

AFRICA AND THE MIDDLE EAST

Angola

I. Summary

Angola is not a country that suffers from significant drug production or drug abuse; however, some cannabis is cultivated and consumed locally. Angola continues to be a transit point for drug trafficking—particularly, cocaine from Brazil into Europe and South Africa. Angola signed and ratified the Southern African Development Community (SADC) counternarcotics protocol in 2003. Angola acceded to the 1988 UN Drug Convention in October 2005.

II. Status of Country

Angola is not a major center of drug production, money laundering, or production of precursor chemicals, and is not likely to become one. It is however, a transit point for drug trafficking. Various types of narcotics, the largest quantity being cocaine, enter the country from destinations such as Brazil and are then transported to Europe and South Africa. Police continued to seize cocaine and cannabis in 2005. Increased intelligence sharing and the scanning of incoming containers improved the effectiveness of drug interdiction.

III. Country Actions Against Drugs in 2005

Law Enforcement. Angola cooperates with South Africa, Brazil, and Portugal in fighting the flow of cocaine through Angola to various destinations. South Africa has provided intelligence, training, and equipment to the Angolan police. Angola also cooperates on a regional basis via the South African Development Community (SADC).

Corruption. Although cases of public corruption connected to narcotics trafficking are rare, in June three National Department for Criminal Investigation (DNIC) officials were charged with trafficking in cocaine. As a matter of government policy, however, Angola does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions.

Agreement and Treaties. In October 2005, Angola acceded to the 1988 UN Drug Convention, the 1971 UN Convention Against Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Angola has signed, but has not yet ratified, the UN Convention on Transnational Organized Crime and the UN Convention Against Corruption.

Domestic Programs/Demand Reduction. In 2004, Angola enacted legislation mandating treatment for those convicted of narcotics abuse. Drug rehabilitation centers have been established in Luanda, Lubango, and Benguela.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. In 2005, 28 Angolan police officers participated in State Department-sponsored regional training courses, which included segments on counternarcotics.

The Road Ahead. The U.S. will continue to assist Angola through training of law enforcement officials at ILEA Gaborone and in ILEA Roswell to the degree Angola wishes.

Benin

I. Summary

While Benin is a low volume narcotics producer, the country remains a transit point for illegal narcotics. During 2005, no new counternarcotics laws or initiatives were introduced in Benin. Benin's drug enforcement police squad, Office Centrale de Repression du Traffic Illicit de la Drogue (OCERTID, or Central Office for Repression of Illicit Drug Trafficking) has limited resources. Benin co-hosted the 2005 West African Joint Operations (WAJO) Conference in September, 2005 along with the DEA Attaché from Lagos, Nigeria. The rate of illegal drug seizures remained low in Benin during 2005. Benin is a party to the 1988 UN Drug Convention, and their counternarcotics legislation adopted into law in 1997 is based on the UNDC model.

II. Status of Country

Benin remains a small producer of illegal narcotics with marijuana being the only drug produced in significant quantities. It is cultivated throughout the country, primarily along the borders with Nigeria and Togo and in the central area of the country. The primary market for this cultivation is personal use within Benin. There are no current Beninese government plans to eradicate the drug. Benin's porous borders and lack of port security allow for easy transshipment of narcotics by regional traffickers. All forms of narcotics are known to transit through Benin, but 2005 did not see a significant increase or decrease in this activity.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Benin continued to take few steps towards combating the trafficking of illegal narcotics in 2005. Legislation adopted in 1997, which increased sentences for traffickers, criminalized drug-related money laundering, and permitted the seizure of drug-related assets remains in effect, but little progress has been made towards practically implementing this legislation through enhanced drug law enforcement. Benin does not have a legal mechanism in place to seize assets on behalf of counternarcotics efforts.

Law Enforcement/Accomplishments. Benin continues to work towards the goals of a 2001 bilateral narcotics control agreement signed with the U.S. Of significance in 2005 were Beninese efforts towards regional cooperation. In September, Benin co-hosted the 2005 Western Africa Joint Operations Conference with the U.S. DEA Country Attaché from Lagos, Nigeria. Regional agreements to exchange intelligence between the 19 attending nations and plans for regional training were established. During December, three officers from OCERTID participated in UNODC counternarcotics training in Nigeria. In addition, OCERTID assigned a team to the port of Cotonou during November, 2005. But this team has been hampered by a lack of training in the area of seaport security and container search procedures. The total reported drug seizures in Benin during 2005 were 2,206 kilograms of cannabis; 28.2 grams of cocaine; and 25.2 grams of heroin. Total arrest and prosecution statistics are not available at this time, but sources indicate that existing law enforcement resources are exclusively used to arrest and prosecute small-scale couriers and users.

Corruption. There is no legislation or legal framework in Benin to prevent or punish narcotics-related corruption, and Benin did not take any new steps to prevent narcotics-related corruption in 2005. No known senior Beninese Government official or entity engages in, encourages, or facilitates the illicit

production or distribution of narcotic or psychotropic drugs, but it is likely that corruption facilitates the movement of narcotics through Benin.

Agreements and Treaties. Benin is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Benin is a party to the UN Convention Against Corruption, and to the UN Convention Against Transnational Crime and its protocols against trafficking in persons, migrant smuggling and illegal manufacturing and trafficking in firearms.

IV. U.S. Policy Initiatives and Programs

The Road Ahead. Benin continues to profess its commitment to counternarcotics initiatives but needs to implement counternarcotics legislation and address border and port security controls. The lack of training and resources for counternarcotics units requires attention as well, and if remedied, would put Benin on the road to further supporting the 1988 UN Drug Convention.

Egypt

I. Summary

The Arab Republic of Egypt is not a major producer, supplier, or consumer of narcotics or precursor chemicals. Heroin and cannabis are transported through Egypt, but presumed levels have not risen in four years. The Anti-Narcotics General Administration (ANGA) is the main counternarcotics organization in Egypt. It is competent and progressive, and cooperates fully with the Drug Enforcement Administration (DEA) office in Cairo. In 2004, a joint DEA-ANGA investigation uncovered a significant MDMA (ecstasy) laboratory in Alexandria, resulting in the arrest of four individuals, possible indictment of two U.S. citizens, and a secondary ongoing investigation that has already identified more than two million dollars of drug related proceeds. In 2005, several major international investigations were conducted jointly with ANGA. Egypt is party to the 1988 UN Drug Convention.

II. Status of Country

Egypt is not a significant producer or consumer of narcotics or precursor chemicals, despite the fact that opium and cannabis plants are grown in Egypt. The substances that are most commonly abused are cannabis, which is known here as “bango,” and legitimate pharmaceuticals. Narcotics do pass through Egypt. Egypt’s long and mostly uninhabited borders, combined with the high level of shipping passing through the Suez Canal Zone, have made Egypt prone to the transshipment of Asian heroin. Other types of narcotics periodically pass through Cairo International Airport. The narcotics are primarily destined for Western Europe, with only small amounts headed to the United States. Transshipment has diminished considerably in recent years due to the elevation of security in Egypt and the region as a whole.

The ANGA is the oldest counternarcotics unit in the Arab world. It has jurisdiction over all criminal matters pertaining to narcotics and maintains offices in all major Egyptian cities and ports of entry. Despite limited resources, ANGA has continually demonstrated improvements in its capabilities.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The Government of Egypt (GOE) continues to aggressively pursue a comprehensive drug control strategy that was developed in 1998. ANGA, as the primary Egyptian drug enforcement agency, coordinates with the Egyptian Ministry of Interior, the Coast Guard, the Customs Service, and select military units on all aspects of drug law enforcement. Government and private sector demand reduction efforts exist but are hampered by financial constraints and logistical challenges.

Accomplishments/Law Enforcement Efforts. Internal security and combating terrorism are the major foci of Egyptian law enforcement efforts. Despite these priorities, ANGA is able to operate an effective program against narcotics trafficking. Egypt is a transit country for narcotics. ANGA investigates and targets significant drug traffickers, intercepts narcotics shipments, and detects and eradicates illegal crops. Large-scale seizures and arrests are rare, primarily because Egypt does not have a significant narcotics market or narcotics abuse culture. ANGA operates its own drug awareness campaign in addition to other government and private sector demand reduction programs. ANGA’s Eradication Unit conducts monthly operations against cannabis and opium crops in the Sinai.

Continuing a trend over the past several years, the amount of narcotics seized during 2004 was again higher than that of the previous year.

According to the GOE, drug seizures in 2004 included cannabis (80.2 metric tons), hashish (1.9 metric tons), and smaller amounts of heroin, opium, psychotropic drugs, and cocaine. Significant amounts of prescription and “designer” drugs such as ecstasy (6,194 tablets), amphetamines, and codeine were also seized. During the course of 2004, Egyptian law enforcement officials eradicated 171 hectares of cannabis and 65 hectares of opium poppy plants. Late in 2004, a joint DEA-ANGA investigation uncovered an MDMA laboratory located in a small apartment building in Alexandria, Egypt. ANGA raided the laboratory, arresting four individuals and seizing chemicals, paste, and equipment. Additionally, a secondary ANGA financial investigation conducted in 2005 with assistance from the DEA country office has identified over two million dollars in drug proceeds located in Egypt. Since 2003, production of illicit pharmaceuticals and counterfeit narcotics are on the rise in Egypt, which may represent a new trend toward shifting artificial drug labs to the region due to the region’s relatively lax regulation of commercial chemical products. With the passage of the first anti-money laundering law in 2002, which criminalized the laundering of proceeds derived from trafficking in narcotics and numerous other crimes, seizures of currency in drug-related cases have amounted to over 3,000,000 Egyptian Pounds (\$520,000). In October 2005, ANGA seized two metric tons of marijuana that originated in the northern Sinai.

Corruption. As a matter of government policy, the Government of Egypt does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal transactions. The GOE has strict laws and harsh penalties for government officials convicted of involvement in narcotics trafficking or related activities. However, low-level local police officials involved in narcotics-related activity or corruption have been identified and arrested.

Agreements and Treaties. Egypt and the United States cooperate in law enforcement matters under an MLAT and an extradition treaty. Egypt is a party to the 1988 UN Drug Convention since 1991, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Egypt is a party to the UN Convention against Transnational Organized Crime and its protocols on migrant smuggling and trafficking in persons. Egypt also is a party to the UN Convention Against Corruption.

Cultivation and Production. Cannabis is grown year round in the northern and southern Sinai and in Upper Egypt, while opium poppy is grown in the southern Sinai only from November through March. Rugged terrain means that plots of illegal crops are small and irregularly shaped. ANGA combats this production by using aerial observation and confidential informants to identify illegal plots. Once the crops are located, ANGA conducts daylight eradication operations that consist of cutting and burning the plants. ANGA has yet to implement a planned herbicide eradication program. No heroin processing laboratories have been discovered in Egypt in the last 14 years and no evidence is available indicating that opiates or cannabis grown in Egypt reach the United States in sufficient quantities to have a significant impact. In an ongoing investigation that started in 2004, a joint DEA-ANGA operation uncovered the first ever MDMA laboratory in Egypt and eliminated it before it reached significant production.

Domestic Programs (Demand Reduction). In 2005, the National Council for Combating and Treating Addiction continued to be the GOE’s focal point for domestic demand reduction programs. The Council is an inter-ministerial group chaired by the Prime Minister and has the participation of ten ministries. The group espouses a three-pronged strategy to counter the demand for narcotics: awareness, treatment (including detoxification and social/psychological treatment), and rehabilitation. The group’s efforts over the past year included a range of activities, for example, a media advertising

campaign with participation from First Lady Suzanne Mubarak, annual seminars at Al-Azhar University on “Islam and Narcotics,” and the establishment of a drug treatment hotline and website. Additionally, the Council sponsors four rehabilitation centers, primarily focused on the Cairo metropolitan area. These centers annually receive thousands of requests from addicts for help.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives/Bilateral Cooperation. The U.S. counternarcotics policy in Egypt is to engage the GOE in a bilateral program to reduce narcotics transshipments and decrease opium poppy and cannabis cultivation. The policy includes the following specific objectives: increase training to ANGA and other government offices responsible for narcotics enforcement; assist with the identification of illegal crop eradication targets; improve narcotics interdiction methodology; and improve intelligence collection and analysis. In 2005, the DEA country office initiated Operation Sphinx, a joint DEA-ANGA operation to collect actionable intelligence for enforcement/interdiction action in the Suez Canal and the Gulf of Aqaba. The operation targets sources of information in the maritime industry throughout the region.

The Road Ahead. In fiscal year 2006, the U.S. Government plans to increase its joint operations with ANGA, moving beyond a previously predominant focus on monitoring the narcotics problem. This will involve the DEA country office continuing to work closely with ANGA on joint investigations, as well as improving interdiction and eradication techniques and developing additional sources of information on trafficking and production.

Ethiopia

I. Summary

Ethiopia does not play a major role in the production, trafficking or consumption of illicit narcotics or precursor chemicals associated with the drug trade. Although Ethiopia is strategically located along a major narcotics transit route between Southwest/Southeast Asian heroin production and European markets and West African trafficking networks, the amount of drugs transiting Ethiopia remains small. Heroin transits Ethiopia for markets in West Africa, Europe and the United States, primarily due to Ethiopia's good airline connections between those markets and Southwest/Southeast Asia. Nigerian traffickers use Ethiopia as a transit point on a limited basis. Ethiopia now produces more khat than coffee for export. Khat is legal in Ethiopia. Khat is increasingly becoming more popular in the U.S. Seizures are up and illegal importations from Ethiopia, through Europe to the U.S. are rising. Khat is a chewable leaf, with mild narcotic effect. It is part of the culture of several countries bordering the Red Sea. A small amount of cannabis is grown in Ethiopia, but most is consumed in rural areas of Ethiopia itself. The Ethiopian Counter-narcotics Unit (ECNU) maintains an interdiction team at the international airport in the capital. Ethiopia is a party to the 1988 UN Drug Convention.

II. Status of Country

Ethiopia is not now, and is not likely to become, a significant producer, trafficker or consumer of narcotic drugs or diverted precursor chemicals. A small volume of cannabis is produced in rural areas, of which a small portion is being produced for export, primarily to neighboring countries; the majority is consumed at home, but absolute quantities in both cases are moderate. For the first time, in 2001, opium poppy was seized at two locations where it was apparently being grown as an experimental crop. No further seizures have been reported. Indications are that the techniques for growing the opium came from India and that the appearance of these apparent experimental plots may be explained by that year's downturn in coffee prices. No opium gum has been found.

III. Country Actions Against Drugs in 2005

The use of heroin and other hard drugs remains quite low, due primarily to the limited availability of such drugs, its high street price when available, and low incomes of most Ethiopians. To the extent such hard drugs are available it is in large part due to the spillover effect from drug couriers transiting through Bole International Airport in Addis Ababa. Bole is a major air hub for flight connections between Southeast and Southwest Asia and Africa, and according to Ethiopian authorities, much of the heroin entering and/or transiting Ethiopia comes from Asia, although absolute quantities in both cases are low. Some of the flights require up to a two-day layover in Addis Ababa, permitting a limited opportunity for the introduction of these drugs into the local market.

Law Enforcement Efforts. The ECNU has shown solid competence in terms of performance over the previous two years. After changing its leadership in 2002, it has since been more proactive at the federal level. The ECNU was expanded from 50 to 150 police and has plans to carry out some border road interdiction efforts in addition to its work at the airport, where its interdiction team uses its two drug sniffer dogs to examine, with a degree of randomness, cargo and luggage. The ECNU routinely screens passengers, luggage and cargo on flights arriving from "high risk" origins, such as Bangkok, Mumbai, New Delhi and Islamabad. The interdiction unit continues to improve its ability to identify male Nigerian/Tanzanian drug "mules", who typically swallow drugs to smuggle them. The Ethiopian

government does not maintain precise statistics on interdictions, but reports that the overall volume of drugs interdicted has been low, as most seizures involve airline passengers carrying small quantities in luggage or on their person.

Corruption. There is no evidence of government corruption related to illicit drugs. The Anti-Corruption Commission, created in 2001, was given substantial police powers to investigate corruption, and for a short while attracted considerable attention when it arrested and charged several high-level government officials with corruption (unrelated to drugs) in 2001 and 2002. Since then, the Commission seems to have become bogged down bureaucratically and is no longer a formidable organization. There have been no charges of drug-related corruption against government officials.

Agreements and Treaties. Ethiopia is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Ethiopia has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention Against Corruption.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. The United States is working to raise the profile of crime-related issues and encourage criminalization of money laundering. A U.S. Treasury advisor to the Ethiopian Central Bank provided advice to the Ministry of Justice in 2004 on drafting anti-money laundering legislation; the legislation was approved in Parliament and was adopted into law in 2005.

The focus of U.S. programs remains on the law enforcement side, specifically the ECNU. State Department narcotics assistance supports curriculum advice and training for police academy instructors in drug investigations. The objective is to institutionalize training, ensuring that courses will be repeatedly offered by Ethiopian trainers, rather than relying on return visits by DEA trainers from the U.S.

The Road Ahead. Ethiopia is likely to remain a minor trafficking center for Africa because of its airport and the flight arrangements described above. The GOE has a solid plan for using U.S. narcotics assistance to good effect and cooperation with the U.S. has been good.

Ghana

I. Summary

Ghana has taken steps to combat illicit trafficking of narcotic drugs and psychotropic substances and has mounted major efforts against drug abuse. It has active enforcement, treatment, and rehabilitation programs; however, lack of resources remains a problem and suspected drug trafficking by a Member of Parliament surfaced this year. Ghana-U.S. law enforcement coordination strengthened in 2005. Interagency coordination among Ghana's law enforcement, however, remained a challenge and attempts to establish an anticorruption unit at the Customs, Excise & Preventive Service were stalled. Ghana is a party to the 1988 UN Drug Convention.

II. Status of Country

Ghana is increasingly a transit point for illegal drugs, particularly cocaine from South America and heroin from Southeast and Southwest Asia. Europe remains the major destination, but drugs also flow to South Africa and to North America. Accra's Kotoka International Airport (KIA) is increasingly a focus for traffickers. Ports at Tema and Sekondi are also used, and border posts at Aflao (Togo) and Elubo and Sampa (Cote d'Ivoire) see significant drug trafficking activity. In 2005, Nigerian traffickers continued to strengthen their presence, and some South American narcotics rings trafficking cocaine began operating in Ghana. Trafficking has also fueled increasing domestic drug consumption. Cannabis use is increasing in Ghana as is local cultivation. Law enforcement officials have repeatedly raised concerns that narcotics rings are growing in their size, strength, organization and capacity for violence. The government has mounted significant public education programs, as well as cannabis crop substitution programs. Diversion of precursor chemicals is not a major problem.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The Narcotics Control Board (NCB) coordinates government counternarcotics efforts. These activities include enforcement and control, education, prevention, treatment, rehabilitation, and social reintegration. The NCB's counternarcotics national strategy, the "National Plan of Action 1999/2008", was never implemented due to lack of funding. However, in 2005 the UN Office of Drugs and Crime (UNODC) financed three projects: 1) the upgrade of a rehabilitation and treatment center run by REMAR, a Spanish nongovernmental organization; 2) training of judges and officials of the Narcotics Control Board, Ghana Police, the Customs, Excise & Preventive Service and other agencies to combat transnational organized crime, including narcotics and associated financial crimes; and 3) a survey to measure the prevalence of drug abuse and its correlation to HIV/AIDS in Ghana. Each year since 1999, the NCB has proposed to amend the 1990 narcotics law to allow stricter application of bail bond system (i.e., no general granting of bail when flight is a real possibility; higher sureties to assure that defendants appear for trial) and to fund NCB operations using a portion of seized proceeds, but the Attorney General's office has not acted on these proposals. The NCB also called for amendment, without success, of PNDC Law 236 (1990) to enable it to confiscate property and assets purchased by identified drug dealers using illegal proceeds.

Law Enforcement Efforts. In 2005, Ghanaian law enforcement agencies continued to conduct joint police/NCB operations against narcotics cultivators, traffickers, and abusers. NCB agents, who are not armed, rely upon the police's Criminal Investigative Division's (CID) narcotics unit in situations requiring armed force. The Ghana Police Service has assigned several investigators to narcotics cases,

holds suspects in its cells and prepares such cases for docket. The NCB continued to work with DHL, UPS, and Federal Express to intercept packages containing narcotics.

The NCB reported that from January to September 2005 arrests rose by 40 percent for cocaine and 20 percent for cannabis compared to the same period the prior year. Meanwhile, arrests for heroin dropped to nearly one-third of their 2004 level. Drug seizure statistics for 2005 show an 11 percent increase in narcotics arrests (782 for January through September 2005 compared to 705 for the same period in 2004). More than 80 percent of these arrests are for cannabis. Despite the upward trend in arrests, the amount of cocaine seized remained steady while that of heroin dropped to one tenth of its 2004 level. The NCB said narcotics rings find trafficking cocaine to Europe easier and more profitable than obtaining heroin from the Far East and trafficking it to the U.S. The Ghana Police Service's campaign to destroy cannabis farms in the Upper East and Eastern Regions accounted for a nearly 18-fold increase in seizures in 2005. Overall, 2005 saw the highest number of drug trafficking arrests on record. In one of the largest drug busts of 2005, Ghana Police arrested two suspected narcotics ring members claiming Venezuelan citizenship on November 12 in Mpaesem, Ghana. The police seized 580 kilograms of cocaine.

The NCB reported that prices of cocaine, heroin and cannabis remained steady. In 2005, a gram of cocaine sold for cedis 168,350 (\$18.50 at the current exchange rate). A cocaine booster sold for cedis 12,000 (\$1.32), while crack cocaine sold for cedis 5,000 (\$.55). A gram of heroin sold for cedis 145,600 (\$16). A heroin booster sold for cedis 10,000 (\$1.10). The price of a small parcel of cannabis in 2005 was approximately cedis 5,000 (\$.55), while a wrapper or joint sold for cedis 1,000 (\$.11). Successful interdiction efforts increased these prices temporarily, but the NCB said they fluctuated near this level throughout the year.

The NCB and other law enforcement agencies continued their successful cooperation with U.S. law enforcement agencies in 2005, sharing information, as well as extraditing individuals wanted on narcotics-related charges. The U.S. extradited one person to Ghana, and Ghana extradited two persons to the U.S.

Corruption. Despite the regular arrests of suspected narcotics traffickers, Ghana has an extremely low rate of conviction, which law enforcement officials indicate is likely due to corruption within the judicial system. The backlog of cases pending trial and the limited resources facing the judiciary remain problems in controlling drug trafficking in Ghana.

The Customs, Excise & Prevention Service (CEPS) says finding a location away from its headquarters has kept it from establishing an internal affairs unit. In October 2005, a supervisor of KIA's cargo handling company was arrested attempting to smuggle cocaine using an airport tractor and his unusual access to an airplane. Media outlets alleged that this occurred with either the approval or the involvement of ruling party officials. In November 2005, U.S. Immigration and Customs Enforcement officers arrested Eric Amoateng, a Member of Ghana's Parliament in New York, during the seizure of 62 kilograms of heroin. Amoateng has been provisionally charged and arraigned and is expected to face trial for drug trafficking in the U.S. NCB officials complain that courts often release suspected smugglers, including foreign nationals, on bail that is often set at only a tiny fraction of the value of the drugs found in a suspect's possession. The court requirement of a surety in addition to bail is often either dropped, or court registrars will fraudulently use the identical property as surety for multiple cases. In September 2004, the NCB was held in contempt of court for withholding the passports of suspects charged with drug trafficking who had been released on bail. The NCB retained the passports while they waited for the Attorney General to file a request not to permit bail, which was ultimately never filed. The NCB eventually had to turn over the passports on a court order. At least one of the suspects in this case, a Ghanaian citizen possessing a Dutch passport, has since traveled in and out of

Ghana while on bail. In August 2005, the Attorney General's office filed an appeal to protest a retiring judge's acquittal of two of these suspected traffickers.

In 2004 and 2005, there were no cases of alleged evidence tampering. In April 2005, the Ghana Police interdicted two policemen who allegedly facilitated a suspected Nigerian drug trafficker's escape from custody. In May 2005, the Ghana Police Criminal Investigations Division took into custody two suspected traffickers and four policemen who allegedly demanded a \$60,000 bribe to release the traffickers when they first encountered them with narcotics. In June 2005, all six were granted bail.

Agreements and Treaties. Ghana is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention, as amended by the 1972 Protocol. U.S.-Ghana extradition relations are governed by the 1931 U.S.-U.K. Extradition Treaty. In 2003, Ghana signed a bilateral Customs Mutual Assistance Agreement with the United States. Ghana has signed, but has not yet ratified the UN Convention Against Corruption.

Cultivation and Production. Cannabis (also known as Indian hemp) is widely cultivated in rural farmlands. The Volta, Brong/Ahafo, Western, and Ashanti regions are principal growing areas. Most is consumed locally; some is trafficked to neighboring and European countries. Cannabis is usually harvested in September and October, and law enforcement teams increase their surveillance and investigation efforts at these times. In 2005, combined NCB and police teams continued to investigate cannabis production and distribution, and to destroy cultivated cannabis farms and plants. In October 2005, a joint operation between the NCB and police destroyed three acres of cannabis in Akatsi and took two Ghanaians and two Jamaicans into custody. In February 2003, the NCB implemented a pilot program designed to reduce the area under cultivation, under which 140 marijuana cultivators volunteered to give up marijuana in exchange for government assistance with planting and processing new food crops and immunity from prosecution. The NCB expanded the program from 120 farmers in 2004 to 325 in 2005. The Ministry of Women and Children's Affairs also donated two cassava-processing plants to the Essam, Eastern Region community to provide alternative income to farmers growing cannabis.

Drug Flow/Transit. Cocaine and heroin are the main drugs that transit Ghana. Cocaine is sourced mainly from South America and destined for Europe, while heroin comes mainly from Southeast and Southwest Asia on its way to Europe and North America. Cannabis is shipped primarily to Europe, specifically to the United Kingdom. Narcotics are sometimes repackaged in Ghana for reshipment, and the most lucrative concealment method uses carry-on, wheeled luggage. Drug traffickers have grown increasingly inventive. In November 2004, British Customs and Excise seized 23 kilograms of cocaine hidden in live snails from Ghana at London's Heathrow Airport. Investigators have found cocaine packed as fish and packaged cannabis concealed in smocks and sacks of processed cassava.

Although there is no hard evidence that drugs transiting Ghana contribute significantly to the supply of drugs to the U.S. market, there are indications that direct shipments to the United States are on the rise. Accra is an increasingly important transshipment point from Africa. In November 2004, two alleged leaders of a drug smuggling ring from Ghana were indicted in Columbus, Ohio for shipping heroin for distribution across central Ohio, indicating a direct flow of illicit narcotics from Ghana into the U.S. Midwest. The November 2005 arrest of a Ghanaian parliamentarian indicated a similar flow of heroin to the New York area. In the past, direct flights from Accra played an important role in the transshipment of heroin to the U.S. by West African trafficking organizations. In July 2004, the Federal Aviation Administration banned Ghana's only direct flights to the United States for safety reasons. However, this did not appear to reduce the trafficking of drugs between the two countries. Instead, drug traffickers rerouted the flow through Europe, according to the NCB. In October 2005, the NCB arrested a cargo handling supervisor attempting to smuggle 12 kilograms of cocaine through the country's sole international airport. Combined with almost weekly arrests of drug mules, this arrest

raises concerns about the volume of narcotics transited by air through Ghana. The NCB reports that narcotics air transit through Ghana has reduced somewhat in favor of land routes to Abidjan, largely due to the break down of law and order in Cote d'Ivoire, which favors narcotics traffickers. The biggest challenge in Ghana, however, is the unpatrolled coastline.

Domestic Programs. The NCB works with schools, professional training institutions, churches, local governments, and the general public to reduce local drug consumption. The Ministries of Health and Education further coordinate their efforts through their representatives on the Board. Board Members and staff frequently host public lectures, participate in radio discussion programs, and encourage newspaper articles on the dangers of drug abuse and trafficking. Ghana observed the International Day Against Drug Abuse and Illicit Trafficking in June 2005, in Cape Coast, Central Region. Although treatment programs have lagged behind preventative education and enforcement due to lack of funding, there are three government psychiatric hospitals receiving drug patients, and three private facilities in Accra, run by local NGOs, also assisting drug abusers. The NCB's national drug education efforts continued in schools and churches, heightening citizens' awareness of the fight against narcotics and traffickers. In 2005, the NCB continued broadcasting TV programs to explain narcotics' effects on the human body, individual users and society, which are being broadcast on state television in local languages. Also in June, the NCB organized an event in Cape Coast to highlight drug abuse in Ghana in conjunction with the UN's International Day Against Drug Abuse and Trafficking.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. The USG's counternarcotics and anticrime goals in Ghana are to strengthen Ghanaian law enforcement capacity generally, to improve interdiction capacities, to enhance the NCB's office and field operation functions, and to reduce Ghana's role as a transit point for narcotics. In 2002, the United States provided the Government of Ghana counternarcotics assistance in the form of surveillance and detection equipment, worth \$64,000, including two narcotics detection devices ("Itemizers") installed at Kotoka International Airport in December 2003. Similar equipment funded in FY 2000 and FY 2001 is effectively maintained and has facilitated a number of drug arrests and seizures. Funding provided in FY 2002 for training for the Police will continue to assist in suppressing corruption and strengthening the capacity of the police to interdict illegal drugs. A four-week, interagency counternarcotics training course, funded by the U.S. in FY 2002 and focused on drug interdiction at Ghana's air and seaports, took place in November 2004. Future assistance, committed in August 2005, will focus on advanced narcotics investigations skills, airport interdiction and financial crimes investigations. In August 2005, the U.S. government signed an agreement to provide Ghana's law enforcement agencies with an additional \$200,000 in assistance to fight narcotics trafficking.

The Road Ahead. Tougher confiscation provisions, with a portion of such resources dedicated to fighting narcotics trafficking, would strengthen Ghana's counternarcotics regime. Better oversight of financial transactions is particularly important given the potential for any narcotics financial networks to be used by terrorist organizations or for internal corruption.

Jordan

I. Summary

Jordan's geographical location between drug producing countries to the north and drug consuming countries to the south and west, makes it a transit country for illicit drugs. Historically, Jordanians do not consume significant quantities of illicit drugs, and according to the public security officials there are no known production operations in the Kingdom. Statistically speaking, however, drug use continues to grow in Jordan. According to statistics for the first 11 months of 2005, total drug seizures for the year will be slightly below, or close to 2004 seizures, excluding Captagon seizures (fenethylline), a synthetic amphetamine-type stimulant. There was an increase in reported drug-related cases and subsequent arrests. The drugs of choice among users arrested for drug possession in Jordan continue to be cannabis and heroin, and people arrested for drug-related crimes fall predominantly between the ages of 18 and 35 years old. Additionally, drug movement coming from Iraq has picked up seven-fold. Cooperation among neighboring countries in combating the drug trade is ongoing. Jordan is a party to the 1998 UN Drug Convention.

II. Status of Country

There are currently no indications that Jordan will move from a predominantly drug transit country to a drug producing country. Statistics produced by the Public Security Directorate/Anti-Narcotics Department (PSD) appear to confirm this assessment. Jordan's vast desert borders make it vulnerable to illicit drug smuggling operations. Jordanian authorities do not believe that internal drug distribution is a profit-making venture.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Due to sustained usage of hashish and heroin among people predominantly between the ages of 18 and 35, Jordan continues its drug awareness campaign focused at educating young people of the dangers of drug use. Authorities continue to provide educational presentations in schools and universities throughout the country. Jordan also publishes a number of brochures and other materials aimed at educating Jordan's youth. Cartoons aimed at younger children designed to dissuade youngsters from trying drugs have also been developed and broadcast this year. In July 2005, DEA sponsored a one-week Asset Forfeiture and Financial Investigations Seminar in Amman, which was presented to Jordanian law enforcement, financial institutions, and other attendees.

Law Enforcement. Jordan's PSD maintains an active counternarcotics bureau, and it maintains excellent relations with the U.S. DEA, Nicosia Country Office based in Cyprus. In 2004, PSD began utilizing x-ray equipment on larger vehicles at its major border crossings between Syria and Iraq, which netted numerous drug seizures in 2005. PSD stated that since 1997 it has worked cooperatively with the military on the Syrian and Iraqi borders to intercept traffickers entering through those areas. Seizures of Captagon tablets are up about 11 percent from last year's statistics, but PSD claims not to have observed any wide-spread use of the drug in Jordan. PSD reports that 80 percent of all seized illicit drugs coming into Jordan are bound for export to other countries in the region. Jordan's general drug traffic trend continues to include cannabis entering from Lebanon, heroin from Turkey entering through Syria on its way to Israel, and Captagon tablets from Bulgaria entering through Syria on the way to the Gulf. The majority of Jordan's drug seizures take place at the Jaber border crossing point between Jordan and Syria, although seizures from Iraq have risen significantly compared to last year.

Since the removal of Saddam Hussein, PSD has observed an increasing trend of trafficking hashish and opium from Afghanistan through Iraq and into Jordan. So far in 2005, there have been 28 seizures at the Iraq border resulting in the arrest of 24 people, up from a total of 4 cases in 2004.

Corruption. As a matter of government policy, Jordan neither encourages nor facilitates the illicit production or distribution of drugs or substances, or the laundering of proceeds from illegal drug transactions. There is currently no evidence to suggest that senior level officials are involved in narcotics trafficking.

Agreements and Treaties. Jordan is party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Jordan is a party to the UN Convention against Corruption, and has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime. Jordan continues to remain committed to existing bilateral agreements providing for counternarcotics cooperation with Syria, Lebanon, Iraq, Saudi Arabia, Turkey, Egypt, Pakistan, Israel, Iran, and Hungary.

Cultivation and Production. Existing laws prohibit the cultivation and production of narcotics in Jordan. These laws have been effectively enforced.

Drug Flow and Transit. Jordan remains primarily a narcotics transit country. Jordan's main challenge in stemming the flow of illicit drugs through the country remains its vast and open desert borders. While law enforcement contacts confirm continued cooperation with Jordan's neighbors, the desolate border regions and the various tribes, with centuries-old traditions of smuggling as a principle source of income, make interdiction difficult. None of the narcotics transiting Jordan are believed to be destined for the United States.

Domestic Programs. Jordan maintains a robust program of awareness, education, and rehabilitation. Education programs target high school and college-aged kids. Authorities continue to provide educational presentations in schools and universities throughout the country. According to a representative of the local UN Office on Drugs and Crime (UNODC), since 2001 the Jordanian government, in conjunction with the UNODC, has strengthened treatment and rehabilitation services for drug abusers in Jordan. Most notably, a national treatment and rehabilitation strategy and coordination mechanism has been put in place; the Police Treatment Center has been upgraded to provide and facilitate treatment and rehabilitation services to drug abusers referred by the court; and the five primary health centers in Jordan are now able to provide outreach services for early intervention and counseling. In August 2005, the Jordanian Drug Information Network (JorDIN) was officially established. This new UNODC initiative was implemented with the view to support the development of a comprehensive drug use monitoring system covering drug abuse indicators in Jordan, composed of the Ministries of Health and Education, the University of Jordan, and other organizations. In the future, JorDIN will enable the GOJ to better quantify rates of success for rehabilitation and treatment of drug users. The UNODC representative further stated that with each year, Jordan has made real progress in drug abuse treatments.

There are currently three locations at which people in Jordan can receive treatment and rehabilitation services: the National Center for the Rehabilitation of Addicts operated by the Ministry of Health; the Police Treatment Center operated by the PSD's Anti-Narcotics Department, and a private treatment facility operated by Al-Rashid Hospital in Amman.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In July 2005, DEA sponsored a one-week Asset Forfeiture and Financial Investigations Seminar in Amman.

The Road Ahead. U.S. Officials expect continued cooperation with Jordanian officials in counternarcotics related issues.

Iran

I. Summary

The Islamic Republic of Iran is a major transit route for opiates smuggled from Afghanistan and through Pakistan to the Persian Gulf, Turkey, Russia, and Europe. The largest single share of opiates leaving Afghanistan (ca. 60 percent) passes through Iran to consumers in Iran itself, Russia and Europe. There is no evidence that narcotics transiting Iran reach the United States in an amount sufficient to have a significant effect. Iran is no longer a major drug-producing country. There are an estimated 3 million opiate abusers in Iran, with 60 percent reported as addicted to various opiates and 40 percent reported as casual users. The latest opiate seizure statistics from Iran suggest Iran is experiencing an epidemic of drug abuse, especially among its youth.

There is overwhelming evidence of Iran's strong commitment to keep drugs leaving Afghanistan from reaching its citizens. As Iran strives to achieve this goal, it also prevents drugs from reaching markets in the West. More than 3,400 Iranian law enforcement personnel have died in clashes with heavily armed drug traffickers over the last two decades, and Iran reports that another 48 died in 2004. Iran spends a significant amount on drug-related expenses, including interdiction efforts and treatment/prevention education. Estimates range from \$250-\$300 million to as much as \$800 million each year, depending on whether treatment and other social costs are included. Traffickers from Afghanistan continue to cause major disruption along Iran's eastern border, but Iranian security forces have had excellent seizure results for the last two years by concentrating their interdiction efforts in the eastern provinces.

Iran is a party to the 1988 UN Drug Convention, but its laws do not bring it completely into compliance with the Convention. The UNODC is working with Iran to modify its laws, train the judiciary, and improve the court system.

II. Status of Country

Iran is a transit country and a major consumer country of opiates and hashish. Entering from Afghanistan and Pakistan into eastern Iran, heroin, opium, and morphine are smuggled overland, usually to Turkey. Drugs are also smuggled by sea across the Persian Gulf. Iran is itself a major opiate consuming country, with the highest share of population abusing opiates in the world. The UNODC estimates that 2.8 percent of the Iranian population over age 15 used opiates in 2001 (latest data available). A sharp increase in the share of unrefined opium in total opiate seizures made by Iranian enforcement in 2005 suggests that drug traffickers in Afghanistan have consciously decided to serve the growing opium market in Iran, rather than ship refined or semi-refined opiates (heroin and morphine base) for ultimate consumption in Europe.

III. Country Actions Against Drugs in 2005

Policy Initiatives. A group of Iran's neighbors, and major narcotics assistance donor countries working together in a regional organization under UNODC sponsorship (the "Paris Pact") organized a visit to Iran to discuss Iran's counternarcotics efforts, and its needs for narcotics-related assistance. Among the policy recommendations to emerge from this review was the need not to overlook exit routes along the Iranian/Turkish border, and to strive for more intelligence-led investigations of trafficking organizations. The Paris Pact review also made recommendations to improve treatment and

drug education, and to encourage more effective courts and decrease corruption. UNODC has put together an assistance program for Iran containing enforcement, demand reduction, and judicial sector projects and requested donors to consider contributions towards the estimated \$22 million cost of the program. Approximately half of the amount necessary has already been pledged, largely by European donors, significantly Great Britain. Iran continues to spend at least 50 percent of its budgeted counternarcotics expenditures on demand reduction activities as a continuing response to the growing social and health impact of more dangerous drug abuse (e.g., heroin vice opium), and the trend towards more intravenous heroin abuse, with certain addict populations sharing needles. Police forces engaged in narcotics suppression activities have begun to complain publicly that their budgets are inadequate for their interdiction responsibilities.

Law Enforcement Efforts. The Drug Control Headquarters coordinates the drug-related activities of the police, the Islamic Revolutionary Guard Corps, and the Ministries of Intelligence and Security, Health, and Islamic Guidance and Education. The long-time head of the Drug Control Headquarters, Ali Hashemi, was replaced after this summer's Presidential elections in Iran, by Fada Hussein Maleki, an official with provincial administration experience in a region (Baluchistan) beset by narcotics trafficking.

Iran pursues an aggressive border interdiction effort. A senior Iranian official told the UNODC that Iran had invested as much as \$800 million in a system of mud walls, moats, concrete dams, sentry points, and observation towers, as well as a road along its entire eastern border with Pakistan and Afghanistan. According to an official GOI Internet site, Iran has installed 212 border posts, 205 observation posts, 22 concrete barriers, 290 km of canals (depth-4m, width-5m), 659 km of soil embankments, a 78 km barbed wire fence, and 2,645 km of asphalt and gravel roads. It also has relocated numerous border villages to newly constructed sites, so that their inhabitants are less subject to harassment by narcotics traffickers.

Thirty thousand law enforcement personnel are regularly deployed along Iran's border with Afghanistan and Pakistan. Interdiction efforts by the police and the Revolutionary Guards have resulted in numerous drug seizures. Iranian officials seized 199 metric tons of opiates (opium equivalent) just during the first seven months of 2005. Opiate seizures in 2005 (projected) were on track to be just 9 metric tons less (-2.54 percent) than the all-time record seizures achieved in 2004. Iran and Pakistan alternate for the right to be the country with the highest volume of opiate seizures in the world.

Iranian opiate seizures in the first seven months of 2005 display some interesting trends:

- Unrefined (raw) opium seizures continued to increase sharply; projected out for the year, they were on track to increase by 17 percent, even though all opiate seizures (opium, heroin, morphine base) were projected to be down by 2.5 percent;
- The share of raw opium in total opiate seizures approached 60 percent, a level not seen in a decade. Given the weight and bulk advantage of shipping opiates as either a fully or partially refined product (1/10th the weight and bulk), it would seem that trafficking groups in Pakistan and Afghanistan have made a conscious decision to serve the large and growing market for opium in Iran;
- Heroin increased from 13.5 percent of all opiates seized in Iran in 2004 to a projected 15 percent in 2005, still a relatively modest share of the total;
- The morphine base share of seized opiates fell to just 25 percent of the total. Since morphine base is the opiate most likely headed for consumption outside of Iran in Russia and/or Europe (after further refining), this sharp decline in a single year from

last year's level of 37 percent, makes clearer the traffickers' focus on the Iranian opium market.

One possible explanation for these seizure trends is a return of Iranian addicts to traditional raw opium abuse, after a period when disruptions in supply from Afghanistan forced a switch to heroin. A large share of heroin and almost all of the morphine base transiting Iran is headed for markets in Europe (heroin) or for further refining in Turkey (morphine base).

Hashish seizures in Iran in the first seven months of 2005 were 35 metric tons. If hashish seizures are projected out for the whole of 2005 (60 metric tons), and compared with 2004's seizures of 86.5 metric tons, they would register a sharp decline of more than 30 percent.

Drug offenses are under the jurisdiction of the Revolutionary Courts. Punishment for narcotics offenses is severe, with death sentences possible for possession of more than 30 grams of heroin or five kilograms of opium. Those convicted of lesser offenses may be punished with imprisonment, fines, or lashings, although it is believed that lashings have been used less frequently in recent years. Offenders between the ages of 16 and 18 are afforded some leniency. More than 60 percent of the inmates in Iranian prisons are incarcerated for drug offenses, ranging from use to trafficking. Narcotics-related arrests in Iran during 2004 continued a sharp upward trend, mounting to 417,240, an 11 percent increase over drug arrests in 2003. Almost two-and-one-half times more drug abusers were detained than drug traffickers. Iran has executed more than 10,000 narcotics traffickers in the last decade.

Corruption. It would seem that corruption plays a more important role in narcotics trafficking in Iran than heretofore thought. Corruption cases reached the courts in Iran, and were also featured in media reports. The election campaign highlighted incidents of corruption, and to some extent the results can be read as a populist reaction to perceptions of corruption in leadership circles. Although there is no specific indication that senior government officials aid or abet narcotics traffickers, comparison of the situations in other narcotics-transit countries suggests that in addition to corruption among lower/mid-level law enforcement, there is also probably involvement of higher level officials as financiers and protectors of narcotics traffickers. Nevertheless, punishment of corruption can be harsh, and the evidence of Iran's commitment to keep drugs from its people is compelling. A high-profile effort is currently under way in Iran to highlight corruption and discourage its spread, but some cynicism might be justified on the question of its seriousness, with an eye on those in the top infrastructure who escape punishment for apparent corruption. Iran has signed, but has not ratified, the UN Convention Against Corruption.

Agreements and Treaties. Iran is a party to the 1988 UN Drug Convention; however, its legislation does not bring it completely into compliance with the Convention, particularly in the areas of money laundering and controlled deliveries. The UNODC is working with Iran through the NOROUZ Program to modify its laws, train the judiciary, and improve the court system. UNODC has also proposed new assistance projects for Iran's courts and prosecutors after the recent Paris Pact review of Iran's counternarcotics efforts. The proposed assistance, which is projected to cost in excess of \$7.5 million, focuses on modernization of the courts, especially increased use of computerization in courts, transparency, and corruption reduction. UNODC is seeking donor commitments currently. Iran is also a party to the 1971 UN Convention on Psychotropic Substance, and the 1961 UN Single Convention as amended by the 1972 Protocol. Iran has signed, but has not yet ratified, the UN Convention on Transnational Organized Crime. Iran has shown an increasing desire to cooperate with the international community on counternarcotics matters. Iran is an active participant in the Paris Pact, a group of countries that actively seeks to coordinate efforts to counter opiate smuggling in Southwest Asia, and as noted above, Iran hosted an expert round table and review of its counternarcotics efforts by this group in 2005.

Cultivation/Production. A 1998 U.S. survey of opium poppy cultivation in Iran and a detailed U.S. multi-agency assessment concluded that the amount of poppy being grown in Iran was negligible. The survey studied more than 1.25 million acres in Iran's traditional poppy-growing areas, and found no poppy crops growing there, although the survey could not rule out the possibility of some cultivation in remote areas. A follow-up survey in 1999 reached the same conclusion. Iran is now generally viewed as a transit country for drugs produced elsewhere, but there are some reports of opium refining near the Turkish/Iranian border. Most refining of the opiates moving through Iran is done elsewhere, either in Afghanistan or in Turkey.

Drug Flow/Transit. Shipments of opiates enter Iran overland from Pakistan and Afghanistan by camel, donkey, or truck caravans, often organized and protected by heavily armed ethnic Baloch tribesmen from either side of the frontier. Once inside Iran, large shipments are either concealed within ordinary commercial truck cargoes or broken down into smaller sub-shipments. The Iranian town of Zahedan is reportedly a center for the opiate trade as it first enters Iran, and then moves westward. Foreign embassy observers report that Iranian interdiction efforts have disrupted smuggling convoys sufficiently to force smugglers to change tactics and emphasize concealment more than they have in the past. The use of human "mules" is on the rise. Individuals and small groups also attempt to cross the border with two to ten kilograms of drugs, in many cases ingested for concealment. Trafficking through Iran's airports also appears to be on the rise. Still, many traffickers move drugs in armed convoys, and are ready for a fight if challenged.

A large share of the opiates smuggled into Iran from Afghanistan is smuggled to neighboring countries for further processing and transportation to Europe. Turkey is the main processing destination for these opiates, most of which are bound for consumption in Russia and Europe. Essentially all of the morphine base, which represented almost 25 percent of all opiates seized in the first seven months of 2005, in Iran, is likely moving towards Turkey, as is some share of the much diminished 15 percent, or so, of opiates moving as heroin. Significant quantities of raw opium are consumed in Iran itself, but some quantities also move on to the west to be refined and consumed as heroin in Europe and elsewhere. There is a northern smuggling route through Iran's Khorasan Province, to Turkmenistan, to Tehran, and then on to Turkey. The mountains and desert, which are sparsely populated along this route, make it hard to police. Traffickers are frequently well armed and dangerous.

The southern route also passes through sparsely settled desert terrain on its way to Tehran en route to Turkey; some opiates moving along the southern route detour to Bandar Abbas and move by sea to the Persian Gulf states. Bandar Abbas also appears to be an entry point for precursor chemicals moving to refineries in Afghanistan. Iran does not specifically control precursor chemicals used for producing illicit drugs, but has made a number of important seizures, mostly at Bandar Abbas, of acetic anhydride, used in the refining of heroin. All precursor chemicals seized were consigned? to Afghanistan. Trafficking through Iran is facilitated by wide-spread smuggling traditionally used to provide necessities, and to escape high taxation. There are also reports that enforcement authorities accept bribes to pass shipments, and fail to enforce laws that prohibit street sales of narcotics inside of Iran.

Azerbaijan and Armenia provide alternative routes to Russia and Europe that bypass Turkish interdiction efforts. Additionally, despite the risk of severe punishment, marine transport is used through the Persian Gulf to the nations of the Arabian Peninsula, taking advantage of modern transportation and communication facilities and a laissez-faire commercial attitude in that area. Hashish moves extensively along this route, as well. Oman and Dubai appear to be important destinations, but some Iranian hashish even finds its way to Iraq. Iranian enforcement officials have estimated that as much as 60 percent of the opium produced in Afghanistan in past years entered Iran, with as much as 700-800 metric tons of opium consumed in Iran itself by its ca. 3 million users.

Domestic Programs (Demand Reduction). Smoked opium is the traditional drug of abuse in Iran, but opium is also drunk, dissolved in tea. Opium and its residue are also injected, dissolved in water, by a small number of addicts. Iranians have clearly been using more heroin during the past several years. Heroin has not replaced opium, the traditional drug of choice in Iran, but lower street prices for heroin, and temporary shortages of opium (after the Taliban successfully prohibited opium production in Afghanistan in 2000/01), plus higher prices for opium, have encouraged some addicts to switch from opium to heroin. Some heroin is smoked or sniffed, but a growing share is injected. Recent seizure statistics, where the share of opium seized is up sharply, suggests a return to more traditional patterns of abuse in Iran, namely opium as the predominant drug of abuse. There are also many reports that young people in Iran have turned aggressively to drug abuse as an escape from what they perceive as difficult economic and social conditions. Significant seizures (6 metric tons in 2004) of synthetic drugs have also been reported, again suggesting that young people are driving drug abuse in Iran to even higher levels.

Ninety-three percent of opiate addicts are male, with a mean age of 33.6 years (plus or minus 10.5 years), and 1.4 percent (about 21,000) are HIV positive. In the past, Iran focused more aggressively on illegal alcohol use than on drug abuse and was reluctant to discuss drug problems openly. Since 1995, public awareness campaigns and attention by two successive Iranian presidents, as well as cabinet ministers and the Parliament, have given demand reduction a significant boost. Under the UNODC's NOROUZ narcotics assistance project, the GOI spent more than \$68 million dollars in the first year for demand reduction and community awareness. The Prevention Department of Iran's Social Welfare Association runs 12 treatment and rehabilitation centers, as well as 39 out-patient treatment programs in all major cities. Eighty-eight out-patient treatment centers are now operational. Some 30,000 people are treated per year, and some programs have three-month waiting lists. Narcotics Anonymous and other self-help programs can be found in almost all districts, as well, and several NGOs focus on drug demand reduction. There are now methadone treatment and HIV prevention programs in Iran, in response to growing HIV infection, especially in the prison population.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In the absence of direct diplomatic relations with Iran, the United States has no narcotics initiatives in Iran. The U.S. government continues to encourage regional cooperation against narcotics trafficking. Iran and the United States have expressed similar viewpoints on illicit drugs and the regional impact of the Afghan drug trade. In the context of multilateral settings such as the UN's Paris Pact group, the United States and Iran have worked together productively. Iran nominated the United States to be coordinator of an earlier UN-sponsored coordination effort on narcotics called the "Six Plus Two" counternarcotics initiative. The U.S., for its part, has approved licenses which allow U.S. NGOs to work on drug issues in Iran.

The Road Ahead. The GOI has demonstrated sustained national political will and taken strong measures against illicit narcotics, including cooperation with the international community. Iran's actions support the global effort against international drug trafficking. Iran stands to be one of the major benefactors of any long-term reduction in drug production/trafficking from Afghanistan, as it is one of the biggest victims of the short term increase in opium/heroin production there now. The United States anticipates that Iran will continue to pursue policies and actions in support of efforts to combat drug production and trafficking.

Israel

I. Summary

Israel is not a significant producer or trafficking point for drugs. The Israeli National Police (INP), however, report that during 2005, the Israeli drug market continued to be characterized by high demand in nearly all sectors of society and a high availability of drugs including cannabis, ecstasy, cocaine, heroin, hashish and LSD. The INP also reports a continuing demand for ecstasy in 2005, but a lower level of seizure compared with 2004. The amount of marijuana seized is less than half that in 2004, and there was a slight decrease in the amount of hashish seized. The INP reports that the amount of heroin seized has doubled since last year and that the level of demand is unchanged. The quantity of LSD seized in 2005 is considerably less than the previous years. Widespread use of ecstasy by Israeli youths is a continuing source of concern for authorities. There was a decrease from last year in the number of arrests for drug use, and possession, not for personal use, but arrests for trafficking have increased. The number of drug arrests for 2005 was 3,640 (Note: All 2005 data are for the period January through October and were obtained from the Research Department of the Israeli Police Headquarters, unless otherwise indicated.) Israel is a party to the 1988 UN Drug Convention.

II. Status of Country

Israel is not a major producer of narcotics or precursor chemicals. Israeli narcotics traffickers operating outside of Israel continue to be deeply involved in the international ecstasy trade. The INP reports that during 2005, the Israeli drug market was characterized by a high demand in nearly all sectors of society and a high availability of drugs including cannabis, ecstasy, cocaine, heroin, hashish and LSD. The INP estimates the annual demand of the Israeli market to be 100 tons of marijuana, 20 tons of hashish, 20 million tablets of ecstasy, 4 tons of heroin, 3 tons of cocaine, and hundreds of thousands of LSD blotters. Officials are also concerned with the widespread use of ecstasy and cannabis among Israeli youth, and say that drug use among youth mirrors trends in the West. The INP indicates that most of the hashish in Israel now comes from Afghanistan and Morocco, which have replaced Lebanon as the major source. Another source of concern for law enforcement authorities is the synthetic drug Gamma Hydroxybutyrate (GHB), and its analogues, Gamma Butyrolactone (GBL), and Butanediol (BD), better known as Date-Rape Drugs. This class of drugs has been outlawed in Israel since 2004.

III. Country Actions Against Drugs in 2005

Policy initiatives. In 2005, the INP continued its general policy of interdiction at Israel's borders and points of entry because the biggest quantities of drugs cross into Israel from Jordan, Egypt, and Lebanon. Together with the Israeli Anti-Drug Authority (IADA), the INP concentrated specifically on the Jordanian and Egyptian borders, where the majority of heroin, cocaine, and cannabis entered Israel. The INP and the IADA have jointly developed programs to help Israeli youth, especially in the Arab community, where there has been a marked increase in use of illegal drugs and drug-related violence since 2004. Both organizations continue to identify and investigate several major families involved in the drug trade in Israel. In 2005, the INP combined its investigations and intelligence units into one branch called the Special Operations Division (SOD).

Law Enforcement Efforts. INP reported a high demand for cocaine and a total of 158 kilograms seized in 2005, a figure almost six times that of 2004. Other reported seizures for 2005 are as follows:

7,000 kilograms of marijuana; 730 kilograms of hashish; 200,000 ecstasy tablets; 140 kilograms of heroin; and 1,866 LSD blotters. There was a slight change from last year in the number of arrests reported by the INP. In 2005, the INP reported 15,427 arrests for drug use, 3,047 for drug trafficking, and 5,233 for drug possession not for personal use. Israel destroyed 686 illicit labs in 2005, compared with 528 in 2004. The figure for drug arrests in 2004 was 4,340, dropping to 3,640 in 2005. In 2005, there were several high profile drug cases. In one instance, the INP arrested seven members of an ecstasy ring involved in smuggling 90,000 pills from Europe, and the seizure of 30 kilograms of pure heroin at a border crossing between Israel and Jordan, estimated at NIS 3.5 million (\$777,777). In total there were 24,393 felony cases related to the narcotics crimes.

Corruption. As a matter of government policy, Israel does not encourage or facilitate the illicit production or distribution of drugs or substances, or the laundering of proceeds from illegal drug transactions. Israel does not have specific legislation for public corruption related to narcotics, but vigorously enforces its general laws against malfeasance in government.

Agreements and Treaties. In June 2002, Israel ratified the 1988 UN Drug Convention after passing all the necessary laws to make Israeli laws consistent with the Convention. Israel is a party to the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. A customs mutual assistance agreement, an extradition treaty and a mutual legal assistance treaty are in force between Israel and the U.S. Israel signed the UN Convention against Transnational Crime and it is in the process of passing the necessary changes to Israeli law required for ratification. Israel has signed, but has not yet ratified the UN Convention against Corruption.

Cultivation/Production. There is negligible cultivation and production of illicit drugs in Israel.

Drug Flow/Transit. Israel is not a significant transit country, although Israeli citizens have been part of international drug trafficking networks in source, transit, and distribution countries. Israeli citizens abroad in locations such as France, Spain, Germany, Denmark, Holland, and Belgium serve as brokers and transporters of ecstasy to the U.S. and elsewhere. Israeli officials are particularly concerned about drugs being smuggled into Israel from neighboring countries Lebanon, Jordan and Egypt. Israel also works with Germany and Holland to interdict the flow of ecstasy—with Turkey to interdict the flow the heroin and with South American countries to interdict the flow of cocaine.

Demand Reduction. A number of both public and private entities are working to reduce the demand for drugs through awareness and prevention programs. The Israeli Anti-Drug Authority (IADA) is one of the main governmental actors in this effort. Its mission, among other things, is to spearhead prevention efforts, initiate and develop educational services and public awareness, and treat and rehabilitate drug users. It coordinates with and directs the activities of a number of government ministries involved in reducing demand. The IADA also seeks to change the public opinion to counter increasing social acceptance of recreational drug use. Prevention programs target high-risk segments of the population like the Arab sector, as well as youths, students, backpackers, new immigrants, and others. The IADA offers workshops and lectures for immigrants from Russia and Ethiopia in their respective languages and tailored to their particular cultural needs. The IADA is working to reduce demand for narcotics among soldiers by providing officers with the skills to combat effectively the use of drugs within their units. There is an ongoing public awareness campaign aimed at parents and designed to focus their attention on their children's whereabouts and activities. The IADA also concentrates on human resources development, including the development of a professional infrastructure, and is establishing a unified standard for training purposes, including development of a curriculum for nurses, police, prison employees, physicians, and counselors, as well as other drug prevention, treatment, and enforcement professionals. The IADA also performs basic, epidemiological, and evaluative research in the narcotic drug field. The INP participates in demand

reduction initiatives by lecturing at schools at all levels above 10 years of age and in the army about the impact of drugs on the body and mind.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. DEA officials characterize cooperation between the DEA and the INP as outstanding. All DEA investigations related to Israel are coordinated through the DEA Nicosia Country Office. The INP has liaison officers in Bangkok, Paris, The Hague, Bogotá, Berlin, Moscow, Ankara, and Washington, DC. Through these offices, there were several significant joint investigations conducted in 2005 leading to arrests of 36 Israelis abroad in 2005.

Road Ahead. The DEA regional office in Nicosia, Cyprus, looks forward to continued cooperation and coordination with its counterparts in the Israeli law enforcement community. The GOI is seeking to widen and build on relations with other countries and has created an office of International Relations within the IADA to pursue this objective.

Kenya

I. Summary

Kenya has become an increasingly significant transit country for cocaine from South America bound for Europe. The seizure of more than one ton of cocaine in December 2004 raises concerns that international drug trafficking rings have made inroads in Kenya and may benefit from a climate of official corruption, which allows them to operate with near impunity. Heroin and hashish transiting Kenya, mostly from Southwest Asia bound for Europe and the U.S., have markedly increased in purity in recent years. Some share of the heroin is destined increasingly for the U.S., even as the overall transit volume is believed to have declined. There is a growing domestic heroin and cocaine market and use of marijuana is becoming more widespread, particularly on the coast and in Nairobi. Although government officials profess strong support for counternarcotics efforts, the overall program suffers from a lack of resources and corruption at various levels. Kenya is a party to the 1988 UN Drug Convention.

II. Status of Country

Kenya is a significant transit country for cocaine and heroin and a minor producer of cannabis. It is believed that Kenya is becoming an increasingly significant transit country for multi-ton shipments of cocaine from South America destined for European and African consumers; however, cocaine seizures have decreased significantly from the dramatic spike in 2004. Kenya's sea and air transportation infrastructure, and the network of commercial and family ties that link some Kenyans to Southwest Asia, make Kenya a significant transit country for Southwest Asian heroin and hashish. Although it is impossible to quantify exactly, officials now believe that the United States is at least as significant as Europe as a destination for heroin transiting Kenya. Seizures of Southwest Asian cannabis resin transiting Kenya have fallen off dramatically since 2000 and the 2005 figures remain relatively constant with figures for 2004. Cannabis or marijuana is produced in commercial quantities for the domestic and export market, however there is no evidence of its impact on the United States. Kenya does not produce significant quantities of precursor chemicals.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Kenya has abandoned the wholesale adoption of the 2001 National Drug Control Master Plan (NDCMP). Rather, Kenya is currently drafting legislation which would implement select provisions of the NDCMP by creating a Drug Control Authority. Counternarcotics agencies, notably the Anti-Narcotics Unit (ANU) within the Kenyan Police Service, continue to depend on the 1994 Narcotics Drugs and Psychotropic Substances Act (Narcotics Act) for enforcement measures and interdiction guidelines. The twelve year-old Act is generally sufficient to sustain current interdiction efforts, but the Act's major weakness remains its ambiguity and inconsistencies in the area of drug seizure, analysis, and disposal. In 2005, the government of Kenya worked with the United Nations Office for Drugs and Crime (UNODC) to draft revisions to the Narcotics Act covering the seizure, analysis, and disposal of narcotic drugs and psychotropic substances. Despite the recognized need, the revisions have yet to be implemented. Kenya has no crop substitution or alternative development initiatives for progressive elimination of the cultivation of narcotic crops. The ANU remains the focus of Kenyan counternarcotics efforts.

Law Enforcement. As a result of UNODC and bilateral training programs, the ANU and the Kenyan Customs Service now have a cadre of officers proficient in profiling and searching suspected drug couriers and containers at airports and seaports. Profiling has yielded good results in recognizing couriers but not major traffickers. Seaport container-profiling has proven difficult. Despite the official estimate that much of the narcotics trafficking through Kenya originates on international sea vessels, ANU maritime interdiction capabilities remain virtually nonexistent. Personnel turnover at the ports is high and Kenya has no functioning maritime interdiction capability. Six officers are assigned to Kenya's (and East Africa's) principal port of Mombasa for profiling purposes only; the two officers who have been trained in maritime interdiction have no boats from which to operate. Corruption continues to thwart the success of long-term port security training and inadequate resources also sap morale, and impose real restrictions on what can be achieved. Both corruption and resource constraints are real problems throughout the Kenyan police force and significantly reduce the ANU's operational effectiveness.

Seizures of heroin and cocaine decreased in 2005, while seizures of cannabis and its derivatives increased. Kenya seized 30 kilograms of heroin in 2005, a 10-kilogram decrease from the quantities seized in 2004 (all statistics on drug seizures in this section reflect the period from January to November 2005 as provided by the ANU) and arrested 103 people on heroin-related charges. The ANU concentrates its antiheroin operations at Kenya's two main international airports. Kenyan authorities seized 49,854 kilograms of cannabis and its derivatives in 2005 and arrested 4,648 suspects. As in the previous year, the ANU saw an increase in cannabis cultivation during targeted raids in 2005, in which 153,720 plants were destroyed. The ANU continued to operate roadblocks for domestic drug trafficking interdiction and is pursuing a variety of policy initiatives for more effective coordination with other government agencies. Weak laws, an ineffective and inefficient criminal justice system and widespread corruption are the main impediments to an effective counternarcotics strategy for Kenya.

Seizures of cocaine and arrests for cocaine trafficking were low, compared to 2004. Kenya seized 5 kilograms of cocaine in 2005 and made 4 arrests. However, Kenya has yet to achieve a successful prosecution stemming from the December 2004 record seizure of cocaine. All seven defendants accused of trafficking 295 kilograms of cocaine seized in the Netherlands related to the cocaine shipment seized in Kenya were acquitted in November due to lack of evidence. The presiding magistrate stated that the case was neither adequately investigated nor prosecuted and the state failed to comply with sections of the Narcotics Act. Given the lackluster performance of legal and law enforcement authorities in the case, the magistrate questioned the commitment of the Office of the Attorney General to combating drug trafficking.

The Kenyan government (through Customs and the Criminal Investigations Department of the Kenyan police service) is collaborating with UNODC in setting up a drug law enforcement program targeting key entry points of drugs into the East African region. This program complements another UNODC program focusing on developing drug control capacity in the port of Mombasa.

Corruption. As a matter of government policy, Kenya does not encourage nor facilitate the illicit production or distribution of narcotic or psychotropic substances, or the laundering of proceeds from illegal drug transactions. However, official corruption remains a significant barrier to effective narcotics enforcement at both the prosecutorial and law enforcement level. Despite Kenya's strict narcotics laws that encompass most forms of narcotics-related corruption, reports continue to link public officials with narcotics trafficking. The December 2004 cocaine seizure has heightened public concern that international drug trafficking rings enjoy protection by high-level officials for their activities in Kenya. The November 2005 acquittal of seven suspects accused of trafficking cocaine to the Netherlands raises questions about the ability or willingness of legal and law enforcement

authorities to combat drug trafficking. The December 31 murder of the lead police officer investigating the theft of shipping containers, possibly in connection with a drug trafficking ring, illustrates the challenges facing authorities in interdicting drug trafficking through the Port of Mombasa. The murdered officer was killed after reportedly refusing substantial bribe offers. As in previous years, airport and airline collusion and outright involvement with narcotics traffickers continued to occur in the year covered by this report. Several Kenya Airways employees were arrested for smuggling of small quantities of cocaine into European airports, increasing public concern about the threat that some of last year's one ton cocaine seizure, still warehoused in Kenya, might find its way back out to the streets.

Agreements/Treaties. Kenya is a party to the 1988 UN Drug Convention, which it implemented in 1994 with the enactment of the Narcotic Drugs and Psychotropic Substances Control Act. Kenya is also a party to the 1961 UN Single Convention as amended by its 1972 Protocol, and the 1971 UN Convention Against Psychotropic Substances. Kenya is a party to the UN Convention Against Corruption, and to the UN Convention Against Transnational Organized Crime and its protocols against migrant smuggling, trafficking in persons, and illegal manufacturing and trafficking in firearms. The 1931 U.S.-U.K. Extradition Treaty remains in force between the United States and Kenya through a 1965 exchange of notes, but the extradition relationship has not been entirely satisfactory to the U.S. of late. Kenya, Tanzania, and Uganda established a protocol to enhance regional counternarcotics cooperation in 2001.

Cultivation and Production. A significant number of Kenyan farmers illegally grow cannabis on a commercial basis for the domestic market. Fairly large-scale cannabis cultivation occurs in the Lake Victoria basin, in the central highlands around Mt. Kenya, and along the coast. Foreign tourists export small amounts of Kenyan marijuana. Officials continue to conduct aerial surveys to identify significant cannabis-producing areas in cooperation with the Kenya Wildlife Service. Aerial surveys this year identified large cannabis crops in several areas, of which 153,720 plants were destroyed.

Drug Flow and Transit. Kenya is strategically located along a major transit route between Southwest Asian producers of heroin and markets in Europe and North America. Heroin normally transits Kenya by air, carried by individual couriers, but as a result of profiling measures and enhanced counternarcotics efforts, ANU officials believe traffickers are finding Jomo Kenyatta International Airport (JKIA) an increasingly inconvenient exit point for East African drugs. ANU officials continued to intercept couriers transiting newly created land-routes from Uganda and Tanzania, where it is believed the drugs arrive by air. The increased use of land-routes demonstrates, in the minds of ANU officials, that traffickers have noted the increase in security and narcotics checks at JKIA. Postal and commercial courier services are also used for narcotics shipments through Kenya. There is evidence that poor policing along the East African coast makes this region attractive to maritime smugglers, particularly for cocaine shipments. Kenya also remains a transit country for methaqualone (mandrax) en route from India to South Africa. However, total mandrax seizures for 2005 amounted to only 5 tablets, down from 5,000 seized in 2004. Officials have never identified any clandestine airstrips in Kenya used for drug deliveries and believe that no such airstrips exist.

Domestic Programs. The National Campaign Against Drug Abuse (NACADA) continues to combat drug abuse, although the quasi-governmental organization's budget remains negligible. While there are no reliable statistics on domestic consumption of illicit narcotics, NACADA estimates that twenty-one percent of 10 to 21 year olds have used cannabis. Kenya has made some progress in efforts to institute programs for demand reduction. Illegal cannabis and legal khat are the domestic drugs of choice. Heroin abuse is generally limited to members of the economic elite and a slightly broader range of users on the coast. Academics and rehabilitation clinic staff argue that heroin use in Nairobi and along the coast has grown exponentially in the past few years. Nairobi and Mombasa each have an

estimated 10,000 heroin addicts. Cocaine use is also expanding in urban centers. Solvent abuse is widespread (and highly visible) among street children in Nairobi and other urban centers. Demand reduction efforts have largely been limited to publicity campaigns sponsored by private donors and a UNODC project to bring counternarcotics education into the schools. NACADA continues to pursue demand reduction efforts via national public education programs on drug abuse. Churches and nongovernmental organizations provide limited rehabilitation and treatment programs for heroin addicts and solvent-addicted street children. With the support of USAID, the Ministry of Health is developing two rehabilitation and drug abuse treatment facilities in Nairobi and Mombasa. UNODC supports a youth network on drug demand reduction.

IV. U.S. Policy Initiatives and Programs

U.S. Policy Initiatives. The principal U.S. counternarcotics objective in Kenya is to interdict the flow of narcotics to the United States. A related objective is to limit the corrosive effects of narcotics-related corruption in law enforcement, the judiciary, and political institutions, which has created an environment of impunity for well-connected traffickers. The USG seeks to accomplish this objective through law enforcement cooperation, the encouragement of a strong Kenyan government commitment to narcotics interdiction, and strengthening Kenyan counternarcotics and overall judicial capabilities.

Bilateral Cooperation and Accomplishments. There was a modest expansion of USG bilateral cooperation with Kenya and surrounding countries on counternarcotics matters in 2005. Counternarcotics training opportunities and equipment offers have also been the hallmark of bilateral assistance to the ANU. The United States remains active in the Mini-Dublin Group, which has responsibility for coordinating counternarcotics assistance from several Western donors. Additionally, the USG provided U.S. speaker programming on drug abuse to raise public awareness of the growing rates of heroin addiction in the coastal region. USAID also provides support to projects to develop addiction treatment services to heroin addicts in Nairobi and on the Kenyan coast.

The Road Ahead. The USG will continue to take advantage of its good relations with Kenyan law enforcement to build professionalism, operational capacity, and information sharing. The USG will actively seek ways to maximize counternarcotics efforts both in Kenya and throughout East Africa. Perhaps most significantly, the USG will work with local, regional, and international partners to better understand and combat the flow of international narcotics through Kenya.

Lebanon

I. Summary

Lebanon is not a major illicit drug producing or drug-transit country, but with a history of opium cultivation and its central location, conditions in Lebanon bear close watching. The Lebanese government reported complete success in eradication of poppy and cannabis crops for 2004. It took serious actions to prevent cannabis cultivation and to eradicate illicit crops before harvest in the Biqa' Valley. It appears that crop destruction operations like these will continue to be routine operations. However, illicit crop cultivation is likely to continue to remain an option for local farmers due to an increasingly difficult economic climate and a lack of investment in alternative crops.

Cultivation of illicit crops increased slightly from 2004 to 2005. There is practically no illicit drug refining in Lebanon, and no production, trading or transit of precursor chemicals. Drug trafficking across the Lebanese-Syrian border has diminished substantially as a result of Lebanese and Syrian efforts to deter smuggling activity. The government continued its ongoing drug reduction efforts through public service messages and awareness campaigns. Lebanon is a party to the 1988 UN Drug Convention.

II. Status of Country

At least five types of drugs are available in Lebanon: hashish, heroin, cocaine, methamphetamine, and other synthetics, such as MDMA (ecstasy). Hashish and heroin are reported to be rare, due to the destruction of local crops, but small quantities of cocaine arrive in Lebanon to meet local demand, and the government reported increased interest in synthetic drugs. Lebanon is not a major transit country for illicit drugs, and most trafficking is done by "amateurs," rather than major drug networks. Marijuana and opium derivatives are trafficked to a modest extent in the region, but there is no evidence that the illicit narcotics that transit Lebanon reach the U.S. in significant amounts. South American cocaine is smuggled into Lebanon primarily via air and sea routes from Europe, Jordan, and Syria, or directly to Lebanon. Lebanese nationals living in South America, in concert with resident Lebanese traffickers, often finance these operations. According to a report issued by the Judicial Police in 2003, very small quantities of cocaine were smuggled in 2003, as compared to an average of approximately 500 kilograms in previous years. Synthetics are smuggled into Lebanon primarily for sale to high-income recreational users.

The stagnating economic situation in rural Lebanon and the lack of investment in alternative crops continues to make illicit crop cultivation appealing to local farmers in the Biqa' Valley in eastern Lebanon, though in ever-lesser quantities due to efforts by the government to eradicate illicit crops. The government also continued a counternarcotics campaign to discourage new planting. According to Lebanon's Internal Security Forces (ISF), approximately 273,555 square meters of opium and 641,890 square meters of hashish were eradicated in 2005.

There is no significant illicit drug refining in Lebanon. Such activity has practically disappeared due to the vigilance of the Syrian and Lebanese governments. Small amounts of precursor chemicals, however, shipped from Lebanon to Turkey via Syria, were previously diverted for illicit use. Legislation passed in 1998 authorized seizure of assets if a drug trafficking nexus is established in court proceedings.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The Ministry of Interior again made counternarcotics a top priority. The Judicial Police reported that no one was exempt from the law, and made narcotics-related arrests in 2004 for the first time in 35 years. The government also continued its vigorous campaign to discourage drug use by expanding public awareness on university campuses, through media campaigns, and in written advertisements.

Accomplishments. In 2005, the Government of Lebanon continued hashish and poppy eradication. Lebanese law enforcement officers cooperated with law enforcement officials bilaterally and through Interpol. Several European and Persian Gulf countries have illicit drug enforcement offices in Beirut with which local law enforcement authorities cooperate. The Government of Lebanon received from the UNODC and the UNDP a \$362,000 grant for “the development and implementation of a national action plan on drug demand reduction in Lebanon” from 2004-2006.

Law Enforcement Efforts. The ISF stated that from January to November 2004, they eradicated all cultivated crops during the year. The ISF reported seizures of 900 kilograms of hashish, and significantly lesser quantities of other illicit drugs. The number of arrests for use was 960, for dealing 847, for distribution 142, and lesser numbers for planting, smuggling, and transporting. The total number of persons arrested in 2004 for drug related crimes was 1,424, including the arrest in June of one of the major drug dealers in Lebanon. Abou Ali Sadek el-Masri was apprehended in his home in the Bika’ Valley in a joint operation carried out by the ISF and the Lebanese Armed Forces. Results for 2005 were not yet available, as this report neared completion.

Corruption. Corruption remains endemic in Lebanon up to the senior levels of government, but the U.S. is unaware that government corruption is connected with drug production or trafficking or the protection of persons who deal in illicit drugs. While low-level corruption in the counternarcotics forces is possible, there is no evidence of wide-scale corruption within the Judiciary Police or the ISF, which appear to be genuinely dedicated to combating drugs. Lebanon is not a party to the UN Convention Against Corruption.

Agreements and Treaties. Lebanon is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention, as amended by the 1972 Protocol. Lebanon also is a party to the UN Convention Against Transnational Organized Crime and its protocols against migrant smuggling and trafficking in persons.

Cultivation and Production. There are conflicting reports of illicit crop cultivation. Statistics from the Judicial Police this year show that 273,555 square meters of opium and 641,890 square meters of hashish were eradicated during 2005. However, a respected agricultural research center reported that in fact there were no eradications of illicit crops because farmers did not plant illicit crops. According to the director of the center, farmers have been thoroughly intimidated by police efforts to eradicate illicit crops. Knowing that the crops will be destroyed, and given the poor economic climate, farmers are loath to invest in crops that they believe will be destroyed. In either case, the end-result is that Lebanon is not believed to be a significant drug producing country any more.

Drug Flow/Transit. Illicit drug trafficking via traditional smuggling routes has been somewhat curtailed by joint Syrian-Lebanese operations in the past. Drug trafficking along the Israel-Lebanon frontier has been negligible since the Israeli withdrawal from Lebanon in May 2000 and the subsequent near-sealing of the UN-demarcated Blue Line. The primary route for smuggling hashish from Lebanon during 2004 was overland to Arab countries such as Saudi Arabia, Egypt, Kuwait, the United Arab Emirates, and via sea routes to Europe. According to the ISF, large exports of hashish

from Lebanon to Europe are more and more difficult for smugglers due to increased seashore patrols and airport control. The ISF asserts that no hashish has been smuggled into the United States.

Domestic Programs (Demand Reduction). Lebanese leaders understand that they need to address the problem of illicit drug use. In 2002, the government launched a public awareness campaign to discourage drug use and which remains on-going. Textbooks approved for use in all public schools contain a chapter on narcotics to increase public awareness. The current law on drugs dictates that a National Council on Drugs (NCD) be established, whose services and activities will include substance abuse treatment, prevention, awareness, and assistance to substance users and their families, in addition to setting up a national action plan. Since 2001, the government has been engaged in the establishment of this council; however, the NCD has not yet been formed.

There are several detoxification programs, but the only entity in Lebanon that offers a comprehensive drug rehabilitation program is Oum al-Nour (ON), a Beirut-based NGO. The Government of Lebanon, through the Ministry of Social Affairs and the Ministry of Public Health, provided 36 percent of ON's 2004 budget, which was \$1,000,000. ON estimates that the age of the average drug addict in Lebanon has been decreasing since the end of the country's civil war in 1990, with pre-college and college-age youth now being the most vulnerable. In 2004, 60 percent of ON's clients were under 24 compared to 5 percent for the same age group in 1990. ON statistics, based on their patient base, indicate that the most commonly abused illicit substance is heroin, but use of "designer" drugs such as methamphetamine and ecstasy is increasing. ON operates three drug treatment centers in Lebanon, two for men and one for women. The centers, which have a maximum capacity of 70 patients, offer a year-long residential program for hard-core addicts, and sometimes operate above capacity. The program strives for recovery for the residents' physical, psychiatric, spiritual, and social well-being without the use of drug maintenance. A new section, funded by USAID, was built in one of the men's centers and became operational in September. The new section, which can accommodate 12 to 15 patients, has taken in 21 patients since September. ON offers no outpatient drug withdrawal programs. ON also engages in drug prevention activities such as distributing educational materials on college campuses and promoting drug awareness among the population through advertisements and education programs. The organization also has a research office and a center for statistical studies.

Another drug rehabilitation center for men opened in Zahleh in the Biqa' Valley in coordination with the Saint Charles Hospital and the Ministry of Health. The center can accommodate up to 16 patients. The center's team of psychiatrists, clinical psychologists and social workers also does clinical training with drug addicts at the hospital. A new walk-in outpatient therapeutic facility for addiction that offers prevention, awareness, and psychological treatment to drug users and their families called Skoun (which means "internal tranquility" or "silence" in Arabic) opened last year in downtown Beirut. The center is currently treating some 20 outpatients. Other associations that fight drugs are: Jeunesse Anti-Drogue (JAD), which is primarily committed to drug awareness, but also provides medical treatment and psychological rehabilitation on an outpatient basis; Jeunesse Contre la Drogue (JCD), which raises awareness of substance abuse and AIDS, and helps users get proper treatment and rehabilitation; and Association Justice et Misericorde (AJEM), which was established to assist prisoners. One recurrent problem is the lack of coordination between concerned ministries and sometimes between the various NGOs that work on substance abuse.

According to the report "Substance Use and Misuse in Lebanon", released by the UN Office on Drugs and Crime (UNODC) in May 2003, ISF participants in the study reported that individuals arrested for substance-related offenses most commonly use heroin, hashish/marijuana, and cocaine. Furthermore, the participants noted that synthetics use is on the rise and so is Benzhexol use in prisons. On the other hand, ecstasy use was perceived as uncommon. As for data from treatment/rehabilitation centers, they showed that ecstasy and medicinal opiates are on the rise. Data gathered from street substance users

showed that codeine and other medication abuse are on the rise, and additionally, that the young population is increasingly inhaling thinner.

IV. U.S. Policy Initiatives and Programs

U.S. Policy Initiatives. In meetings with Lebanese officials, U.S. officials continued to stress the need for diligence in preventing any return to the production and transportation of narcotics in Lebanon, and the need for a comprehensive development program for the Bekka' Valley that would provide impoverished residents with alternate sources of income. The USG also stressed the importance of anticorruption efforts.

Bilateral Cooperation. USAID continued its four-component program to aid and empower key Lebanese stakeholders—local government, media, and civil society—in their efforts to fight corruption. On the supply side, USAID assisted U.S. and local NGOs working with villages to promote the substitution of illicit crops with legitimate, economically viable ones. The Sustainable Forage Development Program, ongoing since 2002, has proven the feasibility of forage cultivation as an alternative to illicit cropping, producing an average net income of \$900 per hectare; more than 1,030 farmers in the Biqa' and South Lebanon have joined the program. USAID also helped increase the receiving capacity of one of Oum el Nour's rehabilitation centers (see above on Domestic Programs). In 2003, the Department's INL Bureau funded a narcotics demand reduction program administered by a Beirut-based NGO, the Justice and Mercy Association (AJEM). This ongoing project was designed to create a drug treatment facility in Roumieh prison to provide treatment and social rehabilitation for drug-addicted prisoners incarcerated there. INL also funded a second project aimed at expanding receiving and treatment capacity at Oum el Nour centers. This was the first year that INL funded counternarcotics projects in Lebanon.

The Road Ahead. The success of measures to halt cultivation and trafficking depends on the will of the Lebanese government. The GOL, since the withdrawal of Syrian occupation forces, has new access to areas inside Lebanon where cultivation has historically been centered. However, it has not successfully developed a socio-economic strategy to tackle the problem of crop substitution. The USG will continue to press the GOL to maintain its commitment to combating drug production and transit and implementing anticorruption policies.

Morocco

I. Summary

Morocco continues to be a major producer and exporter of cannabis. It produced an estimated 98,000 metric tons of cannabis in 2004, providing for potential cannabis resin (hashish) production of 2,760 metric tons, according to the second joint study on cannabis released in May 2005 by the United Nations Office on Drugs and Crime (UNODC) and Morocco's Agency for the Promotion and the Economic and Social Development of the Northern Prefectures and Provinces of the Kingdom (APDN). As of December 2005, the Government of Morocco (GOM) was in the process of completing its 2005 study on cannabis production. Available information continues to indicate the United States is not a major recipient of drugs from Morocco. According to the UNODC report, Morocco in 2004 succeeded in decreasing by 10 percent its land dedicated to cannabis cultivation to 120,500 hectares, down from 134,000 hectares in 2003. The UNODC study also states that approximately 800,000 Moroccans (2.5 percent of the country's estimated 2004 population) were involved in cannabis cultivation. Morocco's efforts to combat cannabis cultivation are made more difficult by limited short-term alternatives for those involved in its production. Morocco is a party to the 1988 UN Drug Convention.

II. Status of Country

Morocco consistently ranks among the world's largest producers and exporters of cannabis; and its cultivation and sale provide the economic base for much of the mountainous northern region of Morocco. Only very small amounts of narcotics produced in or transiting through Morocco reach the United States. According to a UNODC report, the illicit trade in Moroccan cannabis resin generates approximately \$13 billion a year in total revenues. The narcotics trade might well be Morocco's single largest source of hard currency, but Morocco gets only a small share (perhaps \$325 million) of the estimated \$13 billion total turnover of the cannabis trade. Independent estimates indicate that the returns from cannabis cultivation range from \$16,400-\$29,800 per hectare (little of which goes to the growers themselves), compared with an average of \$1,000 per hectare for one possible alternative, corn. According to EU law enforcement officials, Moroccan cannabis is typically processed into cannabis resin or oil and exported to Europe, Algeria, and Tunisia. To date, Morocco has no enterprises that use dual-use precursor chemicals and is thus neither a source nor transit point for them. While there has been a small but growing domestic market for harder drugs like heroin and cocaine, cannabis remains the most widely used illicit drug in Morocco. Although there is no substantial evidence of widespread trafficking in heroin or cocaine, press reports suggest Latin American cocaine traffickers may have started using well-established cannabis smuggling routes to move cocaine into Europe.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The GOM's partnership with UNODC in conducting the 2004 and 2003 cannabis surveys reflects Morocco's desire to compile accurate data about narcotics production and address its narcotics problem. In 2004, Morocco also launched an awareness campaign for cannabis growers— alerting them to the adverse effects of cannabis cultivation for the land and informing them of alternative ways to use the land more productively. Throughout the 1980's, the GOM worked in conjunction with the UN to devise a response to the unique geographic, cultural and economic

circumstances that confront the many people involved in the cultivation of cannabis in northern Morocco. Joint projects to encourage cultivation of alternative agricultural products included providing goats for dairy farming, apple trees, and small bee-keeping initiatives. This effort also included paved roads, modern irrigation networks, and health and veterinary clinics. In the 1990's, the GOM continued to focus on development alternatives in Morocco's northern provinces through the work of APDN and the Tangier Mediterranean Special Agency (TMSA). In June 2003, TMSA oversaw the groundbreaking of the centerpiece of its northern development program, the Tanger-MED port, which is set to become Morocco's primary maritime gateway to the world. To study the viability of medicinal plant substitution the GOM selected Taounate as the site for the construction of the National Institute of Medicinal and Aromatic Plants (INPMA). Morocco and France agreed in 2004 to reinforce bilateral counternarcotics cooperation by deploying liaison officers to Tangiers and France

Law Enforcement Efforts. According to government statistics, Morocco in 2004 seized 318 tons of cannabis, representing a 361 percent increase over the 69 tons seized the previous year. During the same period seizures were also up for cocaine, heroin, and psychoactive drugs. Morocco claims to have arrested 22,526 Moroccan nationals and 356 foreigners in connection with drug-related offenses in 2004.

As part of a 1992 counternarcotics initiative, an estimated 10,000 police were detailed to drug interdiction efforts in the North and Rif mountains in 1995. Since then, approximately every six months, the GOM has rotated personnel into this region and continued to maintain counternarcotics checkpoints. Moroccan forces also staff observation posts along the Mediterranean coast, and the Moroccan Navy carries out routine sea patrols and responds to information developed by the observation posts. These efforts, however, have not changed the underlying reality of extensive cannabis cultivation and trafficking in northern Morocco. During this past year, according to both Moroccan and French police sources, controlled deliveries of drugs have proven to be a very successful interdiction technique. The GOM in 2005 destroyed more than 7,000 hectares of cannabis, primarily in Larache and Taounate Provinces, and plans to destroy 10,000-25,000 hectares of land cultivated with cannabis during next year's eradication campaign. The Ministry of Interior is also in the final stages of launching a website that will provide the public with information on the government's counternarcotics efforts. Morocco has laws providing a maximum allowable prison sentence for drug offenses of 30 years, as well as fines for narcotics violations ranging from \$20,000-\$80,000. Ten years' imprisonment remains the typical sentence for major drug traffickers convicted in Morocco.

Corruption. The GOM does not promote drug production or trafficking as a matter of policy, and it contests accusations that government officials in the northern territories are involved in the drug trade. According to Moroccan press reports, the Rabat Court of Appeal in April issued prison sentences ranging from 1 to 10 years to members of a drug trafficking ring; in addition, 25 policemen and 7 gendarmes were given one-year sentences for corruption. Morocco has signed, but has not yet ratified, the UN Convention Against Corruption.

Agreements and Treaties. Morocco is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances and the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol. Morocco is a party to the UN Convention against Transnational Organized Crime.

Cultivation/Production. The center of cannabis production continues to be the province of Chefchaouen, although production has expanded north in the last two decades to the outskirts of Tangiers, west to the coastal city of Larache, and east toward Al Hoceima. According to the UNODC report, small farmers in the northern Rif region grow mostly cannabis, where an estimated 27 percent of arable land is dedicated to its cultivation. Production also occurs on a smaller scale in the Souss

valley in the south. The UNODC survey found that 75 percent of villages and 96,000 farms in the Rif region cultivate cannabis, representing 6.5 percent of all farms in Morocco.

The GOM has stated its commitment to the total eradication of cannabis production; but given the economic and historical dependence on cannabis in the northern region, eradication is only feasible if accompanied by a well-designed development strategy involving reform of local government and a highly subsidized crop substitution program. Moroccan drug officials have indicated that crop substitution programs thus far appear to have made little headway in providing economic alternatives to cannabis production. The amount of cannabis production measured in 2004 suggests that the crop's cultivation has seen a steady increase over the past few years, to the detriment of other agricultural activities. The UNODC report warned that this agricultural monoculture represents an extreme danger to the ecosystem, as the extensive use of fertilizers and forest removal continues to be the methods of choice to make room for cannabis cultivation.

Drug Flow/Transit. The primary ports of export for Moroccan cannabis are Oued Lalou, Martil and Bou Ahmed on the Mediterranean coast. Most large shipments bound for Spain travel via fishing vessels or private yachts. Shipments of up to two tons increasingly are being confiscated on smaller “zodiac” speedboats that reportedly can make roundtrips to Spain in one hour. Smugglers also continue to transport cannabis via truck and car through the Spanish enclaves of Ceuta and Melilla, and the Moroccan port of Tangiers, crossing the Straits of Gibraltar by ferry. According to the UNODC, Spain still accounts for the world's largest portion of cannabis resin seizures (57 percent of global seizures and 75 percent of European seizures in 2001). The Moroccan press reported that some 800 tons of Moroccan cannabis resin were seized in Spain in 2004. Given its proximity to Morocco, Spain is a key transfer point for Europe-bound Moroccan cannabis resin.

Domestic Programs. The GOM is concerned about signs of an increase in domestic heroin and cocaine use but does not aggressively promote reduction in domestic demand for these drugs or for cannabis. It has established a program to train the staffs of psychiatric hospitals in the treatment of drug addiction. In partnership with UNODC, the Ministry of Health is exploring the relationship between drug use and HIV/AIDS infection in Morocco. Moroccan civil society and some schools are active in promoting drug abuse campaigns.

IV. U.S. Policy Initiatives and Programs

U.S. Policy Initiatives. U.S. policy goals in Morocco are to enhance Morocco's counternarcotics capability through training in law enforcement techniques and to promote the GOM's adherence to its obligations under relevant bilateral and international agreements. U.S.-supported efforts to strengthen anti-money laundering laws and efforts against terrorist financing may also contribute to the GOM's ability to monitor the flow of money from the cannabis trade.

Bilateral Cooperation. According to Moroccan counternarcotics officials, USG-provided border security equipment—particularly new scanners in main ports—improved the effectiveness of security measures at entry points, which directly contributed to increased drug seizures in 2004. Morocco and the U.S. have also begun to expand cooperation on drug investigations of mutual interest. The Drug Enforcement Administration (DEA), which covers Morocco from its Paris office, has enhanced its engagement with the Moroccan National Police, including discussing ways to increase training visits to the U.S. by Moroccan counternarcotics officials and by U.S. officials to Morocco. DEA officials conducted three trips to Morocco in the 2005. During the December 2005 visit, U.S. and Moroccan officials discussed ways in which the two governments can further their mutual cooperation. In September 2005, the U.S. Coast Guard sent a Mobile Training Team to provide training in maritime law enforcement boarding procedures.

The Road Ahead. The United States will continue to monitor the narcotics situation in Morocco, cooperate with the GOM in its counternarcotics efforts, and—together with the EU—provide law enforcement training, intelligence, and other support where possible.

Mozambique

I. Summary

Mozambique is a transit country for illegal drugs such as hashish, herbal cannabis, cocaine, mandrax (methaqualone), and heroin consumed in Europe and South Africa. Some illicit drug shipments passing through Mozambique may also find their way to the United States and Canada. The country's porous borders, poorly policed seacoast, and inadequately trained and equipped law enforcement agencies facilitate transshipment of narcotics. Drug production is limited to herbal cannabis cultivation and a few mandrax laboratories. Available evidence suggests significant use of herbal cannabis and limited consumption of "club drugs" (ecstasy/MDMA), prescription medicines, and heroin among the urban population of Mozambique. The Mozambican government recognizes drug use and drug trafficking as serious problems but has limited resources to address these issues. The U.S., the UN Office on Drugs and Crime (UNODC), and other donors have established cooperation programs to improve training of drug control officials and provide better interdiction and laboratory equipment. Despite these efforts, drug trafficking interdiction performance has improved only slightly in the past year. Corruption in the police and judiciary continues to hamper counternarcotics efforts, as has the elimination of visa requirements for South African and Mozambican citizens traveling between those two countries. Mozambique is a party to the 1988 UN Drug Convention.

II. Status of Country

Mozambique is not a significant producer of illegal drugs. Herbal cannabis for local consumption is produced throughout the country, particularly in Tete, Manica, and Zambezia provinces. Limited amounts are exported to neighboring countries, particularly South Africa. There are indications that small quantities of a low quality ecstasy are being manufactured in Southern Africa, with Mozambique as a possible producer. Mozambican authorities took steps during the year to reduce local production of mandrax by raiding facilities and seizing production equipment. Mozambique's role as a drug-transit country has continued to grow. Southwest Asian producers ship cannabis resin (hashish) and synthetic drugs through Mozambique to Europe and South Africa. Limited quantities of these shipments may also reach the United States and Canada. Heroin and other opiate derivatives shipped through Mozambique originate in Southeast Asia. Drugs cultivated in Southeast Asia then typically transit India, Pakistan, or the United Arab Emirates and later Tanzania, before arriving by small ship or, occasionally, overland to Mozambique. Traffickers are most commonly of Tanzanian or Pakistani origin. Increasing amounts of cocaine from the Andean region are sent with couriers on international flights from Brazil to Mozambique, sometimes via Lisbon, before being transported overland to South Africa. Mozambique has become a favored point of disembarkation because of its lax airport security control. Drug traffickers have recruited many young women in Maputo to work as couriers to and from Brazil. Mozambique is not a producer of precursor chemicals.

Mozambique has seen growing abuse of heroin among all levels of urban populations. The abuse of methaqualone continues to be a matter of concern for countries in Southern Africa. Methaqualone, which is usually smoked in combination with cannabis, continues to enter South Africa from India and China, and some shipments of the substances pass through Mozambique. Increasing amounts of cocaine from Brazil and Colombia are smuggled through Portugal into Portuguese-speaking countries in Africa, primarily Angola and Mozambique, then into South Africa. This year's agreement between South Africa and Mozambique to drop visa requirements has complicated interdiction and enforcement efforts, as information on individuals crossing borders has become even more limited.

III. Country Actions Against Drugs in 2005

Law Enforcement Efforts. Mozambique's drug unit operates in Maputo and reports to the Chief of the Criminal Investigation Police. With assistance from the UNODC, drug detection equipment was installed at border posts, ports, and airports in 2002 and 2003. In 2004, customs officers at Maputo airport and seaport received drug interdiction training under a UNODC program. In July 2005, a 57-person specialized police unit designed to strengthen efforts to fight organized crime, including narcotics trafficking, was introduced at airports in provincial capitals. In the first nine months of 2005, Mozambican authorities seized a total of 29.5 kilograms of cocaine at the Beira and Maputo airports. As interdiction efforts improve at the Maputo airport, traffickers have been forced to identify alternate points of entry, including Beira, Nampula, Quelimane and Vilankulos. Publicized seizures in 2005 include:

- The March seizure of 10 kilograms of cocaine in the "Colombia" neighborhood in Maputo city;
- The April seizure, at Maputo airport, of 1.8 kilograms of cocaine, carried by a 40-year old woman of unknown nationality arriving from Brazil;
- The May arrest at the Beira airport of a 39 year old Mozambican woman arriving from Brazil with 74 capsules of cocaine in her stomach;
- The June arrest at the Beira airport of a 20-year old Mozambican woman arriving from Brazil with 48 capsules of cocaine in her stomach;
- The seizure of 800 kilograms of cannabis sativa at the Changara/Moatize border post.

More than a dozen individuals were reportedly detained at the Beira and Maputo airports in connection with drug smuggling activities in 2005. Most of these were women who arrived from Brazil carrying capsules of cocaine in their stomachs. It is unclear how many of the suspects detained are incarcerated at this time. In November, local newspapers reported that two Mozambican women caught carrying cocaine from Brazil had been sentenced by the Sofala Provincial Court to lengthy prison terms for drug trafficking. Since the beginning of the year, five such "mules" of Mozambican nationality have died from overdoses while carrying cocaine.

Corruption. Corruption is pervasive in Mozambique. However, Mozambique has continued efforts to prosecute police and customs officials charged with drug trafficking offenses. The trial of four officers charged with selling the proceeds of a large Pakistani shipment of hashish began in February. In September, a Mozambican customs official in Tete province was reportedly sentenced to 16 years in prison for drug trafficking resulting from a 2004 mandrax smuggling charge. The official was accused of unlawfully taking into his possession mandrax seized by customs during a routine stop at a checkpoint in Tete province. As official policy, Mozambique seeks to enforce its laws against narcotics trafficking, but as noted above, confronts difficulties in doing so more effectively.

Agreements and Treaties. Mozambique is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Mozambique has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention Against Corruption.

Cultivation/Production. Cannabis is cultivated primarily in Tete, Manica, and Zambezia provinces. The Mozambican government has no estimates on crop size. Intercropping is the most common method of production. Mozambican authorities have made efforts this year to eradicate cannabis crops through controlled burns.

Drug Flow/Transit. Assessments of drugs transiting Mozambique are based upon limited seizure data and observations of local and UNODC officials. Mozambique increasingly serves as a transit country for hashish, cannabis resin, heroin, and mandrax originating in Southwest Asia, owing to its long, unpatrolled coastline, lack of resources for interdiction and sea, air, and land borders, and growing transportation links with neighboring countries. Drugs destined for the South African and European markets arrive in Mozambique by small ship, mostly in the coastal areas in northern Cabo Delgado province, but also in Nampula, Sofala, and Inhambane provinces.

The Maputo corridor border crossing at Ressano Garcia/Lebombo is an important transit point. Hashish and heroin are also shipped on to Europe, and some hashish may reach Canada and the United States, but not in significant quantities. Arrests in Brazil, Mozambique and South Africa indicate cocaine is being trafficked by drug couriers from Colombia and Brazil to Mozambique, often through Lisbon and Johannesburg, for onward shipment to South Africa. In addition, Nigerian and Tanzanian cocaine traffickers have targeted Mozambique as a gateway to the South African and European markets.

Domestic Programs (Demand Reduction). The primary substances of abuse are alcohol, nicotine, and herbal cannabis. Heroin, cocaine, and “club drug” usage and prescription drug abuse are also reported across Mozambique’s urban population. The Mozambican Office for the Prevention and Fight Against Drugs (GCPCD) has developed a drug education program for use in schools and with high risk families; the program includes plays and lectures in schools, churches, and other places where youths gather. It has also provided the material to a number of local NGOs for use in their drug education programs. The GCPCD has received some support for community policing and demand reduction from bilateral donors. Drug abuse and treatment options remain limited with the GCPCD providing treatment assistance and reintegration programs for approximately 200 families affected by drug addiction in 2005.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. The USG continues to sponsor Mozambican law enforcement officials and prosecutors to attend regional training programs through the International Law Enforcement Academy (ILEA) for Africa in Botswana. Law enforcement officials have also received training at ILEA New Mexico. The State Department’s Bureau for International Narcotics and Law Enforcement Affairs (INL) provides support to the attorney general’s anticorruption unit and the police sciences academy (ACIPOL) near Maputo. The funds support training, specialized course instruction, instructor development, and curriculum development for ACIPOL. The anticorruption unit, which began operations in November 2002, has received specialized training and advisor visits through the Department of Justice OPDAT (Overseas Prosecutorial Development Assistance and Training) program. In September, the unit was restructured into the Central Office for the Combat of Corruption and received for the first time line item funding from the state budget.

The Road Ahead. The U.S. will continue working with ACIPOL to provide training and technical assistance, in 2006, in the areas of drug identification and investigation, as well as other areas of criminal sciences. The U.S. will conduct a community policing program in Maputo which will include specialized training for police officers and the delivery of 50 special purpose built bicycles. Technical assistance programs at the police academy will focus on methods to foster better relations between the community and the police. Among other topics, courses provided by technical specialists will include drug interdiction. U.S. assistance in support of the anticorruption unit will continue in 2006, with plans to place a short-term regional legal advisor at the unit for a period of six months. The U.S., using State Department funds, is working with the GOM to improve its border security efforts. The U.S. is also supporting the Mozambican authorities in addressing issues of coastal security.

Namibia

I. Summary.

While occasionally used as a drug transit point, Namibia is not a major drug producer or exporter. Statistics for seizures of illegal drugs in 2005 largely mirrored 2004 figures, with approximately \$500,000 worth of drugs (mostly marijuana and Mandrax (methaqualone), along with smaller amounts of cocaine) seized as of November 2005. Drug abuse remains an issue of concern, especially among economically disadvantaged groups. Narcotics enforcement is the responsibility of the Namibian Police's Drug Law Enforcement Unit (DLEU), which lacks the manpower, resources and equipment required to fully address the domestic drug trade and transshipment issues. Namibia is not a party to the 1988 UN Drug Convention

II. Status of Country.

Namibia is not a significant producer of drugs or precursor chemicals. No drug production facilities were discovered in Namibia in 2005.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Namibia has requested United Nations (UNDOC) assistance in completing a National Drug Master Plan, which is still being formulated. While Namibia has not announced plans to become a party to the 1988 UN Drug Convention, many Convention requirements are already reflected in Namibian law, which states that illicit cultivation, production, distribution, sale, transport and financing of narcotics are all criminal offenses. Namibia's Parliament passed two bills designed to combat organized crime, trafficking, and terrorism in 2004, but the required implementing regulations for this legislation have yet to be drafted. Three additional initiatives are still pending parliamentary action. Once fully implemented, the new legislation will allow for asset forfeiture and other narcotics-related prosecution tools.

Law Enforcement Efforts. Namibia fully participates in regional law enforcement cooperation efforts against narcotics trafficking, especially through the Southern African Development Community (SADC) and the Southern African Regional Police Chiefs' Cooperative Organization (SARPPCO). The Minister of Safety and Security and working level officials meet regularly with counterparts from neighboring countries, during which efforts to combat crossborder contraband shipments (including narcotics trafficking) are discussed.

Corruption. As a matter of government policy, the Government of Namibia does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions. Similarly, no senior government official is alleged to have participated in such activities.

Agreements and Treaties. Namibia is not a party to the 1988 UN Drug Convention. However, Namibia is a party to the 1961 UN Single Convention as amended by the 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. Namibia also is a party to the UN Convention Against Transnational Organized Crime and its protocols on migrant smuggling and trafficking in women and children, and to the UN Convention Against Corruption.

Drug Flow/Transit. Namibia's excellent port facilities and road network, combined with weak border enforcement, make it a likely transshipment point for drugs en route to the larger and more lucrative South African market. DLEU (Drug Law Enforcement Unit) personnel believe much of the transshipment takes place via shipping containers either offloaded at the port of Walvis Bay or entering overland from Angola and transported via truck to Botswana, Zambia and South Africa. Personnel constraints, inadequate screening equipment, a lack of training and varying levels of motivation among working-level customs and immigration officers at Namibia's land border posts all prevent adequate container inspection and interception of contraband. Inconsistently applied immigration controls also make Namibia an attractive transit point for Africans en route to Latin America for illicit purposes, as evidenced by the September 2004 discovery of a smuggling ring that specialized in the movement of Tanzanians to Brazil via Namibia.

Domestic Programs (Demand Reduction). Drug treatment programs are available from private clinics, and to a lesser extent from public facilities. The vast majority of treatment cases in Namibia are for alcohol abuse, with the remainder divided evenly between cannabis and Mandrax (methaqualone).

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. The USG continues to offer Namibia opportunities for fully-funded law enforcement training programs at the International Law Enforcement Academy (ILEA) in Gaborone, Botswana. Most of these training programs contain counternarcotics elements, and some narcotics-specific training is also offered. While representatives of several law enforcement agencies (Customs, Immigration, Prison Service) and prosecutors have participated in ILEA training, the Namibian Police have declined to do so. The Namibian Police have repeatedly stated their willingness to cooperate with the USG on any future narcotics-related investigations, and both the DLEU and the Namibian Police Special Branch were extremely cooperative in the September 2004 alien smuggling investigation, but, for whatever reason, they have chosen to pass-up training opportunities, when proffered.

The Road Ahead. The USG will continue to encourage the Namibian Police to take advantage of training opportunities at ILEA Botswana and elsewhere, and will assist the Government of Namibia in any narcotics investigation with a U.S. nexus.

Nigeria

I. Summary

While Nigeria is not an important producer of narcotic drugs, it remains a major transit route for illicit trafficking of narcotics. Available evidence shows that narcotics transiting Nigerian ports and borders reach the United States in amounts sufficient to generate serious concern. Nigeria produces marijuana/cannabis domestically, which is trafficked to the neighboring West African countries and to Europe. Domestic markets for opiates, cocaine and synthetics are small, but growing. Use and demand for marijuana is significant in many cities throughout Nigeria.

Nigeria is party to the 1988 UN Drug Convention. The Nigerian Government has made efforts to stop the transshipment of illicit drugs through Nigeria to other countries. The Nigerian Government established the National Drug Law Enforcement Agency (NDLEA) in 1989. The agency is present in all 36 states of Nigeria, although staffing is uneven throughout the country. The NDLEA lacks an adequate number of personnel to handle all narcotics-related cases, and at times requests special technical assistance from the U.S. Government. The agency is insufficiently funded by the government to handle its most basic priorities, and there have been significant lapses that have hurt the NDLEA's overall performance this year. The agency currently lacks some equipment important to implement its counternarcotics mandate. For example, the seaport unit's boats need outboard motors that function, but the agency has not purchased them. Narcotics-detecting itemizers located at three airports, were donated by the U.S. Government. When U.S.-donated associated consumable supplies were expended, the NDLEA did not purchase additional materials to allow for continued use of the itemizers. They are now idle.

There have been credible allegations of drug-related corruption at NDLEA. However, despite erratic performance, there have been some successes in drug interdiction, mostly at the airports. In late November 2005 NDLEA Chairman Bello Lafiaji was dismissed by President Obasanjo due to allegations of corruption and replaced by Ahmadu Giade, a retired deputy commissioner of police.

II. Status of Country

Nigeria is not a producer of heroin or cocaine, but it is a major drug-transit hub. Heroin transits Nigeria on its way to neighboring countries and the United States. Cocaine transits Nigeria on its way to Southern Africa and Europe. Trafficking of heroin and cocaine into the country is on the increase, organized by Nigerian criminal elements, which play a major role in the worldwide cocaine trade.

The NDLEA is the lead agency charged with drug interdiction, but other agencies are secondarily involved, including the Customs Department, Immigration Department, and the Nigeria Police force (NPF). Heroin and cocaine dominate seizures at the Murtala Mohamed International Airport in Lagos, and other ports of entry to Nigeria. Sale and local consumption of marijuana is on the increase in recent years. The rise in marijuana use domestically in Nigeria is evinced by the increased quantities seized, the number of illicit plots discovered and destroyed, and numbers of arrests made.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The NDLEA did not sustain any major policy initiatives in 2005. A special task force to work with the U.S. and other drug liaison officers was instituted, but quickly disbanded by the

recently dismissed NDLEA Chairman Lafiaji after the Task Force arrested a suspected major drug trafficker in Lagos.

Law Enforcement Efforts. Statistical data from the NDLEA show some progress in drug interdiction, especially at the Lagos International Airport. Apart from the short-lived special task force, the NDLEA did not attempt to develop its capacity to investigate major traffickers or shipments. Rather, the NDLEA's enforcement efforts are concentrated on low-level mules and street traffickers.

Accomplishments. The working relationship between the U.S. Government and the NDLEA this year did not advance to the degree needed to effectively counteract the growing challenges of drug trafficking from Nigeria. In 2005, the NDLEA did not demonstrate significant progress in drug interdiction or in the development of policies aimed at eradicating illicit narcotics trafficking. The NDLEA did participate in a joint international operation to stop a container in a neighboring country. However, the agency did not let the operation continue within Nigerian borders, which could have resulted in arrests in Nigeria. According to NDLEA statistics, the agency made several arrests during the year in which there was a nexus to major sources for heroin, such as Pakistan and Afghanistan, but as a general rule, most enforcement was focused on low-level traffickers and mules, with no enforcement impact on the major traffickers who manage and finance drug trafficking from Nigeria.

Corruption. Corruption is entrenched in Nigerian society, and remains a significant barrier to effective narcotics enforcement. There were serious allegations of corruption in the NDLEA, and the Director of the NDLEA, Dr. Bello Lafiaji, was summarily removed, and replaced by Ahmadu Giade, a retired deputy commissioner of police. Chairman Giade has specific experience in investigating corruption and evidence tampering. It is also fair to say that the Nigerian government intensified its campaign against corruption. This is a general policy, and not specific to drug trafficking. To date, no senior government official has been arrested in connection with drug trafficking, despite some accusations of complicity. There is no evidence of senior government officials facilitating the production, processing, or shipment of narcotics and psychotropic drugs, or other controlled substances. However, there are serious allegations of government officials using their position to discourage the investigation of major traffickers and the prosecution of drug-related cases. Moreover, the quantity of drugs moving through Nigeria, under the control of Nigerian criminal elements, and the absence of any vigorous enforcement efforts against the more senior levels of those involved suggests strongly a certain level of corruption would be necessary to protect those senior level traffickers involved. The NDLEA lacks in-house mechanisms, such as an internal affairs section, to investigate corruption within its own agency.

To combat corruption more generally in Nigerian society, the Nigerian Government established the Independent Corrupt Practices and Other Related Offences Commission (ICPC), through the Corrupt Practices and other Related Offences Act of 2000. The Act prohibits corrupt practices and other related offences, and also provides for punishment for those offenses. Under Section 6, the Commission is empowered to receive and investigate reports of corruption, and where justifiable, prosecute the offenders. It is empowered to educate the public on and against bribery, corruption and other related offences. To date, the Commission has not dealt with any cases related to narcotics trafficking, but has vigorously pursued its mandate to prosecute corruption in other areas of government, despite vigorous attempts by legislators, state governors and some elements in the central government to curtail and frustrate its efforts.

In 2002, the Nigerian Government established the Economic and Financial Crimes Commission (EFCC). The EFCC has not investigated or prosecuted any narcotics-related cases. Similarly, no narcotics-related cases have been prosecuted under the Money Laundering Act of 2004. Major trafficking networks in Nigeria are known to replenish their cache of drugs using elaborate schemes to launder money and legitimize their profits. There are also suspicions of relationships between criminal

elements that run advance fee fraud schemes, the so called “419 Fraud”, and the organized criminal gangs who arrange for large-scale movements of cocaine and heroin.

The NDLEA’s relationships with the Economic and Financial Crimes Commission, Independent Corrupt Practices Commission, Nigerian Customs Department, Nigeria Immigration Department and the Nigeria Police Force have not been optimal; there is little cooperation among the agencies. This failure to cooperate weakens the efforts of all of them.

Agreements and Treaties. Nigeria is party to the 1988 UN Drug Convention, the 1961 UN Single Convention as amended by the 1972 Protocol; and the 1971 UN Convention on Psychotropic Substances. Nigeria is a party to the UN Convention against Transnational Organized Crime and its protocols against migrant smuggling and trafficking in persons. Nigeria also is a party to the UN Convention Against Corruption. The 1931 U.S.-UK Extradition treaty, which was made applicable to Nigeria in 1935, provides the legal basis for U.S. extradition requests. A U.S.-Nigeria Mutual Legal Assistance Treaty (MLAT) entered into force in 2003.

Cultivation /Production. Marijuana/Cannabis is grown all over Nigeria, but mainly in central and northern states. It is also grown in large quantities in Ondo and Delta states in Southern Nigeria. Cultivation is generally on small fields in remote areas. Its market is concentrated in West Africa and Europe; none is known to have found its way to the United States. However, domestic use is becoming more widespread. The NDLEA has destroyed marijuana fields, but has no regular, organized eradication program in place. There are no reliable figures to determine crop size and yields.

Drug Flow/Transit. Nigeria remains a major transit hub for heroin from Asia and cocaine from Asia and South America. Interdictions are mainly at the Murtala Mohamed International Airport in Lagos, which has a digital X-ray machine. The NDLEA also has sniffer dogs, but they are seldom used. Port Harcourt Airport is currently operating more than eight international flights per week, and has been utilized as a new smuggling route. Seaports are believed to be a significant point for drugs to enter and exit Nigeria, but the NDLEA is not present at seaports to enforce narcotics laws, and customs efforts have yielded zero seizures and arrests during the year.

Low-level drug couriers can make as much as \$5,000 per trip, depending on the quantity of drugs transported. Most couriers come from poor backgrounds, earning as little as \$500 a year in normally available employment opportunities in Nigeria and neighboring countries. The amounts that can be earned as drug couriers therefore are attractive to many people. Sentences and jail terms for drug trafficking are relatively light, and do not act as a strong disincentive. Repeat drug offenders are numerous.

Domestic Programs (Demand Reduction). Drug abuse continues to rise in Nigeria. Drugs are abundant, cheap, and readily available on the local market in Nigeria’s large cities. Marijuana, locally referred to as Indian hemp, is the predominant drug. Local cultivation and use are growing problems in Nigeria. Drug treatment is generally not available.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In 2005, the 2002 Letter of Agreement signed between the U.S. and Nigerian Governments for narcotics-related grant assistance was amended for the fifth and sixth times. In 2005, the U.S. Government provided financial assistance in the amount of \$550,000 to the NDLEA, and provided other assistance to the police and to the ICPC.

Bilateral Accomplishments. Since 2001, the NDLEA has not arrested any major traffickers, and has not interdicted any drug shipment larger than 50 kilograms, although there is evidence that many sizeable shipments move through Nigeria. No significant progress has been achieved on goals

identified in the bilateral agreement between the U.S. and Nigerian Governments, with perhaps the exception of progress in community policing in the State of Kaduna and a successful advisory program at the ICPC. The NDLEA has yet to attempt a joint international controlled delivery with the DEA. In 1993, the Nigerian Government established the NDLEA Training Academy, now located in Jos. The Academy sponsors 4, 6 and 9-month training sessions for up to 140 cadets. On occasion, the NDLEA conducts UN-sponsored training for other countries at the Academy. The U.S. Government has assisted the Academy in attaining international standards.

The NDLEA received 60 VHF radios and 2 Base stations through an INL assistance program in August 2001. During INL end-use monitoring in September 2005, the NDLEA could not locate this equipment. Itemizers donated to the NDLEA, and located at the Lagos, Abuja, and Kano airports were not in use, though in excellent working condition. The NDLEA stated they did not have the consumable supplies to put the equipment to use.

The Road Ahead. With new leadership at the NDLEA, Nigeria has signaled its intention to improve its efforts to target major traffickers and to strengthen coordination between NDLEA and U.S., UK and other international drug law enforcement agencies. It is crucially important that the NDLEA make progress against narcotics traffickers, lest the trafficking situation in Nigeria and all of West Africa drift completely out of control.

Saudi Arabia

I. Summary

Saudi Arabia has no appreciable drug production and is not a significant transit country. Under the Saudi Islamic Legal Code, drug trafficking, dealing, and use are strictly prohibited. The Saudi Government places a high priority on combating narcotics abuse and trafficking. Since 1988, the Saudi Government imposed the death penalty for drug smuggling and dealing. However, Saudi officials acknowledge that domestic drug abuse and trafficking have increased. Saudi officials have stated that the flow of drugs across its borders from Iraq and Yemen has increased. Saudi and U.S. counternarcotics officials maintain good relations, and Saudi law enforcement agencies are playing a larger role in regional interdiction operations. Saudi Arabia is a party to the 1988 UN Drug Convention.

II. Status of Country

Saudi Arabia has no significant drug production. This ultraconservative society, in keeping with its conservative Islamic values and its obligations under the 1988 UN Drug Convention, places a high priority on fighting narcotics abuse and trafficking. Narcotics-related crimes are punished harshly, and narcotics trafficking is a capital offense enforced against Saudis and foreigners alike. Saudi Arabia maintains a network of overseas drug enforcement liaison offices and state-of-the-art detection and training programs to combat trafficking. Saudi officials acknowledge that despite improved counternarcotics efforts, incidences of drug trafficking and domestic drug abuse are increasing. The Saudi Government promotes counternarcotics educational campaigns in the media, health institutes, and schools. Government efforts to treat drug abuse exclusively targets male Saudi nationals, who are remanded to one of the nation's four drug treatment centers in Riyadh, Jeddah, Dammam, and Qassim. There are no separate facilities for Saudi women, and expatriate substance abusers are jailed and summarily deported. Heroin and hashish are the most heavily-consumed substances, but Saudi officials report that the use of cocaine, barbiturates, and amphetamines is becoming more widespread.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The Ministry of Interior is the lead agency in Saudi Arabia's drug interdiction efforts and has over 40 overseas liaison officers in countries representing a trafficking threat. In July, the Saudi Council of Ministers passed a new law that provides more flexible and specific sentencing guidelines for drug convictions. The new Anti-Drug and Mental Effects Regulation stipulates the death penalty for Saudi drug traffickers, manufacturers, and recipients of any banned drug substances, but also allows Saudi courts to reduce a death sentence to a minimum of 15 years imprisonment, corporal punishment that consists of a maximum of 50 lashes per session, and a minimum fine of SR100,000 (\$26,667). Previously used regulations, which were based on religious edicts (fatwas) issued by the committee of senior scholars, failed to set maximum and minimum punishments for drug offenders, and relied on the judge's judgment for sentencing. The new law also offers treatment to Saudi drug dealers or users who surrender to Saudi law enforcement authorities.

Law Enforcement Efforts. The Saudi Government continues to play a leading role in efforts to enhance intelligence sharing among the six nations of the Gulf Cooperation Council. Additionally, Saudi and U.S. drug enforcement officials regularly exchange information on narcotics cases. Drug seizures, arrests, prosecutions, and consumption trends are not matters of Saudi public record, in

keeping with the general Saudi practice for all criminal matters. Saudi interdiction efforts tend to focus more on individual carriers than on follow-on investigations designed to identify drug distributors and regional networks.

Corruption. As a matter of government policy, Saudi Arabia does not encourage or facilitate the illicit production or distribution of drugs or substances, or the laundering of proceeds from illegal drug transactions.

Agreements and Treaties. Saudi Arabia is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by its 1972 Protocol. Saudi Arabia has signed, but has not yet ratified, the UN Convention against Corruption, and is a party to the UN Convention against Transnational Organized Crime. The Saudi Government has signed bilateral agreements on drugs with Yemen, Pakistan, Libya, Turkey, the Czech Republic, and Iran.

Cultivation/Production. Cultivation and production of narcotics in Saudi Arabia is negligible.

Drug Flow/Transit. Saudi Arabia is not a major transshipment point. Due in part to new detection techniques employed at major points of entry, seizures of narcotics (coming primarily from Pakistan, Nigeria and Turkey) have increased. Saudi officials have expressed concern to U.S. officials about the increase of drugs coming from Yemen, Iraq, and Bahrain. This supports anecdotal evidence that suggests narcotics trafficking is a growing problem via the country's land borders.

Domestic Programs (Demand Reduction). In addition to widespread media campaigns against substance abuse, the Saudi Government sponsors drug educational programs directed at school-age children, health care providers, and mothers. The country's conservative religious establishment actively preaches against narcotics use and Government treatment facilities provide free counseling only to male Saudi addicts. As noted above, there are four drug treatment in Riyadh, Jeddah, Dammam, and Qassim.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. Saudi officials actively seek and participate in U.S.-sponsored training programs and are receptive to enhanced official contacts with DEA. DEA officials work closely with Saudi officials.

The Road Ahead. The U.S. will continue to explore opportunities for additional bilateral training and cooperation.

Senegal

I. Summary

Counternarcotics elements of the Senegalese government remain concerned about the production and trafficking of cannabis, and to a lesser degree, hashish. Small quantities of cocaine and heroin are seized on an infrequent basis. Senegalese authorities have been active in pursuing bilateral cooperation against international traffickers, including signing mutual assistance agreements with France and the UK. Education and strict enforcement of drug laws remain cornerstones of Senegal's counternarcotics goals. Senegal is a party to the 1988 UN Drug Convention.

II. Status of Country

Dakar's position on the west coast of Africa and the presence of an international airport and seaport make it an enticing transit point for drug dealers. The seaport of Dakar and the international airport are the two principal points of entry/exit of drugs in Senegal.

Senegalese authorities state that, because there is not a direct flight from South America, Cape Verde and Guinea Bissau serve as way stations for cocaine bound for Senegal.

While trafficking of all types of drugs, including heroin, cocaine and psychotropic depressants, exists in Senegal, it is cannabis production and trafficking that has continued to stymie most enforcement efforts. Southern Senegal's Casamance region is at the center of the cannabis trade. During 2005 the peace process in the Casamance continued and more areas were opened to agricultural development. It is generally acknowledged that a portion of this development is illicit cannabis cultivation. Police are reluctant to undertake greater enforcement efforts against cannabis cultivation in the Casamance for fear of hampering ongoing peace negotiations. Senegal also serves as a transit country for traffickers due to its location, infrastructure and porous borders. Efforts to tighten security at the Dakar international airport and maritime port have been reasonably effective. However, drug enforcement efforts remain under-funded and undermanned, allowing the illegal cannabis trade and trafficking to continue.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Senegal developed a national plan of action against drug abuse and the trafficking of drugs in 1997. Multidisciplinary in its approach, Senegal's national plan includes programs to control the cultivation, production, and traffic of drugs; inform the population of the dangers of drug use; and reintroduce former drug addicts into society. Full implementation of this plan remains stalled due to funding constraints.

Periodic efforts to improve coordination have also been hampered because of insufficient funding.

Law Enforcement Efforts. The amount of hard drugs seized by police in Senegal is small by international standards. Due to weak enforcement efforts and inadequate record keeping, it is impossible to assess accurately the real drug problem in the country. Police lack the training and equipment to detect drug smuggling. Historically, Senegal has undertaken few cannabis eradication efforts. As previously mentioned, police forces feel constrained in their efforts to eradicate cannabis cultivation in the southern part of the country because of ongoing peace negotiations between insurgents and the central government. Meetings have been organized, though, with island populations

in the south in accordance with the UN Program for International Control of Drugs to promote substitution of cannabis cultivation with that of other crops.

Corruption. The USG is unaware of any narcotics-related corruption at senior levels of the Senegalese government. The GOS does not, as a matter of government policy, encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions. No senior GOS officials engage in, encourage or facilitate the illicit production or distribution of such drugs or substances, or the laundering of proceeds from illegal drug transactions.

Agreements and Treaties. Senegal is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention on Narcotic Drugs, as amended by the 1972 Protocol. Senegal is a party to the UN Convention Against Corruption. Senegal also is a party to the UN Convention Against Transnational Organized Crime and its protocols against migrant smuggling and trafficking in persons.

Cultivation/Production. Although cannabis cultivation in Senegal is not a large problem in relation to the global cultivation of the drug, it could become a serious internal drug problem for Senegal. As mentioned above, efforts to eradicate cannabis cultivation are hampered by the civil conflict in the Casamance region.

Drug Flow/Transit. According to the Chief of OCRTIS (Office Central de Repression du Trafic Illicite), the trend in the amount of illicit drugs transiting through Senegal is increasing. OCRTIS is monitoring the transshipment of hashish and cocaine through Senegal. The U.S. is not a destination point for these drugs.

Domestic Programs. NGOs, such as the Observatoire Geostrategique des Drogues et de la Deviance (OGDD), have taken the lead in public education efforts. OGDD continued a program that began in 2001. The first phase involved a campaign of information targeted at cannabis cultivators, arguing that the land had greater potential if it were used for purposes other than drugs, that drugs were bad for the environment and health, and that drugs were degrading the economy. Village committees have been established to convey the above information to sensitize people to the problems associated with drug use.

The focus of the second phase of the program is to encourage farmers to substitute alternative crops for drugs on their land. Due to funding constraints, however, implementation of this part of the program has been impeded. Other associations for the prevention of drug abuse are in the process of elaborating a program of drug prevention under the auspices of the International Committee for the Fight Against Drugs, which is managed by the Ministry of the Interior.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. USG goals and objectives in Senegal are to strengthen law enforcement capabilities in counternarcotics efforts. In 2002 the USG started a program to train counternarcotics agents in drug investigation and interdiction methods under the State Department's Bureau for International Narcotics and Law Enforcement Affairs (INL). The program provided \$220,000 for several law enforcement programs that will aid the police in all aspects of narcotics investigations and prosecutions. Additionally, the USG is in the fifth year of continued training to the technicians at the National Drug Laboratory that was founded with basic drug analysis equipment and training provided by INL.

The Road Ahead. The USG will continue to work closely with the Senegalese government to improve the capacity of its narcotics law enforcement officers to investigate and prosecute narcotics crimes.

South Africa

I. Summary

South Africa is committed to fighting domestic and international drug trafficking, production, and abuse. The country is an important transit area for cocaine (from South America) and heroin (from the Far East) primarily destined for Southern African and European markets. South Africa is a large producer of cannabis (the world's fourth largest according to the South African Institute for Strategic Studies), most of which is consumed in the Southern African region, but at least some of which finds its way to Europe (UK). It also may be the world's largest consumer of mandrax, a variant of methaqualone, an amphetamine-type stimulant. Mandrax is the preferred drug of abuse in South Africa; it is smuggled, primarily from India, but also from China and other sources. Mandrax is the single most important money-earner for indigenous South African organized crime. According to the Organized Crime Threat Analysis prepared by the South African Police, 369 organized crime groups operate in South Africa; 132 of these crime groups are involved in drug trafficking. Of the 369 criminal groups, 211 were broken-up by enforcement pressure and 158 are still under investigation. Most of those syndicates are foreign—primarily Nigerian, followed by the Pakistani and Indian syndicates. Chinese Triads are also present. The Prevention of Organized Crime Act (POCA, 1988), particularly its asset forfeiture section, has become a useful tool for law enforcement. South Africa is a party to the 1988 UN Drug Convention.

II. Status of Country

South Africa's transition to democracy and its integration into the world economy were accompanied by the increased use of its territory for the transshipment of contraband of all kinds, including narcotics. An overloaded criminal justice system, straining hard just to deal with "street crime," makes South Africa a tempting target for international organized crime groups of all types. South Africa has the most developed transportation, communications and banking systems in Sub-Saharan Africa. The country's modern telecommunications systems (particularly cell telephones), its direct air links with South America, Asia and Europe and its permeable land borders provide opportunities for regional and international trafficking in all forms. The sanctions busting practices so prevalent in the apartheid era have continued under a different guise: instead of the embargoed items, drugs and other illicit items are now smuggled into and out of South Africa. Narcotics trade has become very profitable for organized crime syndicates and they have become heavily involved in stealing vehicles and trading them across South Africa's land borders for narcotics. South Africa is both an importer and an exporter of drugs (marijuana produced on its own territory).

Despite the progress South Africa has made coping with organized crime, South Africa is the origin, the transit point or the terminus of many major drug smuggling routes. Cannabis, for instance is cultivated in South Africa, and also imported from neighboring countries (Swaziland, Lesotho, Mozambique, Zimbabwe), exported to some of the neighboring countries (e.g. Namibia) and Europe (mainly Holland, UK) and, of course, consumed in South Africa. LSD is imported from Holland. Methamphetamine is manufactured in South Africa for local consumption. Both heroin and cocaine are imported into South Africa (from Asia and Latin America respectively), and also exported to Europe, Australia and even the U.S. and Canada. Cocaine from Bolivia and Peru goes through Colombia to Brazil and Argentina, then to South Africa via Portugal or Angola or directly to Johannesburg. To stop some of this trafficking, South Africa needs, in addition to its own efforts, increased international cooperation and assistance.

Although South Africa continues to rank among the world's largest producers of cannabis, this production does not have a significant effect on the U.S. In terms of use of narcotics, heroin is a particularly dangerous new trend among South Africans (who traditionally only used "dagga," the local name for marijuana). The "South African Community Epidemiology Network on Drug Use" (SACENDU) reported that although alcohol remains the dominant substance of abuse, cannabis and Mandrax alone or in combination continue to be significant drugs of abuse. SACENDU also noted that heroin seems to be the primary drug of abuse in Cape Town, Gauteng and Mpumalanga. On the other hand, "club drugs" and methamphetamine abuse is low except in Cape Town where the increase in treatment demand for methamphetamine was dramatic. Methamphetamine has emerged as the main substance of abuse among the young in Cape Town, with two-thirds of drug abusers having it as a primary or secondary substance of abuse.

South Africa is becoming a larger producer of synthetic drugs, mainly mandrax, with precursor chemicals smuggled in and labs established domestically. As in 2004, a number of labs were dismantled in 2005. The SAPS (National Police Service) Annual Report for 2004-2005 reported that 48 clandestine narcotics laboratories were detected and dismantled. Police reported that because of this crackdown, labs were increasingly established on farms, making it more difficult for the police to find and destroy them.

III. Country Actions Against Drugs in 2005

Policy Initiatives. Combating the use of, the production of, and the trafficking in illicit narcotics is an important component of the anticrime agenda of the South African Government (SAG). As a practical matter, however, the SAG tends to target its limited anticrime resources on serious, violent and domestic crime. South Africa has one of the world's highest rates of murder and rape. The porous borders are crossed daily by criminals trafficking in all sorts of contraband, including illicit drugs, stolen cars, illegal firearms, diamonds, precious metals, and human beings. The Cabinet interagency "Justice Cluster" works to help coordinate the law enforcement and criminal justice system's response to those challenges. The Narcotics Bureau was integrated into the police organized crime units in 2003. There is also a Central Drug Authority. Other SAG agencies involved in counternarcotics efforts include, to a lesser or a greater degree, the Home Affairs Department, the National Prosecuting Authority and its Directorate of Special Operations (popularly known as "The Scorpions"), the Customs Service, and the Border Police (a part of SAPS). The U.S. helped in the training of the DSO. The Border Police have 55 land border posts, 10 air-border posts and 9 sea-border posts. Intelligence organizations and the port and airport authorities also have a role in identifying and suppressing drug trafficking. The SAPS 2004/2005 Annual Report states that its first operational priority is to address organized crime by focusing on criminal organizations involved in crimes related to drugs, firearms, vehicles, human trafficking, human organ trafficking, prostitution, endangered species, precious metals and stones.

Law Enforcement Efforts. Although the value of drug seizures according to the SAPS Annual Report for 2004/2005 decreased as compared to those in the period 2003/2004 (from over 3 billion Rands to 675 million Rands), arrests increased from 376 to 401 at the border. SAG authorities, on occasion working closely with other nations to include the U.S., achieved one success—the total street value of drugs seized by various law enforcement agencies during the period April 2004 to March 2005 was over \$12 million.

The SAPS Annual Report (covering the fiscal year from April 1, 2004, to March 31, 2005, and published in August) did not provide seizures of drugs by name. The number of detected drug-related crimes, according to the annual SAPS Report, grew in 2005 to 180.3 per 100,000 of population (from 135.1 in the previous year), or, a 33.5 percent increase over 2004. Border Police made 401 arrests, and

confiscated drugs worth \$112 million. During this period the biggest increase in reported arrests was in respect of drug-related crimes, with 21,243 more arrests reported, or a 33.85 percent increase over the previous year. About 90 percent of those crimes are presented to courts. The conviction rate is about 70 percent (i.e. relatively high).

Additional successes were reported in the press. On May 1 South Africa's Department of Foreign Affairs confirmed that 865 South African "drug mules", i.e., couriers were incarcerated in other countries. The highest number was in Brazil (118) followed by Peru (70), Argentina (51) and Venezuela (36). A 40-year old South African was jailed for life in Indonesia for attempting to smuggle 1.1 kilograms of heroin into Bali. The head of SAPS Narcotics Bureau confirmed that the trend of South Africans being used as mules is on the increase. On July 21, the National Director of Public Prosecutions Vusi Pikoli officiated over the destruction of 45 tons of mandrax powder at Springs on the East Rand seized in 2004 in Durban, with a street value of over \$200 million. SAPS officers in July seized 118 bags of marijuana, with a street value of \$400,000, near the Peka Bridge border post with Lesotho. In April police seized 200 kilograms of dagga near the Swaziland border (street value of \$66,670) and arrested three men. SAPS and members of the South African National Defense Force in April searched a number of schools for drugs. Police said this was part of their Operation Toxic Algae aimed at rooting out drug use. In June, Durban police officers confirmed that the city is a popular distribution point for dagga throughout the country and the rest of the world. Police reported arresting two men with two tons of compressed dagga (with a street value of \$15 million).

Corruption. The Annual Report by the Independent Complaints Directorate (ICD) for 2004-2005 reported an 8 percent decrease in misconduct complaints lodged against police officers. ICD reports that police were found not to be accountable for 80 percent of allegations of criminality made against them. Accusations of police corruption are frequent although the experience of enforcement officers working from the U.S. Embassy is that many of the failures and lapses by the police can be attributed to a lack of training and poor morale. Credible evidence of narcotics-related corruption among South African law enforcement officials has not been brought to light. Some suspect that the reported quantities of seized drugs are lower than actual seizures, and that the difference finds its way back out on the street. Some amount of corruption among border control officials does appear to contribute to the permeability of South Africa's borders.

Agreements and Treaties. South Africa is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. South Africa is a party to the UN Convention Against Corruption, and is also a party to the UN Convention against Transnational Organized Crime and its protocols against trafficking in persons, migrant smuggling and illegal manufacturing and trafficking in firearms. The U.S. and South Africa have bilateral extradition and mutual legal assistance agreements in force, as well as a Letter of Agreement on Anticrime and Counternarcotics Assistance. The Letter of Agreement provides for U.S. training and commodity assistance to several South African law enforcement agencies. In 2000 the U.S. and South Africa signed a Customs Mutual Assistance Agreement, which is not yet in force.

Cultivation/Production. Cannabis or "dagga" grows wild in Southern Africa and is a traditional crop in many rural areas of South Africa, particularly the Eastern Cape and Kwa-Zulu Natal provinces. It also grows wild and is cultivated in neighboring Swaziland and Lesotho. It is possible to have three cannabis crops a year in South Africa. Most South African cannabis is consumed domestically or in the region. Increasing amounts are, however, being seized in continental Europe and the UK. Some estimates are that 20,000 to 30,000 hectares of SA arable land are used to grow cannabis, although most observers estimate the area dedicated to illicit cannabis to be about 1500-2000 hectares. Although the police force, with some success, sprays cannabis in South Africa, Swaziland, and Lesotho, illicit street prices never seem to rise—an indication of uninterrupted supply.

Mandrax, amphetamine and methamphetamine are also produced in South Africa for domestic consumption. Among South Africans, “dagga” and mandrax are the traditional drugs of choice; in more recent years, there has been rising interest in domestically produced ATS and imported heroin.

Drug flow/Transit. Significant amounts of cocaine reach South Africa from South America. Cocaine is constantly available on the local illicit market. Cocaine is mainly brought in by Nigerian syndicates, or the people who work for them. South Africa, once a country of transshipment, has become a country with its own market. The consumption of cocaine, both powder and crystalline (“crack”), is on the increase. Heroin is smuggled into South Africa from Southeast and Southwest Asia, with some moving on to the U.S. and Europe. Thus, South Africa is also a country of transshipment of heroin. According to a UN study, however, most heroin trafficked into South Africa is intended for domestic consumption. Consumption of heroin among South African youth has increased with the advent of smokable heroin. South Africans do not like injectable drugs of any kind, although there are cases of people injecting heroin. An additional risk in terms of intravenous drug abuse is, of course, HIV/AIDS, a major health issue in South Africa. South Africans also import “dagga” from Swaziland and Lesotho, considering it to be of higher quality than the domestic version. Abuse of methaqualone (Mandrax) and other ATS tablets is on the rise too, especially among urban youth. Even ecstasy finds its way into townships. Diverted precursor chemicals, some produced locally and some imported into South Africa, are also a growing problem. Many drug liaison officers, as well as South African Police Service officers, believe that South Africa is becoming a place for traffickers to warehouse their stocks of various drugs before sending them on to other countries. They believe that criminals view South Africa as a “weak enforcement” option for such warehousing operations. Nigerian, Pakistani, Indian, Colombian, Venezuelan, and Chinese syndicates are all taking advantage of South Africa that, in addition to “weak enforcement,” has excellent financial, transportation, and communications facilities. The 2004-2005 SAPS report states that a SAPS chemical monitoring program to prevent the diversion of chemicals for the manufacture of illicit drugs, checked 337 import notifications of precursors to South Africa. 245 export notifications of precursor chemicals were forwarded to relevant foreign authorities. Traffickers of Nigerian origin may be the most organized of organized crime groups operating in South Africa. Using South Africa as their base for world wide operations, they are involved in virtually every aspect of drug trafficking.

Domestic Programs. South Africa has had a long history of mandrax and “dagga” (cannabis) abuse; drug counselors have noted in the past two to five years large increases in the number of patients seeking treatment for crack and heroin addiction. SAG treatment facilities and nongovernment drug rehabilitation agencies have seen their allotments for treatment cut the last four to five years. There are many people seeking treatment who are unable to register with any program, and those who manage to enter a rehabilitation program find that available services are constrained by lack of resources. Education of the public at large about the dangers of drug addiction remains a high priority for the government. SAPS is continuing its visible crime deterrence policy by organizing visits and counternarcotics lectures in more than 35,000 schools; and the National Awareness Program, sponsored by the United Nations Office for Drug Control and Crime (UNODC), the Department of Safety and Security and the Central Drug Authority, and originally launched in Cape Town in 2003, continues to present facts on drugs and their dangers to young people, students and others, under the slogan “Ke Moja” (“No Thanks, I’m Fine!”).

Certain successes have been achieved within the correctional system as well, mainly through efforts of NGOs. In South African prisons, up to 70 percent of inmates are drug users (with an even higher percentage among those awaiting trial), according to NGO contacts. Among the main rehabilitation programs organizers is KHULISA, an NGO partly funded by State Department narcotics assistance. “Peer” counselors, trained by KHULISA within the prison system, continue to organize

counternarcotics lectures and seminars for inmates. Some of the government-employed prison officials have also received basic training in this area.

IV. U.S. Policy Initiatives and Programs.

Policy Initiatives. U.S. law enforcement officers from the DEA, FBI, DHS (Customs/ Immigration), the Secret Service and the State Department successfully cooperate with their South African counterparts. The U.S. also urges the SAG to strengthen its legislation and its law enforcement system and thus become able to prosecute more sophisticated organized criminal activities, including drug trafficking. The Scorpions, with U.S. training, have targeted organized crime and high-profile crime of all sorts. Some training has also been provided to the national police, the metropolitan police forces of Johannesburg and Tshwane (Pretoria), the Special Investigating Unit, the Department of Home Affairs, the Customs and Revenue Service, and others.

The Road Ahead. Bilateral links between the United States and South African law enforcement communities are in the interest of both countries and even closer cooperation is needed. Assistance from the U.S. and other donors is essential to help develop the law enforcement system in South Africa.

Syria

I. Summary

In 2005, the Government of the Syrian Arab Republic (SARG) continued to give a high priority to, and devoted significant resources to combating the drug trade. Although drug seizures increased, domestic usage was negligible. Syria remains an important transit country, with a pronounced increase this year in the quantity of illegal narcotics passing through the country. Jordan and the Gulf States remain the primary destinations for drugs transiting from Lebanon and Turkey. Syria continues to have a close working relationship with Saudi Arabia and Jordan, but counternarcotics cooperation with Lebanon has deteriorated since the Syrian withdrawal from Lebanon in April 2005. Syria's domestic drug abuse problem remained small, due largely to the active enforcement of existing laws and the cultural and religious norms that stigmatize substance abuse. Syria is a party to the 1988 UN Drug Convention.

II. Status of Country

Most narcotics transiting Syria go to other parts of the region and to Europe. Syria is a transit country for hashish, cocaine, and heroin, particularly from Turkey, but also from Lebanon. Syria is also a transit country for Captagon (fenethylamine), a synthetic amphetamine-type stimulant. Captagon originates in Eastern Europe, primarily Bulgaria and Romania, and is destined for the Gulf Countries, mainly Saudi Arabia via Turkey and Syria. As in 2004, the domestic production of hashish has continued to increase significantly, while production of opium has decreased slightly. Since the withdrawal of Syrian troops from Lebanon, the cooperation between the two countries has diminished.

III. Country Actions Against Drugs in 2005

Policy Initiatives. In 2005, Syrian officials implemented a 2002 draft decree providing financial incentives of up to several million Syrian pounds (\$1 = 57 Syrian Pounds) to anyone providing information about drug trafficking and/or cultivation in Syria. In 2002, Syria upgraded the Counternarcotics Unit from a branch to a directorate of the Interior Ministry. The government also opened regional counternarcotics offices in Aleppo province, covering the Turkish border, and in Homs province, to monitor the Lebanese border, and eventually plans to open offices in every province. A new police facility for the Syrian Anti-Narcotics Department is set to begin construction in Damascus. This new facility will also house the country's primary drug lab.

Law Enforcement Efforts. Syrian officials characterized cooperation on drug issues with neighboring Saudi Arabia and Jordan as excellent. Relations with Lebanese and Iraqi officials are strained. Syria has strict sentencing guidelines and offers the death penalty for trafficking-type drug offenses. Syria has legislation that provides for seizure of assets financed by profits from the drug trade. The SARG has used this legislation to seize assets. In 2005, hashish, opium, heroin, and cocaine seizures all increased. Seizures of Captagon tablets have also increased significantly this year:

Corruption. The SARG has an Investigations Administration (Internal Affairs Division) responsible for weeding out corrupt officers in the counternarcotics unit and the national police force. The Investigations Administration is independent of both the counternarcotics unit and the national police and reports directly to the Minister of the Interior. According to Syrian authorities, there were no arrests or prosecutions of officers in the counternarcotics unit for corruption in 2005.

Agreements and Treaties. Syria is a party to the 1988 UN Drug Convention, the 1961 Single Convention on Narcotic Drugs as amended by its 1972 Protocol, and the 1971 Convention on Psychotropic Substances. Syria has signed, but not yet ratified the UN Convention against Transnational Organized Crime and the UN Convention against Corruption.

Cultivation/Production. The SARG has an effective counternarcotics system in place that has reduced cultivation and production in Syria to negligible levels. However, as noted, the production of hashish has continued to increase significantly, while production of opium has decreased slightly.

Drug Flow/Transit. Drug interdiction remains the focus of the Syrian counternarcotics effort. Syrian officials estimate that in 2005, the overall flow of illegal narcotics transiting Syria and destined for other countries had increased. Transshipment of narcotics from Turkey continues to represent the major challenge to Syria's counternarcotics efforts, as the porous Turkish/Syrian border continues to pose a problem by providing an easy entry point for drugs being smuggled into Syria. Narcotics coming from Iraq are transported into Syria either directly or via Jordan. The SARG's reported seizure statistics suggest that either the overall flow of narcotics has increased, or that SARG counternarcotics efforts have been more effective. Main shipment routes include the transit of hashish and cocaine through Syria to Europe and other countries in the region, of opium transiting from Pakistan and Afghanistan through Syria to Turkey, and of Captagon pills transiting from Turkey through Syria to Saudi Arabia. There were also reports of an increase in drug transit from Iran to Syria via Iraq, predominantly for onward shipment.

Domestic Programs. Due to the social stigma attached to drug use and stiff penalties under Syria's strict counternarcotics law, the incidence of drug abuse in Syria remains low. The SARG's counternarcotics strategy, which is coordinated by the Ministry of the Interior, uses the media to educate the public on the dangers of drug use, and drug awareness is also part of the national curriculum for school children. The Ministry also conducts awareness campaigns through university student unions and trade unions.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In meetings with Syrian officials, DEA officials continue to stress the need for diligence in preventing narcotics and precursor chemicals from transiting Syrian territory and the necessity of terminating any involvement, active or passive, of individual Syrian officials in the drug trade.

Bilateral Cooperation. DEA officials based in Nicosia maintain an ongoing dialogue with Syrian authorities in the Counternarcotics Directorate. Syrian Ministry of Interior officials characterize cooperation with the Nicosia DEA office as excellent.

The Road Ahead. The U.S. will continue to encourage the SARG to maintain its commitment to combating drug transit and production in the region; to implement regulations and establish a financial intelligence unit to actualize their new anti-money laundering law; and to improve its counternarcotics cooperation with neighboring countries.

Tanzania

I. Summary

Tanzania is located along trafficking routes linking Asia and the Middle East to South Africa, Europe and, to a lesser extent, the United States. Drugs like hashish, Mandrax, cocaine, heroin and opium have found their way into and through Tanzania's porous borders. In addition, the domestic production of cannabis is a significant problem. As a result, drug abuse, particularly involving cannabis, cocaine and heroin, is gradually increasing, especially among younger, more affluent people and in tourist areas. Tanzanian institutions have minimal capacity to combat drug trafficking, and corruption reduces that capacity still further. Tanzania is a party to the 1988 UN Drug Convention, and in conjunction with UNODC, is seeking to address objectives of that convention.

II. Status of Country

Until 1989, Tanzania's contact with drugs was largely limited to the traditional cultivation of cannabis in some parts of the mainland. Since then, economic liberalization has brought increased affluence to the expatriate community and some urban Tanzanians. This affluence has driven demand for new drugs like Mandrax, cocaine, heroin, and opium, which have found their way through Tanzania's porous borders ever higher. The domestic production of cannabis and drug abuse among younger people is increasing. Substances commonly abused are the more affordable cannabis and Mandrax, but hard drugs like heroin and cocaine, including some crack cocaine (crystallized), are used in small quantities within the affluent classes. The growth of the tourism industry, particularly in Zanzibar, has increased demand for narcotics there, as has drug smuggling along Tanzania's largely un-patrolled coast.

Tanzania is located along trafficking routes with numerous possible points of illegal entry. The drugs originate from Afghanistan, Pakistan, India, Thailand, Burma, and South America en route to Europe, South Africa and, to a lesser extent, the U.S. Drugs enter Tanzania by air, sea, roads and rail. Major points of entry include airports in Dar es Salaam, Zanzibar and Kilimanjaro, and seaports at Dar es Salaam and Zanzibar, as well as smaller ports like Tanga and Mtwara.

Local authorities believe that traffickers conduct a significant amount of narcotics smuggling off-shore in small "dhow" boats that never stop in ports. Anecdotal evidence suggests surveillance at the airports has improved, which may have the effect of driving trafficking to minor ports and unofficial entry points. During the year, there were reports of "mules" (paid narcotics couriers, who frequently ingest the narcotics they carry) carrying hard drugs into and out of Tanzania. An increasing trend is the use of Tanzanian land border patrols to enter neighboring countries, especially Kenya and Malawi, to catch international and regional flights.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The government did not introduce new initiatives in 2005. In 2004, the Ministry of Home Affairs (on behalf of the counternarcotics unit of the police force) submitted suggestions for amending counternarcotics legislation by increasing penalties and revising asset seizure laws. The government has yet to act on these suggestions. In 2003, the House of Representatives in Zanzibar passed their own Prevention of Illicit Traffic and Drugs Act, which puts Zanzibar narcotics law and sentencing in line with that of the mainland.

Law Enforcement Efforts. Law enforcement officials have increased their efforts to combat narcotics trafficking and made sporadic seizures during the year. Police continued cannabis eradication efforts, and uprooted 50 tons of virgin cannabis in Arusha in October 2005. Tanzania's counternarcotics police force consists of 75 officers in three branches located in Dar es Salaam, Zanzibar and Moshi. Additionally, more than 300 regional officers throughout the country have received counternarcotics training. However, because of the still limited training and operational capabilities of its counternarcotics officers, Tanzania's efforts against narcotics are narrowly focused on street pushers and individual "mule-carriers" and are not effective at limiting narcotics trafficking. While increasing the number of smugglers apprehended, Tanzanian law enforcement has not been able to translate small seizures into the prosecution of top leaders of organized rings.

Senior Tanzanian counternarcotics officials acknowledge that their officers are under-trained and under-resourced. For example, the harbor unit lacks modern patrol boats and relies on modified traditional wooden dhows to interdict smugglers. As a result of the lack of training and resources, Tanzanian officers and police staff do not effectively implement profiling techniques and seize large amounts of narcotics. Narcotics interdiction seizures generally result from tip-offs from police informants. Moreover, low salaries for law enforcement personnel provide a good deal of impetus to engage in corrupt behavior. The Dar es Salaam police force called on members of the public to cooperate with the police in addressing the illicit drug trade. Formal cooperation between counternarcotics police in Kenya, Uganda, Rwanda and Tanzania is well established, with bi-annual meetings to discuss regional narcotics issues. This cooperation has resulted in significant increases in effectiveness in each nation's narcotics control efforts. The Criminal Investigative Police reported that just over 5.5 kilograms of drugs were intercepted from January to November 2005

Corruption. Neither the government nor senior officials encourage or facilitate the production or distribution of illicit drugs; however, pervasive corruption continued to be a serious problem in the Tanzanian Police Force. It is widely believed that corrupt officials at airports facilitate the transshipment of narcotics through Tanzania. There is no specific provision of the anticorruption laws regarding narcotics-related cases, and few corruption cases are prosecuted. Many believe that corruption in the courts leads to light sentencing of convicted narcotics offenders. Prosecutors complain that many "swallowers" arrested at ports of entry will plead "not guilty" at first until there has been time to pay off the magistrate. Once confident of the magistrate's help, the suspect changes his plea to guilty, and the magistrate sentences with fines only and no jail time.

Agreements and Treaties. Tanzania is a party to the 1988 UN Drug Convention. Tanzania also has signed the Southern African Development Community (SADC) Protocol on Drug Control, and the Protocol on Combating Drug Trafficking in the East African Region. The 1931 U.S.-U.K. Extradition Treaty is applicable to Tanzania.

Cultivation and Production. Traditional cultivation of cannabis takes place in remote parts of the country, mainly for domestic use. No figures on production exist, but police and government officials report that production continues to increase. Given the availability of raw materials, and the simplicity of the process, it is possible that some hashish is also produced domestically. Police have seized equipment used to manufacture Mandrax from clandestine laboratories in Dar es Salaam, suggesting continued efforts to establish domestic production. Most other illegal drugs in Tanzania are probably produced elsewhere.

Drug Flow/Transit. Due to its location and porous borders, seaports and airports, Tanzania has become a significant transit country for narcotics moving in sub-Saharan Africa. Control at the ports is especially difficult due to the combination of sophisticated methods of forging documents, poor controls, and untrained and corrupt officials. Afghan heroin entering Tanzania from Pakistan is smuggled to the U.S. by Nigerian traffickers in small quantities. Traffickers from landlocked countries

of Southern Africa, including Zambia, use Tanzania for transit. The port of Dar es Salaam is a major entry point for Mandrax from India headed towards South Africa. An increasing number of Tanzanians are being recruited for trafficking. Tanzanian smugglers have been arrested coming into Tanzania through the land borders with Kenya and Malawi, after having arrived at international airports from Brazil, Pakistan or the United Arab Emirates. They are thought to have planned to “unload” the drugs so another mule could smuggle them to Europe or the U.S. This trend suggests a growing local trafficking organization.

Domestic Programs/Demand Reduction. Recent trends indicate an increase in consumer use, particularly of the lower cost drugs. The spill-over from trafficking and increased tourism both have contributed to an increase of domestic demand. The tourist industry has brought ecstasy (MDMA) to Zanzibar, and police reports confirm that crack cocaine is available locally. The Prime Minister’s Office manages a very small demand reduction program, and the police have a public sensitization program. Generally, addicts are either arrested or placed in psychiatry wards of public hospitals.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. U.S. policy initiatives and programs for addressing narcotics problems in Tanzania focus on training workshops and seminars for law enforcement officials. State Department law enforcement assistance includes funding the establishment of a forensics lab and training in its use. At the GOT’s request these facilities will include narcotics analysis capabilities. The State Department’s counterterrorism bureau is funding the “PISCES” (Personal Identification Secure Comparison System) program to improve interdiction capabilities at major border crossings. While the program targets terrorist activities, it has implications for narcotics and other smuggling as well.

The Road Ahead. U.S.-Tanzanian cooperation is expected to continue, with a focus on improving Tanzania’s capacity to enforce its counternarcotics laws.

Togo

I. Summary

Togo is not a significant producer of drugs and its role in the transport of drugs is primarily regional. During 2005, however, the drug trade, particularly of hard drugs, increased substantially. The Togolese drug trade is dominated by Nigerian traffickers. Lome remains a spoke in the Nigerian hub of narcotics trafficking and money laundering. Togo's ability to address the transnational flow of drugs is undercut by its stalled democratic transition and its long, porous borders. Togo is a party to the 1988 UN Drug Convention.

II. Status of Country

Drug abuse by Togolese citizens and crimes resulting from drug abuse are not numerous. There are three agencies responsible for drug law enforcement: the police, the gendarmerie, and customs. The only locally produced drug is cannabis and approximately one to two metric tons are seized each year. Heroin and cocaine, while not produced in Togo, are available, coming through the Port of Lome—the heroin smuggled from Afghanistan and the cocaine transported from South America. In 2005 Togolese authorities seized 7 kilograms of heroin valued at \$3 million, 17 kilograms of cocaine (value unknown), and six grams of “crack cocaine” (value unknown). Lome serves as a transit point for drugs on their way to Nigeria, Burkina Faso, northern Ghana, and Niger. Togolese are not significant consumers. The great majority of smugglers are long-term Lebanese residents or Nigerians. Togolese buy small amounts for sale to expatriates living in Lome. From January to December 2005, 55 men and 5 women—of whom 37 were Togolese—were arrested for drug distribution. Togo's long and relatively porous borders permit narcotics traffickers easy access/egress. This relatively easy movement through Togo has made Togo a transit point for narcotics such as cocaine and heroin. Many narcotics trafficking arrests in Togo have involved Nigerian nationals traveling from Asia to other West African destinations. The prevalence of widespread official corruption facilitates the drug traffic

III. Country Actions Against Drugs in 2005

Policy Initiatives. In March 2004 a new Central Office Against Drugs and Money Laundering was created. This Central Office is responsible for investigating and arresting all persons involved in drug-related crimes. This office has approximately twenty gendarmes and ten police personnel to conduct investigations and enforcement operations. Security agencies report all drug-related matters to the Director of the Central Office. The Director of the Central Office, in turn, is directly responsible to the Minister of Interior. The National Anti-Drug Committee has been incorporated into the new Central Office. An Idea Bank has been created among Togo, Benin and Ghana to facilitate counternarcotics operations in the sub-region. While Ghana and Togo regularly contribute to the bank, Benin has yet to play an active role.

Law Enforcement Efforts. The number of arrests decreased somewhat in 2005. Only occasional spot checks are made of passengers at the airport. The new cargo screening ability at the Port of Lome will, however, aid the interdiction of drugs arriving by sea. Arrests have been most numerous at the land border crossings and in Lome. Arrests are sometimes made after a tip, but are more often made in the course of other routine law enforcement activities, such as traffic security or customs checks. The greatest obstacles that the Government of Togo (GOT) faces in apprehending drug distributors are the government's lack of computer technology, lack of communication and coordination, and mutual

distrust among the three agencies responsible for drug law enforcement. While all agencies are required to report narcotics related crimes to the Central Office Against Drugs and Money Laundering, in practice there is no effective reporting, record keeping or cross-agency communication process.

Corruption. The Anti-Corruption Commission (ACC) made no drug-related arrests of government officials and, to USG knowledge, no government officials are involved in the drug trade. Reports abound that unnamed officials in various GOT agencies can be bribed to allow illicit narcotics to transit to or through Togo. At least some of these reports are sourced to prominent expatriated former officials, who were well positioned to know, when they still were in Togo. Given the growing transit of drugs through Togo, if some of these reports were true, they would help explain the growing traffic.

Agreements and Treaties. Togo is a party to the 1988 UN Drug Convention, the 1971 UN Convention Against Psychotropic Substances, and to the 1961 UN Single Convention, as amended by its 1972 Protocol. Togo cooperates with other members of ECOWAS (Economic Community of West African States) regarding law enforcement issues. Togo is a party to the UN Convention Against Corruption. Togo also is a party to the UN Convention Against Transnational Organized Crime,

Cultivation/Production. The only drug cultivated in quantity is cannabis, which can be grown in all five of Togo's regions. Cultivation is primarily for local demand although some cross border distribution by small-scale dealers is suspected.

Drug Flow/Transit. There are sizable expatriate Nigerian and Lebanese populations involved in the drug trade, and they arrange for drug transshipments from many places in the world, through Africa, and onward to final markets. Many observers of drug trafficking in West Africa believe that hard drugs like cocaine and heroin are "warehoused" in the region, before being dispatched to final consumption markets.

Domestic Programs (Demand Reduction). The CNAD opened a youth counseling center that shows films and sponsors counternarcotics discussion groups. The programs have been well attended by NGO's, religious groups, and school groups composed of parents, teachers, and students. Programs designed for high school students focused heavily on prevention/non-use. The CNAD also sponsored programs for security forces that stressed the link between drug use and HIV/AIDS.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. The primary goal of the U.S. is to help the GOT combat the international trafficking of drugs. The U.S. seeks to help the GOT in improving its ability to interdict illicit narcotics entering Togo and to prosecute those traffickers who are caught. Togo's emerging willingness to confront the issue of illicit drugs is hampered by the country's ongoing democratic transition and the weak state of GOT finances.

The Road Ahead. U.S. cooperation with Togolese counternarcotics officials will continue. USG funded narcotics assistance will be used for Togolese counternarcotics infrastructure improvements. With the assistance of the regional Drug Enforcement Agency representative based in Lagos, the Embassy will continue to look for ways to provide counternarcotics trafficking training to Togolese law enforcement personnel.

Uganda

I. Summary

Uganda is not a major hub for narcotics trafficking. Nevertheless, Ugandan authorities have detected and confiscated heroin and cannabis transiting the Entebbe Airport and also along the border with Kenya. The only drug known to be produced in Uganda is cannabis which is primarily grown in the Districts of Busia, Bugiri, Kabarole, and Rakai. Uganda is a party to the 1988 UN Drug Convention

II. Status of Country

Drug production and trading within Uganda is not significant. Uganda offers more potential as a transit route (Entebbe Airport and porous borders).

III. Country Actions Against Drugs in 2005

Policy Initiatives. The Government of Uganda (GOU) is a party to a multilateral agreement with Government of Tanzania (GOT) and the Government of Kenya (GOK). Known as the “the Protocol on Combating Narcotic Drugs in East Africa,” it allows these three countries to share law enforcement intelligence amongst themselves so as to better interdict and arrest drug traffickers. Recently acquired information indicates that the GOU no longer has a Memorandum of Understanding (MOU) with the Government of Nigeria (GON) to share law-enforcement intelligence.

Law Enforcement Efforts. The GOU is making an effort to fight illicit drugs, but there are few resources to support the campaign. The GOU has approximately 120 law enforcement personnel devoted to counternarcotics activities throughout the country, 10 of whom are assigned to Entebbe airport. Limited manpower and resources have forced the GOU to concentrate its focus on Entebbe Airport as a transit point. Although the focus is at Entebbe, the GOU also sends forces to participate in cannabis eradication campaigns in certain areas.

The GOU’s Drug Squad claimed the following results in 2005 (through November): Heroin Cases: 5; Heroin Arrests: 6; Heroin Seized: 1.88 kilograms; Heroin Convictions: 2; Heroin Cases Pending: 1. There were no cocaine cases or seizures. Cannabis Cases: 432; Cannabis Arrests: 430; Cannabis Seized: 11,825 kilograms plus 392,674 Plants; Cannabis Convictions: 73; Cannabis Cases Pending: 53.

Corruption. Corruption is a huge problem that affects most aspects of the Ugandan government. Although there is no evidence that there is narcotics-related corruption, it is reasonable to believe that corruption plays the same role there that it does in the other arenas of GOU politics. The GOU, however, does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions.

Agreements and Treaties. The GOU is a party to the 1988 UN Drug Convention, the 1971 UN Convention Against Psychotropic Substances, and the 1961 UN Single Convention as amended by its 1972 Protocol. The GOU is a party to the UN Convention Against Transnational Organized Crime and its protocol against illegal manufacturing and trafficking in firearms. The GOU also is a party to the UN Convention Against Corruption

Cultivation/Production. Marijuana is grown for domestic consumption, but there are no accurate estimates of how much.

Drug Flow/Transit. The GOU is primarily concerned with heroin transit through Entebbe Airport, raw cannabis transport into Kenya and processed cannabis transit from Kenya. The United States is not the destination for these transshipments. Uganda Police Anti-Narcotics Unit statistics show a decrease in heroin seizures since 2001, which could suggest either police have become more successful or narcotics traffickers have become better at concealment. While detection of illicit goods is a possibility at Entebbe Airport, it is exceedingly difficult to detect along Uganda's porous borders.

Domestic Programs (Demand Reduction). Demand reduction is not addressed in a national or uniform manner. Although heroin addiction and cannabis use is of concern to the GOU and local law enforcement, concern for the impact of other social ills leaves the concept of demand reduction unfunded and neglected by the GOU.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. The U.S. has assisted Uganda's counternarcotics efforts with basic skills training at the Police Academy. The U.S. also is assisting Uganda to develop a forensics capability by establishing a crime/forensics laboratory, and supports a community policing project.

The Road Ahead. The U.S. Government continues to engage with the GOU on a variety of law-enforcement issues with the objective of improving Uganda's capacity to enforce its laws and investigate crime.

United Arab Emirates

I. Summary

Although not a narcotics-producing country, the United Arab Emirates (UAE) is believed to be a transshipment point for traffickers moving illegal drugs from the major drug producing countries, including Afghanistan and Pakistan. Frequent reports of seizures of illegal drugs in the UAE over the past few years underscore this conclusion. Most seizures have been of hashish. There are several other factors that render the UAE a way station, including its proximity to major drug cultivation regions in Southwest Asia and a long (700 kilometer) coastline. High volumes of shipping render UAE ports vulnerable to exploitation by narcotics traffickers. In February 2005, the UAE signed an MOU with Iran on cooperation against the trafficking of narcotics and psychotropic drugs and their precursor chemicals. In September 2005, the U.S. DEA also established a country office in the UAE to enhance cooperation with UAE law enforcement authorities. The UAE is a party to the 1988 UN Drug Convention.

II. Status of Country

A major regional financial center and hub for commercial shipping and trade, the UAE is a transshipment point for illegal narcotics from the drug-cultivating regions of southwest Asia, to Europe, to Africa, and less significantly, to the United States. Western Europe is the principal market for these drugs, and Africa is becoming an increasingly prominent secondary market. Factors that contribute to the role of the UAE as a transshipment point are the emergence of Dubai and Sharjah as regional centers in the transportation of passengers and cargo, a porous land border with Oman, and the fact that a number of ports in the UAE are de facto “free ports”—where transshipped cargo is not usually subjected to the same inspection as other goods that enter the country.

III. Country Actions Against Drugs in 2005

Policy Initiatives. The UAE continued to advance its national drug strategy based on intensifying security at the country’s air and sea ports and patrols along the coastline, reducing demand for illegal drugs through educational campaigns, enforcing harsh penalties for trafficking, and rehabilitating drug addicts. The UAE’s Federal Supreme Court ruled in 2003 that authorities needed proof that drug use occurred in the UAE before they could prosecute users. A positive blood test is considered evidence of consumption, but not evidence of where the consumption took place. In September of 2005, the UN established a sub-office on Drugs and Crimes in the UAE. The UAE government funded the estimated \$3 million cost of the office and contributed an additional \$50,000 to the UN counternarcotics program. The sub-office is responsible for coordinating national counternarcotics strategies and integrating them into the UN’s comprehensive global program.

Law Enforcement Efforts. In 2004, UAE counternarcotics forces reported 901 drug cases and arresting a total of 1,419 people. This was an increase from 2003, when officials arrested 1,267 people in 786 cases. The largest number of arrestees were Emirati nationals (405) followed by Iranians (264) and Pakistanis (164). About 62 percent of the arrests were for possession or consumption of narcotics. In 2004, UAE officials seized 50 kilograms of opium, 91 kilograms of heroin, and 1,777 kilograms of hashish. In the first five months of 2005, the Emirate of Abu Dhabi announced that it had arrested 97 people on drug-related charges in 68 cases. Punishment for drug offences in the UAE is severe. A 1995 law stipulates capital punishment as the penalty for drug trafficking. No executions for drug

trafficking, however, have ever taken place, and sentences usually are commuted to life imprisonment. UAE authorities continue to take seriously their responsibility to interdict drug smuggling and distribution. In May 2005, Dubai police announced that they had seized 200 kilograms of hashish from two “Asians” who were attempting to sell it. This has been the largest seizure of hashish in Dubai to date. UAE authorities continue to cooperate with other countries to stop trafficking. This cooperation has resulted in several arrests. In one case, Dubai police, cooperating with Jordanian authorities, blocked an attempt to smuggle 2.7 million doses of “Captagon,” which was being smuggled in 2 buses traveling from Eastern Europe to Dubai.

Corruption. The government of the UAE as a matter of policy does not encourage or facilitate illicit production or distribution of narcotic or psychotropic drugs or other controlled substances or the laundering of proceeds from drug transactions. Senior officials are not known to engage in or facilitate illicit production of these drugs or the laundering of proceeds from drug transactions either. There is no evidence that corruption—including narcotics related corruption—of public officials is a systemic problem.

Agreements and Treaties. The UAE is party to the 1988 UN Drug Convention, the 1961 UN Single Conventions as amended by the 1972 Protocol and the 1988 UN Convention on Psychotropic Substances. The UAE has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention against Corruption.

Cultivation/Production. There is no evidence of any major drug cultivation and/or production in the UAE. Published records show that there were two cases of “planting” drugs in the Emirate of Ras Al-Khaima in 2004, with a total of three people arrested.

Drug Flow/Transit. High volumes of shipping render the UAE vulnerable to exploitation by narcotics traffickers. The UAE—Dubai, in particular—is a major regional transportation and shipping hub. Narcotics smuggling from South and Southwest Asia continues to Europe and Africa and to a significantly lesser degree to the United States via the UAE. Hashish, heroin, and opium shipments originate in Afghanistan, Pakistan, and Iran and are smuggled in cargo containers, via small vessels and powerboats, and/or sent overland via Oman. According to published figures, Iranians and Pakistanis made up the largest number of nonUAE nationals arrested in drug cases in 2004 at 18.6 percent and 11.6 percent respectively. Recognizing the need for increased monitoring at its commercial ports, airports, and borders, the UAE is making an effort to tighten inspections of cargo containers as well as passengers transiting the UAE. In December 2004, the Emirate of Dubai signed the Container Security Initiative (CSI) with the U.S. CSI inspectors arrived in Dubai in 2005 and are now inspecting containers destined for the U.S. Customs officials randomly search containers and follow-up leads on suspicious cargo.

Domestic Programs (Demand Reduction). A 2003 report noted that the majority of UAE drug users take their first doses abroad, primarily because of peer pressure. Statistics reveal that 75 percent of drug users in the UAE prefer hashish, 13 percent use heroin, while six percent use morphine. The report illustrates a clear relationship between drug abuse and level of education—75 percent of arrested drug users in 2002 were high school graduates, but only two percent were university graduates. While the data is a few years old, trends reported are still reflective of current societal patterns. The focus of the UAE’s domestic program is to reduce demand through public awareness campaigns directed at young people. The UAE has also established rehabilitation centers. In June 2005, the UAE issued a postage stamp to highlight the hazards of drugs as part of its awareness campaign. It also held a high-profile “Drug Awareness Week” with exhibits prominently set up in all of the local shopping malls. UAE officials believe that adherence to Muslim religious morals and severe prison sentences imposed on individuals convicted of drug offenses effectively deter narcotics abuse. An affluent country, the UAE has established an extensive treatment and rehabilitation program

for its citizens. There is a rehab center in Abu Dhabi, two in Dubai, and one each in Ajman and Sharjah for those identified as addicts. In accordance with federal law, UAE nationals who are addicted can present themselves to the police or a rehabilitation center and be exempted from criminal prosecution. Those nationals who do not turn themselves in to local authorities are referred to the legal system for prosecution. Third-country nationals or “guest workers” who make up approximately 80 percent of the population generally receive prison sentences upon conviction of narcotics offenses and are deported upon completing their sentences. Most UAE nationals arrested on drug charges are placed in one of the UAE’s drug treatment programs. They undergo a two-year drug rehabilitation program, which includes family counseling/therapy.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. The DEA Administrator visited the UAE in July 2005 to enhance counternarcotics cooperation with the UAE. During her visit, she proposed, and the UAE accepted, establishing a DEA presence in the UAE to work closely with UAE authorities. The first DEA office was established in September 2005 in Dubai. A second office will be established in Abu Dhabi in 2006.

The Road Ahead. The USG will continue to encourage the UAE to focus enforcement efforts on dismantling major trafficking organizations and prosecuting their leaders and to enact export control and border security legislation.