 kilogrammes of dry cannabis; 111.02 kilogrammes of fresh cannabis; 5,600 kilogrammes of khat leaves; 108.01 kilogrammes of XLR-11 "American grass"; 17.64 kilogrammes of ketamine; 319 guns; 1,015 bullets; over USD 1.1 million and other exhibits and assets. The functional forces of Viet Nam received and processed 152 pieces of information on drug-related crime provided by international police forces.

4. Cultivation of plants containing narcotic substances





Viet Nam discovered and eradicated 10 ha of opium, mainly in Lai Chau, Dien Bien, Son La and 1 ha of cannabis scattered in provinces in the Mekong Delta, highlands and some mountainous provinces in the North. (See *details of sustainable alternative development in narcotic plants cultivation area in Chapter 5*).

Challenges

In 2017, Vietnam obtained great achievements in the fight against drug-related crime which has been shown clearly through mentioned–above issues. However, there are still challenges in drug control for the Government of Vietnam such as:

- There is no Extradition and Criminal Justice Assistance Agreement among Viet Nam and many other countries in the region and in the world; therefore there is no legal base for co-ordination in an arrest of wanted drug offenders. Moreover, there remain many difficulties in exchanging evidences, criminal traces; in the establishment of joint survey teams; in immigration control, etc.
- Due to various causes (profits, demand, and so on), criminals increasingly take advantage of legal loopholes to illegally purchase and trade precursors for illegal purposes, especially high-risk precursors used in the production of

illicit drugs such as pseudoephedrine, ephedrine, etc. Meanwhile, the process of amending, supplementing and issuing legal documents is still prolonged, not meet the current situation. Drug precursors include many kinds of chemicals and components which appear in almost all fields of social life, thus the management and control have many difficulties and not been managed in the same way as the route of all precursors trafficking, as well as in determining mixed precursors for granting license.

- Precursor control action depends greatly on the legal management and control of the functional agencies (Police, Health, Industry and Trade, Customs, and so on). However, the market management force is not a part of the inter-sector working group, so it is difficult to manage the trafficking, transportation and storage of precursors.
- Criminal Law of Viet Nam stipulates that it is necessary to prove the case of use of precursors for drug-related purpose. Then, the case is subject to criminal penalties for drug offenses. Therefore, the handling of case related to the trading, transportation of precursors is limited.



On the other hand, there are still some other potential challenges such as the emerging of NPS, weakness of law enforcement officer's capacity, the limitation of domestic and international cooperation among functional agencies, lack of equipment, etc.

Conclusion

The Government of Viet Nam always attaches great importance to drug control activities on every aspect by issuing comprehensive legal documents on drug control, strengthening law enforcement, enhancing international cooperation, improving judicial matters, drug treatment, etc. Viet Nam also promotes international cooperation through bilateral or multilateral agreements or memorandums of understanding between the Vietnamese and

foreign governments and international organizations. Cooperation activities have been implemented effectively in many aspects such as exchange of criminal information, coordination and assistance in investigating crimes and arresting international wanted subjects; exchange of experience and training, etc. Viet Nam will continue to cooperate closely with UNODC, INTERPOL, ASEANAPOL, international organizations, countries in the region, especially the Asia-Pacific countries and carry out operations on drug prevention and control. Special attention would be paid to the control of precursors to prevent the abuse of the use, production of synthetic drugs. Furthermore, Viet Nam continues to negotiate and sign bilateral agreements on drug cooperation with countries highly involved in combating drug-related crimes.





Chapter 3

Major Drug Problems in ASEAN

Drugs of abuse in ASEAN Member States vary. However, central/national narcotics control authority in all ten AMS have commonly agreed on the five narcotics namely, cannabis, opium, heroin, methamphetamine tablets, and crystalline methamphetamine as five major problematic drugs in every country. Therefore, in the first phase of ASEAN Drug Monitoring Network the ADM Report has focused the analysis on these five drugs that exist in all ASEAN Member States.





Cannabis

Cannabis plant is believed to be human's oldest cultivated narcotic crop and has spread to Southeast Asia since 1,000 A.D. Although cannabis was legalised in some countries around the world for both medical use and recreational use, among ASEAN Member States, cannabis is illegal.

According to UNODC World Drug Report 2018, roughly 192 million of the world population aged 15-64 years was estimated to have used cannabis at least once (or past year cannabis users) in 2016. The latest household survey in Thailand (2016) estimated cannabis users 5.8% lifetime prevalence of the population aged 12-65 years and an annual prevalence of 2.8%. Despite the prevalence rates, the number of cannabis users who receive treatment each year appears to be small. According to the admission data in 2017, 4.6% of all admissions were cannabis users. A study in

Thailand indicated that disability life lost due to cannabis dependence was small, equal to smoking, or 6-7 times lower than alcohol.

In 2017, over 14,000 cannabis users had registered for drug treatment. This number of cannabis users who sought treatment was 0.83 times of the past year. However, the number of cannabis users in 2017 was still higher than that of 2015 by 1.14 times.

Overall admission of cannabis users was 2.3 per hundred thousand population. The proportion of the new admission was 78.6%

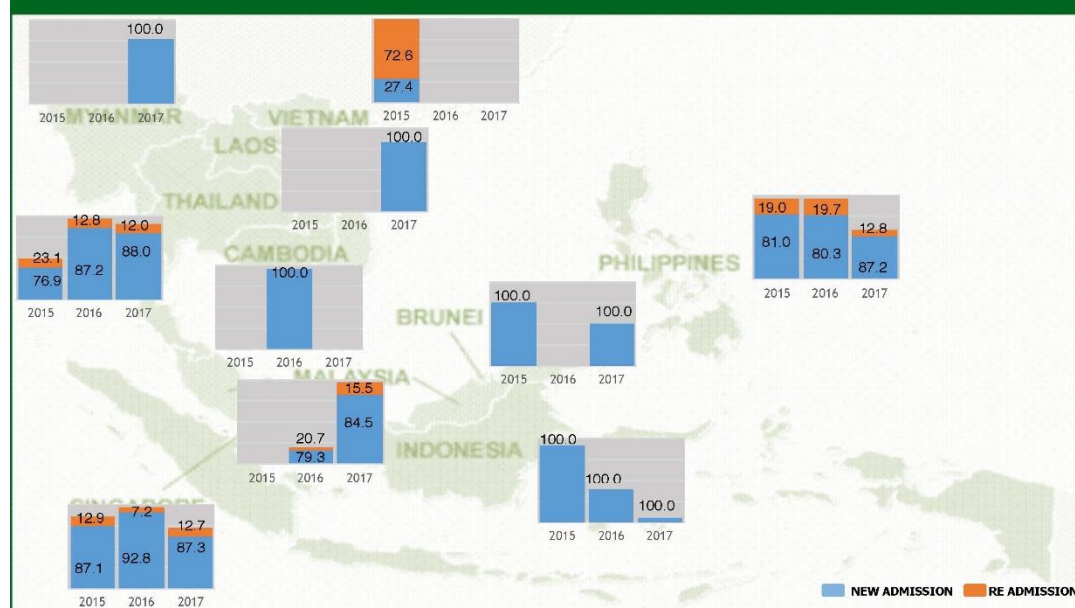


in 2015, 87.6% in 2016 and 88.2% in 2017. The new admission ranges from 84.5% in Malaysia to 100% in Indonesia, Myanmar, Lao PDR and Brunei Darussalam.

Male population accounted for over 98.3% of cannabis users, ranging from 94.3% in the Philippines to 100% in Myanmar, Lao PDR and Brunei Darussalam. The proportion of male cannabis users remains relatively

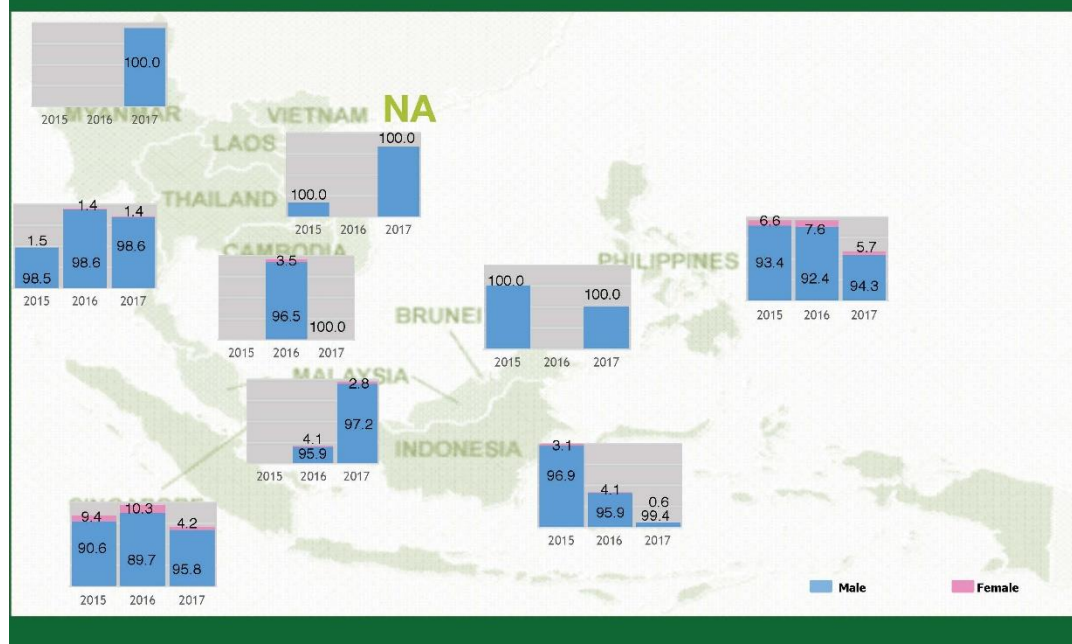
similar to 2015 and 2016 in all ASEAN Member States. In Thailand, 30% of cannabis users were temporary workers, 24% were unemployed and 19% were students. About half of the cannabis users aged below 25 years old. They used cannabis as mood adjustment for their recreational purposes.

CANNABIS: Admission by member states





CANNABIS: Sex by member states

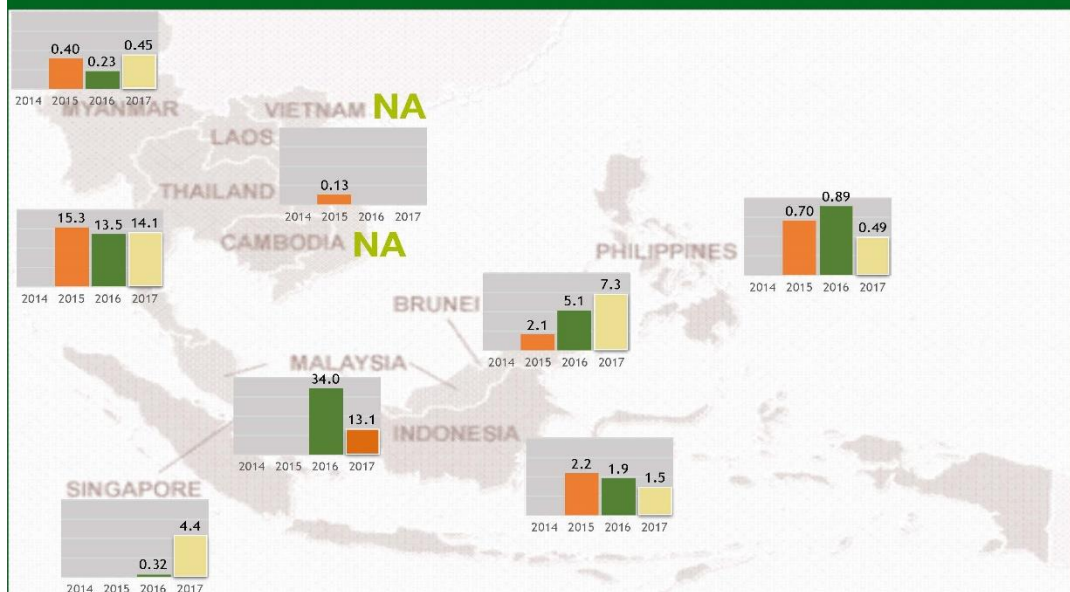


Over twenty thousand cannabis offenders accounted for 5.6% of all drug offenders arrested in 2017. The number of cannabis offenders arrested in 2017 decreased from that of 2015 and 2016. There were about 3.5 cannabis offenders in hundred thousand population in ASEAN. Cannabis offender rate in each ASEAN Member States were almost stable. There were over 18,000 cannabis cases in 2017 which slightly increased from 2016. The rate of cannabis cases in Myanmar and Brunei Darussalam has increased while in Indonesia and the Philippines, the rate has decreased.

Almost 500 metric tons of cannabis (cannabis plant, resin, dried, and synthetic cannabinoids) were seized in ASEAN in 2017, a drastic decrease from 2016. The average cannabis seizure was less than one kilogramme per case. However, cannabis plants were seized in Cambodia, Indonesia and the Philippines. Although cannabis (dried) was predominantly seized in the region, global trend of cannabis resin is increasing. This may be considered as a warning sign that cannabis resin can become an increasing threat to the region.

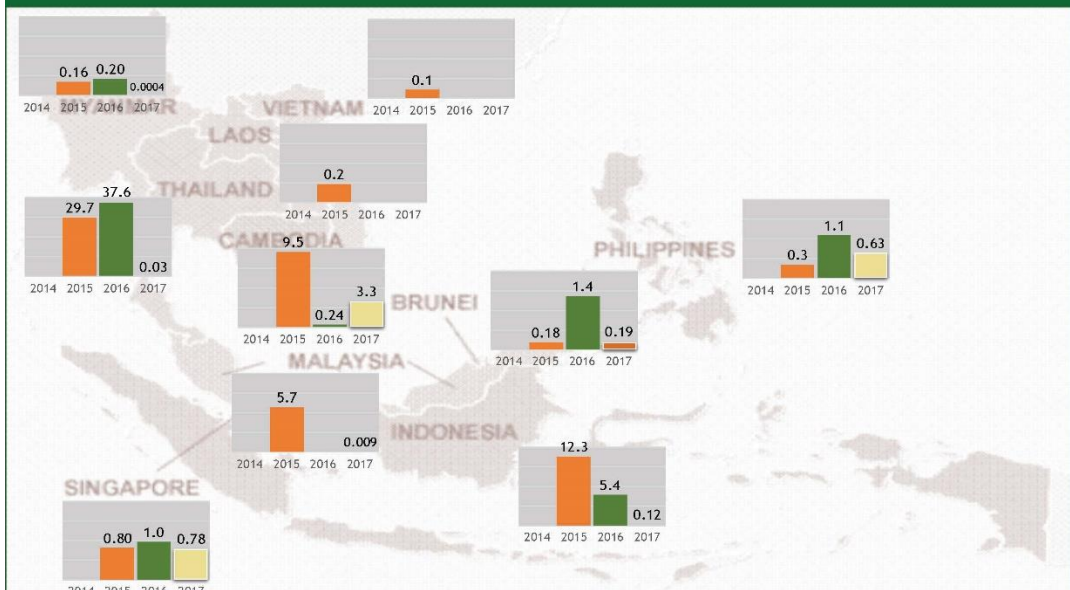


CANNABIS: Cases by member states



Rate per 100,000 population

CANNABIS: Quantity seized by member states (Kg.)



Rate per 100,000 population



Opium

The opium trade in Indochina has a long history back to the early eighth century when Arab Turkish merchants first introduced opium to China. Opium is a narcotic made from the liquid in a poppy bulb. Harvested opium comes in a black or brown mass of a tar-like substance. The substance is pressed into blocks and sun dried. Opium can either be smoked or processed into other derived drugs. Opium poppy cultivation and opium use was known among tribal people such as the Hmong and Mien, who brought the poppy seeds with them as they migrated southward to the Golden Triangle area.

The Golden Triangle, an area covering parts of Myanmar, Northern Thailand and Northern Lao PDR, was the world's second largest source of opium poppy cultivation. Total global opium production in 2017 jumped by 65% from 2016, to 10,500 tons. Of these, 550 metric tons in 2017 were produced from the cultivation area of approximately 41,000 hectares in Myanmar (result from opium survey 2017). It is estimated that 13.3% of opium produced worldwide in 2017 remained unprocessed for consumption as opium, while the rest was processed into heroin.

According to the UNODC World Drug Report 2018, 19 million of the world population aged 15-64 years was estimated as past year opiates users in 2016. Opiates include numerous substances. These highly addictive substances are called opiates because they are derived from chemicals found in the opium poppy. Two grammes of opium contain 120 to 250 milligrammes of morphine, which is a lethal dose. The active alkaloids in opium are morphine and codeine, which are responsible for the euphoric effects of this substance. Many opioids are used to treat pain. Using these medications for



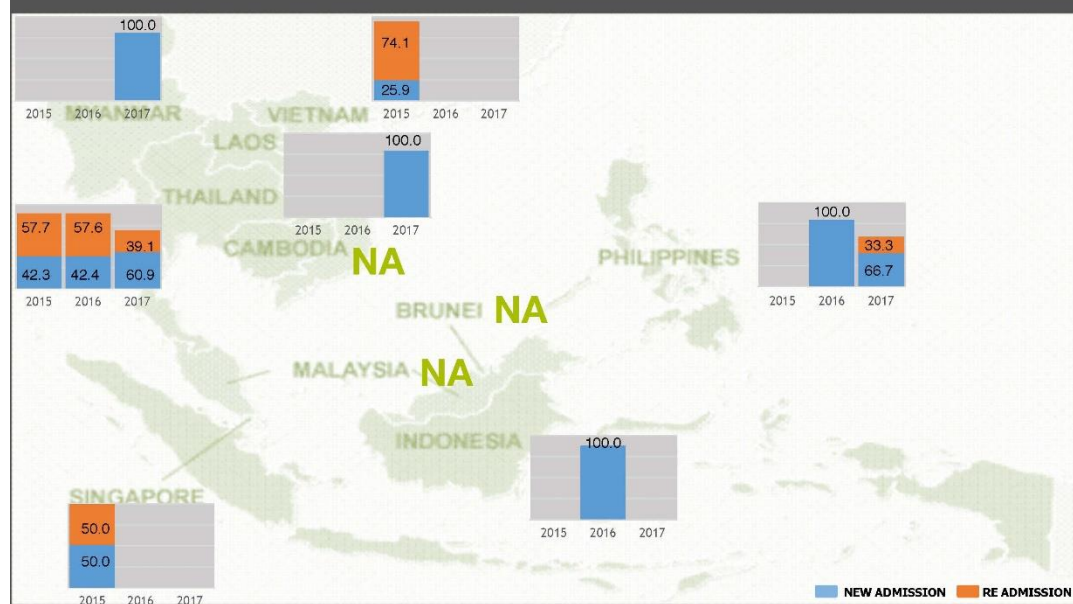
recreation or in a way not prescribed by a doctor can be considered abuse. Opioids are highly addictive. Both abuse and addiction can cause serious health problems and can lead to death. Opioids continued to cause the most harm, accounting for 76% of deaths related drug use disorders (UNODC 2018).

According to the total admission data of ASEAN in 2017, over 2,600 (0.8%) were opium users. This number decreased by 42% and 27% in 2015 and 2016, respectively. Of note is that Singapore has no opium admission case in both 2016 and 2017.

The overall admission rate for opium users in ASEAN in 2017 was 0.41 per hundred thousand population. The proportion of the new admission was 65.5%, higher than 2015 and 2016. This may be considered as a warning sign that opium is a returning serious problem in the region.

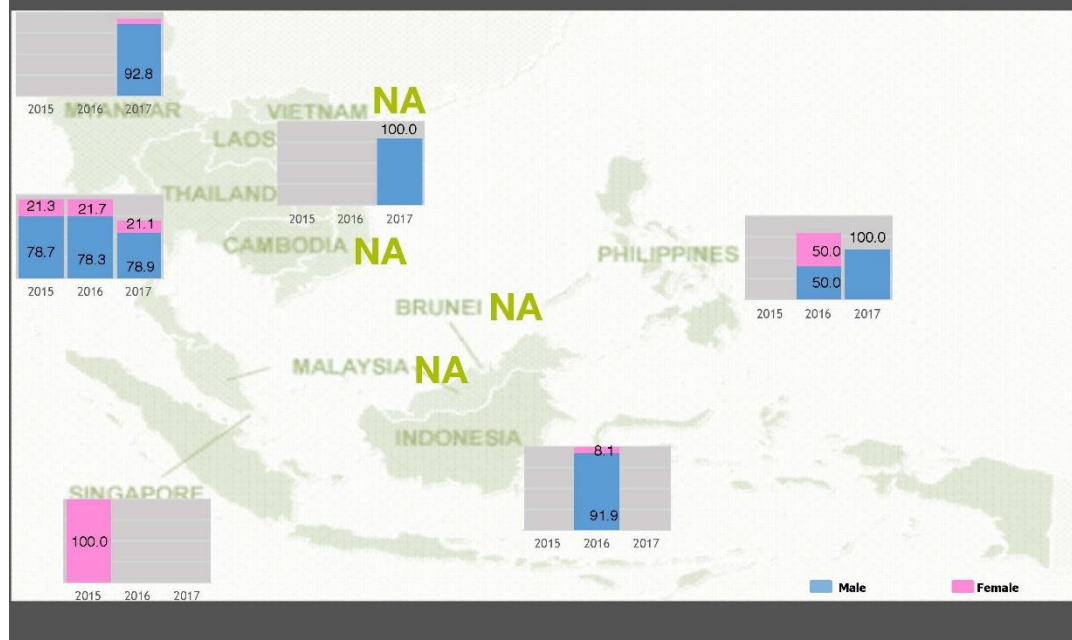
Males make up around 80.7% of the total opium users in ASEAN and this trend has slightly increased from 2015 and 2016. However, the proportion would differ among ASEAN Member States. In Thailand, 59% of opium users were agriculturists, 25% were temporary workers and 7% were unemployed. About half of opium users aged 40 years and above and approximately 7% were injecting drug users (IDU).

OPIUM: Admission by member states





OPIUM: Sex by member states

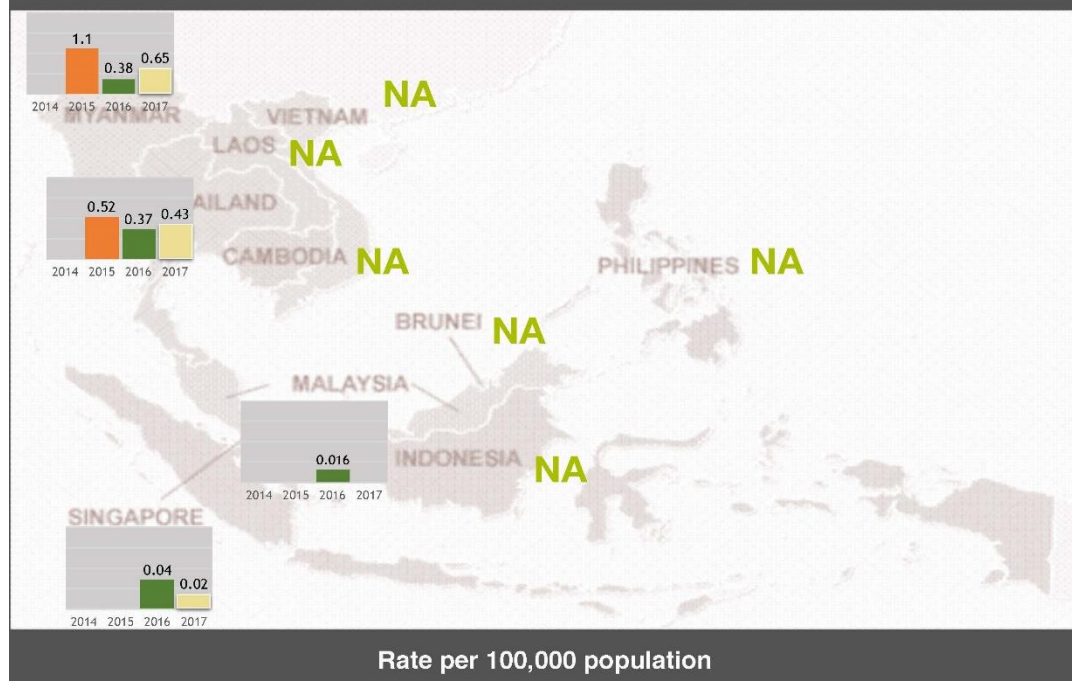


There were almost 1,000 opium offenders arrested in ASEAN which accounted for 0.37% of all drug offenders in 2017. The number of opium offenders has increased from 2016. Rate of opium offenders was 0.14 per hundred thousand population. There were over 600 opium cases and this number is 1.5 times of 2016. Overall, the rate of opium cases per hundred thousand population in ASEAN Member States has increased.

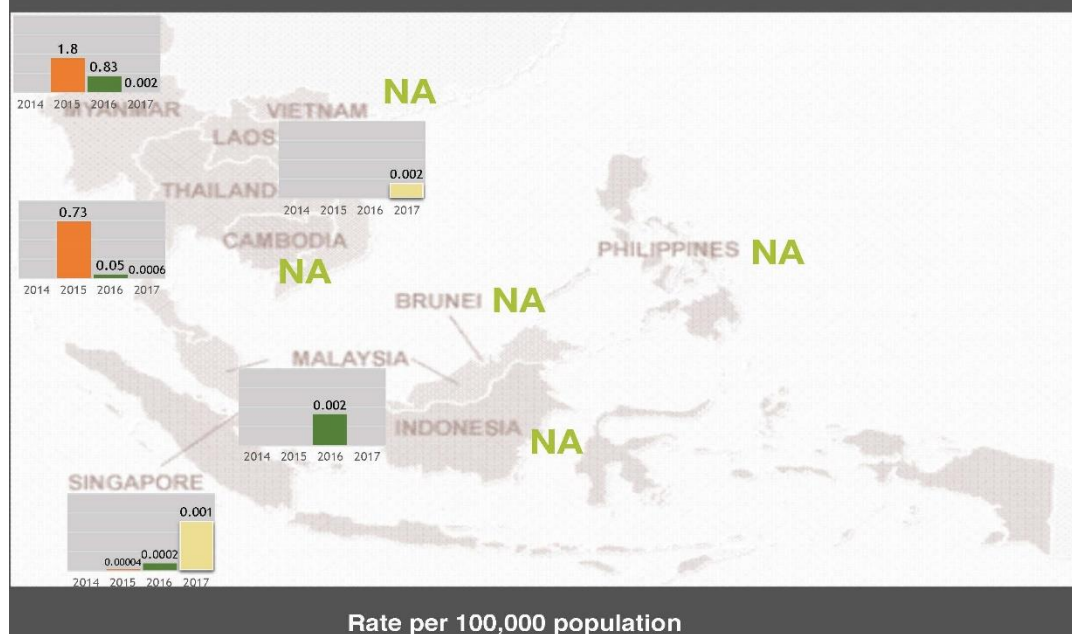
Less than one metric ton of opium was seized in ASEAN in 2017, which was lower than 2015 but higher than 2016. The increase of opium seizures may be a warning sign for ASEAN's opium control measures.



OPIUM: Cases by member states



OPIUM: Quantity seized by member states (Kg.)





Heroin

Heroin is the name for a refined version of morphine that is a very addictive and illegal opioids drug and most commonly used as a recreational drug for its euphoric effects. Heroin (diacetylmorphine), a semi-synthetic opiate derived from opium and first synthesized in 1874, is recognized as one of the most harmful drugs. Heroin is typically injected, usually into a vein; however, it can also be smoked, snorted or inhaled. Common side effects include respiratory depression (decreased breathing), dry mouth, and addiction. Other side effects can include abscesses, infected heart valves, blood borne infections, constipation, and pneumonia. After a history of long-term use, withdrawal symptoms can begin within hours of last use. When given by injection into a vein, heroin has two to three times the effect as a similar dose of morphine.

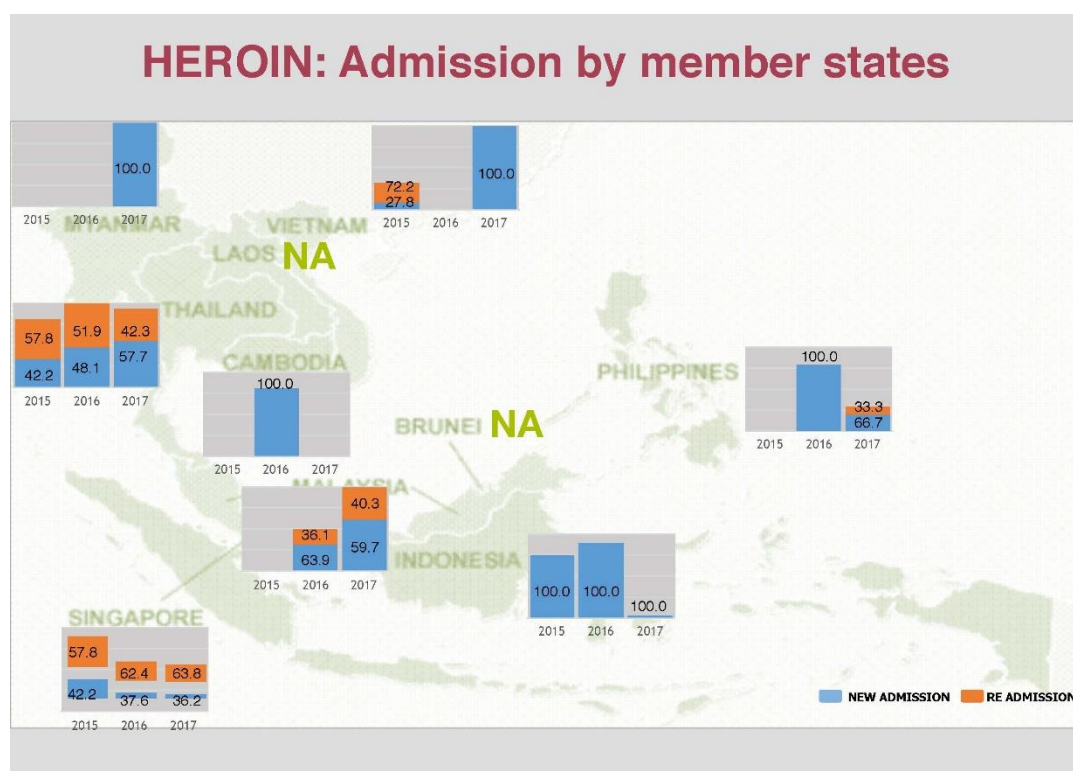
In 2016, the quantity of heroin seized globally reached to 91 metric tons, according to UNODC World Drug Report 2018. It is estimated that there were 1,050 tons of heroin manufactured worldwide in 2017. Southeast Asia (i.e. the Golden Triangle) is one of Asia's two main opium-producing areas, and the other is situated in

Afghanistan in the Golden Crescent. Based on UNODC and the Southeast Asia Opium Survey 2014 conducted by Lao PDR and Myanmar, over 70 metric tons of heroin in the world market could be produced in the Golden Triangle. Heroin produced in the Golden Triangle are trafficked to China and Thailand, and to Oceania (mostly Australia).

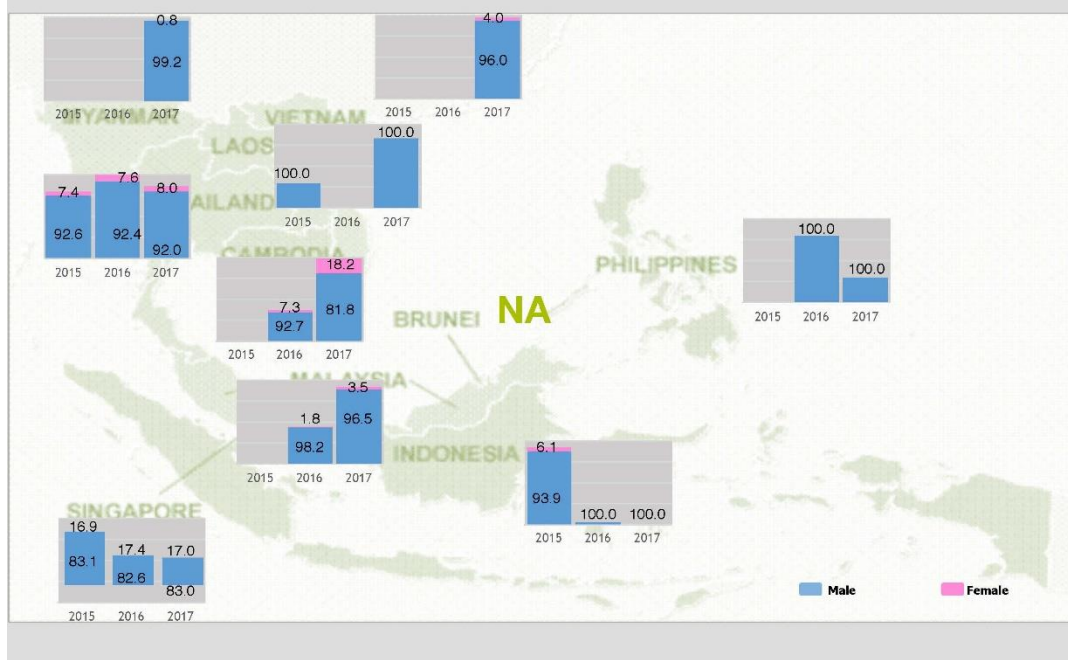


According to the admission data in 2017, 7.3% were heroin users. In 2017, over 32,000 heroin users received treatment, which was 1.15 and 4 times of 2015 and 2016, respectively. Overall ASEAN admission rate was 4.9 per hundred thousand population in 2017. The number of new admission was 82.6% which was a drastic increase compared to 2016. The number of new admission was reported to have increased in Viet Nam and Myanmar and decreased in Cambodia, Indonesia, and the Philippines. The rest were almost stable.

In all ASEAN Member States, 96% of heroin users are male and this was a slight increase from 2016. However, each ASEAN Member States may present different figures. In Thailand, 35% of heroin users were temporary workers while 25% were agriculturists and 15% were unemployed. About half of heroin users were between 25 and 39 years old. About 20% of admissions were IDU.



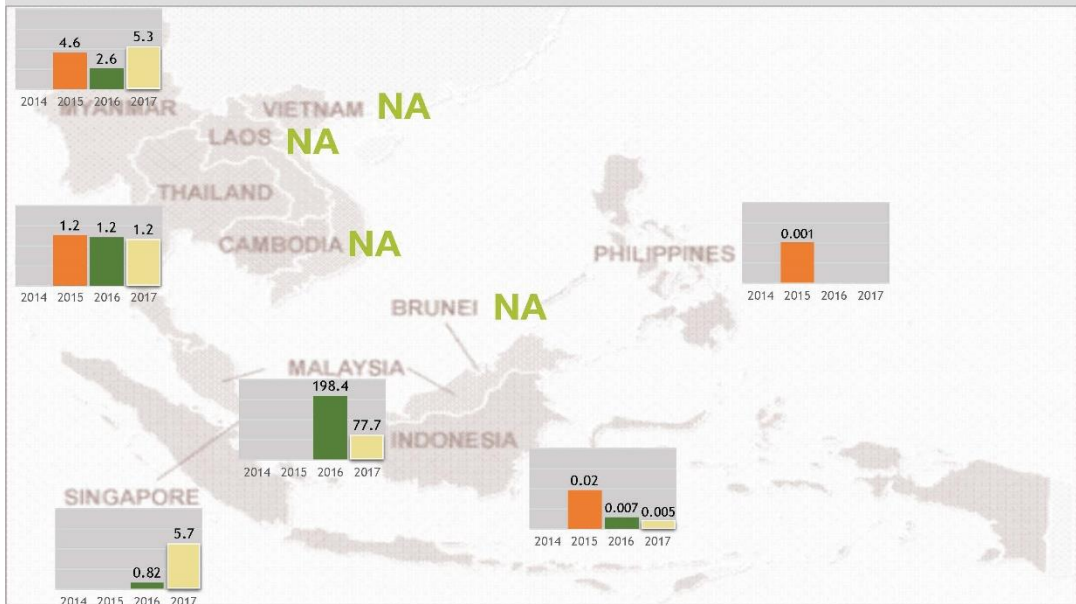
HEROIN: Sex by member states



There were about 36,000 heroin offenders in 2017 which was a significant decrease compared to 2016 and 2015. For every hundred thousand population in ASEAN, there were 5.7 heroin offenders. This was a drastic decrease from 2016. Heroin production cases were rarely reported despite the number of heroin seizures reported by ASEAN Member States.

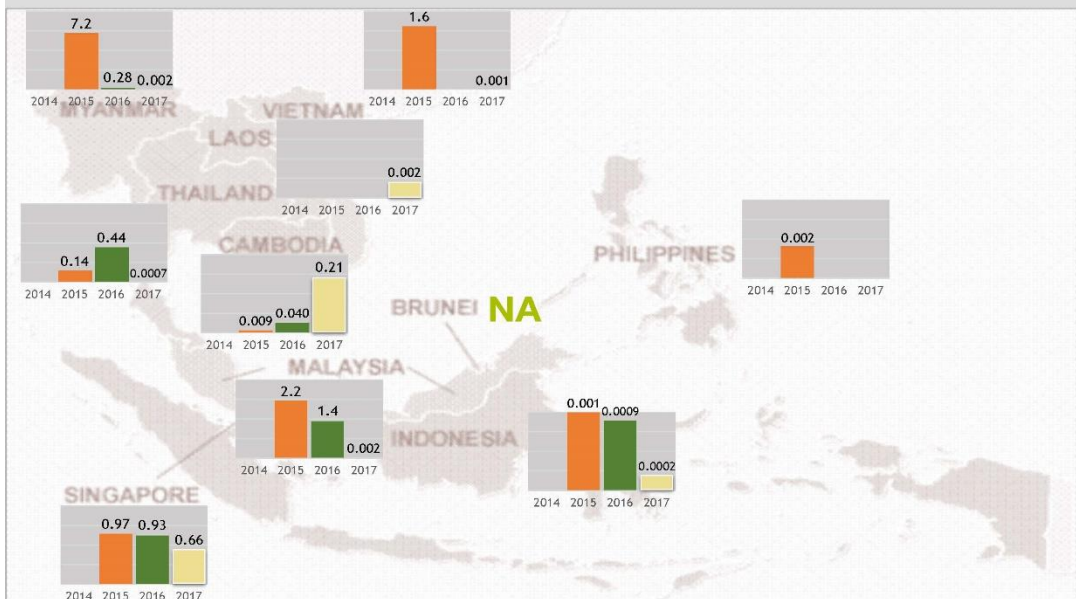
The non-medical use of pharmaceutical opioids is of increasing concern for both law enforcement authorities and public health professionals. Different pharmaceutical opioids, such as tramadol, codeine, etc. are misused in different regions around the world. In ASEAN; seizures of methadone, buprenorphine and fentanyl have also been reported.

HEROIN: Cases by member states



Rate per 100,000 population

HEROIN: Quantity seized by member states (Kg.)



Rate per 100,000 population



Methamphetamine

(Tablet)

Amphetamine-type stimulants (ATS) is a group of drugs which mainly includes amphetamine and methamphetamine. Methamphetamine, chemically similar to amphetamine, is a strong central nervous system (CNS) stimulant that has been used as a recreational drug. Formerly popularly known as speed or uppers, it was used by athletes, college students, motorcycle gangs and truck drivers. ATS has always been ranked among the top three drugs used in Southeast Asia since 2009.

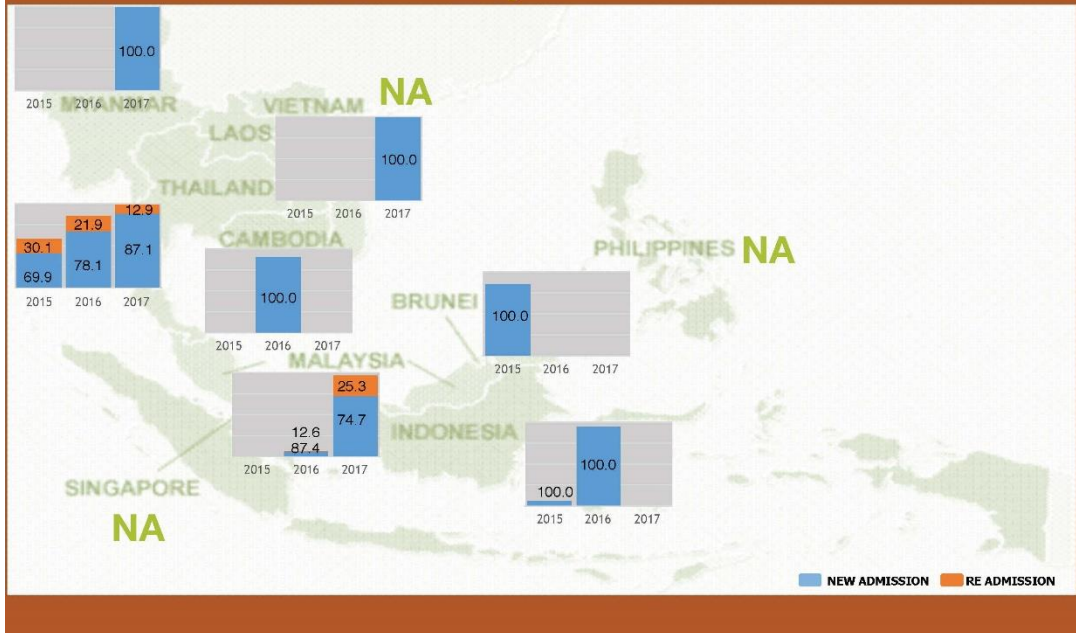
According to UNODC World Drug Report 2018, methamphetamine seizures globally increased to 158 metric tons in 2016, 12% increased from the past year.

Methamphetamine is known to possess a high addiction potency and high dependence potency. According to admission data in ASEAN, 57.8% of all admissions were ATS users, most were methamphetamine tablet users (50.4%). It was 1.7 and 1.1 times higher than in 2015 and 2016, respectively. In 2017, over 160,000 methamphetamine tablet users received drug treatment. Overall ASEAN admission rate increased to 25.5 per hundred thousand population, slightly

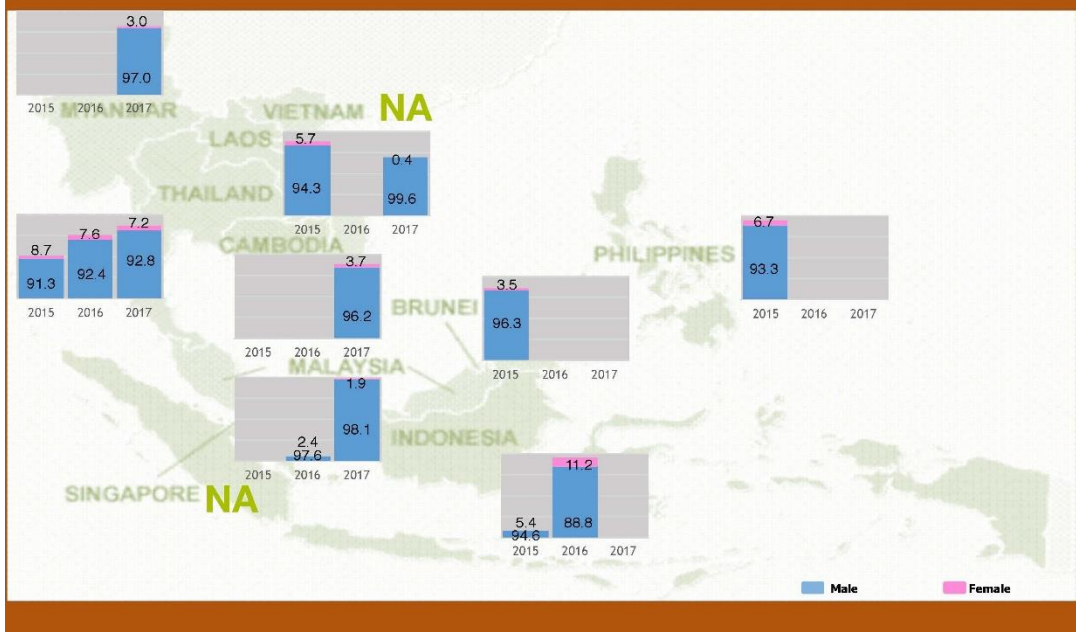
increasing compared to 2015 and 2016. The proportion of new admission was 87%, which was a notable increase from 2015 and 2016.

Similar with other drugs, approximately 93% of methamphetamine tablet users were males. The ratio of male to female methamphetamine tablet users increased slightly from 2015. In Thailand, 40% of methamphetamine tablet users were temporary workers while 16% were unemployed and 13% were students. About half of the methamphetamine tablet users aged less than 40 years old and less than 1% of admissions were IDU.

Methamphetamine (tablet): Admission by member states



Methamphetamine (tablet): Sex by member states

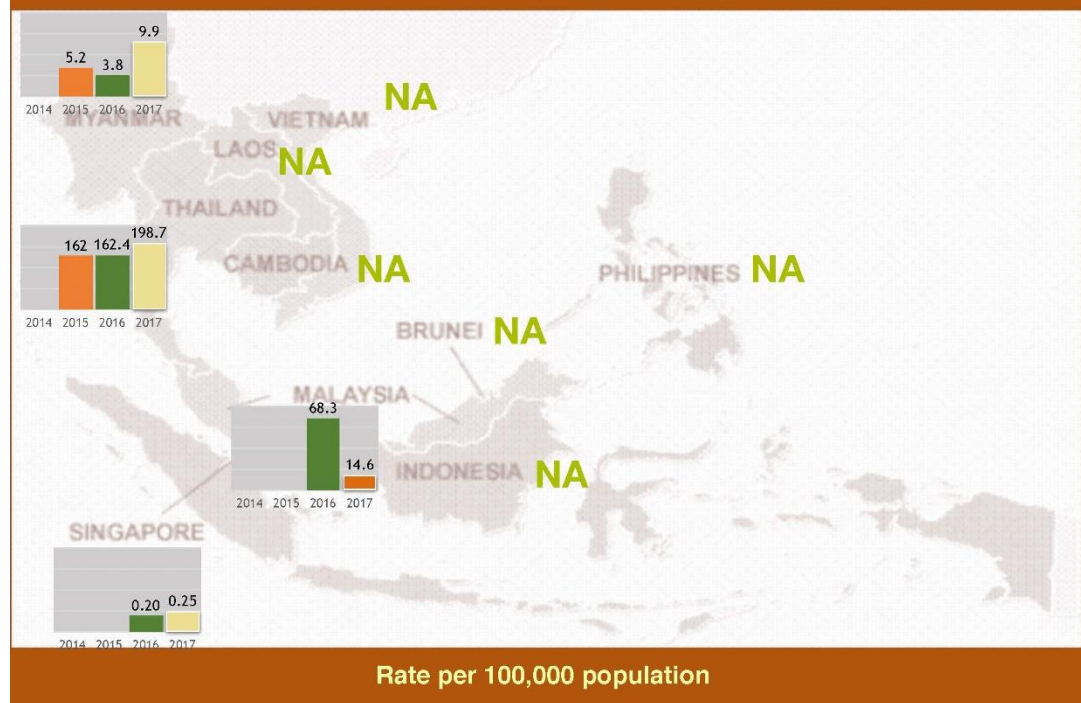


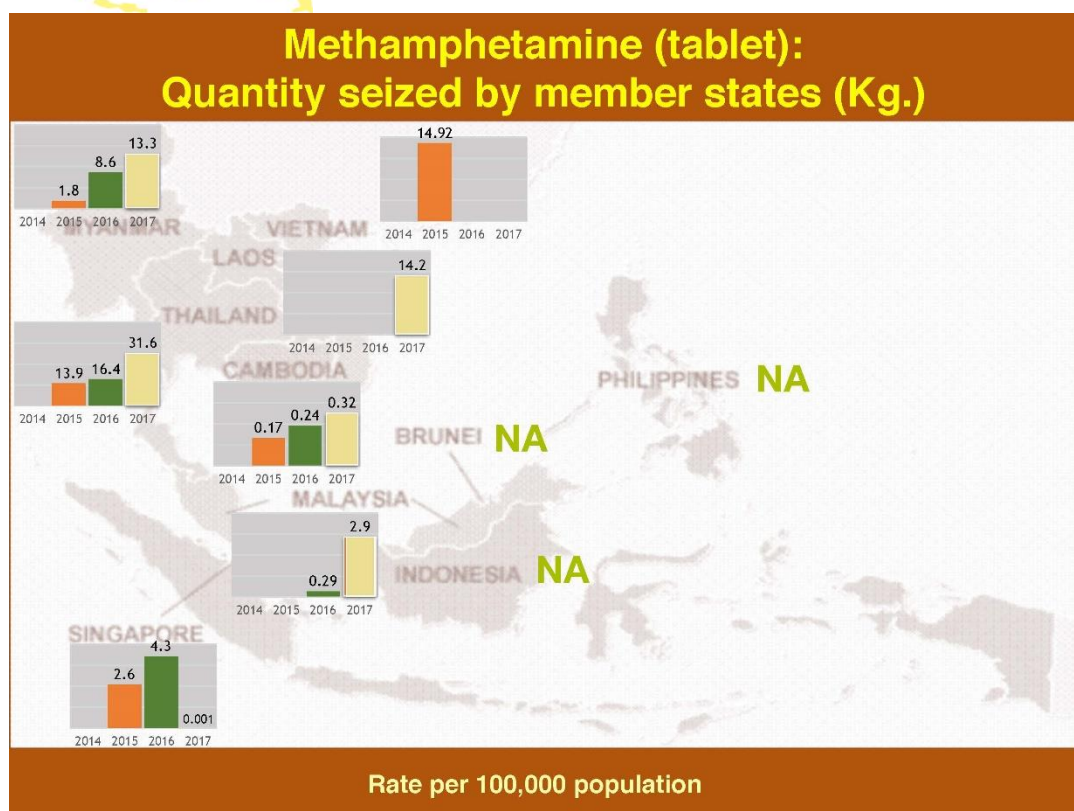


The global quantity of ATS seized has increased. Methamphetamine continues to account for the largest share of global quantities of ATS seized. In 2016, methamphetamine seizures increased to 158 metric tons (UNODC 2018). In ASEAN, around 153,000 methamphetamine tablet offenders accounted for 38.5% of all offenders in 2017. Overall methamphetamine

tablet offender rate in ASEAN was 23.8 per hundred thousand population. Over 140,000 cases were detected with 290 metric tons of methamphetamine tablet seized. A few production sites have been found, and investigations are ongoing to uncover the remaining production sites, particularly in the Golden Triangle area.

Methamphetamine (tablet): Cases by member states







Crystalline Methamphetamine

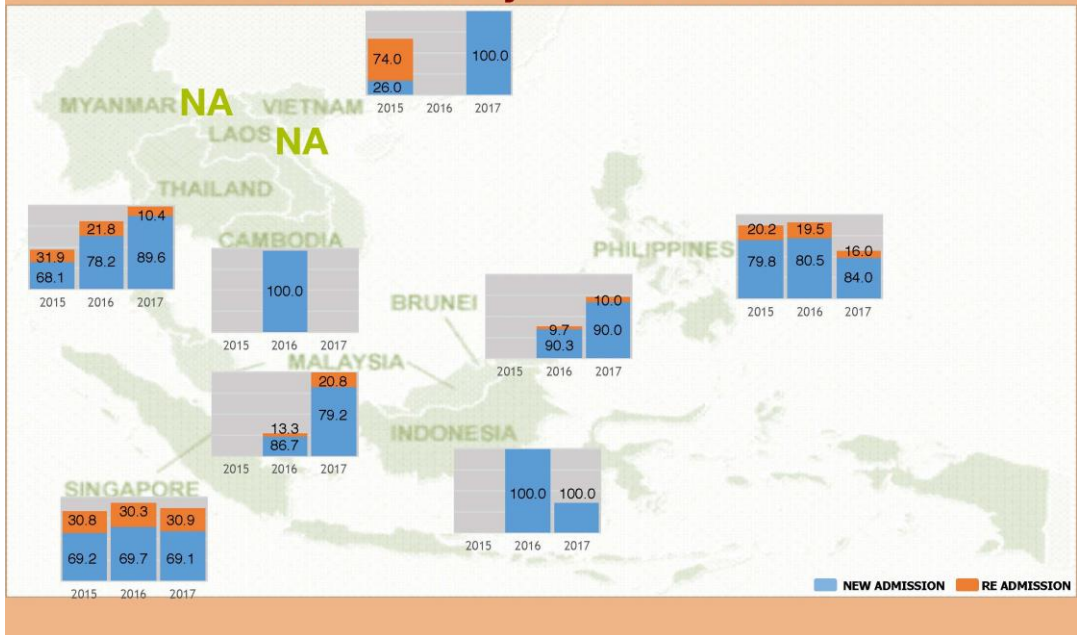
Crystalline methamphetamine commonly known as “ICE” or “Shabu/Syabu” in some ASEAN countries, a white crystal, was extensively used during the World War II. In the late 1960s, it became known as a dangerous drug that created detrimental health threats to its users.

UNODC reported that crystalline methamphetamine seizures in East and Southeast Asia increased to 60 metric tons in 2016 (UNODC 2018). According to admission data, 10.7% of all admissions were crystalline methamphetamine users. In 2017, over 34,000 crystalline methamphetamine users received drug treatment. This was a 1.1 times increase from the previous year and 1.7 times of 2015. The overall admission rate in ASEAN was 5.4 per hundred thousand population. The proportion of new

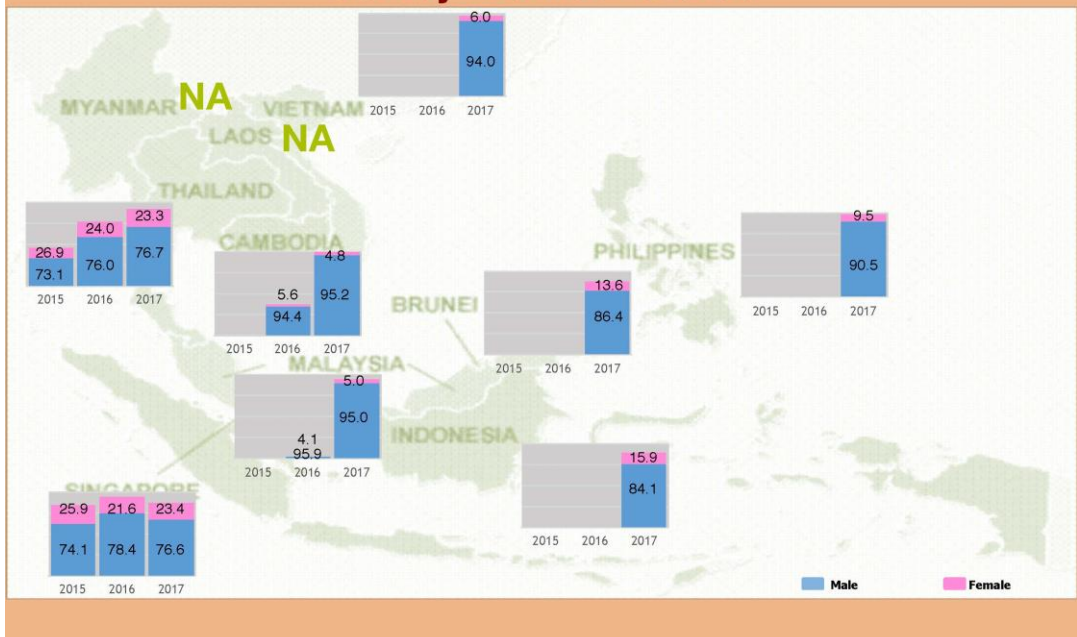
admission was 90%, which was a major rise from 2015 and 2016.

The data shows 90% of crystalline methamphetamine users were male, ranging from 76.6% in Singapore to 95.2% in Cambodia. In Thailand, 42.0% of crystalline methamphetamine users were temporary workers, 25.4% were unemployed and 12.0% were merchants. About half of the crystalline methamphetamine users aged less than 40 years old.

Crystalline Methamphetamine: Admission by member states



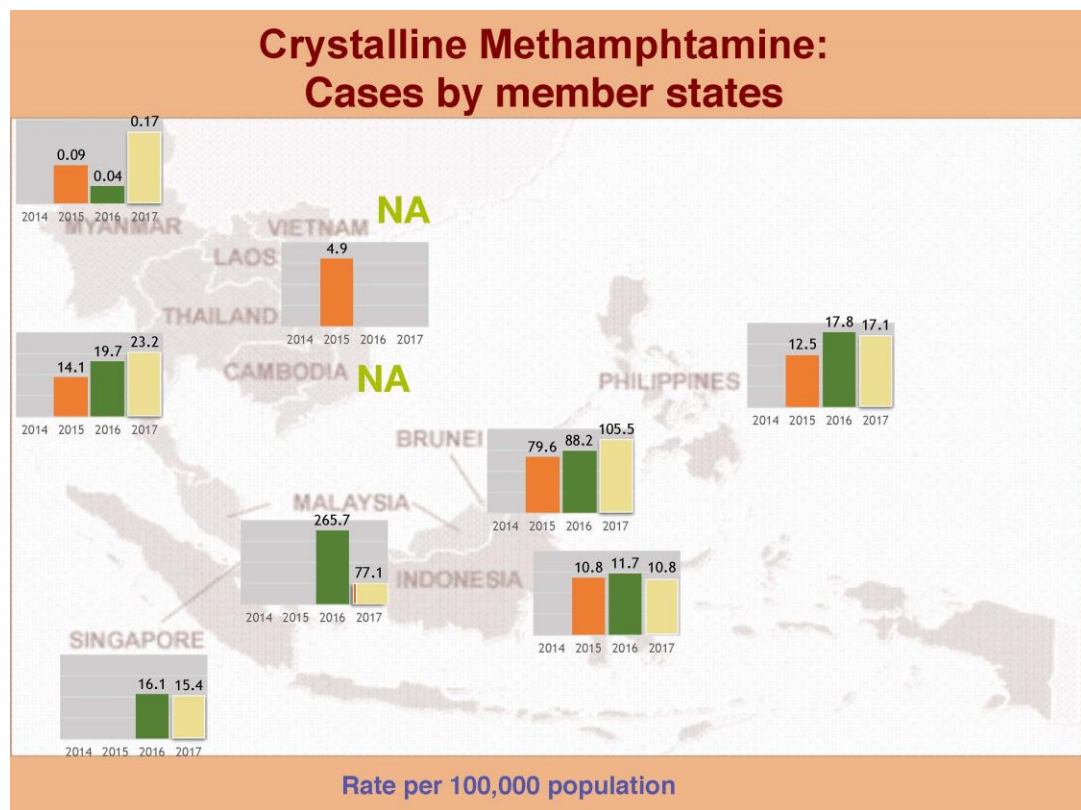
Crystalline Methamphetamine: Sex by member states



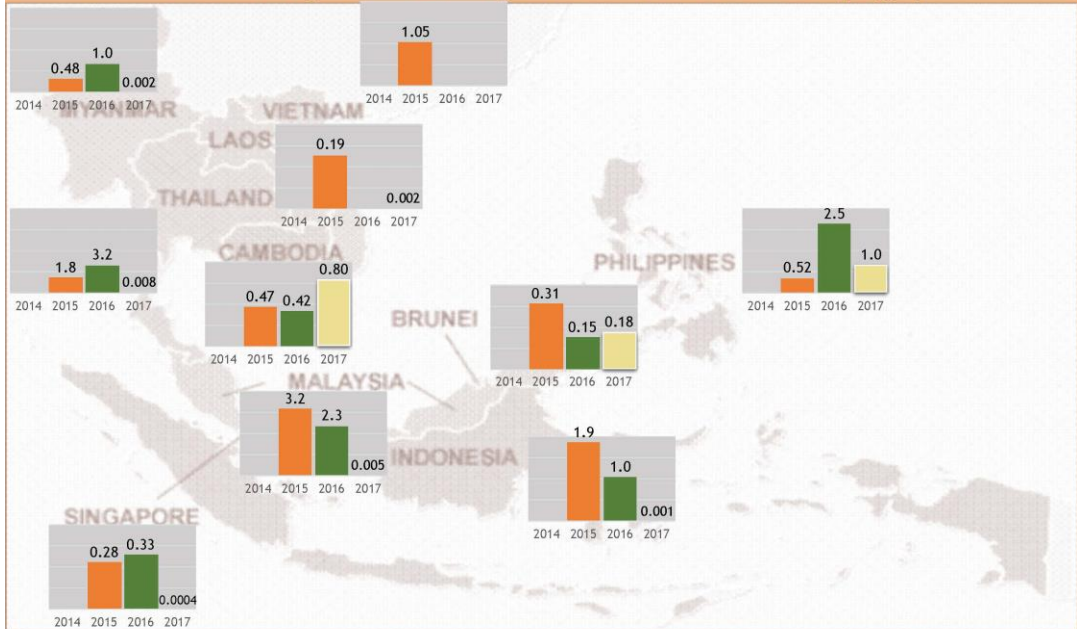


Over 100,000 crystalline methamphetamine offenders accounted for 29.8% of all offenders in 2017, which was a huge decrease from the previous year. The overall offender rate in ASEAN was 18.5 per hundred thousand population. Over 87,000 cases were detected with more than a total of one metric tons of crystalline methamphetamine

seized. ASEAN will continue to investigate the source of crystalline methamphetamine flowing into the region as there were only a few crystalline methamphetamine production sites known. Both tablet and crystalline methamphetamine remained the key challenges to be tackled within the region.



Crystalline Methamphetamine: Quantity seized by member states (Kg.)



Rate per 100,000 population



Other drugs

Based on the data from ASEAN Member States, the non-medical use of pharmaceutical drugs is increasing. Pharmaceutical opioids misused in ASEAN included methadone, morphine, Tramadol, alphaprodine, buprenorphine and fentanyl as well as other pharmaceutical products were also misused. This may reflect another emerging threat to the region.





Chapter 4

Research Knowledge and Innovation





Cambodia

Programme initiatives

In response to the problems posed by drugs, especially during the last few years, in addition to the National Strategic and Operation Plan, the Government of Cambodia has strengthened law enforcement in order to prevent drug trafficking from outside Cambodia. The government also prioritizes drug preventive education by identifying the target groups and the roles and responsibilities of relevant ministries and agencies to take over specific response to specific targets to prevent them from getting involved in any drug-related problems.

To cope with the demand for treatment and rehabilitation services, Cambodia government had put forth on the enhancement of treatment services in all public health facilities by promoting community-based treatment programmes, in line with capacity building and

treatment services in temporary rehabilitation centres.

Community-based drug prevention and treatment has also been one of the most prioritised interventions since it helps people who use drug to voluntarily reveal themselves without fear of legal punishment to get treatment and rehabilitation in their own community. Another intervention called drug-free community is also put in place in order to mobilise people from all sectors in the community to fight against drugs and to help those who are suffering from drugs abuse.

With support from various partners, a new National Centre for Drug Treatment and Rehabilitation Centre in Sihanouk Ville province has been under construction and Cambodia also encourages other provinces to set up temporary centres for taking care of drug addicts where necessary.



Apart from drug prevention and law enforcement enhancement, Cambodia has been piloting the **White Village (Drug-Free Village) Policy** along the border with Thailand and Lao PDR.

NACD had facilitated and coordinated with other concern agencies, conducting a new survey on the National Population Size Estimation, Integrated Biological and Behavioural Survey, and HCV among PWID (People Who Injected Drugs) and PWUD (People Who Used Drugs) in Cambodia, 2017.



Indonesia

National Survey on Drug Abuse among Workers, 2017

Drugs market has been targeting almost all age groups and professions, most of them are in productive age groups, both students and workers. The number of workers in Indonesia is significantly large, so no matter how small the potential exposure to drugs will cause a very large level of abuse. Based on data from the Central Bureau of Statistics, in February 2017 the number of workers was 124.54 million, consists of 58.35% informal workers¹ and 41.65% formal sectors², while 7.01 million were open unemployment³.

The prevalence of drug abuse among workers in the period of 2009-2012 was relatively stable at about 5%. The indication of drug trafficking among workers can be seen from the number of suspects which was also workers. So far only one-third of companies understand the danger of drug abuse and have worked with other agencies related to the prevention of drug abuse for their employees.

In 2017, National Narcotics Board (BNN) in collaboration with Center for Health Research, University of Indonesia conducted a National Survey on Drug Abuse among Workers, to assess the effectiveness of drug abuse prevention programme in workplace.

This survey was done in 34 provinces, using total 34,000 sample workers.

Key findings:

1. Rate of drug abuse

Compared to the 2012 survey, the prevalence rate of **“ever used”** tends to decline from 12.8% to 9.1%, the prevalence of **“current users”** also declined from 4.7% to 2.9%.

2. Pattern of drug abuse from several characteristics

- a. Drug abuse prevalence within the less than 30 years old age group is higher than the rest, for both male and female workers.
- b. The highest prevalence of drug abuse occurred in workers who only finished elementary school and/or junior high school⁴.
- c. Workers who live together without marriage are more vulnerable to drug abuse, and workers who live with friend also showed high prevalence than workers who live with their family or live alone.
- d. Workers who live in apartments became the most vulnerable to abuse drugs.
- e. The higher the salary is, the more susceptible to abuse drugs.



- f. Construction sector has the highest prevalence for male, while social service sector⁵ has the highest prevalence for female.

3. Type of employment with high prevalence

Freelance worker has the highest prevalence for male while contract employee⁶ has the highest prevalence for female.

4. Pattern of drug abuse based the type of drugs

Generally, the number of drug abuser for most drug types, except opiates, has been declining. Male workers tend to abuse cannabis, shabu, ecstasy, analgesic and dextro (cough syrup), while female workers tend to abuse cannabis, codeine, analgesic, and ecstasy.

There was an increasing trend of tranquilizer abuse such as Lexotan, Valdimex and Zenith, especially among female workers. These drugs were easy and cheap to obtain from drugstores, and commonly used as complement of other types of drugs.

Conclusion:

1. Prevalence rate of drug abuse among workers tends to decline.
2. While TV is the most effective media to inform about the danger of drug abuse to the workers, some companies has implemented drug prevention programmes inside their companies, by doing general check-up, general staff meeting, holding seminar on drug abuse, and even forming a special unit.
3. Cannabis was still the most abused drug among workers.

Notes:

1. **Informal workers** are workers who have non-fixed income and are non-taxable, such as, independent or occasional labourers, farmers, fishing men, etc.
2. **Formal workers** are regular workers or professionals who earn regular salary and are taxable such as government officials, medical doctors, private business sector, etc.
3. **Open unemployment** are unemployed workforce due to various reasons such as a lack of qualifications or not willing to work, etc.
4. Basic education in Indonesia consists of three levels: 6 grades in elementary school, 3 grades of junior high school, then 3 grades of senior high school. Students who finish each level will receive a certificate, so students who finish all three levels of basic education will have three certificates.
5. **Social service sector** can also be called non-government organisation is the working sector that aims to help people deal with their problems by restoring and enhancing their social functioning.
6. **Contract employees** are workers who have a contract to work in a private company or government institution and the contract is renewed month by month or year by year and can be terminated anytime.



Malaysia

Challenges posed by NPS and precursors

Malaysia underscores the challenges posed by new psychoactive substances (NPS) that are not controlled under the international drug control treaties and that may pose potential public health risks and as well as the proliferation and diversion of chemical precursors used in the illicit manufacture of narcotic drugs and psychotropic substances and the emergence of new methods of diversion used by organized criminal groups. Malaysia underlines the importance of enhancing information-sharing and early warning networks on NPS and precursor chemicals and strengthening partnerships with industry. In this regard, Malaysia is in the process to continuously schedule NPS under

the existing national legislation for better control and trade monitoring. Currently Malaysia has taken proactive measures by scheduling five NPS as psychotropic substances and ten NPS as poisons under the National Law.

Malaysia is encouraged by the introduction of the International Import/Export Authorization System (I2ES) which facilitates a faster Import/Export Authorization verification process in addition to real time endorsements of Export Authorizations by relevant Competent Authorities. Malaysia would like to take this opportunity to urge all ASEAN Member States to use the I2ES and request that training for the users be organised, in order for the I2ES to be used to its full potential.



Myanmar

Harm reduction service availability and linkage for PWIDs among public and private service providers in selected priority townships*

Funded by the Implementation Research/Operational Research Programme, MoHS

Summary

Myanmar is one of the highest HIV prevalence in the Asia-Pacific Region and HIV/AIDS is among country's three burden diseases. HIV Sentinel Sero-Surveillance and Integrated Biological and Behavioural Surveillance showed that among three key populations, prevalence of people who inject drugs (PWID) was still high in 2015, and they have been encountering with health deterioration, negative impact of physical, social and psychosocial consequences. Aiming to prevent HIV and other drug-related harms for PWIDs, National Drug Abuse Control Programme and its partners are providing a comprehensive package of nine interventions – provision of methadone by methadone clinics at public drug treatment hospitals and other services by NGOs.

Although numbers of PWIDs who reached different harm reduction service centres had increased in 2015 compared to 2014, the

data indicated that there was possibility of service overlapping and double counting of the individual PWID at the service centres. To strengthen the prevention and treatment systems of multiple service centres, this study attempted to determine linkage among public and private harm reduction services, and service and system factors relating to double counting and service overlapping.

A cross-sectional study design was conducted in Shan and Kachin States and Mandalay and Sagaing Regions. Nine townships where both methadone clinics and harm reduction services implemented by NGOs, were chosen purposively, namely - Tachilek, Lashio, Nanpaung and Naungmon, Myint-kyi-na and Wa-shaung, Aungmyaytharzan and Pyigyitagon and Kale. Information was collected through desk review and in-depth-interview with pre-tested research tools by trained interviewers. A total of 30 responsible persons for harm reduction-related service centres from public and NGOs were



interviewed till information was saturated. The study was conducted from August 2017 to March 2018 after getting approval from Ethics Review Committee, Department of Medical Research. For ethical purpose, data were kept with strict confidentiality. Names of organizations and respondents were not mentioned in the report; unless it was necessary.

Due to dissemination of health messages about availability of free methadone by the NGOs, a number of methadone clients among PWIDs had increased. However, since not all NGOs could cover the whole areas, PWIDs who were non-methadone clients were also high in the community.

All methadone clinics involved in study areas lacked full permanent staff and the clinics were functioning with 3-monthly rotated nurses. New assigned nurses to methadone clinics received methadone training from the senior staff and on-job training. On the contrary, harm reduction services at NGOs provided the services with full strength of trained staff. There was weak linkage in records of ART clinic, methadone clinic and harm reduction services of the NGOs in terms of different client codes. Consequently, possibility of double counting and service overlapping, particularly for the needle and syringe programme, was noted.

Despite free methadone treatment, a number of factors caused negative attitude towards taking methadone – nature of long-term methadone treatment, process of getting methadone enrolment, perception of clients and their parents on taking daily supervised methadone, livelihood of the clients, inconveniences about take-home system, cost of drugs and negative attitudes of community towards needle and syringes programme. Except methadone, provision of harm reduction services was more or less the same among NGOs. They provided the services at outreach and drop-in centre. Nearly all referrals to methadone clinic, NAP and other disease control programmes were initiated by the NGOs. Usually, all NGOs used referral letter and one of the staff accompanied the client when making referral. Most NGOs had supportive measures for PWIDs such as formation of self-help group and network group of drug users, development of income generation scheme.

Few NGO respondents pointed out that 'one township, one organization' was conceptually an acceptable approach. However, to reach every PWID with the maximum service, sometimes, the PWIDs should receive all supports from the NGOs.

Limitations in performing harm reduction services were expressed at both public and NGOs. Staff shortage, using different



identification client codes, and impossibility of take home methadone for a long period were reported as some of the restrictions in public health service system. In addition, due to lack of full staff at the public health facilities, regular client assessment, accompany the clients when referring and dropout/defaulters tracing could not be done. Misperceptions of the community members towards needle and syringe programme and some kind of community involvement like destroying heroin production sites also caused barriers for the NGOs.

In spite of constraints, a good coordination between methadone programme, disease control programmes and local NGOs were noted. Although each service organization had own objectives, the interviews pointed out that collaboration among service providers was essential to achieve goals and targets through one-stop service, computer-

based networking, client referral and dropout / defaulter tracing.

Findings highlighted several issues that need to be taken into consideration, e.g. – to establish an acceptable and user friendly patient unique identifier system, to plan the prerequisites of strong infrastructure for new establishments, like human resources, training, funding for one-stop-service and unique identifier recording system, to strengthen patient referral between public health sector and NGOs, and to improve dropout tracing activities.

In conclusion, since the magnitude of PWIDs taking methadone was increasing over the years, it is hoped that the findings would be helpful for planning on expansion methadone sites in high burden areas across the country and continuum care for the clients in need by both public and NGOs.

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⁵ Research Officer, Health Systems Research Division, Department of Medical Research



The Philippines

The Philippines dwell on the premise that policies are needs-based and evidence-based. Hence, continuous conduct of researches and improvement of data collection system is being implemented.

In 2006, Board Regulation No. 7 was issued institutionalizing the Integrated Drug Abuse Data and Information Network (IDADIN). Thirteen forms were then developed for uniformity and clarity of reporting. One of the forms being enhanced is form 1-06 for Treatment and Rehabilitation Centres now renamed as Treatment and Rehabilitation Admission Information System (TRAIS). The TRAIS is a web-based information system that establishes a venue where Drug Abuse Treatment and Rehabilitation Centres (DATRCs) can provide and share data on drug abuse treatment and drug dependent profile. Pieces of information collected from the DATRCs are packaged into statistical and management reports that will enable the assessment of government's drug demand and supply reduction efforts, programme planning, prioritization and evaluation. The system will capture the uploading of the information details of accredited DATRCs, patient's profile, admission and discharges, follow-up and after care. A web-enabled system to collect, manage and analyze data and information on drug abuse prevention will monitor the implementation of anti-drug

policies and programmes of different national agencies, local government units, and partner groups and organizations. It will serve as a venue for reporting drug abuse prevention and control programmes for programme implementers. Use of this system will result in a more informed and evidence-based decision making.

The Dangerous Drugs Board also maintains a Geographic Information System which is an online map that displays data, statistics and information on the different anti-drug programmes and location of a treatment and rehabilitation centres across the country.

Another system which is currently being developed for data collection and monitoring is the Integrated Drug Monitoring and Reporting Information System (IDMRIS). It is also a web-enabled system that will collect, manage, and analyze data and information on drug abuse prevention. It has sub-systems which includes the Anti-Drug Advocates Registration System (ADARS), Anti-Drug Advocates' Activities Reporting System (ADA-ARS), Anti-Drug Abuse Council Reporting System (ADAC-RS), Philippine Anti-Drug Strategy Implementation Monitoring System (PADS-IMS), and Program Implementation Monitoring system (PIMS).



Singapore

Curiosity towards Drugs among Youths in Singapore

A team of psychologists and researchers from the Central Narcotics Bureau and the Singapore Prison Service conducted this study in 2016. The research team administered surveys to 269 youths to gather their views and attitudes towards drugs. In-depth interviews were conducted with 29 of the surveyed youths to obtain a richer understanding of the nature of their curiosity towards drugs and factors influencing their eventual drug use or non-use. The youths in this study consisted of an abuser and non-abuser group. The age of the drug abusers ranged from 15 and 22 years old and were made up of drug supervisees who were undergoing the Youth Enhanced Supervision scheme, residents from the Community Rehabilitation Centre, and inmates from the Drug Rehabilitation Centre. The non-abusers' ages ranged between 12 and 22 years old were students ranging from secondary school to institutes of higher learning.

Key Findings:

- 1) The study found that youths in our sample who were curious towards drugs were significantly more curious in nature compared to their non-curious peers. In addition, they were significantly more impulsive in the facets of attentional and motor impulsiveness compared to their peers.
- 2) Although both abusers and non-abusers in our study became curious towards drugs through similar sources – peers, the Internet, movies or television programmes, they sought out different types of information about drugs. More abusers were curious about the benefits that they could gain from the effects of drugs (e.g., staying alert for long hours to work longer hours, decreased in appetite to lose weight), while more non-abusers wanted to know the reasons for individuals to use drugs despite its harmfulness. In addition, they wanted to know how drugs work in the human body.



- 3) In terms of factors that participants would consider against drug use, both groups were concerned about the legal consequences of drug use. However, curious non-abusers also considered the social and physical consequences of drug use such as how relationships with their family and friends could be affected, and the potential harm that drugs could cause towards their bodies.
- 4) Regarding their attitudes towards drugs, curious non-abusers have less permissive attitudes towards drug use and do not think that drugs are commonly available and easily accessible in Singapore, as compared to the curious abusers.

Recommendations:

- 1) It is crucial for youths to have access to accurate information about drugs. As mass information about drugs

regardless of its accuracy can be found on the Internet, anti-drug advocates and organisations can provide a balanced view on drugs with evidence-based information in their drug prevention messages via various platforms.

- 2) It will be useful for anti-drug advocates and organisations to highlight the salience of messages related to the social and physical consequences of drug use in their drug prevention materials and messages.
- 3) Drug prevention efforts to have a greater involvement of ex-abusers to share about the effects of harm they experienced alongside the harm resulted from their drug use.

It is also important for the preventive drug education contents for Youths-At-Risk to be supplemented with skills-based resilience training so that they will be better equipped to handle risky situations related to drug use.



Thailand

Polydrug use among kratom users: Findings from the 2011 Thailand National Household Survey^{*1}

Despite the availability of numerous anecdotal reports of polydrug use in kratom users, few studies have been carried out in Thailand. This study aimed to explore the problem of polydrug use among Thai kratom users. A national household survey on the prevalence of substance use was conducted in 2011 using a multistage random sampling technique. Participants were interviewed using a structured questionnaire. The frequency of other substance use was compared between respondents with and without a history of kratom use. Of the total sample (18,457), 544 (2.9%) acknowledged kratom use while 89 (46.1%) used it almost every day. The mean age of users (SD) was 42.7 (12.8) years old, 459 (84.4%) were male, and 264 (48.5%) had used other illicit drugs in the past. Kratom users were significantly more likely to use heroin, ecstasy, and ICE with adjusted odds ratios of 39.7, 30.5, and 29.1, respectively. Of 195 who acknowledged kratom use in the past 12 months, 22 (11.3%) concurrently used other illicit drugs, including cannabis, amphetamine-type stimulants (ATS), and inhalants. Polydrug use is common in Thai kratom users who are more likely to use opiates and ATS in their lifetime. Another drug concurrently used was cannabis. Health personnel need to be aware of polydrug use in this population.

^{*1} Likhitsathian, S., Jiraporncharoen, W., Aramrattana, A., Angkurawaranon, C., Srisurapanont, M., Thaikla, K., ... & Jarubenza, R. (2018). Polydrug use among kratom users: Findings from the 2011 Thailand National Household Survey. *Journal of Substance Use*, 23(4), 384-389.



Associations of the Neighborhood Environment with Substance Use: A Cross-sectional Investigation among Patients in Compulsory Drug Rehabilitation Centers in Thailand^{*2}

The objective of this study was to identify the association of characteristics of the neighborhood environment with substance abuse among clients receiving treatment for drug abuse in Thailand. A cross-sectional study was conducted with 1,128 drug addicts from 28 neighborhoods who were receiving treatment at all 7 compulsory drug rehabilitation facilities in Thailand. Trained interviewers conducted structured interviews with the subjects about substance use and the perceived neighborhood environment in their community. A multilevel logistic regression model was applied to estimate the effects of the neighborhood environment on substance use.

The majority of participants, 53.8% only used methamphetamine tablets, 31.3% used other illicit drugs as well as methamphetamine tablets, and 14.9% used an illicit drug other than methamphetamine. Three neighborhood characteristics were found to associate with substance use. A 1-unit increase in the perceived neighborhood cohesion score was associated with a 15% reduction in methamphetamine tablet use and an 11% reduction of the use of both methamphetamine tablet and another illicit drug. Conversely, a 1-unit increase in

perceived neighborhood crime predicted 19 and 14% increases in the use of methamphetamine tablets and the use of both methamphetamine tablets and another illicit drug, respectively. In addition, a 1-unit increase in the scores for stigma surrounding addiction corresponded to a 25% increase of the use of methamphetamine tablet and a 12% increase in the use of both methamphetamine tablet and another illicit drug.

Substance use among drug addicts was influenced by characteristics of the neighborhood environment. Therefore, prevention and intervention strategies should be designed with a consideration of the impact of neighborhood context on substance use behaviours.

^{*2} Yangyuen, S., Kanato, M., & Mahaweerawat, U. (2018). Associations of the Neighborhood Environment With Substance Use: A Cross-sectional Investigation Among Patients in Compulsory Drug Detention Centers in Thailand. *Journal of Preventive Medicine and Public Health*, 51(1), 23.



Trends in the use of illicit substances in Thailand: Results from national household surveys^{*3}

Some parts of Thailand border with the world's largest methamphetamine and opioids producing area and trafficking routes. This study reports trends in illicit substance use in Thailand over the period 2001–2011. National Household surveys on illicit drug use were conducted in 2001, 2003, 2007, 2008 and 2011. A stratified multi-stage cluster random sampling technique was implemented for each survey. Provinces in four regions were systematically selected using a probability proportionate to the size of the targeted population. Participants were interviewed using structured questionnaires on their history of substance use.

The prevalence of illicit drug use the past drastically decreased from 4.5% in 2001 to 1.0% in 2003 ($P < 0.05$). Since 2003, when Thailand began to launch a 'War on Drugs' campaign, the prevalence of illicit use within the past year varied between 1.0% and 1.3%. By 2011, it was estimated that 0.84% have used kratom (*Mitragyna speciosa*) within the

past year. Around 0.20% and 0.19% reported using cannabis and methamphetamine tablet within a year of the 2011 survey. Other types of illicit drugs were less commonly used in Thailand.

There was a decrease in prevalence of illicit drug use within the past year between 2001 and 2003 in Thailand. Since 2003, the past year prevalence of illicit drug use has remained relatively stable. From 2001 to 2011, cannabis, kratom and methamphetamine tablets have remained the three most commonly reported types of illicit drugs used in Thailand.

^{*3} Angkurawaranon, C., Jiraporncharoen, W., Likhitsathian, S., Thaikla, K., Kanato, M., Perngparn, U., ... & Aramrattana, A. (2018). Trends in the use of illicit substances in Thailand: Results from national household surveys. Drug and alcohol review.



The prevalence and associated factors of new psychoactive substance use: A 2016 Thailand national household survey ^{*4}

Analyzing the situation and risk factors associated with using new psychoactive substances (NPS) is essential for preventing and controlling health consequences. This study explored the prevalence and associated factors of NPS use in the Thai population.

This descriptive study was conducted in participants (N = 30,411, mean age = 42.4 ± 13.4 years, range = 15–64 years, 50.3% women) from urban and rural areas of Thailand. The participants were recruited using multistage sampling for large populations. The data were collected between July–December 2016 and analyzed using frequency, percentage, mean, standard deviation, chi-square, multiple logistic regression, and odds ratio with 95% confidence intervals (CI).

The prevalence of lifetime NPS use was 49.7% (95% CI, 49.1–51.3), past-year use was 31.3% (95% CI, 30.8–31.8), and current (past-month) use was 14.9% (95% CI, 14.5–

15.3). Among current users, 29.5% were habitual users (over 20 days in 30 days). The factors associated with current NPS use were sex (male/female) (adjusted odds ratio [AOR] = 1.145; 95% CI, 1.075–1.221; $p < 0.001$), age group (25–64/15–24 years) (AOR = 1.126; 95% CI, 1.090–1.358; $p < 0.001$), educational attainment (elementary or secondary school education and higher) (AOR = 1.634; 95% CI, 1.529–1.747; $p < 0.001$), and employment status (AOR = 1.842; 95% CI, 1.683–2.016; $p < 0.001$).

The prevalence of NPS use in Thailand is high, which reflects abuse behaviour that could potentially harm users. Understanding the prevalence and risk factors of NPS use could benefit policymakers.

^{*4} Wonguppa, R., & Kanato, M. (2017). The prevalence and associated factors of new psychoactive substance use: A 2016 Thailand national household survey. Addictive Behaviors Reports.



Viet Nam

Research on production and methods of drug treatment and detoxification:

In order to initiate an alternative drug detoxification; relevant agencies and scientists have been researching, producing and experimenting with cesium-based

detoxification in some localities. The application of treatment last about 6 months and achieved some initial results: firstly, the rate of non-drug use was 38% and after 1 year this rate was 27%. However, scaling up is more difficult because costs for this treatment are higher than others.

Pilot implementation of drug treatment with Cedemex in the community

Since 2013, the Ministry of Labour, War Invalids and Social Affairs in coordination with the provincial People's Committees of

Thai Nguyen and Hung Yen implemented a pilot drug treatment model with Cedemex.

**Cedemex is a drug detoxicant prepared from different medical herbs, invented and manufactured by Viet Nam. In August 2003, Cedemex – the product invented by scientists from the Institute on Research and Application of Herbal Medicines for Fatal Disease Treatment – was acknowledged by the State Check and Acceptance Board as an effective medication to cut the attack of drug addiction. Cedemex was permitted by the Ministry of Health to be put into nationwide circulation and used at all rehabilitation centers throughout the country.*



I. ACHIEVEMENT

IN THAI NGUYEN

Since April 2013, 688 people (91.73% of the target) have participated in the project in 114 communes, wards and townships in 9 districts, cities and towns; 02 Centers for Treatment - Education - Social Labor and 02 Voluntary Drug Treatment facilities.

The results of intervention phase:

There were 176 patients who quitted, tested positive for drug, accounted for 25.6%; 512 patients with drug-related adverse events were treated with Cedemex for 6 months, accounted for 74.4% of the total number of participants.

The results of the 6-month maintenance phase of Cedemex maintenance therapy:

After the intervention phase, 512 people were treated with Cedemex. Up to now, there are 71 people who have not yet been identified or assessed (absent from the localities, lack of information); 25 people died from various reasons, 416 who were present in the locality, were examined and assessed. Among these 416 people;

- 115 people were tested and showed negative results with drugs, accounted for 27.64% (in which the number of people taking medicine <1 year, was 20 people, from 1 year to 2 years, was

50 people, from 2 years to above 3 years, was 45 people).

- 242 people took enough medicine (11 boxes) according to the treatment protocol: 93/242 people tested negative of drugs, accounted for 38.42%.
- 130 people did not take Cedemex enough (left treatment halfway, away from work, other causes); 22/130 people tested negative accounted for 16.9%.
- 44 people continued to take Cedemex in 2016 (not yet 11 boxes) have not been evaluated.

IN HUNG YEN

Total number of participants: 107 people (2013-2014: 45 people, 2015: 32 people, 2016: 30 people):

- *Health status:* 107/107 were in good health.
- *Employment:* construction worker (03 persons), mechanic (03 persons), workers (03 persons), catering service (02 persons), driver (04 persons), farmer (13 people), self-employed or unemployed (79 people).

Number of relapses:

- After 1 month found 17/107 drug-positive accounted for 15.8% (in which 2013-2014 found 5/45 persons, 2015



found 7/32 persons, and 2016 found 5/30 persons).

- After 3 months found 36/107 drug-positive accounted for 33.6% (in which 2013-2014 found 12/45 persons, 2015 found 11/32 persons, and 2016 found 13/30 persons).
- After 6 months found 63/107 drug-positive persons accounted for 58.8% (in which 2013-2014 found 20/45 persons, 2015 found 10/32 persons, and 2016 found 18/30 persons).

Situation of using Cedemex:

Duration of use: Drug addicts participating in the project were given drugs for treatment within 6 months, including 05 days of high doses, 6 months of maintenance dose;

- Efficacy: In 6 months of maintenance treatment with Cedemex, most patients ate well, slept well, had comfortable psychology and spirit; Physiological recovery - weight gain.
- Side effects: During the first 5 days of treatment, some patients suffered from insomnia, fatigue, constipation, diarrhea. The maintenance phase has no side effects.
- Difficulties: In the interdiction phase, oral medication was given 4-5 times a day so many addicts did not take medicine at the right time.

Advantages: oral tablet is easy to use, herbal composition should be relatively benign, safe for users, although using high doses.

II. ASSESSMENT

1. Advantages

Efficacy and safety of Cedemex:

During the treatment of 6 months, Cedemex has helped the patients recover quickly, ate and slept well, had good psychology and spirit. Thanks to prolonged maintenance treatment, drug addicts were improved the ability to resist drug, therefore the proportion of people who do not re-use drugs was much high.

Cedemex is highly safe in the treatment and maintenance doses of 06 months. During the implementation, there have been no cases of patients with undesirable effects occurring with Cedemex.

2. Limitations

- A number of people involved in the project scattered in many communes, wards and townships, so it was very difficult for the leadership, guidance and support, inspecting, supervising and evaluating of patients.
- There are no regulations on staffing and special allowances for officials working in drug addiction treatment and rehabilitation at home and in the community; lack of mechanisms and policies to encourage enterprises,



individuals and owners of production and business to accept post-detoxification workers as well as to create jobs.

- The patient has not actively changed behaviour, still lacks of willpower, energy, determination to change lifestyle. Many people also abuse alcohol, beer due to custom and habits and use other drugs, such as tobacco, pipe tobacco, terpin hydrate mixture).
- Many families of patients have no suitable solution and persuasion for the patients in the detoxification process, resulting in patients lacking determination to detoxify, quit or take drugs.
- The project has not been integrated with vocational training, loan support, job creation for project participants in the family and community.





Chapter 5

Policy and Implementation Programme





Brunei Darussalam

The Narcotics Control Bureau adopts a comprehensive and balanced approach towards eradicating drugs in the country through drug supply reduction and drug demand reduction strategy. Drug supply reduction strategy is conducted by preventing the entry of drugs either through legal or illegal points of entry whilst drug demand reduction strategy is implemented through effective drug prevention activities such as preventive drug education, supervision, and rehabilitation.

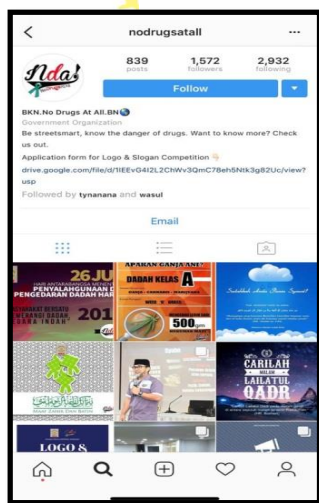
For demand reduction, besides online resources at <http://www.pde.narcotics.gov.bn>; Brunei Darussalam has been constantly providing drug preventive education through various programmes and approaches both in school and workplace settings. School programmes include: (1) SYUMMUL programme for high risk students, (2) SINAR forum programme for students in year 7, (3) Cluster programme for students in year 5 and 9 which reached out to 23,536 students in total, and (4) Explore – an anti-drug awareness raising programme. Programmes in workplace settings include: (1) urine

screening for 2,169 workforces, (2) drug awareness at work, and (3) briefing/talk services. Roadshows as well as AWASI ANAK KITANI programme were also launched nationwide. Another effective outreach activity was the community awareness raising programme that reached out to 5,589 people.

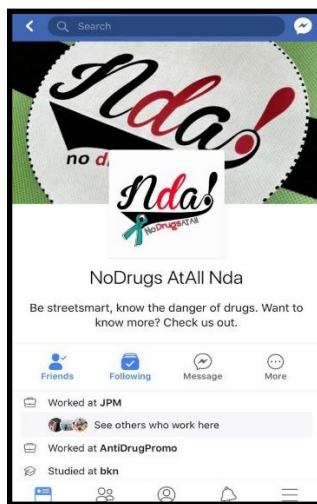
Drug abuse prevention programmes of Brunei Darussalam include:

1. Usage of social media

Narcotics Control Bureau actively uses social media platforms such as Facebook and Instagram for the purpose of advertising, sharing of anti-drugs information on the abuse of illicit drugs and international drug syndicates. This is to keep the public aware of the prevention and educational activities carried out by the Preventive Drug Education Division. These activities include visits to schools, public roadshows and other prevention activities which are also held at the gallery in the Narcotics Control Bureau headquarter.



Instagram



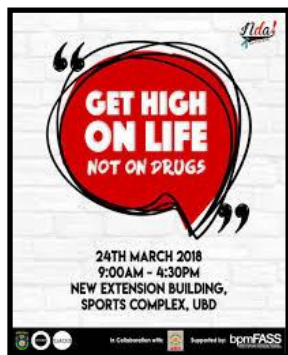
Facebook

2. Collaboration with the Ministry of Education

In collaboration with the Counselling and Career Division, Ministry of Education and other relevant agencies such as Royal Brunei Police Force, Community Development Department and Prison Department; a programme known as the SINAR Programme has been implemented in high risk schools which involves students from Year 5 and Year 7.

3. Community Outreach Programme

In the effort to reach out to all levels of society, the Bureau also conducts public events especially during school holidays at shopping malls, convention centers and other public places of interests. During such roadshows, interactive games and activities are also held alongside to attract the public's attention whilst disseminating anti-drug information.



The Preventive Drug Education Division has also been involved in providing the pensioners, who are former government employees, on preventive drug education.



4. Digital Advertising

In collaboration with Radio Television Brunei, Mix Media Works (Mixels) and Adtalk Advertising Companies, information on dangers of drug abuse are disseminated through digital advertising located at various strategic areas.

Narcotics Control Bureau of Brunei Darussalam will continue to step up its efforts to further engage youth on the danger of drugs.





Cambodia

Cambodia Policy and Drug Control Plan in 2017

The Royal Government of Cambodia, through National Authority for Combating Drugs strived to get more successful result from continuous combating activities; especially in 2017, Cambodia launched an Anti-Drug Campaign through which all relevant ministries and agencies of the government, private sector, religious institution, civil society, especially community and family were mobilized to jointly fight against drug trafficking and to help people who are suffering from drug. The main action plan covered:

1. Public Awareness and Drug Prevention;

- Continue to educate on the danger of drugs through different ways to the target places and vulnerable people.
- Update drug message contexts to attract the public and vulnerable target audience.
- Encourage guardians and private sectors to participate in public awareness campaigns on harmful drugs.
- Enhance mechanism on the management of relevant information and ethics education on **Say No to**

Drug into education institutions and community centers.

- Encourage and reward teachers, pupils, students and teacher-trained persons for participating in drug prevention and eradication activities in community.
- Encourage the guardians and former drug addicts who reintegrated back into community to participate in public awareness activities.
- Continue to campaign on participation of the public, international/national organizations, nongovernment organizations, religious organizations, and private sectors aiming at drug demand reduction and drug rejection through all means, at all places, and all time.

2. Treatment, rehabilitation, vocational training, enhancing life skills, social reintegration, and detoxification;

In 2017 there were 12,695 drug addicts who had received treatment, an increase by 9.43% compared to 11,602 persons in 2016. This may result from the following measures;

- Continue strengthening capacity of state, temporary and private centers for



drug treatment, rehabilitation and detoxification.

- Set up a treatment and rehabilitation center for drug abusers in Sihanouk Ville province with support from local and international partners.
- Continue expanding and enhancing capacity of community-based treatment programmes by applying the three specific mechanisms i.e.: Treatment, Vocational Training, and Integration; and continue implementing administrative and legislative actions.
- Continue collaborating with development partners, national and international organizations, and private sectors to implement their tasks and responsibilities in drug treatment, rehabilitation, vocational training and reintegration into families and communities.
- Continue taking care of drug addicts' health after withdrawal and continue the cooperate between the National Authority for Combating Drugs, National Aids Authority, and organization partners to tackle drug and HIV/AIDS issues.

3. Strengthening law enforcement institution

- Continue to take measures both legal and administration to fight against illicit crops plantation, illicit drugs production,

trafficking, storage and abusing from small scale to large scale methods.

- Continue to promote the quality of law enforcement in order to dismantle transnational crime syndicates by collaborating with neighboring countries and international bodies to jointly suppress and take action against criminals' tricks.
- Continue to strengthen the capacity, willing, virtue, professional, and responsibility of law enforcement institutions in order to raise quality and reduce the inactiveness which is against the professional conducts and responsibilities.
- Continue to strengthen the mechanisms and capacity of law enforcement in collecting evidences in drug cases to legally punish the criminals in accordance with drug control law and judicial reform.
- Cooperate with the World Bank on enhancing the effectiveness in anti-money laundering and anti-financial terrorism.

4. Precursor Chemicals Control

- Promote collaboration with relevant ministries, institutions in managing imported legal and illegal precursor chemicals and other raw materials
- Prevent and control the diversion of legal precursor chemicals to illegal synthetic drugs



- Provide training on chemicals control and management to all law enforcement units, enterprises and industries engaged in chemical business

5. International Cooperation with Neighbouring Countries

- Increase international collaboration with neighbouring countries by all means and establish drug free villages, communes and communities in neighbouring provinces.
- Implement the **White Village Project** (Drug Free Villages) along Cambodia-Thailand and Cambodia-Lao border and select the good ones as role model for sharing the best practice for drug control cooperation with Lao PDR, Thailand and Viet Nam.
- Continue to strengthen Border Liaison Offices (BLO) between Cambodia, Lao PDR, Thailand and Vietnam.

6. International cooperation among countries in the region and other development partners

- Continue the international cooperation with countries in the region and other development partners to strengthen and expand duties stated in the agreements and UN Conventions on Drug Control.

- Promote international collaboration with other countries to seek support for drug control activities, especially strengthening collaboration with national and international donors to seek financial support for community-based treatment.
- Continue to mobilize donor countries and development partners in particular UNODC to support drug control activities in Cambodia via the implementation of the Mekong Sub-Region Action Plan.
- Continue to participate in regional and international forums to raise collaboration against all drug trafficking.

7. Strengthen national and sub-national drug control mechanisms

- Continue to strengthen national and subnational mechanisms by providing guidelines on multi-strategies' implementation; particularly enhancing the capacity of city and provincial drug control committees.
- Continue to provide motivation to organizations and individuals on drug achievements and promote competitive movements in accordance with drug control multi-strategies.



Lao PDR

Lao policy and national drug control master plan (2016-2020)

Lao PDR like many other countries in the world, has been confronted with a threat from drugs and the trend of this danger is annually intensifying and expanding. The drug threat causes numerous social illnesses, becomes a source of crimes and a grave obstacle to the national socio-economic development; drug afflicts families and the nation's future generation.

Illicit drugs are now considered as a dangerous threat to the nation's security, peace and safety. It represents significant obstacles for our socio-economic development endeavour. Drugs ruin family fabric. It is a scourge of families and our young generation. Drugs cause transnational crimes, corruption, money laundering; affecting the role and prestige of our Party and Government. It also provides conditions in favour of our enemies and negative elements that might make use of certain careless drug addicts to create undesirable incidents in our society. In addition, narcotics issue has also been used as a political pretext for attracting antagonistic powers to interfere in our domestic affairs. Therefore, Lao PDR has always put in efforts in various forms to control, prevent and combat illicit

drugs and has given the top priority in tackling drug menace.

Due to the above reasons, a Five Year National Drug Control Master Plan (2016-2020) was formulated with an objective to be used as the basis and guiding device for implementing drug control activities in the next five years with effectiveness. The plan will also serve as an instrument for soliciting funding from international communities that will supplement the government's budget allocated for the execution of the Five Year National Drug Control Master Plan which has nine projects as the following:

- 1. Formulating and improving legal instruments concerning narcotic problems programme;**

During the implementation of the First National Drug Control Master Plan, the Party and Government promulgated many legal instruments that served as a guidance/reference for agencies performing drug control tasks, and while addressing drug related problems. Nevertheless, substances of some legal instruments might not be appropriate in the real the situation at a different time. Therefore, it is needed to



closely monitor and promote the implementation of legal instruments and inform the leadership about all legal instruments that are not suitable and might create loopholes for criminals to take advantage of so that the leadership can timely provide guidance for addressing the situation. At the same time, it might be necessary to formulate additional legal instruments to facilitate the implementation of the future tasks. The following are projects under this programme;

- 1) Formulation and improvement of legal instruments.
- 2) Improving, formulating and printing legal instrument concerning drugs.

2. Data/Information Collection and Analysis Programme;

The objective of this programme is to collect information on all facets of the drug related situation in the country. This involves surveys on production, cultivation, processing, use, trafficking, transporting of drugs, precursor and paraphernalia/ equipment used by criminals at different period of time. Information collected will be studied and analyzed with a goal of attaining accuracy of the situation that will serve as verifiable official information. The following are projects under this programme;

- 1) Survey and data/information collection in all aspects of drug related problems.

- 2) Data base, data analysis and reporting system.
- 3) Exchange lessons and information within the country and abroad.

3. Programme concerning education/ training and dissemination of information on the law and adverse consequences of drug abuse

In order to prevent members of our society from becoming victims of narcotics, especially our youth and teenagers/ adolescents, the generation that will take over the nation's future; to ensure that the society enjoys peace, safety and social order, preventing negative social manifestation threatened by drugs which can slow down socio-economic development of the country; to achieve all these, it is imperative to launch education/training and information dissemination to sensitize/raise awareness of our people so that they will acknowledge and understand the legal instruments that exist, harmful consequences caused by drugs and the prohibition imposed by Party and Government in this regard. This task must be launched extensively and continuously. The program involves the following projects;

- Produce equipments and materials for education/training and information dissemination. It will also look into the production of appropriate CDs, short films, posters, manuals, and anti-narcotics sign boards.



- Celebrate the national and international antinarcotics days. For these events, we will organize meetings, song and dance contests, and sports/antinarcotics walk rally. The public will be informed about achievements made and relevant legal instruments as well as adverse consequences from drug abuse.
- Organise anti-drug song, dance and sports contests/competitions to create festive moods. In these events, there will be displays of accomplishment, theater performance, singing contests, drawing competition for young children, and sport-gymnastic performance with anti-narcotics theme.
- Raise the drug control fund through many approaches for fund raising to seek domestic and foreign financial support.
- Conduct information campaigns, educating/training the public on dangerous consequences of drug abuse so that people will realize and understand drug related laws, orders and interdiction issued by the government to prevent people from becoming drug victims; mobilise/sensitise members of the public to voluntarily join the fight against drugs and not to be tempted by illicit drugs.

These exercises will allow members of the public to apprehend the law and order issued, including the Party and

Government's interdiction related to illicit drugs. The public also realize the dangerous effects of drugs on users and families as well as the formidable effects on communities and nation. The aim is also to encourage/invite members of the public to join drug control efforts.

4. Treatment and vocational training for drug addicts programme.

In order to save and rehabilitate the lives of a large number of victims of illicit drugs, restoring their physical and mental health to a normal state, so that they can become good citizens; i.e., not being thieves, burglars, robbers, mugger, murders, causing of traffic accidents and social disruption of peace and security of the society and the nation at large, a number of projects are incorporated in this program as follows:

- 1) The project involving training and formation of staff that will provide treatment and vocational training to the drug addicts.
- 2) The project dealing with centers the provide treatment/care and rehabilitation for heavily addicted cases.
- 3) The project concerning provision of vocational training to victims at centers before turning to families and communities.
- 4) The project concerning provision of care and treatment to non-serious



opium and amphetamine addicts in their own homes or communities.

- 5) The project that produces tincture of opium (T.O) capsule and treatment through the use of traditional herbs.
- 6) The project concerning improvement and building of infrastructure and provision of equipment to treatment and vocational training centers for drug addicts.
- 7) The project concerning preventing HIV/AIDS among intravenous drug users.

5. Alternative development, replacing opium poppy and cannabis cultivation programme.

To maintain and fulfill the promise declared to the world on 14 February 2006 that Lao PDR had eliminated opium poppy cultivation on its entire territory, to help poor families in remote areas to find legal and sustainable means of living, instead of growing opium poppy; thus improving their lives step by step. This will also contribute to the country's strive to graduate from the list of the world's least developed nations by 2020. In order to implement this program with success, we must pay special attention to effectively carry out the following projects;

- 1) The project aims at preventing and addressing problems related to illegal opium and cannabis cultivation.

- 2) The project to survey areas under illegal opium poppy and cannabis cultivation.
- 3) The project concerning alternative development, replacing illegal opium poppy cultivation.

6. Law enforcement programme

This programme is aimed at controlling and fighting back criminals who use narcotics to intoxicate our people's body and mind. It also tries to diminish our neighbours' concern that criminals have made use of the territory of Lao PDR as the temporary shelters and as a point of transit while transporting illicit drug and precursors to the criminal's countries. The program is aimed at prosecuting criminals' ring leaders, seizing their possession vehicles, equipments, currencies, and valuable objects using them in conjunction with the allocated budget for our drug control operation. The projects to be incorporated under this program include the following;

- 1) Project involving study/research on legal instruments and compiling statistics on criminal cases related to narcotics.
- 2) Project concerning capacity building in matters related to narcotic crimes.
- 3) Project concerning management and improvement of the operation of the Border Liaison Offices (BLOs).
- 4) Project concerning controlling and dealing with shipment of narcotic



drug and precursor at vulnerable point along our borders with neighbours.

- 5) Project concerning specialized training for law enforcement officers.
- 6) Project on controlling drug peddling (flash roll operation).
- 7) Project concerning formation of convert informants/partners.

7. Program concerning precursor control, analyzing and testing drug use:

The program on precursors and equipments used for narcotic production is very crucial for controlling and preventing drug production in the Golden Triangle area. The more successful in preventing precursors and illicit drug production equipment to go to through Lao PDR and neighbouring countries (as transit countries) and going beyond to production sites in the Golden Triangle, the better chance in suppressing narcotics problem at the very beginning. This would restrict considerable amount of drugs of various kinds. This is a very cost-effective way of addressing and controlling drug related problems. Additionally, drug analysis and test capacity will provide verified evidence for fair criminal proceedings against drug related suspects. The capacity to test drug use will allow organizations to know for certain who among those under their administrative use drugs. The projects under this programme include;

- 1) Import/export and use of precursors control project.
- 2) Management of Forensic laboratories and performing drug use tests project.
- 3) Specialized technical training for staff of the narcotics analysis centres project.
- 4) Provision of methamphetamine hydrochloride and equipments used in forensic laboratories project.

8. International cooperation program

Narcotics are common problem for the world over and for our region. Lao PDR alone cannot effectively fight against drugs. Therefore, establishing international contact and cooperation for controlling and addressing drug problems is an empirical necessity. Exchanging data and information, mutually exchange lessons learned, establishing drug control agencies at border points, controlling import/export of drugs, precursors, and drug processing equipments, genuinely carry out obligations as dictated by treaties, agreements and memorandum of understanding to which Lao PDR is party. The following projects are under this programme.

- 1) The Safe Mekong Operation Project which is a cooperation scheme between Lao PDR and five countries that share borders with Laos.



- 2) The Drug Control Cooperation Project that Laos is undertaking with other members of ASEAN countries.
- 3) The Cooperation Project between Laos and UNODC.
- 4) Bilateral and multi-lateral cooperation projects that Lao PDR has signed with friendly countries.
- 5) Project to host ASEAN Ministerial Meetings on illicit drugs.
9. Streamlining the organizational machinery of the National Commission for Drug Control and Supervision at the central and local level programme;

In order to concretise the Five Year National Drug Control Master Plan 2016-2020 according to the stated target, an important factor that is needed is streamlining the organisational structure of the LCDC from central to local level, so that this would correspond to the changing reality at different periods of time. In addition, placement and reshuffling of personnel must consider each and everyone's skill and knowledge and suitability for jobs.



Malaysia

National Drug Policy

At the national level, Malaysia adopted its reviewed National Drug Policy in 2017 in accordance with its current needs and social circumstances, so as to tackle drug related issues in a comprehensive and effective manner. This extensive policy incorporates both demand and supply reduction approaches and underlines a more focused direction for all relevant governmental organisations and various community sectors involved in tackling drug-related issues. The 2017 Malaysia's National Drug Policy underlines five thrusts of action, namely Preventive Education, Treatment and Rehabilitation, Law Enforcement, Harm Reduction and International Cooperation.

Comprehensive, Integrated and Balanced Approach

Malaysia's continuous commitment to address drug problem is evidenced by the declaration on February 2016 by the Deputy Prime Minister who is also the Minister of Home Affairs that year 2016 is "The Year of War on Drugs". This is consistent with Malaysia's commitment to address drug problem through a comprehensive, integrated and balanced approach between demand and supply reduction. These measures, among others, include preventive

education, introduction of voluntary treatment and rehabilitation known as 1Malaysia Cure and Care Clinic, reintegration of former drug users into society, continuous advocacy of treatment and rehabilitation programmes, utilization of Integrated Substances Control Management Systems (SPIKES) by the Pharmaceutical Services Division of the Ministry of Health and the establishment of the Special Tactical Intelligence Narcotics Group (STING) by the Royal Malaysia Police (RMP) with the view to investigate and arrest local and international drug kingpins and syndicates. On top of that, the Government of Malaysia also has approved an Integrated Narcotics Task Force (INTF) to curb illicit drug smuggling activities at the Malaysia-Thailand borders. It is the latest initiative of total enforcement which has 3 main targets:

- i) Seal the Borders
- ii) Drug Trafficking
- iii) Drug Addiction

INTF is a National Blue Ocean Strategy in nature because it involves at least 13 governmental enforcement agencies in its implementation such as NCID, Customs, NADA, Border Control Agency (AKSEM), Army, Maritime, Pharmacy, etc.



Demand Reduction: Treatment

Malaysia's drug demand reduction strategy places great importance on the treatment and rehabilitation of drug dependents. Malaysia adopts the voluntary innovative approach to treatment and rehabilitation of drug dependents since 2010 and continuously increases accessibility to treatment services with the establishment of 20 Cure & Care Rehabilitation Centers, 10 Cure & Care 1 Malaysia Clinic and 78 Caring Community Houses under the purview of the National Anti-Drugs Agency (NADA). The government's role in the rehabilitation of drug dependents is supported by various non-governmental and private organisations through the establishment of 54 private drug rehabilitation centres. This collective effort further enhanced the accessibility of services to those affected by the drug abuse phenomenon.

In 2015, Malaysia implemented the Islamic Spiritual Rehabilitation Approach (ISRA), which integrates the psychosocial and spiritual approach in rehabilitation. This module appears to be effective and had been introduced in other treatment and rehabilitation centres. In 2017, Malaysia became the pioneer of the Psychoeducation Group Therapy for Substance Abuse. NADA developed a specific training module entitled, the "Psychoeducation Practitioner for Substance Abuse Treatment and Rehabilitation Training Manual (Certified

Psychoeducation Practitioner, CPP)" to train NADA and Prison Department's rehabilitation officers. This specific training module has been successfully delivered to 11 Master Trainers and 5 Training of Trainers and further expanded to drug rehabilitation centres.

On the treatment and rehabilitation measures for drug dependents, Malaysia underlines the importance of having an accurate examination of treatment needs for drug dependents. During the initiation process, evidence-based screening and assessment tools such as ASSIST, Addiction Severity Index and URICA are applied. Whereas before aftercare and social reintegration process, another evidence-based assessment tool namely Cure and Care Recovery Index (CCRI) is used. These assessment tools are parts of the treatment and rehabilitation approaches to decrease relapse rate and reduce stigma in the community.

Demand Reduction: Prevention

Malaysia's preventive education strategy focused on four scopes of services namely the Drug-Free Family Programme, Drug-Free Educational Institution Programme, Drug-Free Community Programme and Drug-Free Workplace Programme. Within each scope of the service, Malaysia implemented various evidence-based and best practices programmes such as My Beautiful Malaysia and NADA Squad for



Youth to mobilise the support and participation of wider communities especially the youth.

Since 2016, Malaysia has launched the All Out Campaign against Drugs, through the implementation of six key strategies, namely, Omnipresence, Integrated Enforcement Operations, Preventive Operations, Community Empowerment, Anti-drugs Icon and Campaign through Media. With the laudable support, this campaign further reached out to 178 high risk areas and provides training to 150,000 community leaders.

Malaysia strongly recognised the importance of working collectively with the community in addressing drug problem at the nucleus of the nation. The Community Empowerment has pursued a proactive strategy to mobilise the participation of wider communities in addressing local drug problem through raising awareness of drug menace, strengthening the role of community leaders and enhancing collaborative efforts as well as provision of necessary knowledge and skills on drug prevention. In 2017, training of trainers of the Community Empowerment programme involving 1,940 community leaders in 64 high-risk areas, was implemented to protect communities, especially vulnerable individuals from fall prey to drug abuse.

Harm Reduction

Harm reduction is featured as one of the key thrusts in Malaysia's 2017 National Drug Policy, which aims to minimise the physical, psychological, social, economic and self-harm of drug abuse activities on individuals, families and communities. Harm reduction serves to complement other strategies in the 2017 National Drug Policy, which intended to ensure harm is minimised and demand for drugs is reduced. Specific programmes on harm reduction with the focus to reduce HIV infection and other blood-borne diseases have been implemented in Malaysia, namely the Opioid Substitution Therapy (OST) and the Needle-Syringe Exchange Programme (NSP).

Supply Reduction

Malaysia expresses grave concerns over the increasing illicit drug trade activities especially synthetic drugs. The threats of drug trafficking on social and economic structures call for a serious and concerted effort amongst ASEAN Member States. Malaysia is not exempted from such threats as the geographical location of the country has made Malaysia particularly attractive for the operation of international drug trafficking syndicates. The latest development of synthetic drugs - the current choice of drug, has resulted in the increased demand for drugs.



As the drug problem takes priority in the national agenda, Malaysian policies and national legislations with regard to supply reduction activities are strict and encompass a wide-ranging effort aimed at crippling the drug supply chain. The Dangerous Drugs Act 1952 serves as the main law that governs the importation, exportation, manufacture and sale of drugs. Recently, an amendment to the law was passed with the aim to enhance assistance to enforcement agencies in obtaining information that could be used to disrupt drug trafficking in and outside of Malaysia.

Complementing the Act, the Dangerous Drugs (Forfeiture of Property) Act 1988 allows enforcement agencies to seize and forfeit properties, including proceeds of the illegal activity. The forfeiture of properties of drug traffickers has weakened drug trafficking activities and keeps the drug situation in the country under control.

Malaysia believes that disruption of the supply chain has to be addressed in an extensive, multifaceted and integrated approach. Therefore, close inter-agency collaboration amongst drug enforcement agencies in the country is of paramount importance. The joint efforts of the Royal Malaysia Police, the Royal Malaysia Customs Department, the Pharmacy Enforcement Divisions of the Ministry of Health, the Malaysia Maritime Enforcement

Agency and the forensic services of the Department of Chemistry has continuously disrupted the supply of drugs and resulted in the seizures of 85,835.83 kg, and 99,463.88 litre of drugs as well as the dismantling of 18 clandestine laboratories in 2017.

Apart from the continuous collaborative effort, Malaysia formed an Integrated Narcotics Task Force (INTF), consisting of the drug enforcement agencies with support from the Border Control Agency (AKSEM) and the Malaysian Armed Forces. With the combined strength and expertise of the various agencies, this task force will interdict the flow of drugs by increasing surveillance on drug trafficking activities at the borders.

As the global synthetic drugs market is becoming of serious concern, Malaysia recognises the importance of addressing the proliferation of precursor chemicals. In line with international obligations, Malaysia fully implements the requirement for Pre-export Notification (PEN). PENs will be issued to the competent authority of the importing countries whereby the export of precursor chemicals is only approved if there is no objection from the importing country. Inversely, PENs are vetted for its authenticity and the approval/objection is given by way of PEN online. For importing countries with no access to the PEN On-line System, an import authorisation from the importing country is required.



In addition to that, the import and export of precursor chemicals including pharmaceutical preparations containing pseudoephedrine and ephedrine require an Approval Permit issued through the e-permit system provided by the Royal Malaysia Customs Department, established pursuant to the Customs (Prohibition of Import) Order and Customs (Prohibition of Export) Order. Routine inspections and audits on the companies involved in the importation and exportation of precursor chemicals are also done periodically. To date, there has been no report regarding the diversion of precursor chemicals from licit sources.

International cooperation is among the core of the supply reduction measures undertaken by Malaysia. Enforcement agencies maintain regular and timely exchange of information and intelligence with counterparts in other ASEAN Member States, including the US Drug Enforcement Administration (DEA), Central Narcotics Bureau of Singapore

(CNB), Central Investigation Bureau of Taiwan (CIB), National Narcotics Control Commission of China (NNCC), Police Narcotics Suppression Bureau of Thailand (PNSB), the Togo Police at the airport in Lome and the Narcotics Police at Sao Paulo International Airport, Brazil. The monitoring of movements of suspected drug traffickers and setting up of joint narcotics operations have resulted in several syndicate members being apprehended and prosecuted either in or out of Malaysia.

At the regional level, Malaysia participates actively in various platforms within ASEAN, especially the ASEAN Airport Interdiction Task Force (AAITF) and the ASEAN Seaport Interdiction Task Force (ASITF). These initiatives have not only provided Member States with a multilateral cooperation setting, but also helped improve the capabilities of each agency through training workshops and sharing of best practices.



Myanmar

Drug Control Policy

The priority need of Myanmar, as identified by consultations, combined with regional and international priorities has led to the decision to include the following key approaches in the drug control policy:

Supply Reduction and Alternative Development

- Reduction of cultivation, production, and trafficking of illicit drugs and drug related crimes.
- Development of effective laws for prevention, suppression and investigation of drug related offences.
- Combating money laundering and corruption that are related to drug offences.
- Development and implementation of alternative development programmes in order to reduce the dependency on illicit opium cultivation and illicit drug activity, including through creation of opportunities for sustainable livelihoods, and development of infrastructure and human resources.

Demand Reduction and Harm Reduction

- Development and implementation of interventions for prevention of illicit drug use among children, youth, women,

vulnerable populations and general public.

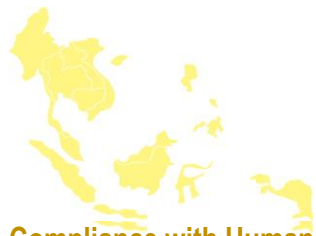
- Promotion of treatment for people who use drugs and improving the quality of treatment services as well as implementation of rehabilitation and social reintegration interventions for people who use drugs.
- Reduction of health and social adverse consequences and harms caused by use of drugs (reduction of drugs-related health and social harms and consequences).
- Regulation of availability of controlled substances and drugs for medical treatment purposes in a proper, systematic and adequate manner.

International Cooperation

- Promotion of international cooperation in drug control as this is a common problem in all countries, and responsibility for combating it is a shared duty for all countries of the world.

Research and Analysis

- Investment in research and analysis to gain a clear understanding on the real, absolute situation of the drug problem.



Compliance with Human Rights

- Creation and promotion of opportunities for treatment, rehabilitation, access to justice and social services for children, disabled people, women and other vulnerable population.

Myanmar's new drug policy covers law enforcement, treatment, rehabilitation and alternative development. Especially AD, there are many programmes/projects Myanmar collaborates with UNODC, China, ONCB Thailand and local companies as well.

Myanmar's national strategies on drug abuse control are;

- (1) To designate narcotic drugs elimination as a national duty and comprehensive implementation, and

- (2) To develop and enhance the standard of living of the national races residing in the border areas and total eradication of opium poppy cultivation.

Supply reduction, demand reduction and law enforcement are three tactics adopted. Designating prioritized activities include supply elimination, demand elimination, law enforcement, organizing the local populace to participate in the fight against narcotic drugs and international cooperation. Law enforcement agencies involved in the mission are military, police force and Customs Department together with 50 anti-narcotic task force units nationwide.



The Philippines

Government response towards Philippine Anti-Illegal Drug Strategy (PADS)

A blueprint describing the strategies and programmes to be undertaken by the government in addressing the country's drug abuse problem was put in place. It is aligned with the President's priority thrusts and is anchored on the Philippine Development Plan 2017-2022. The Plan will be adopted through an EO by the Duterte Administration.

Drug demand reduction policies were formulated through issuances of:

- Guidelines for the Implementation of Operation: "Lawmen"
- Guidelines on Voluntary Surrender of Drug users and Dependents and Monitoring Mechanism of Barangay Anti-Drug Abuse Campaigns
- Strengthening the Implementation of Barangay Drug Clearing Programme
- Capacity building for local government officials, programme implementers, and volunteers on handling voluntary surrender of drug users and establishment of community-based treatment and rehabilitation (OPLAN SAGIP)
- Urban Poor against Drugs: Harnessing capacities for drug free communities - aims to build the capacities of peoples'

organizations in taking action against the proliferation of illegal drugs and drug abuse in urban poor communities

Moreover, Philippines applied several substance use prevention interventions in many base settings including school-based, family-based, workplace-based, sector-based, community-based, treatment and rehabilitation, studies, researches and statistics along with civic awareness and response.

Regional and international cooperation were done through technical assistance and exchange, adherence to treaties, hosting of study tours and field visits as well as attendance to foreign conferences.

The seventeen (17) members of the Dangerous Drugs Board (DDB) have their own responsibilities in combating the drug abuse problem. Within their respective mandates, agencies of the government have been contributing to the realization of a drug-free Philippines through the implementation of programmes based on a comprehensive and balanced strategy.



Moreover, a range of educational programmes and services are being implemented designed to address the needs of every sector of the society. For families, the family drug abuse prevention programme in partnership with the Department of Social Welfare and Development (DSWD) and the systematic training for effective parenting. In the workplace, the institutionalization of a drug-free workplace programme including the formulation of anti-drug policy, training and advocacy programmes, random drug testing and employee assistance program.

Another preventive education programme is the Urban Poor against Drugs: Harnessing capacities for drug free communities. It aims to build the capacities of peoples' organizations in taking action against the proliferation of illegal drugs and abuse in urban poor communities.

Regional and international cooperation were done through technical assistance and exchange, adherence to treaties, hosting of study tours and field visits as well as attendance to foreign conferences.



Singapore

Preventive Drug Education is a key strategy

While the total number of drug abusers and new drug abusers arrested fell in 2017, the proportion of new young drug abusers remained of concern. Those below the age of 30 made up nearly two-thirds (64%) of all new drug abusers arrested. As the National Council Against Drug Abuse (NCADA) Youth and Public Perception Survey 2015/6 had found, a growing number of youths were displaying more liberal attitudes towards drugs.¹ While a majority of them still held negative views towards drugs, there had been an increase in liberal attitudes, up from 11% in 2013 to 16% in 2016 for those aged 13 to 21 years.² The survey also revealed that 58% of youths said they learnt about drug-related content via social media. Nevertheless, at least 94% of all youths (under 30 years old) were confident in their ability to resist peer pressure and to say no to drugs. The key deterrent for them was our strict anti-drug laws.

New young abusers may form the next generation of drug addicts. That was why Preventive Drug Education (PDE) remained one of CNB's key drug control strategies. CNB expanded its social media and community outreach efforts through the use of bite-sized posts on our CNB.DrugFreeSG social media platforms, to encourage youths to lead a drug-free lifestyle.

CNB also worked actively with various groups in the community to boost awareness of the harms of drugs, and encourage advocacy and co-creation. This was done through rallying youths' participation in the Anti-Drug Advocate Programme and partnering with organisations from the government, non-government and private sectors under the United Against Drugs Coalition (UADC).

Singapore remained committed to staying ahead in the ongoing fight against drugs. The initiatives in 2017 were as follows:

¹ The report on the NCADA Youth and Public Perception Survey 2015/6 was released in April 2017. A copy of the report can be found at this URL: <https://www.ncada.org.sg/docs/default-source/what-we-know/release-of-ncada-perception-survey-2015-2016-results5408f493a45c6266b305ff00000462c8.pdf>

² Youths in this age group were asked for their response to liberal statements such as "It is alright to try drugs for a new experience".



Social media campaigns (#CNB247, Be Yourself Campaign, #SingaporeansAgainstDrugs)

Social media campaigns such as “#Singaporeans Against Drugs” and “Be Yourself” were introduced on the CNB.DrugFreeSG social media handles.

The #SingaporeansAgainstDrugs series featured everyday Singaporeans who made a stand against drug abuse.

Targeted at youths aged 13 to 25, the “Be Yourself” Campaign encouraged youths to pursue their passions, instead of losing themselves to drugs.



Preventive drug education toolkits

Parents, educators and National Service commanders play critical roles as mentors. Toolkits have been developed to assist them in guiding youths and provided information on the effects of drugs, reasons as to why youths turn to drugs, and resources on how to seek help.

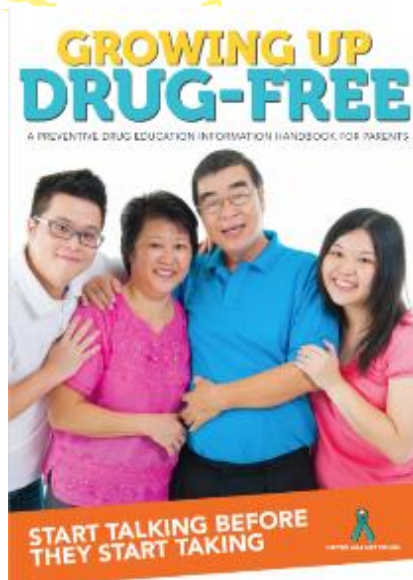
The NCADA Youth and Public Perception Survey 2015/6 found parental influence to be very effective in deterring drug abuse. Almost half of the secondary school and junior

college respondents were found to have had conversations with their parents about drugs, and 9 in 10 were less likely to abuse drugs after talking to their parents about it.³

The parents’ handbook was therefore launched in April 2017 to encourage parents to start conversations with their children on the dangers of drug abuse. Over 300,000 copies of the Parents’ Information Brochure have been distributed. All toolkits and handbooks are available online at www.cnb.gov.sg.

³ The report on the NCADA Youth and Public Perception Survey 2015/6 was released in April 2017. A copy of the report can be found at this URL :

<https://www.ncada.org.sg/docs/default-source/what-we-know/release-of-ncada-perception-survey-2015-2016-results5408f493a45c6266b305ff00000462c8.pdf>



Talk to your child, and never assume that your child would know better. Youth who have healthy relationships and are involved in meaningful activities are less likely to abuse drugs. In order for your child to stay drug-free, you will need to guide them to build strong and healthy relationships with their family members and peers, bring a safe world and ensure their moral education to cope with life's challenges is also important. All these start with you.

PARENTING TIPS TO BUILD HEALTHY RELATIONSHIPS

HELP YOUR CHILDREN FEEL GOOD ABOUT THEMSELVES

You can build better relationships with your children by making them self-esteem. You can:

- Offer praise and encouragement
- Show affection
- Be there for them in times of need
- Engage them in conversation regularly for an instant connection
- Give them responsibility to make them feel valued and respected



Mobile applications developed to highlight dangers of drug abuse

In collaboration with Nanyang Polytechnic's School of Interactive and Digital Media, an anti-drug mobile application game- 'Narcaution' - was developed and officially launched at the CNB Workplan Seminar in April 2017.

The game was centred on the story of an anti-drug protagonist protecting Earth from various drug lords, and provided an immersive experience to transform the way anti-drug messages were pushed out to youths. The effects of drug abuse were also represented metaphorically in the game to allow players to experience them through game play, and factual information of drugs was also compiled for players' reference.

CNB also worked with Dr Roger Ho from the National University of Singapore and Dr Melvyn Zhang, from the Institute of Mental Health to develop a PDE mobile application which highlighted the dangers of drug abuse to our youths, especially for students going for overseas exchange programmes.





Latest technologies incorporated into PDE Roadshows at Institutes of Higher Learning (IHLs)

CNB strived to create a sustainable, anti-drug presence in educational institutions. In 2017, CNB launched a new large-scale

roadshow concept in IHLs, which provides a more interactive and personalised experience for students. Through virtual reality technologies and facial scanning digital displays, students witnessed first-hand how drug abuse affects their well-being.



PDE videos to promote a drug-free lifestyle

CNB also commissioned eight PDE videos ranging from short-film dramas to documentary-style interviews with ex-abusers, to promote the importance of a drug-free lifestyle.

In order for PDE messages to be effectively put forth to other youths in a youth-centric and light-hearted manner, CNB also explored new partnerships with young, local filmmakers in 2017, including a group of students from ITE College West.





Anti-drug Ambassador Activity (AAA) booklet

To promote independent learning and thinking skills through hands-on activities, the AAA booklets were distributed to primary schools and community organisations annually. Since its inception in 2004, CNB has seen 468,000 AAA participants, with 113 schools and 43,082 participants engaged in 2017 alone.

Children aged 10 to 12 years were encouraged to complete a series of activities in the booklet, which included the conducting of online research on drug effects, and interviewing friends and family members on their knowledge of drugs. This year, participating schools showcased their students' submissions at the end of the activity period, with 10 primary schools, including Alexandra Primary School, Greendale Primary School and Yumin Primary School, winning prizes for the best montage exhibition.



Partnering the local community and foreign counterparts in the fight against drugs

CNB cannot fight drug abuse alone, and needs community support to sustain the movement. Beyond educating and

inculcating anti-drug attitudes in our youths, it remained critical to empower youths to become leaders amongst their peers.



Youth Anti-Drug Advocate (ADA) Programme

The ADA programme identified and equipped youth advocates with the knowledge to spread anti-drug messages. The advocates were encouraged to speak out on the anti-drug cause and to generate support within their own circle of friends.

Youths who sign up would gain an understanding of Singapore's drug policies and the harmful effects of drugs. As part of the experiential learning, they would also visit halfway houses and drug rehabilitation centres to hear first-hand accounts of the harms of drug abuse.



Anti-Drug Abuse Advocacy (A3) Network

NCADA established the A3 Network to provide a platform for Singapore's anti-drug advocates to connect and bond.

The A3 Network brought together individuals who are passionate about keeping Singapore drug-free, and provided them with advocacy training and updates on local drug issues and

trends. This allowed them to keep abreast of the local drug situation, and facilitated their efforts in garnering support for a drug-free Singapore.



United Against Drugs Coalition (UADC)

Launched in April 2017, the UADC was an anti-drug alliance for organisations based in Singapore. It aimed to raise awareness of drug abuse in our society and rally support from different organisations to advocate for a drug-free Singapore.

There were more than 50 organisations in the UADC, including private business organisations like Singapore Post, and Fly Entertainment.

Through the support and communications platforms of these organisations, CNB conveyed the crucial message that drugs have no place in our society, and that non-government organisations and private businesses alike were equally supportive of a drug-free Singapore to safeguard the health and interests of the people.



Positive influencers

Positive influencers had substantial impact in capturing youths' attention and shaping their attitudes and behaviours towards certain causes. Tapping on their influence to promote the anti-drug cause can therefore go a long way compared to simply telling youths that drugs are harmful.

In January 2017, national footballer Irfan Fandi was appointed as an anti-drug advocate. As part of his advocacy efforts, he participated in a friendly football match with underprivileged children and youths-at-risk, encouraging them to pursue their own passions.



In September 2017, local comedian and CEO of talent agency FLY Entertainment, Irene Ang, spoke about the detrimental consequences drug abuse brought to abusers' friends and family. In a drug awareness video by FLY Entertainment which garnered significant traction on popular social media sites, she spoke about her mother's long-time addiction to drugs, how it had impacted her childhood negatively and urged her followers to stay drug-free.





International Day Against Drug Abuse and Illicit Trafficking

To commemorate the annual 'International Day Against Drug Abuse and Illicit Trafficking' on 26 June 2017, officers from CNB and volunteers took to the streets to distribute 600,000 information cards and guitar pick keychains - with the tagline "For a #DrugFreeSG" - to members of public islandwide.



Anti-Drug Abuse Campaign (ADAC)

The Year 2017 marked CNB's 22nd ADAC, and music and dance were selected as anchor activities.

On 16 June 2017, a music concert, featuring popular local artistes such as Taufik Batisah, The Sam Willows, Inch Chua, THELIONCITYBOY and Scarlet Avenue, was held for a crowd of 2,000. Four groups of youths were also selected in a music programme and mentored by the artistes to perform together with them onstage.

The music concert aimed to encourage youths to embrace a drug-free lifestyle, and urged them to pursue their interests and aspirations rather than seek fleeting moments of happiness with drugs. The event also included a mentorship programme to emphasise the importance of peer influence and guidance.



DanceWorks! Competition

Held in conjunction with the annual ADAC, DanceWorks! was an anti-drug dance competition that provides a vibrant platform for youths to spread anti-drug messages through dance.

In addition to the group choreography segment, Danceworks! 2017 saw the introduction of a new 'Free-Style Battle' dance category to promote anti-drug



awareness among older youths. It featured a Professional-Amateur duo battle format, requiring professional dancers to pair with amateurs for the competition.

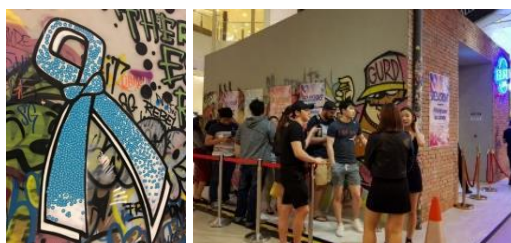


GURD Club

In October 2017, CNB set up a pop-up installation, “GURD CLUB” (‘DRUG’ spelt backwards) to raise awareness among young adults on the harmful effects and negative consequences of drugs through a multi-sensory experience at The Cathay.

Marketed as a pop-up underground club, more than 2,000 participants were treated to an interactive simulation of the short-lived highs and crashing lows of drug consumption.

After the experience, participants were encouraged to pledge their support for a drug free Singapore with stickers to form an anti-drug ribbon.



Asia Pacific Forum Against Drugs (APFAD) 2017

Organised by NCADA, the 2nd APFAD was held on 26 October 2017. More than 180 anti-drug advocates from local and foreign NGOs, civil society groups and government agencies came together to network and discuss about the strengthening of anti-drug strategies.

Themed “Together, A Drug-Free World For Our Children”, the forum saw local and foreign speakers covering topics ranging from preventive drug education to community efforts in promoting anti-drug advocacy.





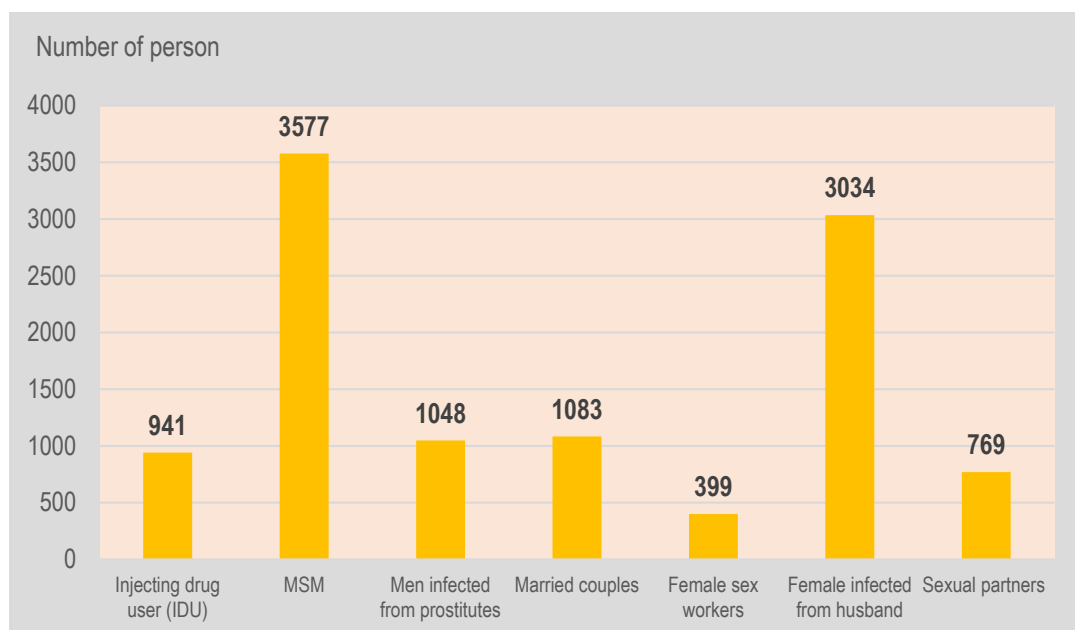
Thailand

Harm reduction in drug control policy of Thailand

Drug abuse remains a national agenda of Thailand. For several decades, the principal strategies to solve the problem have based on the supply reduction and demand reduction covering prevention and treatment approaches. Since it has been found that these two approaches were not sufficient to bring down the severity of the problem, the government has introduced an additional approach of harm reduction aiming at the injecting drug users. Although the number of

IDUs is small comparing to stimulant users, methamphetamine tablets in particular, considering the health-related harmful consequences from injecting drugs, that is HIV/AIDS and HVC; there is a need for a new approach to reduce these harm.

Estimation by the Thai Working Group on AIDS showed that in 2010 the number of living HIV infected and AIDS patients were 499,324 persons and the estimated number of new affected persons was 10,853 persons which can be grouped as follows:



Source: The Asian Epidemic Model (AEM) Projection for HIV/AIDS in Thailand: 2005



Thailand's history of harm reduction began in 1970 by providing methadone for detoxification in several drugs addiction treatment government clinics. From 1987 onwards, HIV/AIDS has become widespread. HIV/AIDS among injecting drug users has been continuously increasing. In 1988, several health service units piloted a small scale harm reduction among IDUs, for instance,

1. Methadone Clinic pilot project in Mae Chan Hospital, Chiang Rai
2. HIV/AIDS Prevention Project of the Department of Public Health, Bangkok Metropolitan Administration
3. HIV/AIDS Prevention and Control in Prisons of Department of Correction
4. HIV/AIDS Prevention Project of Department of Juvenile Observation and Protection

Towards the end of 2012, a working group on HIV infection reduction amongst IDUs has been set up as a coordination mechanism to integrate and facilitate work plans and activities of service provider agencies from government, non-government, civic societies, foreign and international technical agencies, international organisations. Harm reduction has been included in demand reduction national strategy for narcotics control ever since.

The present concept of harm reduction in Thailand has shifted to public health approach that considers drug users as patients and to reduce drug related harm. Nonetheless, drug policy of the country still aims at abstinence while alternative measures are also accepted.

Objectives of harm reduction initiatives in 2017 were as follows:

- Support and facilitate access to harm reduction services while enhance the collaboration between relevant organizations and communities,
- Strengthen harm reduction mechanisms,
- Promote awareness on harm reduction, and
- Develop the harm reduction model suitable for Thailand (model development)

Under the Office of the Narcotics Control Board, harm reduction mechanisms have been divided into two levels of policy and operation. At the policy level, a committee on harm reduction was formed and chaired by Secretary-General of the Narcotics Control Board. The committee is responsible for issuing measures, seeking and providing academic/technical support and advocacy. At the operational level, provincial command centres are the focal point in supporting hospitals, administrative bodies, police, NGOs and ONCB regional offices. There are two target groups: primary and secondary.



The primary targets include heroin/opioid injecting users, heroin/opioid users and other injecting users. The secondary targets include chronic drug users (comorbid disorder/no intention to quit) and drug users. Target areas covered 37 out of 77 provinces but services have been provided in Bangkok and nationwide.

The model starts from accessibility to harm reduction services and after care. For accessibility, target groups can access to the services both by government programme after screening test and by civil society through outreach programme by outreach workers to drop-in centres. Harm Reduction services include addiction medical services, physical and mental health services and social services. For after care, target groups/patients are followed up by health professionals and civil society (outreach workers) under a holistic approach. However,

challenges towards harm reduction are; (1) negative attitude on people who use drugs, (2) conflict with current drug laws, (3) unclear definition and target groups, (4) few collaboration between relevant organizations both at national and local levels.

Sustainable Alternative Development: As a tribute to the late His Majesty King Bhumibol Adulyadej's self-sufficiency philosophy, problem solving needs to cover all dimensions. A holistic approach will create sustainable impact. ONCB' AD goals in 2018 is to provide area focused training and develop the AD mechanism while work closely with social enterprises such as Mae Fah Luang Foundation and the Royal Project Foundation to improve local economic and improve quality of life of northern hill-tribes as well as to bring the AD approach of the King's philosophy into sustainable development of urban communities.



Viet Nam

In the past few years, there has been an increase in the illicit precursor trade in and out of our country, especially the high-risk types used in the production of illicit synthetic drugs such as pseudoephedrine, and ephedrine. Viet Nam has detected and cracked down several cases in which new medicines containing precursors are collected, extracted for the illegal production of synthetic drugs or illegal transportation to foreign countries. The criminals' main modus operandi is to extract low-content precursors found in new medicines for illicit purposes (illegal synthetic drug production in Viet Nam or illegal transportation to foreign country). For instance, in April, 2017, Viet Nam functional forces broke a case of producing synthetic drugs from precursors in Ho Chi Minh City, arresting a Vietnamese and his accomplices, seizing 500,000 ecstasy tablets, 85 kilogrammes of MDMA powder and 2.5 tons of precursors including safrole-rich oil, methylamine, acetone, and methanol.

Achievements made by the Government of Viet Nam

1. Law Enforcement

In view of the complicated drug situation, drug prevention and suppression forces of Viet Nam at the central and local levels and

among the relevant ministries and agencies, have closely coordinated in the implementation of various measures to combat drug-related crimes, for example;

Strengthen cross-border cooperation

On the land route, Viet Nam has launched campaigns of propaganda and suppression against drug-related crimes on the Viet Nam-China border and Viet Nam-Laos border and also organized meetings on drug prevention and suppression with Lao PDR and Cambodia. The bordering provinces have close coordination and implementation of joint action plans, organized periodical or unscheduled meetings, exchanged information, surveyed areas, shared experience in enhancing the capacity to fight against drug-related crimes.

Promote the operation of Border Liaison Offices (BLOs)

Currently, Viet Nam has established and maintained operational capacity of 18 BLOs on border lines with neighboring countries, namely, Viet Nam - China: 4 BLOs, Viet Nam – Lao PDR: 8 BLOs, Viet Nam – Cambodia: 6 BLOs; as well as implemented joint cross border activities with neighbouring countries.



Strengthen international cooperation

In 2017, Viet Nam appointed 154 delegations to participate in international and regional cooperation forums such as the 16th Ministerial Meeting on Drug Control Cooperation among Viet Nam, Lao PDR and Cambodia; MOU Ministerial Meeting on Drug Control in the Greater Mekong Sub-region; the 60th Commission on Narcotic Drugs (CND 60); Heads of National Drug Law Enforcement Agencies in Asia-Pacific (HONLEA 41); 7th ASEAN Airport Drug Interdiction Task Force (AAITF 7); 2nd ASEAN Seaport Drug Interdiction Task Force (ASITF 2); ASEAN Drug Monitoring Network Operational Workshop (ADMN), and tens of meeting, seminar and training course on drug control, etc.

In addition, Viet Nam also organized and worked with more than 68 international delegations. More importantly, Viet Nam hosted the official visit of H.E. Ke Kim Yan, Deputy Prime Minister, President of Cambodian National Authority for Combating Drugs; organized the 38th ASEAN Senior Official on Drug Control Cooperation (ASOD 38); the 11th bilateral meeting on drug control cooperation between Viet Nam and Thailand, and in coordination with UNODC organized the SMART Regional Workshop on Synthetic Drugs, etc.

On the other hand, the functional forces of Viet Nam received and processed 152 pieces

of information on drug-related crime provided by international police forces.

2. Demand Reduction

To implement the government resolution on strengthening the direction of drug treatment in the current situation, Viet Nam has been implementing drug treatment in the following models:

Drug treatment in the centre: There are 51,296 people treated in 280 drug treatment facilities.

Drug treatment in family, community and post-treatment community management: There were 3,566 people treated in family and community; 923 people treated in post-treatment community management and 22,837 people treated in residential area.

Methadone Maintenance Therapy (MMT): Up to 2017, all provinces and cities in Viet Nam provided MMT for 53,000 people in 282 MMT facilities. In addition, most treatment-education-social work centres converted to multifunctional facility also provide MMT.

In addition to these drug treatment models, Viet Nam is implementing SUBOXONE Maintenance Treatment (SMT) for 163 patients in 3 provinces and cities. Suboxone is a prescribed medication that can help treat heroin addiction and dependence on other opiates. It is a combination of buprenorphine,



which can be used as a stand-alone treatment for opiate dependence, and naloxone which is used to treat opiate overdose.

3. Sustainable alternative development

Viet Nam has made great efforts to eradicate narcotic plants and implement sustainable alternative development. The detection and eradication of the narcotic plants are maintained; people are mobilized not to re-cultivate narcotic plants. Inspection and detection of narcotic plant cultivation areas is conducted in key mountainous and remote areas. At the same time, Viet Nam raises the efficiency of poverty alleviation programmes and change the structure of plants and animals suitable to each locality. Besides, the Government has also been implementing social-economic development programmes to raise efficiency of hunger elimination and poverty reduction programmes; integrate alternative programmes for livelihood income; improve living conditions and stabilize the living of local people, especially in remote and mountainous areas and develop rural economy, generate jobs, increase income of farmers.

More sustainable hunger eradication and poverty reduction in Vietnam

Eliminating hunger, reducing poverty, and improving the living conditions of the poor,

especially for people in opium poppy cultivating areas, is not just a major consistent social policy of the Vietnamese Party and State but it is also an important part and a strategic focus in Viet Nam's socio-economic development strategy.

The Government, ministries and sectors have paid special attention to researching, reviewing, building and issuing mechanisms and policies on sustainable poverty reduction, regularly fine-tuned, amended and supplemented mechanisms and policies embracing reality, expanded target beneficiaries, and raised the support-level to meet the aspirations of poor people and poor households.

4. International cooperation on judicial matters and improvement of legal basis

Viet Nam has ratified the three United Nations International Conventions on Drug Control (1961 Convention, 1971 Convention and 1988 Convention), signed 14 memorandums, agreements and cooperation agreements on drug and crime control with other countries in the region and the world.

In 2017, Viet Nam signed MOU on the cooperation in the prevention of production, transportation, trading and abuse of NPS with the Russian Federation.



Annex










Drug Profiles of Tablet-type Narcotics in ASEAN

ASEAN Drug Monitoring Network collected data on drug profiling and tool marks from three ASEAN Member States namely, Myanmar, Thailand and Viet Nam as follows;


1. Drug profiling and tool marks of methamphetamine tablets in Yangon, Myanmar (All with a WY logo)

No.	Photo/registration no./group	Characteristic
1	<p>2116/ND/YGN/2016</p>  <p>Bm-3</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 5.553 x 3.296 mm - Average weight: 91.3 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 10.7% Caffeine 83.58% - Impurity: X13
2	<p>2119/ND/YGN/2016</p>  <p>Bm-1</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 5.564 x 3.269 mm - Average weight: 96.5 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 11.26% Caffeine 87.68% - Impurity: X13



No.	Photo/registration no./group	Characteristic
3	<p>2120/ND/YGN/2016</p>  <p>Am-16</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 5.576 x 3.424 mm - Average weight: 104.4 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 14.62% Caffeine 84.05% - Impurity: X13
4	<p>2124/ND/YGN/2016</p>  <p>Am-18</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 6.985 x 3.282 mm - Average weight: 102 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 12.06% Caffeine 71.72% - Impurity: X5
5	<p>2127/ND/YGN/2016</p>  <p>Bm-14</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 5.601 x 3.61 mm - Average weight: 90.9 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 13.96% Caffeine 76.05% - Impurity: X12




No.	Photo/registration no./group	Characteristic
6	<p>2132/ND/YGN/2016</p>  <p>Bm-1</p>	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 5.544 x 3.068 cm - Average weight: 87 mg <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine 13.33% Caffeine 76.12% - Impurity: X3

For further details and inquiry, please contact Mr. Khin Maung Thein, Drug Enforcement Division, CCDAC Myanmar at khinmaungthein.05@gmail.com

2. Characteristics of Methamphetamine Tablets seized in Thailand

The Narcotics Analysis and Technical Service Institute of ONCB Thailand is one of the authorized forensic laboratories for conducting an official scientific analysis of narcotic drugs seized by law enforcement units in Thailand. In the case of methamphetamine tablet, ONCB's forensic laboratory conducts an analysis only for cases with the amount of seized drugs from 10,000 tablets up. In general, methamphetamine tablets found in Thailand have the following characteristics;

1. Physical characteristics

Compressed round flat tablets approximately 6 mm in diameter, 2.5-3.0 mm thick, weighed about 80-100 mg. Tool marks on tablets varied e.g. one side plain and one side with a symbol or mark, for example, WY/plain, R/plain, /plain, 999/plain, as well as with a different symbol or mark on both sides of

the tablet such as G/1, 88/1, WY/A. Tablets came in various shades of orange and green.


2. Chemical characteristics


From samples of the seized methamphetamine tablets, the forensic laboratory of ONCB found more than 95% with the purity of methamphetamine between 15-25%, caffeine 60-80%, and the rest were other ingredients such as vanillin, ethyl vanillin, etc.


3. Tool marks

In 2017, Narcotics Analysis and Technical Service Institute of ONCB analysed the seized methamphetamine tablets from 1,116 narcotic cases. From 3,322 samples of 185,064,746 tablets, Narcotics Analysis and Technical Service Institute made a grouping of seized methamphetamine tablets by tool marks as follows;





Group of tool marks		Am 1
pictures		
% methamphetamine	15-25%	
% caffeine	65-80%	

Group of tool marks		Am 2
pictures		
% methamphetamine	20-25%	
% caffeine	60-75%	

Group of tool marks		Am 3
pictures		
% methamphetamine	15-25%	
% caffeine	60-80%	



Group of tool marks	Am 4
pictures	
% methamphetamine	20-25%
% caffeine	70-75%

Group of tool marks	Am 5
pictures	
% methamphetamine	20-25%
% caffeine	70-75%

For further details and inquiry, please contact Ms.Kanyanan Kongpatnitiroj, Director of Narcotics Analysis and Technical Service Institute, ONCB Thailand at pomnarak9@gmail.com

3. Profiles of synthetic drug tablets found in VIET NAM

Overview

- Methamphetamine tablets containing 14-16% methamphetamine purity with “WY” logo are very popular in Viet Nam. These tablets are seized together with heroin blocks trafficked from Lao PDR to Viet Nam via the North-to-West land routes(mainly in Son La province). Normally, one heroin block is attached with 100 “WY” tablets (99 pink and 1

green). Then the offender repacks these tablets and sells on the illicit markets.

- In Viet Nam, some of the methamphetamine manufacturing cases with the “WY” logo were dismantled in Hai Phong and Bac Ninh provinces.
- MDMA tablets with “-” logo, with the purity of MDMA around 20-30%, are most commonly uncovered in Viet Nam. However, tablets containing MDMA often in various forms or logos as well



as impurities (often appear in batches or on demand of users).

- In Viet Nam, MDMA tablets manufacturing cases have been dismantled in Ho Chi Minh City, Bac Ninh, and Hung Yen provinces.
- From 2015 up to now, besides MDMA and methamphetamine tablets, tablets

containing NPS have appeared in Viet Nam such as 5Meo-Mipt, 4-HO-MET, 4-CEC. Particularly, there are tablets, powder samples (seized in Hai Phong city) containing ingredients such as heroin, MDMA, THC, ketamine, phenol barbital.

Samples of tablet containing Methamphetamine


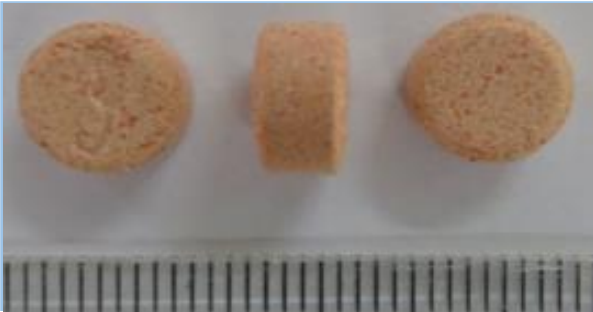

Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.5 x 0.2 cm - Average weight per tablet: 0.095 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine - Purity: 14-16%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.8 x 0.4 cm - Average weight per tablet: 0.254 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine, MDMA - Purity: N/A



Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 1.0 x 0.4 cm - Average weight per tablet: 0.244 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug composition: Methamphetamine, MDMA, Methylphenidate - Purity: N/A

Samples of pill containing MDMA



Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 1.0 x 0.3 cm - Average weight per tablet: 0.284 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA, Methamphetamine, Methylphenidate - Purity: 25-30%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.8 x 0.3 cm - Average weight per tablet: 0.265 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: 6,6%








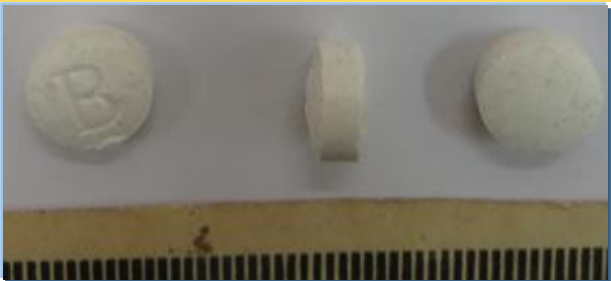

Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.8 x 0.4 cm - Average weight per tablet: 0.254 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: 25-28%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.3 cm - Average weight per tablet: 0.293 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA, Methamphetamine, Ketamine - Purity MDMA: 25-30%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 1.3 x 0.6 x 0.4 cm - Average weight per tablet: 0.414 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: 30.3%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.3 cm - Average weight per tablet: 0.247 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: N/A



Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 1.0 x 0.4 cm - Average weight per tablet: 0.367 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA, Methamphetamine - Purity: 26-28%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.3 cm - Average weight per tablet: 0.244 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: 24-28%
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.4 cm - Average weight per tablet : 0.274 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: MDMA - Purity: N/A



Samples of tablet containing other drugs/ substances

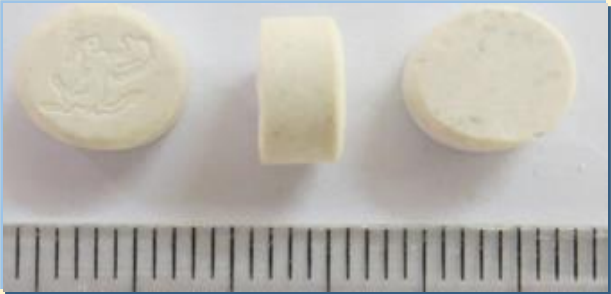


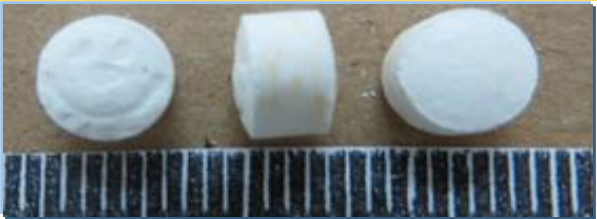


Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.4 cm - Average weight per tablet : 0.278 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: 2C-B - Purity: N/A
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.4 cm - Average weight per tablet : 0.251 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: 5Meo-Mipt - Purity: N/A
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.9 x 0.4 cm - Average weight per tablet : 0.270 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: PMMA - Purity: N/A
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.6 x 0.4 cm - Average weight per tablet : 0.289 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: 3-FPM - Purity: N/A



Photo	Characteristic
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 1.0 x 0.3 x 1.0 cm - Average weight per tablet : 0.316 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: 4-HO-MET, Alpha Ethylaminohexanophenne - Purity: N/A
	<p>Physical characteristic:</p> <ul style="list-style-type: none"> - Size: 0.7 x 0.3 cm - Average weight per tablet : 0.102 gramme <p>Chemical characteristic:</p> <ul style="list-style-type: none"> - Drug Composition: Nimetazepam - Purity: 4-7mg/ tablet

For further details and inquiry, please contact Mr. Le Hong Phong, Standing Office on Drugs and Crime, Ministry of Public Security of Viet Nam, email: Phong.sodc@gmail.com





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