

AFRICA AND THE MIDDLE EAST

Angola

I. Summary

Although some cannabis is cultivated and consumed locally, Angola neither produces nor consumes significant quantities of drugs. Angola continues to be a transit point for drug trafficking, particularly cocaine brought in from Brazil or South Africa and destined for Europe. Angola is a member of the Southern African Development Community (SADC) Counternarcotics Protocol in 2003. Angola is a party to the 1988 UN Drug Convention.

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. Narcotics, mostly cocaine, enter from Brazil and are then transported to Europe and South Africa. Police continued to seize cocaine and cannabis in 2006. Increased intelligence sharing and the scanning of incoming containers improved the effectiveness of drug interdiction.

II. Country Actions Against Drugs in 2006

Law Enforcement Efforts. 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 SADC.

Corruption. Although cases of public corruption connected to narcotics trafficking are rare, in June 2005, three officials of the National Department for Criminal Investigation were charged with trafficking in cocaine. As a matter of government policy, Angola does not encourage illicit production or distribution of drugs or associated money laundering.

Agreement and Treaties. Angola 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 the 1972 Protocol. Angola ratified the UN Corruption Convention on August 29, 2006 and has signed, but has not yet ratified the UN Convention against Transnational Organized Crime.

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, but government resource constraints limit what the government can offer in modern drug treatment.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. In 2006, 24 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.

Benin

I. Summary

Benin is a low volume narcotics producer and remains a transit point for illegal narcotics. During 2006, no new counternarcotics laws or initiatives were introduced in Benin. Benin's drug enforcement police squad, the Central Office for Repression of Illicit Drug Trafficking (known by the French acronym OCERTID) operates with limited resources. The rate of illegal drug seizures, compared to the likely volume of drugs transiting Benin, was low in Benin during 2006, as were quantities seized. Benin is a party to the 1988 UN Drug Convention, and Benin's antinarcotics legislation adopted into law in 1997 is based on the UNODC model.

II. Status of Country

Benin produces illegal narcotics - but in very modest quantities for local consumption. Marijuana is the only drug produced in significant quantities. There is no production of chemical drugs such as methamphetamines. Marijuana is cultivated along the western and eastern borders with Nigeria and Togo. Marijuana is also cultivated in the central area of the country. During 2006, there were no new efforts by the government to eradicate in these areas. Benin's porous borders and lack of port security allow for the easy transshipment of narcotics by regional traffickers. All forms of narcotics are known to transit through Benin. The extent of the transit is uncertain, but seems to be growing, based on seizures.

III. Country Actions Against Drugs in 2006

Policy Initiatives. In March 2006, Benin elected a new president in a generally fair democratic election. Within the severe limits imposed by the poverty of the country, the existing level of activity against narcotics continued, and a few new initiatives were proposed.

Law Enforcement Efforts. The total reported drug seizures in Benin during 2006 were: cannabis: 2.2 MT; cocaine: 28.2 kg.; and heroin: 25.2 kg. Total arrest and prosecution statistics are not available. Law enforcement resources continue to target small-scale couriers, users, and criminals involved in other forms of crime that are captured with various quantities of illegal drugs. 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 with limited implementation. Benin has no legal mechanism in place to seize narcotics-related assets. OCERTID has had a team assigned to the port of Cotonou since November 2005, but this team continues to be hampered by a lack of training in the area of seaport security and container search procedures. In general, Benin suffers from a lack of follow-up and focus on implementation in its counternarcotics efforts. The United States Millennium Challenge Compact, which was signed in February 2006 and entered into force in October, will help address these weaknesses over the next five years. The Compact includes the development and implementation of a port master plan that incorporates institutional security improvements in the areas of access, customs services, and cargo screening.

Corruption. There is no information that a senior Beninese government official or government entity engages in, encourages, or facilitates the illicit production or distribution of narcotic or psychotropic drugs. 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 2006. However, in May 2006, upon his election to the Presidency, Boni Yayi signed a

good governance charter with 22 of his ministers publicly, laying out clear code of conduct ground rules for all his ministers.

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.

Domestic Programs. Benin's drug enforcement coordination office called CILAS (Interdepartmental Committee to Fight Against Drugs and Narcotics Abuse) encompasses representatives from the Ministries of Health, Family, Social Protection, Finance, Economy, Environment, and Youth. CILAS is responsible for implementing Benin's domestic drug policy, but no results on the effectiveness of its programs are available.

IV. U.S. Policy Initiatives and Programs

The Road Ahead. With the inauguration of the new Beninese Presidential administration in early 2006 and its new initiatives, which include efforts to address corruption, the GOB could improve its efforts in implementation of prior and new counternarcotics initiatives in response to increased drug-trafficking through the country. Efforts by the U.S. Government, such as improving port and border security through the Millennium Challenge Corporation agreement, will greatly enhance the GOB's capacity to address drug-trafficking.

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, indictment of three U.S. citizens, and a secondary ongoing investigation that has already identified more than two million dollars of drug related proceeds. In 2006, DEA conducted several major international joint investigations 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 poppy and cannabis plants are grown in Egypt. The substances that are most commonly abused are cannabis, which is known in Egypt 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 2006

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. Reversing a trend over the past several years, the amount of narcotics seized during 2005 was lower than that of the previous year.

According to the GOE, drug seizures in 2005 included cannabis (78.0 MT), hashish (1.5 MT), and smaller amounts of heroin, opium, psychotropic drugs, and cocaine. Significant amounts of prescription and “designer” drugs such as Ecstasy (10,683 tablets), amphetamines, and codeine were also seized. During the course of 2005, Egyptian law enforcement officials eradicated 380 hectares of cannabis and 106 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 synthetic 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 4,560,000 Egyptian Pounds (\$800,000). 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, 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 Corruption Convention. The 1988 UN Drug Convention, coupled with an 1874 extradition agreement with the former Ottoman Empire, provides the United States and Egypt with a basis to seek extradition of narcotics traffickers.

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 2007, 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, the amount of drugs transiting Ethiopia remains small. Small amounts of heroin transit 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. In addition, cannabis is grown throughout Ethiopia, but most is consumed in rural areas of Ethiopia itself. Khat, a chewable leaf with a mild narcotic effect, is legal in Ethiopia. Ethiopia now produces more khat than coffee for export. Seizures are up, and illegal exports from Ethiopia, through Europe to the U.S., are rising. Khat chewing is part of the culture of several countries bordering the Red Sea. The Illicit Drug Control Service (IDCS), formerly the Ethiopian Counternarcotics Unit (ECNU), has a small staff, limited training and equipment, and would like to partner with the international community to improve its capabilities. The IDCS 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. Cannabis is produced in rural areas throughout Ethiopia. Only 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. According to the IDCS, cannabis is primarily grown and used by the Rastafarian population, and that the highest volume was grown in and outside of the town of Shashemene, approximately 250 kilometers south of Addis Ababa. IDCS also believed that cannabis was likely sold side by side with khat. No seizures of opium have been reported since 2001, when opium poppy was seized at two locations where it was apparently being grown as an experimental crop.

III. Country Actions Against Drugs in 2006

The use of heroin and other hard drugs remains quite low, due primarily to the limited availability of such drugs, their 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 IDCS has a small staff and inadequate budget, which limit its capabilities. There is currently no training offered for officers in IDCS, and IDCS had no permanent programs. After changing its leadership in 2002, IDCS has been more proactive at the federal level, but is still hampered by financial constraints. IDCS is comprised of approximately 40 individuals, including federal police officers and administrative personnel. Its efforts include an

airport interdiction team comprised of 11 staff, a four-person surveillance team, and an educational unit with six staffers. At the airport, the interdiction team uses its one drug sniffer dog to examine, with a degree of randomness, cargo and luggage. The IDCS formerly had two dogs from the U.S., which have died. The current sniffer dog was a donation from Sudan; however, the dog could only detect cannabis. The IDCS routinely screens passengers, luggage and cargo on flights arriving from “high risk” origins, such as Dubai, Bangkok, Mumbai, New Delhi, Bombay, Karachi, and Islamabad. The interdiction unit continues to improve its ability to identify male Nigerian/Tanzanian drug “mules,” which typically swallow drugs to smuggle them. However, the airport interdiction unit relies heavily on tips from other countries to identify the drug mules. The Ethiopian government 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 1961 UN Single Convention as amended by the 1972 Protocol and the 1971 UN Convention against Psychotropic Substances. Ethiopia has signed, but has not yet ratified, the UN Convention against Transnational Organized Crime and the UN Convention against Corruption.

Cultivation/Production. Cannabis is produced in rural areas throughout Ethiopia, of which a small portion is for export, primarily to neighboring countries; the majority is consumed at home, but quantities in both cases are moderate. Khat is grown all over Ethiopia to accommodate traditional users in Ethiopia itself and increasingly for export.

Drug Flow/Transit. 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.

Domestic Programs. The only domestic program to combat narcotics in Ethiopia is the IDCS, which has both an enforcement and limited drug education role. The ICDS' education unit aims to increase public awareness by partnering with antidrug clubs in high schools. Further, the education unit educates domestic police on how to detect and control drugs in all areas of Ethiopia.

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. At present, the U.S. is not providing assistance to the IDCS.

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's goal is to partner with the international community to improve its detection capabilities.

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, corruption and a lack of resources remain problems. A national narcotics scandal in 2006 involving allegations of official complicity in narcotics trafficking complicated Ghana's efforts to combat the drug trade, but served to focus public attention on the growing problem. Ghana-U.S. law enforcement coordination strengthened in 2006, particularly at the policy level, but operational cooperation was strained by the narcotics scandal. Interagency coordination among Ghana's law enforcement remained a challenge. Ghana is a party to the 1988 UN Drug Convention.

II. Status of Country

Ghana has become a major transshipment point for illegal drugs, particularly cocaine from South America, as well as 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, Sekondi, and Takoradi are also used, and border posts at Aflao (Togo) and Elubo and Sampa (Cote d'Ivoire) see significant drug trafficking activity. In 2006, South American cocaine trafficking rings increased their foothold in Ghana, establishing well-developed distribution networks run by Nigerian and Ghanaian criminals. Ghana's interest in attracting investment provides good cover for foreign drug barons to enter the country under the guise of doing legitimate business. However, South American traffickers reduced their need to visit Ghana in person by increasing reliance on local partners, thus further insulating themselves from possible arrest by local authorities.

The year was marked by a series of cocaine scandals, including allegations of police complicity in cocaine trafficking. In May five kg of cocaine went missing from a police evidence locker. An ensuing investigation, which received extensive domestic media attention, quickly expanded to other cases. In the most prominent case, security agencies interdicted a ship, the MV Benjamin, thought to have been carrying as much as two tons of cocaine, of which authorities only seized thirty kg. The scandal intensified when a secret recording surfaced that caught an Assistant Commissioner of Police and known narcotics traffickers on tape discussing why they had not been alerted to the two ton cocaine shipment. In a separate case, a woman alleged that a different senior police official requested a \$200,000 bribe to drop a case against her boyfriend, a foreign cocaine trafficker. The ruling party and the opposition political parties used the scandal to accuse each other of allowing the country to become a transshipment point for cocaine and heroin bound for other countries. As a result of these scandals, a handful of law enforcement officials lost their jobs and the government renewed its focus on how to combat the narcotics trade.

Trafficking has also fueled increasing domestic drug consumption. Cannabis use is increasing in Ghana, as is local cultivation of cannabis. Law enforcement officials have repeatedly raised concerns that narcotics rings are growing in 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 2006

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 two top officials at the NCB were suspended at the outset of the 2006 narcotics scandal. The top official was ultimately replaced, but the NCB remained without an operations chief at year's end. The Ministry of Interior set up a fact-finding committee to investigate the loss of the two tons of cocaine apparently not seized by enforcement personnel, and related issues. Following the release of the committee's report in September, the UNDP funded a series of experts' meetings to develop a new national drug policy and make recommendations on improving the country's counternarcotics efforts. The series of meetings was ongoing at year's end.

Each year since 1999, the NCB has proposed to amend the 1990 narcotics law to fund NCB operations using a portion of seized proceeds, but the Attorney General's office has not acted on this proposal. In 2006, the Attorney General succeeded in amending the narcotics law to allow stricter application of the 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). 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. The government began drafting a Proceeds of Crime bill and a Money Laundering bill in 2006, and final drafts were reportedly near completion by year's end. The government reportedly plans to present the bills to parliament for consideration in early 2007.

Law Enforcement Efforts. In 2006, 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 total drug seizures of cocaine, heroin, and cannabis from January to September 2006 decreased by 17 percent compared to the same period in 2005, likely reflecting a temporary decrease in trafficking activity following the 2006 narcotics scandal. Projected fourth quarter data (based on data for the earlier part of the year) suggests that the number of cocaine arrests in 2006 dropped to roughly half that of 2005, while heroin and cannabis arrests both showed modest declines. 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.

Convictions in drug cases involving 100 grams or more increased in 2006. During the year, courts delivered 33 drug-related convictions in such cases, including 4 for arrests made in 2006 and 29 for arrests made in 2005. In addition to a number of Ghanaians, courts sentenced citizens of Nigeria, Cote d'Ivoire, Togo, Guinea, Belgium, and Germany in cases involving cocaine and heroin trafficking. Despite these positive trends, at year's end courts still had 96 cases pending that involved 100 grams or more. Of these, 52 were for 2006 arrests and 44 were for older cases. The NCB reported that the price of cannabis increased sharply in 2006, possibly as a result of eradication efforts. The price of a small parcel of cannabis (the size of a loaf of bread) in 2006 was approximately cedis 100,000-150,000 (\$10.86 - \$16.29), while a wrapper or joint sold for cedis 2,000-5,000 (\$0.22 - \$0.54), from two to five times the price in 2005. The NCB and other law enforcement agencies continued their successful cooperation with U.S. law enforcement agencies in 2006 until the eruption of the narcotics scandal, which forced U.S. agencies to reduce

cooperation until the NCB could reconstitute itself. There were no narcotics-related extraditions to or from the United States in 2006.

Corruption. Ghana 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, nor is any senior official known to engage in, encourage, or facilitate narcotics production or trafficking. Despite the regular arrests of suspected narcotics traffickers, Ghana has an extremely low rate of conviction, which law enforcement officials indicate is likely due primarily 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. In October 2005, a supervisor of KIA's cargo handling company was arrested attempting to smuggle cocaine using an airport tractor and his access to an airplane. Media outlets alleged that this occurred with either the approval or the involvement of ruling party officials.

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. Government officials hope that with the change to the bail bond system in 2006, this will cease to be a problem.

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 arrested 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.

Corruption among law enforcement officials remained a serious problem in 2006. In January, two officers from the Bureau of National Investigations were suspended for having inappropriate contact with Nigerian drug traffickers. An Assistant Commissioner of Police and five other officers were arrested for their alleged direct involvement in the trafficking of the cocaine, which went missing from the MV Benjamin. Though no charges of corruption were brought, the two top officials at the Narcotics Control Board were suspended for dereliction of duty in allowing five kg of seized cocaine to go missing from a police evidence locker. In a related development, a state prosecutor was asked to proceed on leave because he charged drug barons with a lesser crime than the charge sought by the Attorney General, allowing the criminals to be granted bail (they were re-arrested the next day and the prosecutor was dismissed). One of those re-arrested allegedly was later allowed by jail personnel to continue using his mobile phone from his jail cell and was reportedly escorted out of the jail some evenings by officers to attend social engagements. It was not until the story broke in a local newspaper that government officials allegedly insisted the trafficker be moved to a more secure facility.

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. In July 2006, Ghana ratified both the UN Convention against Corruption and the African Union Convention on Preventing and Combating Corruption. Ghana has not signed the UN Convention against Transnational Organized Crime.

Cultivation and Production. Cannabis (also known as Indian hemp) is widely cultivated in rural farmlands. The Volta, Brong-Ahafo, Eastern, Western, and Ashanti regions are principal growing areas. Most cannabis 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. Due to the shakeup relating to the narcotics scandal, NCB did not investigate cannabis production and distribution, or destroy cultivated cannabis farms and plants in 2006 as they had in years past. 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 the terms of this project, 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, but did not have funds to expand the program in 2006. NCB reports, however, that by 2006 cultivation in targeted areas had gone down. To provide alternative income to farmers growing cannabis, the Ministry of Women and Children's Affairs donated two cassava-processing plants to a community in Essam, Eastern Region in 2005.

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. Law enforcement officials report that traffickers are increasingly exploiting Ghana's relatively unguarded and porous maritime border, offloading large shipments at sea onto small fishing vessels which carry the drugs to shore undetected. Narcotics are often repackaged in Ghana for reshipment, hidden in shipping containers or secreted in air cargo. Large shipments are also often broken up into small amounts to be hidden on individuals traveling by passenger aircraft. The most common individual concealment methods utilize false bottom suitcases or body cavity concealment. Arrests in 2006 revealed a variety of creative concealment methods, including bricks of cocaine hidden inside women's ornate hair-dos, cans of soup and containers of yoghurt with hidden narcotics, and bricks of marijuana hidden in hollowed-out wooden handicrafts bound for Europe.

Officials at UK airports found that the total tonnage of trafficked narcotics seized from passengers on flights originating in Ghana eclipsed those from Nigeria in 2006. In partial response to this trend, the British Government launched a program deploying experienced U.K. customs officers and state of the art ion scan detection equipment to Kotoka International Airport. The program, which will last one or two years, will also involve training Ghanaian customs officers on how to use the equipment, as well as profiling, targeting, intelligence-gathering and other security techniques.

There is no hard evidence that drugs transiting Ghana contribute significantly to the supply of drugs to the U.S. market. However, there are indications that direct shipments to the United States--particularly of heroin--are on the rise, fueled by an increase in shipments of heroin to Ghana from Pakistan and Afghanistan in 2006. 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, and in 2006 a significant number of Ghanaians were arrested in the United States for trafficking heroin. 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. Direct air links were re-established in 2005, with a second airline adding non-stop service between Ghana and the United States in December 2006, in addition to multiple carriers providing connecting flights to the United States via Europe, which may result in increased attempts at smuggling by direct air links.

In 2006, the U.S. Embassy uncovered widespread visa fraud associated directly with drug trafficking organizations, further raising fears of highly organized smuggling rings attempting to carry drugs into the United States from Ghana by air. The NCB reported that in response to increased vigilance against West African drug mules arriving at foreign airports, a new trend appears to be use of Caucasians as carriers of narcotics to arouse less suspicion by customs and immigration officials at European and U.S. airports. Despite concerns with increased use of air travel for drug transshipment, however, the primary problem remains Ghana's long, relatively 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. 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 2006, 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. In partial response to the narcotics scandal, the NCB also began efforts to sensitize coastal fishermen on the dangers of getting involved in the drug trade and on the need to cooperate with law enforcement officials. The Regional Minister for the Central Region (where many fishing ports are located) met with local fishermen to discuss the problems of drug 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 ("Itemisers") 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. Ghana is still benefiting from police training funded in FY 2002, which helped suppress corruption and strengthen 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 undertaken in November 2004, focused on drug interdiction at Ghana's air and seaports.

In August 2005, the U.S. government signed an agreement to provide Ghana's law enforcement agencies with an additional \$200,000 to fight narcotics trafficking. Under this funding, DEA provided a two-week basic narcotics investigations skills course for NCB and other GOG counternarcotics staff in November 2006. At the end of the training, the U.S. Embassy donated 25 sets of new Smith & Wesson handcuffs, provided by the Department of Justice, to the NCB. Future assistance using these funds will focus on advanced narcotics investigation skills and financial crimes investigations. The USG is also working with the Customs, Excise and Preventive Service (CEPS), urging the agency to establish an internal affairs unit that would strengthen internal anticorruption efforts along Ghana's borders.

The Road Ahead. Ghana made progress in late 2006 addressing its legislative and enforcement deficiencies, brought into the public eye by the narcotics scandal, but there is a long road ahead. The NCB's plan to hire forty additional agents will be a good start. 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. Upgraded measures to combat corruption are also essential. Sea interdiction and surveillance capabilities need to be enhanced. These initiatives will require significant re-allocation of resources, and it remains to be seen whether Ghanaian officials have the political will to see them through.

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 (perhaps 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. There are some indications that opium poppy cultivation is making a comeback in Iran, after a long period during which poppy cultivation was negligible. 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. With record levels of opium production right next door in Afghanistan, the latest opiate seizure statistics from Iran continue to 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. Iran claims that more than 3500 Iranian law enforcement personnel have died in clashes with heavily armed drug traffickers over the last two decades, and Iran reports that another 56 died in 2005. Iran spends a significant amount on counter drug-related activities, 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. Iran claims to have invested upwards of \$1 billion in its elaborate series of earthworks, forts and deep trenches to channel potential drug smugglers to areas where they can be confronted and defeated by Iranian security forces. Nevertheless, traffickers from Afghanistan and Pakistan continue to cause major disruption along Iran's eastern border. Iranian security forces have had excellent seizure results for the last several 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. Although China is estimated to have the largest population of those who consume opiates, 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 between the ages of 15 to 64 used opiates in 1999 (latest complete survey data available). A 2005 Quick Assessment drug use survey conducted by Iranian authorities, confirmed the accuracy of the earlier 1999 survey on drug abuse. Many Iranian practitioners, especially in the treatment community, argue that the share of opiate abusers now is even higher than 2.8 percent of the population.

Nevertheless, 2.8 percent is very high. It is almost five times the rate of opiate abuse in the U.S. (.6 percent). A continuing sharp increase in the share of unrefined opium in total opiate seizures made

by Iranian enforcement in the first nine months of 2006 suggests that drug traffickers in Afghanistan have consciously decided to serve the growing opium market in Iran, while also continuing to ship refined or semi-refined opiates (heroin and morphine base) for ultimate consumption in Europe. This choice by traffickers and the record opium crops in Afghanistan over the last few years are contributing to what can only be termed an epidemic of opiate abuse in Iran.

III. Country Actions Against Drugs in 2006

Policy Initiatives. Narcotics-related assistance projects emerging from last year's "Paris Pact" organized visit to Iran began to be implemented this year. Among these projects were interdiction projects focused on exit routes along the Iranian/Turkish border, and others designed to develop additional capacity for intelligence-led investigations of trafficking organizations. Projects focused on improved drug treatment and drug education, and to encourage more effective courts and decrease corruption also advanced towards implementation during 2006. Iran continues to spend at least 50 percent of its own budgeted counterdrug expenditures on demand reduction activities. This appears to be response to the growing social and health impact of more dangerous drug abuse in certain populations (e.g., heroin vice opium), and more intravenous heroin abuse, with certain addict populations (especially addicts in Iran's prisons) sharing needles. Sharing needles is known to contribute to the spread of HIV/AIDS. On the other hand, 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 head of Iran's Drug Control Headquarters received an important visit from UNODC Executive Director, Antonio Maria Costa in late 2006. Costa praised Iran's enforcement efforts and thanked Iran for preventing important quantities of opiates and other dangerous drugs from reaching markets in the West.

Iran pursues an aggressive border interdiction effort. A senior Iranian official told the UNODC that Iran had invested as much as \$1 billion 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, and 290 km of canals (depth-4 m, width-5 m), 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. Prior indications are, however, that Iran invested in this extensive barrier-type construction and fortification system on its eastern border region many years ago, well before the burgeoning drug problem started in the mid-1990's, as security protection against a general lawlessness along its eastern border.

Some villagers organized into self-defense forces (Basij) have received training from the Iranian government, and on occasion even launch offensive operations against traffickers, bandits and ethnic insurgents. Security forces also periodically clash with Baluch tribesmen who are seeking more autonomy from the central governments in Iran and Pakistan in a long simmering conflict. These tribesmen are also an important element in narcotics trafficking and have traditionally smuggled goods across regional borders. As a result, all three elements of lawlessness-narcotics trafficking, ethnic insurgency and smuggling occur simultaneously complicating the situation along Iran's eastern border.

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 365.7 metric tons of opiates (opium

equivalent) during just the first nine months of 2006. Opiate seizures were running at roughly 30 percent more than the same period of 2005. Opiate seizures in projected out for all of 2006 were on track to be almost 107 metric tons more than 2005, and set a new record for Iran's seizures of opiates. Seizures at rates like those claimed in Iran surely strike a blow at narcotics criminals and their financiers. Iran and Pakistan alternate as the countries with the highest volume of opiate seizures in the world.

Iranian opiate seizures in the first nine months of 2006 continued the same interesting trends highlighted in last year's INCSR chapter:

- Unrefined (raw) opium seizures continued to increase sharply; projected out for the year, they were on track to increase by almost 29 percent. This is somewhat less of an increase than that registered for seizures of refined opiates (morphine base and heroin). They are on a track to rise in excess of 33 percent ;
- The share of raw opium in total opiate seizures exceeded 63.4 percent, a level not seen in almost twenty years. 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 seizures were roughly 20 percent of all opiates seized (opium equivalent), sharply up from last year's roughly 15 percent share;
- The morphine base share of seized opiates fell to just 16.8 percent of the total. Refineries in Afghanistan seem to be turning out more heroin, as opposed to base.

NB. To compute shares of opiates seized in Iran accurately, we convert morphine base and heroin into opium equivalents by multiplying by a factor of ten.

One possible explanation for these seizure trends is a return of Iranian addicts to abuse of traditional raw opium, after a period when disruptions in supply from Afghanistan forced a temporary 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 nine months of 2006 were 48.4 metric tons. If hashish seizures are projected out for the whole of 2006 (60.4 metric tons), they would be down almost 11 percent from seizures of 67.3 metric tons during all of 2005.

Iran also reports a category of drug seizures which it labels simply "other". This category of seizures, which probably represents seizures of synthetic drugs, and perhaps destruction of opium poppies in place, has exploded in the last two years. In 2003, "other" seizures were reported at 1647 kg. Then in 2004 and 2005, seizures jumped to 12.4 metric tons and 13.5 MT, respectively. Seizures in this "other" category seem to have fallen sharply in the first nine months of 2006, and were running at only a 7.3 METRIC TONS annual rate. It is indicative of the overall drug problem in Iran that large quantities of synthetic drugs like Ecstasy and methamphetamine are seized there.

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 kg 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 under the age of 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 the first nine months of 2006 were running at an annual rate of almost 400,000, which is a typical level for the last several years. Twice as many drug abusers were detained as drug traffickers. Iran has executed more than 10,000 narcotics traffickers in the last two decades.

Corruption. Corruption plays an important role in narcotics trafficking in Iran. Corruption cases reached the courts in Iran, and were also featured in media reports. The election campaign in 2005 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 situation in Iran with that 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 is compelling that it is Iran's official policy to keep drugs from its people. A high-profile effort is currently under way in Iran to highlight corruption and discourage its spread, but some question its seriousness since some at the top appear to escape punishment. 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 begun to implement new assistance projects for Iran's courts and prosecutors after the recent Paris Pact review of Iran's counternarcotics efforts. The new 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. Iran is also a party to the 1971 UN Convention on Psychotropic Substances, 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 reports of opium refining near the Turkish/Iranian border. Recently, there have been more indications in Iran's press of opium poppy cultivation in remote areas. The Iranian Press reported government interdiction force operations targeted against opium poppy cultivation in isolated, mountainous regions of western Iran, northwest of Shiraz. These articles appeared in the spring and summer of 2006. The area planted to poppy does not seem to be large—news articles mention on the order of 100 acres. They quote Iranian government officials who link the cultivation to the poverty of communities living in these isolated regions. 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 Baluch 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 kg of drugs, in many cases either ingested for concealment or hidden in backpacks or hand luggage. 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 17 percent of all opiates seized in the first nine months of 2006, in Iran, is likely moving towards Turkey, as is some share of the much diminished 20 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. Widespread smuggling traditionally used to provide necessities and to escape high taxation facilitates trafficking through Iran. 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 for a few

years around 2001/02, 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, encouraged some addicts to switch from opium to heroin. That aberration now seems past, and large seizures of opium suggest that opium is now readily available in Iran. Some heroin is smoked or sniffed, but a growing share is injected. 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 (as much as 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. There have also been regular reports of a concentrated or “crack” heroin, which is reportedly more pure than other heroin available in Iran. Where the standard rule-of-thumb holds that 8.5 to 10 units of opium are necessary to make one unit of heroin, crack heroin reportedly requires 15-20 units of opium input. Because of its intensity, crack heroin is associated with increased emergency room visits, and overdose deaths. Typical of comments appearing in the Iranian press is one recent report, quoting the head of Tehran’s Specialist Treatment Addiction Center saying that “crack heroin” use in Tehran had doubled in the last year. Seventy-five percent of all drug addicts reporting to the Center are users of crack/crystal heroin. Due to its highly addictive properties and very high purity/intensity, many addicts had died after injecting crystal heroin, according to the Director.

Ninety-three percent of Iranian opiate addicts are male, with a mean age of 33.6 years, and 1.4 percent (about 21,000) are HIV positive. The scale of the drug abuse problem in Iran forces it into the public arena. Under the UNODC's NOROUZ narcotics assistance project, the GOI spent more than \$68 million dollars in the first year of project implementation 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. A total of 88 out-patient treatment centers spread throughout Iran 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, which 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 counternarcotics 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, and have won the praise of such knowledgeable observers of the international effort against narcotics as UNODC Director, Antonio Maria Costa. 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 recent

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 in 2006 the Israeli drug market continued to be characterized by a high demand in nearly all sectors of society, and a high availability of marijuana, hashish, Ecstasy, cocaine, heroin and LSD. The intense security presence and surveillance along Israel's borders generally make it difficult for smugglers to bring drugs into the country. Consequently, Israel is not a significant transit country for drugs, although Israeli citizens have been part of international drug trafficking networks in source, transit and distribution countries. In 2006, the INP seized less than half as much marijuana and Ecstasy as in 2005, and less than one third as much of each drug as in 2004. Hashish, heroin and cocaine seizures in 2006 remained consistent with seizures from the previous three years. Widespread use of Ecstasy by Israeli youths is a continuing concern for authorities. 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. The INP report that during the year 2006, the Israeli drug market was characterized by a high demand in nearly all sectors of society and a high availability of drugs, including marijuana, Ecstasy, cocaine, heroin, hashish and LSD. The INP estimates the annual scope of the Israeli market to be 100 metric tons of marijuana, 20 metric tons of hashish, 20 million tablets of Ecstasy, four metric tons of heroin, six metric tons of cocaine, and hundreds of thousand of LSD blotters. Officials are also concerned about the widespread use of Ecstasy and marijuana among Israeli youth, and say that juvenile usage mirrors trends in other Western countries.

III. Country Actions Against Drugs in 2006

Policy Initiatives. In 2006, the INP continued its general policy of interdiction at Israel's borders and ports of entry. The INP concentrated specifically on the Jordanian and Egyptian borders, where the majority of heroin, cocaine and marijuana enter Israel.

Law Enforcement Efforts. In 2006, most of Israel's narcotics seizures occurred along its sparsely populated border with Egypt. Eighty-six percent (4,335 kg) of all marijuana, 59 per cent (531 kg) of all hashish, and 43 percent (30 kg) of all heroin seized this year were intercepted near the desert border. Although nearly all the seizures of drugs coming from Jordan occurred at the Arava/Negev border-crossing terminal, the Israeli military seized 17 kg of heroin from Palestinians attempting to bring the drugs across the Dead Sea in one-man boats. According to the INP, the Jordanian police also seized 45 kg of cocaine destined for the Israeli market on the Jordanian side of the Dead Sea from members of the same Palestinian crime ring. Within Israel, the INP shut down a major domestic smuggling operation that shipped liquid cocaine from South America to Israel in wine bottles under the guise of a legitimate wine-importing business. In other operations, the INP seized 41,000 Ecstasy tablets from a single distributor in Qiryat Gat. Finally, the INP reported an increase in the number of domestic marijuana hydroponic cultivating stations seized to ten.

Corruption. As a matter of government policy, Israel does not encourage or facilitate the illicit production or distribution of narcotic or psychotropic drugs or other controlled substances, or the laundering of proceeds from illegal drug transactions. In 2006, a number of public officials were

under investigation for corruption-related offenses. Israel has signed, but not ratified, the UN Convention against Corruption. Israel does not have specific legislation for public corruption related to narcotics, but narcotics-related corruption would be covered under its generic anticorruption legislation.

Agreements and Treaties. Israel is a party to the 1988 UN Drug Convention, the 1971 UN Convention on Psychotropic Substances, the 1961 UN Single Convention on Narcotic Drugs, and its 1972 Protocol. A customs mutual assistance agreement and a mutual legal assistance treaty are also in force between Israel and the U.S. Israel ratified the UN Convention against Transnational Organized Crime in December 2006. Israel is one of 36 parties to the COE European Treaty on Extradition and has separate extradition treaties with several other countries, including the U.S. On January 10, 2007, a new Protocol to the Convention on Extradition between the United States and Israel entered into force. Significantly updating the 1962 convention, the Protocol replaces the outdated list of extraditable offenses with a modern dual criminality approach and provides for the temporary surrender for trial in the Requesting State of fugitives serving a prison sentence in the Requested State. In combination with Israeli extradition law, the Protocol also provides a much-improved framework for dealing with fugitives who claim Israeli citizenship and permits the United States to include hearsay evidence in our extradition documents.

Cultivation/Production. Although the vast majority of drugs consumed in Israel are produced in other countries, the INP reported three significant patterns of production activity during 2006. The nomadic Bedouin tribes that inhabit the Negev desert bordering Jordan and Egypt have long been involved in international smuggling operations -- particularly facilitating the movement of heroin from Jordan to Egypt. However, this year the INP reported that the Bedouin have begun to add a substance, known locally as "nabat," in order to substantially increase the volume of the heroin before transporting it to Egypt for sale.

Next, a new domestically produced drug appeared on the streets of Israel in 2006. Marketed under the name "Orange," (even so far as using the logo of the telecommunications company of the same name), or "Sweet Dreams," the blue and white pills produced a similar effect to Ecstasy and were easily obtainable for about \$12 per pill at kiosks in the commercial districts of most major Israeli cities. The active ingredient in the drug is dimethyl cathinone, which is produced by extracting the cathinone from the "khat" plant. The plant itself is legal in Israel, and is widely cultivated within Israel's Yemenite and Ethiopian immigrant communities. However, it is against Israeli law to extract the cathinone from khat and use it to fabricate any other substances. Police moved against the kiosks openly selling the drug once it became clear that the drug was being produced illegally.

The INP also reported an increase in domestic cultivation of marijuana. Over ten marijuana hydroponics' greenhouses/incubators were discovered in otherwise uninhabited rental homes in the more affluent central region of Israel, and the homes had been converted for the purpose of full-time marijuana cultivation. The INP reported that the seized incubators demonstrated more sophistication than in previous years, including electronic switch timers for lamps and instruction manuals for increasing the THC content of the marijuana.

Drug Flow/Transit. Due to Israel's unique political situation, the intense security presence and surveillance along Israel's borders generally make it difficult for smugglers to bring drugs into the country. Thus, Israel is not a significant transit country for drugs, although Israeli citizens have been part of international drug trafficking networks in source, transit and distribution countries. In 2006, the Second Lebanese War of July/August, and its aftermath, had an unintended effect on drug smuggling into Israel. The increased military presence along Israel's northern border with Lebanon and Syria caused would-be smugglers to modify the routes by which they attempted to

bring drugs into Israel. As security was tightened in the north, more drugs began infiltrating Israel across the relatively peaceful borders with Jordan and Egypt, where Israel has fewer security resources deployed.

In 2006, Israel continued to be more of a transit country than a distribution country for heroin, with heroin primarily flowing from Jordan through Israel en route to the Egyptian market. The Negev Bedouin tribes, using their knowledge of the desert terrain and their familial connections with Jordanian and Egyptian Bedouin, continued to facilitate most of the heroin trafficking across Israel. The Israeli Bedouin trade the heroin in Egypt for cash, Moroccan hashish and marijuana, for which there is a large Israeli market. 60 per cent of the hashish and 86 per cent of the marijuana seized by INP in 2006 was interdicted at the Egyptian border. This year also saw an increase in the amount of cocaine being smuggled across the Jordanian border. While most of the drugs were discovered at the Arava/Negev border-crossing terminal, a Palestinian group also attempted to bring both cocaine and heroin from Jordan across the Dead Sea in one-man boats.

The greatest change in the flow of cocaine into Israel during 2006 was the introduction of liquid cocaine from South America. Cocaine in solid form brought \$70 - \$100 per gram in Israel, and approximately \$70,000 per kg. The Netherlands remained the primary source of Ecstasy for the Israeli market, where it is sold for \$12 - \$20 per pill.

Domestic Programs/Demand Reduction. The Israel Anti-Drug Authority (IADA) is the primary agency responsible for designing and implementing domestic programs to reduce the demand for drugs. In 2006, IADA again addressed the phenomenon of young Israelis developing substance abuse problems while vacationing in India and Southeast Asia. It is commonplace for 20 to 21 year-old Israelis to spend between six months and a year backpacking across Asia or South America after completing compulsory military service. Thousands of young Israelis flock to tourist "colonies" in the Goa region of India for the beaches, the inexpensive cost of living, and the easily accessible and inexpensive drugs -- mostly marijuana and hashish. This year, IADA publicly warned Israeli backpackers of dangers associated with drug activity in India.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. DEA and Israeli officials characterize cooperation between the DEA and INP as outstanding. All DEA investigations related to Israel are coordinated through the DEA Nicosia Country Office.

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 INP is seeking to strengthen relationships between law enforcement agencies in other countries, and has established an office of International Relations within the IADA to pursue this objective. Israel began its final year of a four-year membership term on the Commission on Narcotic Drugs (CND) in January 2007.

V. Statistical Tables

Drug Seizures*

Cocaine (kg)

2006 - 42

2005 - 169**

2004 - 32.4

Heroin (kg)

2006 - 70.3

2005 - 140

2004 - 68.5

Marijuana (kg)

2006 - 5,032

2005 - 10,000

2004 - 16,020

Hashish (kg)

2006 - 898

2005 - 1,022

2004 - 913

LSD (blotters)

2006 - 11,476

2005 - 2,880

2004 - 75,741

MDMA (Ecstasy) (tablets)

2006 - 112,985

2005 - 266,996

2004 - 313,802

Opium (kg)

2006 - 0.1

2005 - 8.4

2004 - 0.05

Cathinone (kg)

2006 - 8.7

2005 - 7.2

2004 - N/A

*2006 data represents seizures from January through October.

Source of data: Israel National Police, Research Department.

**Of the 160kg of cocaine seized in 2005, 120kg were seized aboard one merchant ship in the port of Haifa. The INP determined that this cocaine was destined for Europe, and not the Israeli market.

Jordan

I. Summary

Due to its geographical location between drug producing countries to the north and east, and drug consuming countries to the south and west, Jordan is a transit country for illicit drugs. Jordanians do not consume significant quantities of illicit drugs, and according to the PSD (Public Security Directorate) there are no known production operations in the Kingdom. The PSD believes that the amount of drugs transiting through Jordan continues to grow. According to statistics for the first 11 months of 2006, however, total drug seizures for the year will be slightly below those for 2005. There was a dramatic decrease in the number of persons charged in drug-related cases. There was also a large decrease in the authorities' estimates of the number of drug abusers in Jordan. The PSD attributes these decreases to Jordan's enhanced rehabilitation programs, increased border interdiction operations, better intelligence gathering, and stronger cooperation between Jordan and neighboring countries. 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 increased again this year. Jordan is a party to the 1988 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 PSD's Anti-Narcotics Department 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 significant.

III. Country Actions Against Drugs in 2006

Policy Initiatives. Due to usage of cannabis and heroin among people predominantly between the ages of 18 and 35, Jordan continues its drug awareness campaign focused at educating people of the dangers of drug use. Authorities continue to provide educational presentations in schools and universities throughout the country. The PSD Anti-Narcotics Department (AND) has created a program they call "Friends of the AND". This program sends volunteer civilians into the schools, universities, and other community centers to speak out against drug usage. Jordan has also reached out to all of the country's religious institutions requesting their assistance in combating drug abuse. Jordan publishes a number of brochures and other materials, including antinarcotics cartoons designed for younger children that are aimed at educating Jordan's youth about the dangers of using narcotics. Jordanian authorities also plan to make antidrug abuse movies directed at Jordanian youths next year. This year, the PSD published the first edition of its antinarcotics magazine, and launched a website in English and Arabic for drug abuse awareness and prevention (<http://www.ant-inarcotics.psd.gov.jo/English>). Jordan has agreed to provide advanced training to Palestinian anti-narcotics officers in association with the UNODC, and hopes that this will help promote even more cooperation.

Law Enforcement Efforts. Jordan's PSD maintains an active antinarcotics bureau, and maintains excellent relations with the U.S. DEA- Country Office based in Nicosia, Cyprus. In 2004, GOJ authorities began utilizing x-ray equipment on larger vehicles at its major border crossings between Syria and Iraq. This equipment has proven to be effective and has netted numerous drug seizures in 2005 and increased seizures in 2006 at the border crossings where the equipment has been utilized.

Seizures of captagon tablets are about the same as last year, but PSD claims not to have observed any wide-spread use of the drug in Jordan. The PSD reports that 85 percent of all seized illicit drugs coming into Jordan are bound for export to other countries in the region. Jordan's general drug traffic trends continue to include cannabis entering from Lebanon and more now from Iraq, heroin from Turkey entering through Syria on its way to Israel, and captagon tablets from Bulgaria and Turkey 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 (Karama/Trebil border crossing) have risen significantly again compared to last year. For the last three years, the PSD has continued to observe an increase in trafficking of hashish and opium from Afghanistan through Iraq into Jordan.

Jordanian Drug Seizures

CY	2003	2004	2005	2006 (Jan-Nov.)
Cannabis	4,133	1,931	1,485	739
Heroin	105	186	174	130
Cocaine	9	33	0.5	5
Opium	1	22	36	20
Captagon	2,528,618	9,774,002	11,158,083	8,805,824
Total Drug				
Cases	1,277	1,691	2,041	1,700
Number of				
Arrests	2,119	2,514	4,792	2,724
Number of				
Abusers	1,723	2,158	4,027	2,179

Corruption. Jordanian officials report no narcotics-related corruption or investigations into corruption for the reporting period. There is currently no evidence to suggest that senior level officials are involved in narcotics trafficking. As a matter of government policy, Jordan 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. Jordan is a party to the UN Convention against Corruption.

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 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. The U.S. considers the extradition treaty between the U.S. and Jordan to be in force. A 1997 Jordanian court ruling held that the treaty had not been properly approved by the Jordanian Parliament. The extradition treaty has not been submitted to Parliament for approval.

Cultivation and Production. There are no known production operations. Existing laws prohibit the cultivation and production of narcotics in Jordan and are effectively enforced.

Drug Flow/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 outside of the ports of entry difficult. None of the narcotics transiting Jordan are believed to be destined for the United States.

Domestic Programs/Demand Reduction. Jordan increased the scope of its programs on drug abuse awareness, education, and rehabilitation in 2006. Education programs target high school and college-aged kids. Jordan's antinarcotics cartoon program aimed at younger children designed to dissuade youngsters from trying drugs has continued to flourish. Cultural and religious norms help to control drug use. In conjunction with the UNODC, this year Jordan has again strengthened its treatment and rehabilitation services for drug abusers in the country. The national treatment and rehabilitation strategy and coordination mechanism has proven effective, and Jordan looks to continued successes in this strategy. The PSD reports that it has treated over 150 patients at its drug rehabilitation center. The PSD has plans to construct a new, larger rehabilitation facility that will accommodate more patients. PSD also noted that another highlight of the center's success is the number of patients the Government of Lebanon has sent to Jordan for rehabilitation. The PSD notes that this is another indicator of the strong levels of cooperation between the Governments of Lebanon and Jordan in their antinarcotics efforts. The Jordanian Drug Information Network (JorDIN) was officially established in 2005 with help from the UNODC. Jordan continues to develop the network that will serve as an information sharing device for all of Jordan's treatment providers and the GOJ authorities that deal with antinarcotics programs. The network hopes to provide accurate statistics of Jordan's drug abusers and success levels of treatment.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. The DEA and the interagency Export Control and Related Border Security (EXBS) Program anticipate to providing Jordan with some additional equipment to help Jordan's Border security operations. There are several miles of Jordan's borders that are patrolled only by the PSD's Anti-Narcotics Department. The equipment would include sensitive technologies such as night vision devices, portable thermal imaging units, and all-terrain vehicles. Some of these technologies will require licensing agreements, but would be extremely beneficial to Jordan's antinarcotics programs. Other ongoing GOJ and USG efforts to strengthen border security measures following the Iraq-based terrorist attacks in Amman and Aqaba in 2005 have served to enhance Jordan's detection capabilities and to disrupt the flow of illegal drugs transiting through Jordan.

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

Kenya

I. Summary

Kenya is a significant transit country for cocaine and heroin bound for Europe, and, increasingly, the United States. 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 that 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 quality in recent years. There is a growing domestic heroin and cocaine market and use of cannabis or marijuana is becoming more widespread, particularly on the coast and in Nairobi. Although government officials profess strong support for antinarcotics 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 only modestly increased over 2005. 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 believe that the United States is at least as significant as Europe as a destination for heroin transiting Kenya. Cannabis is produced in commercial quantities primarily for the domestic market (including use by some elements among the large number of tourists vacationing in Kenya). While it is believed that small quantities of cannabis may be bound for export, 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 2006

Policy Initiatives. Counternarcotics agencies, notably the Anti-Narcotics Unit (ANU) within the Kenyan Police Service, continue to depend on the 1994 Narcotic Drugs and Psychotropic Substances Act for enforcement authorities and interdiction guidelines. Revisions to the Narcotics Act on the seizure, analysis, and disposal of narcotic drugs and psychotropic substances drafted by the government of Kenya and the United Nations Office for Drugs and Crime (UNODC) in 2005 were implemented in March 2006. The National Agency for the Campaign Against Drug Abuse (NACADA), the quasi-governmental organization charged with combating drug abuse in Kenya, has recently undergone significant reform to its governing structures and mechanisms, including the appointment of a new director and the creation of a board of directors. These changes are widely viewed as improvements that will lead to enhanced efficacy in the pursuit of its mandate. NACADA is leading recent inter-agency efforts to develop a National Drug Control Strategy for Kenya.

In September 2006, the 16th meeting of the Heads of National Drug Law Enforcement Agencies (HONLEA) in Africa was held in Nairobi. The HONLEA meeting brought together heads of law enforcement agencies from across Africa with representatives of international drug law

enforcement agencies and UNODC experts. The heads shared information on illicit trafficking of cocaine in Africa, cannabis cultivation, and effective control of precursor chemicals. Although these countries meet annually to discuss relevant issues, it is unknown how effectively and enthusiastically they cooperate on a day-to-day basis.

Kenya has no crop substitution or alternative development initiatives for progressive elimination of the cultivation of narcotics. The ANU remains the focus of Kenyan antinarcotics efforts.

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. Airport profiling has yielded good results in arrests for couriers but not major traffickers. Seaport profiling has proven difficult. Despite the official estimate that a significant portion of the narcotics trafficked through Kenya originates on international sea vessels, ANU maritime interdiction capabilities remain virtually nonexistent. Personnel turnover at the ports is high and Kenya currently has limited maritime interdiction capability.

Corruption continues to thwart the success of long-term port security training. Lack of resources, a problem throughout the Kenyan police force, significantly reduces the ANU's operational effectiveness.

Law Enforcement Efforts. Seizures of heroin and cannabis (and its derivatives) continued to decline from 2005 levels, while seizures of cocaine increased over 2005. Kenya seized almost 17 kg of heroin in 2006, a 14 kg decrease from the quantities seized in 2005 (all statistics on drug seizures in this section reflect the period from January to September 2006 as provided by the ANU), and arrested 76 people on heroin-related charges. The ANU concentrates its antiheroin operations at Kenya's two main international airports. There was a sharp decrease in cannabis seizures for 2006. Kenyan authorities seized 5,144 kg of cannabis and its derivatives in 2006 and arrested 2,584 suspects, down from 50,844 kg seized in 2005. The ANU was unable to provide information on cannabis crop cultivation and eradication efforts in 2006 in time for inclusion in this report. 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 increased. Kenya seized 23 kg of cocaine in 2006 and made 6 arrests, compared to 10 kg seized in 2005. Despite the high profile December 2004 record seizure of 1.1 tons of cocaine, Kenya has to date only achieved one successful prosecution related to the case. All but one of the seven defendants accused of trafficking the one-ton plus cocaine shipment seized in Malindi in 2004 were acquitted due to lack of evidence. One defendant, brother to another suspect held by Dutch authorities in connection to the case, was found guilty of drug trafficking in June and sentenced to thirty years imprisonment and fined approximately \$274,000,000. He is the only suspect to be convicted in connection with the seized drugs. It is generally agreed that "smaller fish" were arrested in connection with the case, while the principal culprits responsible for trafficking the cocaine to Kenya remain at large. With the assistance of U.S., U.K., and UNODC experts, Kenya finally tested and destroyed the one-ton cocaine seizure in March 2006. Tests results allayed concerns that the integrity of the one-ton cocaine seizure had been compromised.

Corruption. 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 failure to achieve significant success in the disruption of drug traffickers' networks through arrest and prosecution of those responsible for trafficking the one-ton of cocaine raises questions about the ability or willingness of legal and law enforcement authorities to combat drug trafficking. As in previous years, airport and airline collusion and outright involvement with narcotics traffickers continued to occur in the year covered by this report.

Agreements and Treaties. Kenya is a party to the 1988 UN Drug Convention, the 1961 UN Single Convention and its 1972 Protocol, and the 1971 UN Convention on Psychotropic Substances. The 1931 U.S.-U.K. Extradition Treaty remains in force between the United States and Kenya through a 1965 exchange of notes. Kenya is a party to the UN Corruption Convention and to the UN Convention Against Transnational Organized Crime and its three protocols.

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. Officials continue to conduct aerial surveys to identify significant cannabis-producing areas in cooperation with the Kenya Wildlife Service. However, according to ANU officials, farmers are increasingly savvy about how to shield their crops from aerial detection and difficult terrain hampers eradication efforts. The ANU was unable to provide statistics on the success of their crop eradication efforts in time for inclusion in this report.

Drug Flow/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. A string of cocaine and heroin seizures at Jomo Kenyatta International Airport (JKIA) in spring 2006 (most from flights originating in West Africa) highlights the continuing drug trafficking problem in Kenya. While the arrests of drug "mules" may alert trafficking syndicates that enhanced profiling measures and counternarcotics efforts make JKIA an increasingly inconvenient entry/exit point for drugs, the arrests have achieved little in the way of assisting authorities to identify the individuals behind the drug trafficking networks. ANU officials continued to intercept couriers transiting land routes from Uganda and Tanzania, where it is believed the drugs arrive via air routes. 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. Officials have never identified any clandestine airstrips in Kenya used for drug deliveries and believe that no such airstrips exist.

Domestic Programs/Demand Reduction. The NACADA continues to combat drug abuse, although the quasi-governmental organization's budget remains negligible. Recognizing the dearth of reliable statistics on drug abuse in Kenyan, NACADA is developing plans to conduct a comprehensive survey of the problem in 2007. Kenya continues to make 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. 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 antidrug education into the

schools. NACADA continues to pursue demand reduction efforts via national public education programs on drug abuse. In 2006, NACADA provided e-training on drug awareness to school teachers throughout Kenya. Churches, mosques, and non-governmental organizations provide limited rehabilitation and treatment programs for heroin addicts and solvent-addicted street children. With the support of USAID, the Ministry of Health has developed two rehabilitation and drug abuse treatment facilities in Nairobi and Mombasa.

IV. U.S. Policy Initiatives and Programs

U.S. Policy Initiatives. The principal U.S. antinarcotics 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 U.S. seeks to accomplish this objective through law enforcement cooperation, the encouragement of a strong Kenyan government commitment to narcotics interdiction, and strengthening Kenyan antinarcotics and overall judicial capabilities.

Bilateral Cooperation and Accomplishments. There was a modest expansion of USG bilateral cooperation with Kenya and surrounding countries on antinarcotics matters in 2006. The recent donation by ATA to the government of Kenya (GOK) of four boats (coupled with training) will enable GOK multi-agency shallow water patrols along Kenya's coastline, which should significantly improve the capacity of the GOK to patrol and secure Kenya's coastal waters and assist drug interdiction efforts on the coast. ATA is also assisting with building Kenya's capacity to patrol points of entry to and in the Port of Mombasa by providing training, refurbishing existing patrol boats, and providing two small new boats. USAID provides support to projects to develop addiction treatment services to heroin addicts in Nairobi and on the Kenyan coast. Additionally, a DOD-funded drug abuse awareness campaign raised public awareness of the growing rates of drug addiction in the coastal region.

The Road Ahead. The USG will continue to take advantage of its good relations with Kenyan law enforcement on enhancing its operational capacity, and information sharing. USG will actively seek ways to maximize antinarcotics 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. The USG will also continue to expand our public awareness outreach to assist demand reduction efforts in Kenya.

Lebanon

I. Summary

Lebanon is not a major illicit drug producing or drug-transit country; however, a history of opium cultivation and a central location make Lebanon a country that could revert to a more important role in illicit drug trafficking. Lebanon was once the world's leading cannabis resin (hashish) supplier, but continual eradication efforts have had a significant impact on that illicit industry. Serious actions by the Lebanese government have helped to prevent cannabis cultivation and to eradicate illicit crops before harvest in the Bekaa Valley. It appears that similar crop destruction operations will continue to be routine operations; however, illicit crop cultivation is likely to continue as an option for local farmers due to an increasingly difficult economic climate and a lack of investment in alternative crops.

There is no significant illicit drug refining in Lebanon, and any known production, trading, or transit of precursor chemicals. Drug trafficking across the Lebanese-Syrian border has diminished substantially as a result of cross-border efforts to deter drug smuggling activity, and the withdrawal of the Syrian Army from Lebanon. While the Syrian Army occupied Lebanon, there were regular reports that certain officers facilitated drug trafficking in the Bekka Valley. The Lebanese government continued its ongoing drug education 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 Lebanese government has increased its interest in fighting synthetic drugs, as the problem has grown in scope. Lebanon is not a major transit country for illicit drugs, and although a few major drug networks exist, most trafficking is done by less sophisticated dealers. Opium and cannabis derivatives are trafficked in small amounts in the region, but there is no evidence that the illicit narcotics that transit Lebanon reach the U.S. in significant amounts. Traffickers smuggle South American cocaine into Lebanon primarily via sea and air routes from Europe, Jordan, and Syria, or directly to Lebanon in operations that are often financed by Lebanese nationals living in South America who work with resident Lebanese traffickers. Synthetics are smuggled into Lebanon primarily for sale to high-income recreational users.

The slow economic growth in rural Lebanon and the lack of investment in alternative crops continues to make cultivation of illicit crops attractive to local farmers in the Bekaa Valley in eastern Lebanon. However, due to ongoing efforts by the government to eradicate illicit crops, a return to wide scale illicit cultivation is unlikely at the present time. The government also continues a counternarcotics public information campaign to discourage new planting.

There is no significant illicit drug refining in Lebanon. Such activity has essentially disappeared due to the attention paid to suppression by the Lebanese government. Nonetheless, small amounts of precursor chemicals shipped from Lebanon to Turkey via Syria, have been diverted recently 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 2006

Policy Initiatives. The Ministry of Interior again made counternarcotics a top priority. The government also continued its vigorous campaign to discourage drug use by expanding public awareness through media campaigns, written advertising and activities on university campuses.

Accomplishments. Lebanese law enforcement officers cooperated with law enforcement officials bilaterally and through Interpol on drug law enforcement. Lebanese law enforcement officers also maintain excellent relations with the U.S. Drug Enforcement Administration, Nicosia Country Office based in Cyprus. Several European and Persian Gulf countries have illicit drug enforcement offices in Beirut with which local law enforcement authorities cooperate. UNODC has provided the Government of Lebanon with 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. UNODC reported authorities seized over 900 kg of cannabis herb and resin, and significantly lesser quantities of other illicit drugs in the first nine months of 2006.

Corruption. Corruption remains a problem in Lebanon throughout the government and even up to senior levels. The U.S. is unaware that government corruption is connected with drug production or trafficking, or that corrupt government officials protect drug traffickers. As a matter of government policy, the GOM 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. While low-level corruption in the counternarcotics forces is possible, there is no evidence of wide-scale corruption within the Judiciary Police or the Internal Security Forces (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. The threat of eradication appears to be impacting farmers’ decisions not to cultivate 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. As a result, Lebanon is not believed to be a significant drug producing country, although the danger of some illicit cultivation is always present as promised alternative livelihoods for farmers engaged in illicit cultivation in the past have not been developed as promised.

Drug Flow/Transit. Narcotics trafficking through traditional smuggling routes has been curtailed by joint Lebanese-Syrian operations along their common border. Likewise, illicit drug trafficking along the Israel-Lebanon frontier has been insignificant since the Israeli withdrawal from Lebanon in May 2000 and the subsequent fighting with Hezbollah in Southern Lebanon. The primary route for smuggling hashish from Lebanon is 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 airport control and off shore patrols. The ISF has asserted that Lebanese hashish is not smuggled into the United States, which is consistent with U.S. information.

Domestic Programs (Demand Reduction). Lebanese leaders understand that they need to address the problem of illicit drug use in Lebanon. In 2002, the government launched a public awareness campaign to discourage drug use, which continues today, and textbooks approved for use in all public schools contain a chapter on narcotics to increase public awareness. Lebanon's current drug law requires that a National Council on Drugs (NCD) be established. The NCD's services and activities will include substance abuse prevention, awareness, treatment, and assistance to substance abusers and their families, in addition to developing and implementing a national action plan to counter drug abuse. 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, provides budgetary support to ON. 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. ON's client base under 24 years of age has increased more than ten-fold since 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 MDMA (Ecstasy) and methamphetamine is on the rise. 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 ward, which was funded by USAID and can accommodate up to 15 patients, was built in one of the men's centers and became operational in 2005. ON offers no outpatient drug withdrawal programs. ON also engages in drug prevention activities such as promoting drug awareness among the population through advertisements and education programs, as well as distributing educational materials on college campuses. The organization also has a center for statistical studies and a research office.

Another drug rehabilitation center for men operates in Zahleh in the Bekaa Valley in coordination with the Ministry of Health and Saint Charles Hospital. The center has the capacity to accommodate up to 16 patients, and the 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 recently in downtown Beirut. 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.

IV. U.S. Policy Initiatives and Programs

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 Bekaa Valley that would provide

impoverished residents with alternate sources of income. The USG has 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 annual net income of \$900 per hectare. USAID also helped increase the treatment capacity of one of Oum el Nour's rehabilitation centers (see above on Domestic Programs). In 2003, the State 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 treatment capacity at Oum el Nour centers.

The Road Ahead. The success of measures to combat narcotics trafficking and illicit cultivation depends largely on the will of the Government of Lebanon. Since the withdrawal of Syrian forces, the Lebanese government has renewed access to areas inside Lebanon where historically cultivation has been centered. However, Lebanon has not developed a successful socio-economic strategy to properly address the problem of crop substitution. The United States will continue to press the Government of Lebanon to maintain its commitment to combating narcotics production and transit and implementing anticorruption policies.

Morocco

I. Summary

Morocco achieved significant reductions in cannabis production and cultivation, although it remains one of the world's major producers and exporters of cannabis. According to the Agency for the Promotion of Economic and Social Development of the Northern Prefectures and Provinces of the Kingdom of Morocco (APDN), Morocco produced an estimated 53,400 metric tons (MT) of cannabis in 2005, representing a significant decrease from 2004 when it produced 98,000 MT. According to the combined study on cannabis conducted by the United Nations Office on Drugs and Crime (UNODC) and the APDN, Morocco's gross cannabis production in 2005 provided for potential cannabis resin (hashish) production of 1,067 MT. According to the UNODC report, in 2005, Morocco succeeded in decreasing its land dedicated to cannabis cultivation to 72,500 hectares, down from 120,500 hectares in 2004, a decrease of 40 percent, due in part to an aggressive Government of Morocco (GOM) eradication campaign. 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. Available information continues to indicate that Moroccan cannabis does not significantly impact the United States. Morocco is a party to the 1988 UN Drug Convention.

In 2006, the GOM in addition to its efforts against production, acted against drug-related corruption. In September, a GOM investigation into the network of a major drug baron arrested in the north resulted in the arrest of more than a dozen high-ranking government, judicial, military, and law enforcement officials linked to narcotics-related corruption.

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 2005 UNODC report, the illicit trade in Moroccan cannabis resin generates approximately \$13 billion a year in total revenues, but Morocco retains only a small share (approximately \$325 million) of total revenue from 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. EU law enforcement officials report that Moroccan cannabis is typically processed into cannabis resin or oil and exported predominately to Europe, as well as 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 continues to be a small but growing domestic market for harder drugs like heroin and cocaine, cannabis remains the most widely used illicit drug in Morocco. There is no substantial evidence of widespread trafficking in heroin or cocaine, but 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 2006

Policy Initiatives. The GOM's partnership with UNODC in conducting cannabis surveys the past three years (2003-2005) reflects Morocco's growing desire to compile accurate data on narcotics

production and address its narcotics problem. In 2004, Morocco launched an awareness campaign for cannabis growers alerting them to the adverse effects of cannabis cultivation for the land and informing them of alternatives 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, a cannabis producing province, as the site for the construction of the National Institute of Medicinal and Aromatic Plants (INPMA).

Law Enforcement Efforts. According to government statistics, Morocco in 2005 seized 116 tons of cannabis, down from the previous year's total of 318 MT. Seizures, however, were up for cocaine, heroin, and psychoactive drugs during the same period.

Since 1995, the GOM reports it has deployed up to 10,000 police personnel into the North and Rif mountains to interdict drug shipments and to maintain antinarcotics checkpoints, rotating personnel approximately every six months. 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. Morocco and France agreed in 2004 to reinforce bilateral counternarcotics cooperation by deploying liaison officers to Tangiers and Paris. According to both Moroccan and French police sources, controlled deliveries of drugs have proven to be a very successful interdiction technique as a result of that joint initiative.

The GOM in 2005 destroyed more than 7,000 ha of cannabis, primarily in Larache and Taounate Provinces. As part of its 2006 eradication campaign, which targeted more than 15,000 ha, the GOM claims to have completely eliminated cannabis production in Larache province. 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 to fifteen years' imprisonment remains the typical sentence for major drug traffickers convicted in Morocco. In 2004 (latest figures available), Morocco claims to have arrested 22,526 Moroccan nationals and 356 foreigners in connection with drug-related offenses.

Corruption. As a matter of government policy, the GOM 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. In September, a GOM investigation into the network of a major drug baron resulted in the arrest of more than a dozen high-ranking government, judicial, military, and law enforcement officials linked to narcotics-related corruption, including a senior security official and former chief of police in Tangiers. This investigation, as part of a larger government effort to combat corruption, led to further high-level shake ups in the law enforcement community, as well as the detention of other alleged drug traffickers. Although this investigation continues, the trials of some of the arrested individuals are moving forward. 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. Morocco and the United States cooperate in law enforcement matters under an MLAT.

Cultivation/Production. The center of cannabis production continues to be the province of Chefchaouen, where 56 percent of Morocco's cannabis is cultivated. Production, however, has expanded north in the last two decades to the outskirts of Tangiers and east toward Al Hoceima. According to a special 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 2005 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. An UNODC report warned that this agricultural monoculture represents an extreme danger to the ecosystem due to the extensive use of fertilizers. Moreover, forest removal continues to be the method 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 of illicit cannabis bound for Spain travel via fishing vessels or private yachts. Smaller “zodiac” speedboats, which can make roundtrips to Spain in one hour, are also reportedly being used to transport drugs. Drug shipments of up to two tons have been seized on these boats. 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 (54 percent of global seizures in 2004). 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. Due to the Schengen zone, once contraband reaches Spain it can normally pass to most of Western Europe, without fear of regular inspections.

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 antidrug use 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 antimoney-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 narcotics 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 U.S. 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 narcotics officials and by U.S. officials to Morocco. In September 2005, the U.S. Coast Guard sent a Mobile Training Team to provide training in maritime law enforcement boarding procedures.

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, and heroin consumed primarily in Europe, for mandrax (methaqualone) consumed primarily in South Africa.” Some illicit drug shipments passing through Mozambique may also find their way to the United States and Canada. Drug production mostly is limited to herbal cannabis cultivation and a few mandrax laboratories. Evidence suggests significant use of herbal cannabis and limited consumption of “club drugs” (Ecstasy/MDMA), prescription medicines, and heroin by the country's urban population. While the Mozambican government recognizes drug use and drug trafficking as serious issues, the country's porous borders, very poorly policed seacoast, and inadequately trained and equipped law enforcement agencies compound these problems. The United States, 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 in 2005 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, Sofala, and Cabo Delgado provinces. Limited amounts are trafficked to neighboring countries, primarily South Africa. There are indications that small quantities of a low quality Ecstasy are manufactured in southern Africa, with Mozambique as a possible producer. During the year, Mozambican authorities continued to raid mandrax facilities and seize production equipment. Mozambique's role as a drug-transit country and a favored point of disembarkation in Africa continues to grow, mostly because of general negligence with respect to airport and border security control mechanisms. 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 usually originate in Southeast Asia and typically transit India, Pakistan, the United Arab Emirates, and later Tanzania, before arriving by small ship or, occasionally, overland to Mozambique. Many traffickers are of Tanzanian or Pakistani origin. Increasing amounts of cocaine from Colombia and Brazil are sent with couriers on international flights from Brazil to Mozambique, sometimes via Lisbon, before being transported overland to South Africa. In the past, drug traffickers recruited young women in Maputo to work as couriers to and from Brazil, but because of growing suspicion concerning female passengers on these flights, traffickers are now also using men. Mozambique is not a producer of precursor chemicals.

Mozambique has seen growing abuse of heroin among all levels of urban populations. The abuse of mandrax, which is usually smoked in combination with cannabis, continues to be a matter of concern for countries in southern Africa. Shipments of mandrax continue to enter South Africa from India and China, sometimes after passing through Mozambique. The 2005 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 2006

Policy Initiatives. Mozambique's accomplishments in meeting its goals under the 1998 UN Drug Convention remain limited. Government resources devoted to the counternarcotics effort are meager, and only limited donor funds are available. The Mozambican government carries out drug education programs in local schools in cooperation with bilateral and multilateral donors as part of its demand reduction efforts.

Law Enforcement Efforts. Mozambique's antidrug brigade operates in Maputo and reports to the Chief of the Criminal Investigation Police in the Ministry of Interior. The brigade has few resources at its disposal. In 2003 UNODC donated vehicles, night vision binoculars, and drug detection equipment to the brigade, but most of this equipment is in need of repair. The brigade has not received training for several years. With assistance from UNODC, 24 customs officials at the ports of Beira and Nacala received training in 2006. Since July 2005, a 57-person specialized police unit designed to strengthen efforts to fight organized crime, including narcotics trafficking, has operated at airports in provincial capitals. In September 2006, Mozambican and Brazilian authorities signed a memorandum of understanding on principles, in preparation for an eventual extradition agreement for those convicted of trafficking drugs between the two countries. Mozambican authorities seized 4,500 kg of marijuana in Mozambique in 2005. As interdiction efforts improve at the Maputo airport, traffickers have used alternate airports, including those of Beira, Nampula, Quelimane and Vilankulos. Publicized seizures in 2006 include:

- The May seizure of one ton of hashish hidden in juice containers in a shipment arriving at Maputo port from Jamaica
- The May arrest of two Kenyan nationals at Maputo airport in possession of 100 capsules of cocaine.
- The June seizure of 99 capsules of cocaine carried by a Peruvian women arriving at Maputo airport from Brazil.
- The September arrest of a South African citizen arriving from Lisbon (whose flight originated in Suriname) with at least 70 capsules of cocaine in his stomach.
- The October destruction of 33 kg of cocaine, most of which had been seized at Maputo airport from drug traffickers arriving from Brazil via Lisbon.

Maputo police arrested 23 people (13 women and 10 men) in connection with cocaine trafficking in the first nine months of 2006. Some of the arrested received sentences of between 6 and 16 years. On several occasions during the year, Mozambican authorities highlighted a general lack of resources for destroying seized drugs, particularly hashish, cannabis, and 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 seized in 2000 began in February. On December 30, a court in Inhambane Province sentenced the four police officers to prison terms ranging from 16 to 19 years and ordered the confiscation of goods acquired

with money resulting from the sales. As official policy, Mozambique seeks to enforce its laws against narcotics trafficking, but as noted above, confronts difficulties in doing so 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. On September 20, 2006, Mozambique deposited at the UN its instrument of ratification on the UN Convention against Transnational Organized Crime. Mozambique has signed, but not yet ratified the UN Convention Against Corruption.

Cultivation/Production. Cannabis is cultivated primarily in Tete, Sofala, and Cabo Delgado provinces. Intercropping is the most common method of production. The Mozambican government has no reliable estimates of crop size. Authorities have made efforts in 2006 to eradicate cannabis crops through controlled burns.

Drug Flow/Transit. Assessments of drugs transiting Mozambique are based upon limited seizure data and the 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 to South Africa. 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 drug couriers trafficked cocaine from Colombia and Brazil to Mozambique, often through Lisbon, 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 Program/Demand Reduction. The primary substances of abuse are alcohol, nicotine, and herbal cannabis. The Mozambican Office for the Prevention and Fight Against Drugs (GCPCD) reported in 2006 that there was also significant use of heroin, cocaine, and psychotropic “club drugs,” such as Ecstasy and mandrax, across Mozambique's urban population. GCPCD coordinates a drug prevention and 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. GCPCD has received some support from bilateral donors for community policing and demand reduction. Drug abuse and treatment options remain limited; according to the GCPCD, the main hospitals in Maputo and Beira, respectively, provide drug treatment assistance in partnership with a local NGO.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. The United States continues to sponsor Mozambican law enforcement officials and prosecutors to attend regional training programs at the International Law Enforcement Academy (ILEA) for Africa in Botswana. Law enforcement officials have also received training at ILEA in New Mexico. The United States has supported the police sciences academy near Maputo, through training and technical assistance in the areas of drug identification and investigation, as well as other areas of criminal sciences. The assistance included construction of a forensic laboratory. Technical assistance programs at the police academy focus on methods to foster better

relations between the community and the police. Among other topics, courses provided by technical specialists include courses on drug interdiction. In 2006 the United States delivered 50 special purpose bicycles and trained bicycle patrol police for a pilot community policing program. USAID provides training support to the Attorney General's Central Office for the Combat of Corruption (GCCC), formerly the anticorruption unit.

The Road Ahead. U.S. assistance in support of the GCCC will continue in 2007, with plans to place a short-term regional legal advisor at the unit for a period of six months through the Department of Justice Overseas Prosecutorial Development Assistance and Training program. Additionally, plans are underway to improve Mozambique's border security capabilities. A Department of Homeland Security border assessment team visited Mozambique in October. This assessment visit is expected to be followed by the provision of mainly communication equipment, along with technical training, to boost Mozambican border control capabilities. Also, the U.S. military has provided shallow draft vessels for limited coastal security work. The GOM needs to continue its focus on the corrosive effects of corruption to assure continuing progress in its narcotics control efforts.

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 2006 showed a marked decrease compared to previous years' figures, with approximately \$220,000 worth of drugs (mostly marijuana and Mandrax (methaqualone), along with smaller amounts of cocaine and Ecstasy) seized between April 2005 and March 2006. 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 yet 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 2006.

III. Country Actions Against Drugs in 2006

Policy Initiatives. Namibia has requested United Nations (UNODC) assistance in completing a National Drug Master Plan, which is still being formulated. While Namibia has not said precisely when it will 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. The Combating of the Abuse of Drugs Bill was recently tabled in Parliament. If passed, it will ban the consumption, trafficking, sale and possession of dangerous, undesirable and dependence-inducing substances. Namibia is also a signatory to the International Convention for the Suppression of the Financing of Terrorism. 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 (SARPCCO). The Minister of Safety and Security and working level officials meet regularly with counterparts from neighboring countries, during which efforts to combat cross border contraband shipments (including narcotics trafficking) are discussed. In late 2006, Namibian Police arrested a man in Namibia after he and his wife allegedly attempted to smuggle cocaine in their stomachs via a flight from Brazil. The wife died of an overdose in the attempt.

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, it 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 or from Latin America for illicit purposes

The current maritime security posture does not allow the Namibian police, naval, and port authorities to monitor maritime activities outside the 5 km outer anchorage area of Namibia's major ports in Walvis Bay and Luderitz. It has been reported that drug traffickers have been able to exploit this weakness by using small crafts to meet larger vessels outside these controlled areas. The Namibian Navy is chartered with the responsibility to assist the police and customs officials with better patrolling of Namibia's Exclusive Economic Zones (EEZs) and expects to have a mission capable fleet starting mid-2008.

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). There is also increasing evidence of the problem of cocaine use in Namibia.

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. Representatives of several law enforcement agencies (Customs and Border Protection, Immigration and Customs Enforcement, Prison Service) and prosecutors have participated in ILEA training. The Namibian Police took part in USG-funded training for the first time in 2006. The 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 a September 2004 alien smuggling investigation.

The Road Ahead. The USG will coordinate with the newly formed Anti-Corruption Commission to allow them 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 and Europe in amounts sufficient to generate serious concern. In addition to being a transit hub for narcotics moving abroad, Nigeria also produces marijuana/cannabis, which is trafficked to 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 and growing in many cities throughout Nigeria.

Despite the improved performance of the National Drug Law Enforcement Agency (NDLEA) following the November 2005 appointment of Chairman Ahmadu Giade, government efforts to stop the transshipment of illicit drugs through Nigeria to other countries remain inadequate. At U.S. Government urging Giade established "Special" Commands at Kano and Port Harcourt airports and the Ministry of Aviation renovated and upgraded NDLEA facilities at Nnamdi Azikiwe International Airport, Abuja. After six years with one arrest at Kano Airport, the new command made 8 arrests in the first 6 months of 2006 and achieved 6 convictions. The NDLEA demonstrated significant progress in drug interdiction, especially at the airports, and Giade reinstated the Joint Task Force to work with the U.S. and other drug liaison officers, which his predecessor had disbanded. The National Drug Law Enforcement Agency (NDLEA) lacks adequate resources to handle even its most basic priorities. Staffing and support are uneven throughout the country. The agency currently lacks major equipment important to implement its mandate, such as functioning x-ray machines at the international airports and motors for the Lagos seaport unit's boats. In addition, most commands have insufficient motor vehicles and communications equipment. Many lack weapons and restraints such as handcuffs and/or flex-ties. The U.S. Government donated narcotics-detecting ion scanners located at three airports. However, when U.S.-donated consumable supplies for the machines were expended, the NDLEA did not purchase additional materials to allow for continued use of the ion scanners. The ion scanners have been idle for about two years. The Lagos airport command does continue to maintain and use the U.S. Government-donated x-ray machine, however, the machine is cumbersome to operate and only marginally effective. There is no indication that NDLEA utilizes narcotics sniffing dogs donated by the government of South Africa. Despite erratic performance, there have been some successes in drug interdiction, mostly at the airports. There have been credible allegations of drug-related corruption at NDLEA and several senior officials were suspended in 2006 pending investigation by the Economic and Financial Crimes Commission (EFCC). Nigeria is party to the 1988 UN Drug Convention.

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, including the Customs Department, Immigration Department, and the Nigeria Police Force (NPF), are also involved in narcotics law enforcement. Heroin and cocaine dominate seizures at the Murtala

Mohamed International Airport in Lagos, and other ports of entry to Nigeria. All arrests at Kano airport have involved cocaine destined for the Netherlands. Sale and local consumption of marijuana is on the increase. The rise in marijuana use domestically in Nigeria is evinced by the increased quantities seized, the number and size of illicit plots discovered and destroyed, and numbers of arrests made.

III. Country Actions Against Drugs in 2006

Policy Initiatives. In addition to establishing the special commands at Kano and Port Harcourt airports, Chairman Giade effected a wholesale reassignment of senior NDLEA officers throughout the country. He also reinstated the Joint Task Force to work with the U.S. and other drug liaison officers which his predecessor had disbanded. The NDLEA has also proposed a new salary structure for the agency to improve performance and staff morale, but has provided no details.

Law Enforcement Efforts. In 2006, the NDLEA demonstrated significant progress in drug interdiction although it did not develop new policies aimed at eradicating illicit narcotics trafficking. In 2006 the NDLEA and DEA conducted several international operations. One such operation resulted in the seizure of 51 kg of heroin, which was shipped from Pakistan through Dubai, and then to Nigeria. The NDLEA also conducted international operations with UK officials in 2006. For the first time in five years the NDLEA, with DEA assistance, targeted and arrested two major drug kingpins who are presently being tried for drug trafficking and related money laundering offenses. The two kingpins are allegedly responsible for substantial quantities of heroin and cocaine transiting Nigeria to the U.S. and Europe. One of the kingpins is believed to be responsible for at least three drug-related murders on Lagos Island.

Corruption. Corruption is entrenched in Nigerian society, and remains a significant barrier to effective narcotics enforcement. To combat corruption 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 prosecuted any narcotics-related cases. Similarly, no narcotics-related cases have been prosecuted under the Money Laundering Act of 2004.

Although the NDLEA has excellent relations with the EFCC, relationships with the Independent and 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. There appears little appreciation for the interdisciplinary requirements of Nigeria's counternarcotics efforts at the highest levels of the Nigerian government and this failure to cooperate weakens those efforts at all levels.

To date, no senior government official has been arrested in connection with drug trafficking. 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 allegations of government officials using their positions 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 a certain level of corruption might be paid to protect those senior level traffickers. The NDLEA lacks adequate in-house mechanisms, such as an internal affairs section, to investigate corruption within the agency. As a result, Chairman Giade refers narcotics-related corruption cases to the EFCC for investigation in an effort to show transparency. 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 that arrange for large-scale movements of cocaine and heroin, but there have been no cases, which have proved this thesis.

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, Delta and Edo 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 South America. Interdictions are mainly at the Murtala Mohamed International Airport in Lagos, which has a U.S. Government – provided digital X-ray machine. The NDLEA also has sniffer dogs provided by the South African government, but they are seldom used. Port Harcourt Airport, normally operating more than eight international flights per week, is being utilized as a new smuggling route. Seaports are believed to be a significant point for drugs to enter and exit Nigeria, but, except in Lagos, 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. There are credible reports that many convicted for narcotics offenses never return after their trials to serve time in jail, but simply disappear back into the community. 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. Drug treatment is generally not available.

IV. U.S. Policy Initiatives and Programs

In 2006, the 2002 Letter of Agreement signed between the U.S. and Nigerian Governments for narcotics-related grant assistance was amended for the seventh time. The amendment provided financial assistance in the amount of \$550,000 to the NDLEA, EFCC, ICPC and NPF. Subsequently, an additional \$1,500,000 has been provided for counternarcotics. Personnel from all four agencies and Customs and Immigration also benefited from training at the ILEA in Botswana and/or the United States.

Bilateral Accomplishments. The controlled delivery operations and arrests mentioned above are significant accomplishments. In addition, in 2006 the NDLEA and DEA attended the annual International Drug Enforcement Conference (IDEC) in Canada. During the IDEC the NDLEA and DEA Lagos identified a Nigeria and U.S.-based major international heroin trafficking organization for dismantling.

The NDLEA Training Academy, established in 1993 and now located in Jos, sponsors 4, 6 and 9-month training sessions for up to 140 cadets. On occasion, the NDLEA Academy has hosted UN-sponsored training for other countries at the Academy. The U.S. Government has also provided assistance to the academy in the past, including two State Department counternarcotics assistance (INL)-funded training courses conducted by DEA: a one week airport interdiction seminar (20 students) and a two week regional basic interdiction course (30 students) in 2006.

There have been problems with some U.S. assistance equipment donated to Nigeria: 60 VHF radios and 2 Base stations donated through an INL assistance program to the National Police in August 2001 and unaccounted for in 2005 end-use monitoring remained missing in 2006. Ion scanners donated to the NDLEA and located at the Lagos, Abuja, and Kano airports were not used in 2006 due to the lack of consumables, although they reportedly remain in excellent working condition. The INL-provided x-ray machine at the Lagos airport remains in use but is only marginally effective as it was designed for medical application, not airport use. In addition, hand held radios were provided to the Kano airport command and two vehicles were restored to service. INL also provided evidence safes to NDLEA headquarters and Kano airport. INL, in close consultation with the U.S. Embassy in Abuja, is considering remedies to many of the equipment problems set out above.

The Road Ahead. The new leadership at NDLEA is making strides to combat institutionalized corruption that hinders effective counternarcotics enforcement. However, until the corruption situation at NDLEA, and in other enforcement agencies is seriously addressed by the Government of Nigeria, narcotics trafficking will continue to increase. The failure of the GON to support and adequately fund counternarcotics efforts has been a major disappointment. It remains crucial that the NDLEA make progress against high-level narcotics traffickers, lest the trafficking situation in Nigeria and all of West Africa drift completely out of control. Unless Chairman Giade gets and appropriately uses the resources, cooperation and support he needs, 2007 is likely to be more disappointing than 2006.

Saudi Arabia

I. Summary

Saudi Arabia has no appreciable drug production and is not a significant transit country. Saudi Arabia's conservative cultural and religious norms discourage drug abuse. The Saudi Government places a high priority on combating narcotics abuse and trafficking. Since 1988, the Government has imposed the death penalty for drug smuggling. Drug abuse and trafficking do not pose major social or law enforcement problems; however, Saudi officials acknowledge that illegal drug consumption and trafficking are on the rise. This rise has caused increased arrests and governmental suppression efforts over the past year. Saudi and U.S. counternarcotics officials maintain good relations. Saudi Arabia is a party to the 1988 UN Drug Convention.

II. Status of Country

Saudi Arabia has no significant drug production, and in keeping with its conservative religious values and 1988 UN Drug Convention obligations, it 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. During 2006, approximately 20 executions for narcotics-related offenses were reported in the Saudi media. Saudi Arabia maintains a network of overseas drug enforcement liaison offices and state-of-the-art detection and training programs to combat trafficking. While Saudi officials are determined in their counter narcotics efforts, drug trafficking and abuse is a growing problem. Since the Saudi government provides no statistics on drug consumption, interdiction, or trafficking, it is difficult to substantiate this assessment with hard data. Newspaper reports indicated that there are approximately 150,000 drug addicts and users in the Kingdom. However, anecdotal evidence suggests that Saudi Arabia's relatively affluent population, large numbers of idle youth and high profit margins on smuggled narcotics make the country an attractive target for drug traffickers and dealers.

The Saudi Government undertakes widespread counternarcotics educational campaigns in the media, health institutes, and schools. The government also blocks internet sites that it deems to promote drug abuse. Government efforts to treat drug abuse are aimed solely at Saudi nationals, who are remanded to one of the nation's four drug treatment centers in Riyadh, Jeddah, Dammam and Qassim. Al-Amal hospital in Riyadh has an in-patient rehabilitation center for women. Additionally, media reports and Saudi officials noted that the Ministry of Health planned to open an in-patient rehabilitation center for female addicts in the Jeddah branch of Al-Amal hospital at the end of 2006. As of early 2007, the center had not yet been opened. The hospital currently treats female drug abusers as outpatients. The women's branch at the General Presidency for Fighting Narcotics, which was established in 1988 with only one female employee, currently it has 40 female staff members. Expatriate substance abusers are jailed and summarily deported. Health officials confirm anecdotal reports of an increase in drug abuse, but note that most addictions are not severe due to the scarcity of available narcotics and their diluted form. Saudi narcotics officials said that Captagon, heroin, hashish and Khat are the most heavily-consumed substances, but Saudi officials report that cocaine and amphetamines are also in demand. Paint/glue inhalation and abuse of prescription drugs are also reported.

III. Country Actions Against Drugs in 2006

Policy Initiatives. The lead agency in Saudi Arabia's drug interdiction efforts is the Ministry of Interior, which has over 40 overseas offices in countries representing a trafficking threat. In addition, the Saudi Government continues to play a leading role in efforts to enhance intelligence sharing among the six nations of the Gulf Cooperation Council.

Accomplishments/Law Enforcement Efforts. Saudi and U.S. DEA officials exchange information on narcotics cases. Drug seizures, arrests, prosecutions and consumption trends are becoming more a matter of public record. Contrary to previous years, illegal narcotics seizures by Saudi officials appear frequently in local newspapers.

Corruption. As a matter of government policy, the Government of Saudi Arabia 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. There is no evidence of involvement by Saudi Government officials in the production, processing or shipment of narcotic and psychotropic drugs and other controlled substances. However, newspapers reported in August 2006 that one Saudi officer and two border guard policemen were beheaded for drug distribution and smuggling. Anecdotal evidence suggests that drugs are widely used in Saudi prisons in which certain officers are involved in selling and distribution. Saudi Arabia has signed, but not ratified, the UN Convention against Corruption.

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 is also party to the UN Convention against Transnational Organized Crime.

Cultivation/Production. Cultivation and production of narcotics in Saudi Arabia is negligible. However, one incident reported in the media indicated that the National Guard in Madina raided a house after cannabis was discovered in the yard.

Drug Flow/Transit. Saudi Arabia is not a major transshipment point. Officials say that stricter control measures practiced by the country have led to more seizures. Captagon and heroin are smuggled into the Kingdom from the northern border with Jordan. Hashish is smuggled into the Kingdom from its south-eastern borders with the United Arab Emirates, and Khat is smuggled into the Kingdom from its southern borders with Yemen.

Domestic Programs/Demand Reduction. In addition to widespread media campaigns against substance abuse, the Saudi Government sponsors drug eradication programs directed at school-age children, health care providers, and mothers. The Ministry of Civil service will begin requiring applicants for civil service positions to take a drug test as of January 2007. Executions of convicted traffickers (public beheadings, which are widely publicized) are believed by Saudi officials to serve as a deterrent to narcotics trafficking and abuse. The country's influential religious establishment actively preaches against narcotics use, and Government treatment facilities provide free counseling to Saudi addicts.

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. Saudi Arabia is part of the International Counternarcotics Office in Cairo that works closely with the U.S. counternarcotics agencies.

Road Ahead. The U.S. will continue to explore opportunities for additional bilateral training and cooperation with Saudi counternarcotics and demand reduction officials.

Senegal

I. Summary

Counternarcotics elements of the Senegalese government remain concerned about the production and trafficking of cannabis, and to a lesser degree, hashish. Increasingly, quantities of cocaine are being seized; heroin seizures are rare. Senegal's 2005 money laundering statute and the establishment of a financial intelligence unit has had a limited impact. Senegalese authorities have been under pressure from European nations to curtail illegal immigration to the EU and bilateral assistance to combat immigration may also have some positive effect on counternarcotics enforcement. 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

While trafficking of all types of drugs, including heroin, cocaine and psychotropic depressants, exists in Senegal, cannabis production and trafficking continued to survive most enforcement efforts. Southern Senegal's Casamance region is at the center of the cannabis trade. It is generally acknowledged that a significant portion of cultivated land in Casamance is devoted to illicit cannabis cultivation. Police are reluctant to undertake greater enforcement efforts against cannabis cultivation in the Casamance for fear of hampering the ongoing efforts to establish peace.

Senegal also serves as a transit country for traffickers due to its location, infrastructure and porous borders. During 2006, authorities interdicted a container of more than eight tons of hashish en route from Pakistan to Europe. Additionally, there is evidence that cocaine originating from South America is increasingly transiting Senegal en route to Europe. Senegalese, European and UN Office of Drugs and Crime (UNODC) efforts to tighten security at the maritime port are still in the development phase. In general, drug enforcement efforts remain under-funded and undermanned, allowing the illegal cannabis trade and trafficking to continue unabated.

III. Country Actions Against Drugs In 2006

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 among enforcement forces have been hampered because of insufficient funding. The Senegalese National Assembly in recent years passed a uniform common law and issued a decree against money laundering.

Accomplishments. 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 difficult 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 are constrained in their efforts to eradicate cannabis cultivation in the southern part of the country because of a long-term insurgency. Meetings have been organized with island populations in the south in accordance with the UNODC to promote substitution of cannabis cultivation with that of other crops.

Law Enforcement Efforts. Although no significant changes were made to law enforcement strategies, “L’Office central de repression du trafic-illicite de stupefiants” (OCRTIS) seized more than eight metric tons of hashish destined for Europe from Pakistan in a single seizure in mid-2006. Dakar’s position on the west coast of Africa makes it an enticing transit point for drug dealers. The Port of Dakar and the Leopold Sedar Senghor International Airport are the two primary points of entry/exit of drugs in Senegal. An increasing amount of narcotics, often cocaine, is being brought to Senegal by vehicle and boat from Guinea Bissau.

Given limitations on funding and training of staff there is only limited ability to guard Senegal’s points of entry from the transit of drugs. The international airport has drug enforcement agents present, but they lack the training and equipment to systematically detect illegal drugs. The airport authority’s efforts to attain Federal Aviation Administration (FAA) Category One certification have resulted in the tightening of security procedures and more thorough passenger luggage screening. UNODC is developing a multi-agency program (Customs, Gendarmes and Ministry of Interior Police) for screening and controlling container shipments. Although the USG sponsored the establishment of a Financial Intelligence Unit, with an in-country U.S. Treasury Department advisor, the unit has not been directed against narcotics traffickers. European efforts to combat illegal immigration, however, particularly to Spain, which has provided maritime patrol capabilities, appears to have the added benefit of inhibiting the trafficking of narcotics.

Corruption. In 2004, the Senegalese Government created the National Commission against Non-Transparency, Corruption and Misappropriation of Funds, an autonomous investigative panel. The Commission has been slow to start up, and its effectiveness has, as a result, yet to be demonstrated. 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 has several bilateral agreements with neighboring countries to combat narcotics trafficking, and has signed mutual legal assistance agreements with the United Kingdom and France. Senegal 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. Senegal is a party to the UN Corruption Convention and to the UN Convention against Transnational Organized Crime and its three protocols.

Cultivation/Production. Although cannabis cultivation in Senegal is not a large problem in relation to global rates of cultivation, it could become a serious internal drug problem for Senegal. Efforts to eradicate cannabis cultivation in the Casamance region have improved slightly as military forces increased their presence and activities during the year, but they remain marginal.

Drug Flow/Transit. According to the Chief of OCRTIS, the trend in the amount of illicit drugs transiting through Senegal continues to increase. Senegal is a transit point for Asian heroin being smuggled to the United States.

Domestic Programs. The GOS does not have a comprehensive policy for systematic destruction of domestic cannabis or prevention of transshipment of harder drugs. Enforcement efforts are sporadic and uncoordinated. 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.

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 of 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 sixth 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 Service (SAPS) for the period March 2005 to March 2006, 273 organized crime groups operate in South Africa. Unlike previous SAPS reports, the latest did not list the number of criminal groups involved in drug trafficking. (Note: Last year's report stated that 132 of these crime groups are involved in drug trafficking.) Most of the organized crime syndicates in South Africa are foreign-led—primarily Nigerian, followed by 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 cellular 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 who have become heavily involved in stealing vehicles and trading them across South Africa's land borders for narcotics. According to the latest SAPS report, theft of motor vehicles and motorcycles rose by 2.9 percent; stolen/hijacked vehicles seized at border posts rose from 1,065 to 1,520, an increase of almost 43 percent.

South Africa is both an importer and an exporter of drugs (marijuana produced on its own territory). Despite the progress it has made coping with organized crime, South Africa is the origin, transit point or terminus of many major drug smuggling routes. Cannabis, for instance, is cultivated in South Africa, imported from neighboring countries (Swaziland, Lesotho, Mozambique, Zimbabwe), exported to neighboring countries (e.g. Namibia) and Europe (mainly Holland, UK)

and consumed in South Africa. LSD is imported from Holland. Methamphetamine is manufactured in South Africa for local consumption, and there has been an explosion in usage, especially in Cape Town. 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 increased international cooperation and assistance in the effective use of international controlled deliveries and training.

South Africa ranks among the world's largest producers of cannabis, and unlike previous years, this year local law enforcement officials have detected shipments destined for Canada and possibly the United States. 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 Medical Research Council has reported that heroin abuse is increasing in Gauteng, Mpumalanga and the Western Cape. According to press reports, heroin is reportedly the most popular drug in Pretoria.

South Africa is becoming a larger producer of synthetic drugs, mainly mandrax, with precursor chemicals smuggled in and labs established domestically. As in previous years, a number of clandestine narcotics laboratories were dismantled from March 2005 to March 2006, with the SAPS reporting 52 detected and dismantled during this period. 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.

The "South African Community Epidemiology Network on Drug Use" (SACENDU) reported that although alcohol remains the dominant substance of abuse in South Africa, cannabis and mandrax alone or in combination continue to be significant drugs of abuse. "Club drugs" and methamphetamine abuse has not emerged as a problem except in Cape Town where the increase in treatment demand for methamphetamine is 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. A recent study of SACENDU data from January 2002 to December 2005 showed a sharp increase in the proportion of patients reporting methamphetamine as a primary or secondary substance of abuse over time. The majority of patients who reported methamphetamine as their primary drug of abuse during 2004 and 2005 were male (72 percent-76 percent), Colored (NB.: a South African classification indicating South Asian and mixed race persons) (81 percent-92 percent), students or unemployed (69 percent-78 percent), and attending a treatment center for the first time (85 percent-88 percent). The mean age of these patients was 19.7 years in the first half of 2004 and 21.0 years in the second half of 2005. The study also showed that while the mean age of methamphetamine patients has increased slightly over time, the age structure of methamphetamine patients in treatment has remained fairly similar with over 70 percent of patients falling between 15 and 24 years of age. However, since the first half of 2004 the proportion of patients under 20 having methamphetamine as a primary or secondary substance of abuse has been substantially greater than for older patients. The study noted that the increase in treatment admissions for methamphetamine-related problems in Cape Town represented the fastest increase in admissions for a particular drug ever noted in the country, and that of particular concern is the large number of adolescent users. A March 29 press report claims that this increased use of methamphetamine is "strongly linked to gang culture on the Cape Flats."

III. Country Actions Against Drugs in 2006

Policy Initiatives. Combating the use of, production of, and 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 counter narcotics efforts include--in varying degrees--the Home Affairs Department, the National Prosecuting Authority and its Directorate of Special Operations (DSO) (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 2005/2006 Annual Report noted that an analysis of threats from organized crime groups over the past decade identified drug threats as accounting for the largest proportion of the known threats. The report noted that drug smuggling as an organized crime activity usually ties in with other aspects of organized crime, such as diamond smuggling, gold smuggling, abalone pirating and vehicle hijacking.

Law Enforcement Efforts. SAPs reported that between March 2005 and March 2006 the following quantities of drugs were seized:

Cannabis (excluding plants): 290,117 kg, 108 gram (street value in Rands: 377,152,240), as against 252,643 kg, 345 gram during 2004/2005. In addition, 170.5 hectares of cannabis fields were sprayed in the Eastern Cape, estimated at 1,123, 651 plants. One U.S. dollar equals about seven South African Rands.

Methaqualone: 327, 272 dosage units or in grams: 45, 953

Cocaine: 294, 894 grams

Heroin: 17, 307 grams

LSD: 658 dosage units

Amphetamine-type stimulants (ATS): 192,036 dosage units or in grams: 957,864.

The number of detected drug-related crimes, according to the annual SAPS Report, grew in 2006 to 204 per 100,000 of population (from 180.3 in the previous year, or, a 13.2 percent increase over 2005.) The number of arrests at the border for this period was 383, as against 401 in 2004/2005. The value of drugs seized at the country's borders also dropped from Rand 37,921, 326 as against Rand 675,280,027 in the previous period. The total number of reported drug cases during

2005/2006 were 95,675 (as against 83,995 the previous year); the total number of drug cases reported to court were 90,208 (includes cases carried over from the previous year). There was no information on the conviction rate for 2005/2006.

Additional enforcement successes were reported in the press. For instance: On February 2, South Africa press reported that Russian police dismantled a South African drug smuggling network, arrested 14 people and seized 75 kg of ephedrine. On April 18, crime intelligence police officers seized a box (marked as spare parts) containing more than 110 kg of cocaine at Johannesburg International Airport. On April 19, the police found another quantity of cocaine, originating from South America, of 20 kg concealed in the wooden handles of women's bags. A 36-year-old Nigerian man was arrested. In April, the Deputy Foreign Minister of South Africa informed Parliament that more than 150 South Africans were in foreign jails for drug-trafficking. The Minister explained that the South African Government stopped negotiating with foreign governments regarding the possibility of South Africans serving their jail sentences in South Africa for fear that such an agreement would "send the wrong signal" and encourage other South Africans to get involved in carrying drugs. South Africans are serving sentences mainly in Thailand and Latin American countries.

Corruption. 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.

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 on the same piece of land 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 top-end estimates are that 20,000 to 30,000 hectares of arable land are used to grow cannabis, although most observers estimate the area dedicated to illicit cannabis to be about 1,500-2,000 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 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, although there are cases of people injecting heroin. An additional risk in terms of intravenous drug abuse is 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. SAPS reports that between January and October 2006, the chemical monitoring program to prevent the diversion of chemicals for the manufacture of illicit drugs checked 230 import notifications of precursors to South Africa. Approximately 896 export notifications of precursors were forwarded to relevant foreign authorities. The significant increase in exports is partially due to the SAPS’ increased reporting and South Africa’s lead role in the production of pharmaceuticals in Africa. 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 large increases in the number of patients seeking treatment for crack and heroin addiction in the past two to five years. SAG treatment facilities and non-government drug rehabilitation agencies have seen their budgets 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 schools with assistance from the Department of Education and NGOs. The objective is to curb the influence of illegal drugs among children. 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 the 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 program organizers are KHULISA, the Center for Socio-Legal Studies, Creative Education with Youth at Risk, the President’s Award for Youth Empowerment, and the National Institute for Crime Prevention and the Reintegration of Offenders (NICRO). These NGOs are 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.

V. 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.

Swaziland

I. Summary

Swaziland is a transit country for drug trafficking within the Southern Africa region and also produces high-quality marijuana (known locally as dagga). Swaziland is a party to the 1988 UN Drug Convention.

II. Status of Country

Marijuana is the main illegal drug cultivated in Swaziland. The Royal Swaziland Police Service (RSPS) does its best to eradicate marijuana crops and combat trafficking, but is limited by resources. Most of Swaziland's illegal drug crop is consumed in the country. The majority of the resources of the Government of the Kingdom of Swaziland (GKOS) are earmarked for employee salaries and to fight HIV/AIDS; Swaziland's HIV prevalence rate according to the latest (2006) figures is 39.2 percent, one of the highest prevalence rates for HIV/AIDS in the world.

III. Country Actions Against Drugs in 2006

The RSPS has a Drug Enforcement division responsible for investigating illegal drug activities and eradicating marijuana fields. RSPS Officers not associated with the Anti-Drug Unit receive little training in identifying, seizing or assessing illegal drugs.

Policy Initiatives. Weak legislation and limited resources have prevented the GKOS from making more progress in combating the trafficking of illegal drugs. For example, under Swaziland's outdated criminal code (enacted in the year 1899), Ecstasy is not an illegal substance. Police can seize Ecstasy, but cannot arrest for possession. Furthermore, because prosecution for listed narcotic drug offenses is limited to possession, organizers and conspirators cannot be prosecuted unless they also possess drugs.

Law Enforcement Efforts: From January through September 2006, RSPS Drug Units seized 2689 kg of marijuana. Approximately one-third of the seizures were associated with arrests for other non-drug related crimes. During the same time period, RSPS Drug Units destroyed 437.5 hectares of marijuana using a manually sprayed chemical. Nearly all of the eradication efforts were conducted in areas around Piggs Peak and Nhlngano. Due to the mountainous terrain and the remote location, it is extremely difficult to locate marijuana fields without informants. The RSPS does not have airplanes. On two separate occasions, RSPS officers seized small amounts of heroin at Mozambican border crossings. The RSPS did not report any seizures of cocaine or Ecstasy during 2006.

Corruption: The GKOS does not, as a matter of government policy, encourage or facilitate illicit production or distribution of narcotics or psychotropic drugs or other controlled substances or the laundering of proceeds from illegal drug transactions. There is no evidence that senior officials of the GKOS 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. Swaziland is a party to the 1988 UN Drug Convention and the 1971 UN Convention on Psychotropic Substances. Swaziland has also signed, but has not yet ratified, the UN Convention against Transnational Organized Crime. Swaziland is covered under the 1931 Multilateral Convention on Extradition.

Cultivation/production. Swaziland marijuana is grown mostly in mountainous areas. Remote mountainous areas and fertile soil in Swaziland are ideal for cultivating marijuana. Unlike most areas that have specific harvest seasons, Swaziland does not. The Swaziland climate allows marijuana cultivators to rotate the crops so that there is continually a crop that can be harvested. Marijuana is grown heavily around the Nkomaza River, the Mozne River, and the Mkaomevo River. Swaziland produces high-quality marijuana, some of which is grown for export. The highest quality marijuana is grown in the Piggs Peak area, in the northern part of the kingdom. Marijuana grown in the South West portion of the kingdom is viewed as lower quality. RSPS has reported eradication efforts primarily in the northwest section of the country. As for production of “designer drugs”, there is no indication that these are manufactured in Swaziland, as no labs have been identified or arrests made, and, in any case, the market for them would be quite small.

Drug Flow/Transit. Due to the porousness of Swaziland’s borders, it is assumed that drugs transit to Swaziland from neighboring South Africa and Mozambique. Swaziland is ill equipped to monitor or inspect people or vehicles entering or exiting the country.

Domestic Programs/Demand Reduction. Marijuana use is widespread. Methaqualone is commonly smoked with marijuana, known as white pipe, which represents a serious addiction problem. Cocaine and heroin are too expensive for most of the population in the area.

IV. U.S. Policy Initiatives and Programs

Bilateral Cooperation. Swazi enforcement officers attend courses at the ILEA in Botswana regularly, and consult periodically with DEA staff, visiting from South Africa.

Road Ahead. USG-sponsored training at the International Law Enforcement Academy (ILEA) helps professionalize the RSPS, making it a better law enforcement entity. Training opportunities will continue to be available in the future and should help institutionalize enforcement efforts in Swaziland.

Syria

I. Summary

In 2006, the government of the Syrian Arab Republic (SARG) continued to devote resources to combating the drug trade. Although drug seizures increased, domestic usage was negligible. Syria remains a transit country, with a more pronounced increase of illegal narcotics passing through the country than in years past. Since July 2006 and the onset of the Israeli-Hezbollah conflict in Lebanon, drug traffickers began rerouting narcotics through Syria, increasing the total number of illegal narcotics being transited through the country. Jordan and the Gulf States remain the primary destinations for drugs transiting from Lebanon and Turkey. Syria continues to have a working antinarcotics relationship with Saudi Arabia and Jordan, but counternarcotics cooperation with Lebanon has diminished since Syrian forces withdrew from Lebanon in 2005. Syria's domestic drug abuse problem remains small, due largely to cultural and religious norms that stigmatize substance abuse. Syria is a party to the 1988 UN Drug Convention.

II. Status of Country

Most narcotics that enter Syria go to other countries in the region and to Europe. Syria is a transit country for hashish, cocaine, and heroin, particularly from Turkey, but also from Lebanon. With the closure of the Rafiq Hariri International Airport in Beirut during the Hezbollah - Israel conflict in July and August 2006, drug traffickers were forced to seek alternate routes, and because of its proximity to Lebanon, the amount of drugs flowing through Syria increased. Cooperation between Lebanon and Syria on drug trafficking began to decrease with the withdrawal of Syrian troops from Lebanon in 2005, and the recent conflict in Lebanon worsened this downward trend. Syria is also a transit country for Captagon (fenethylamine), a synthetic amphetamine-type stimulant. Captagon originates in Eastern Europe, primarily Romania and Bulgaria. It is trafficked to Syria of, and then onwards to the Persian Gulf countries, including Saudi Arabia, where it is consumed. The production of hashish and opium remained virtually the same as in 2005, according to law enforcement sources.

III. Country Actions Against Drugs in 2006

Policy Initiatives. In 2002, Syria upgraded its 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, with eventual plans to open offices in the remaining provinces. A new police facility for the Syrian Anti-Narcotics Department was opened in Damascus during the early part of 2006. With the opening of the new facility came the arrival of new and updated equipment that will be used to enhance Syria's drug investigation capabilities. This facility also houses the country's newest drug lab. In 2005, Syrian officials implemented its 2002 draft decree of providing financial incentives of up to several million Syrian pounds (\$1 = 51.60 Syrian Pounds) to anyone providing information about drug trafficking and/or cultivation in Syria. In 2006, hashish and opium seizures decreased slightly, while the seizures of heroin and cocaine increased slightly. The seizures of Captagon tablets have again increased drastically, according to Syrian officials.

Law Enforcement Efforts. Syrian officials characterized cooperation on drug issues with neighboring Saudi Arabia and Jordan as excellent, but say that counternarcotics cooperation with

Lebanese and Iraqi officials has diminished. Syria has strict sentencing guidelines and offers the death penalty for distribution-type drug offenses. Syria has legislation that has provided for seizure of assets financed by profits from the drug trade. Turkey is providing some technical assistance to Syria, primarily training courses, as part of their joint efforts to combat trafficking of narcotics, according to Turkish officials based in Damascus. In 2006, the Syrian government confiscated 144 kg of hashish, more than 5 million Captagon tablets, and 1.64 kg of heroin.

Corruption. The Syrian government 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 2006. The Syrian government did not provide information whether any investigations into corruption were conducted, and the SARG has been reluctant to discuss this issue further. Generally speaking, corruption is a daily fact of life in Syria, however, cultural and religious norms about narcotics somewhat dampens the prevalence of drug-related corruption within the police. Syria has signed, but not ratified, the UN Convention against Corruption. As a matter of government policy, the Government of Syria 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.

Agreements and Treaties. Syria is a party to the 1988 UN Drug Convention, the 1961 Single Convention on Narcotic Drugs and its 1972 Protocol, and the 1971 Convention on Psychotropic Substances. Syria has signed, but not yet ratified, the UN Convention against Transnational Organized Crime. Syria and the United States do not have a counternarcotics agreement, nor is there an extradition treaty between the two countries.

Cultivation/Production. The SARG counternarcotics system has reduced cultivation and production in Syria. Never very high, cultivation and production are currently at negligible levels in Syria. During one 2006 investigation, the Syrian Anti-Narcotics Department seized one manual compressor that was being utilized to manufacture Captagon tablets in a city east of Homs.

Drug flow/transit. Drug interdiction remains the focus of the Syrian counternarcotics effort. Syrian officials estimate that in 2006, the overall flow of illegal narcotics transiting Syria and destined for other countries had increased. As mentioned above, this is assumed to be significantly due to Syria being used as an alternate route for drug trafficking during the conflict in Lebanon in July and August 2006. Transshipment of narcotics from Turkey continues to represent the major challenge to Syria's counternarcotics efforts, as the porous Turkish/Syrian border provides easy entry points for drug smuggling into Syria. Narcotics coming from Iraq are transported into Syria either directly or via Jordan. The SARG's reported seizure statistics suggest that SARG counternarcotics efforts have been more effective, or more likely, the overall flow of narcotics has increased. Main shipment routes include the transit of hashish and cocaine through Syria to Europe and other countries in the region; opium transiting from Pakistan and Afghanistan through Syria to Turkey; and Captagon pills transiting from Turkey through Syria to Saudi Arabia. There were also reports of a moderate increase in drug transiting from Iraq.

Domestic Programs. Due to the social stigma attached to drug use and to stiff penalties under Syria's strict antitrafficking law, the incidence of drug abuse in Syria remains low. The Syrian government'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. Drug awareness is also part of the national curriculum for schoolchildren. The ministry also conducts awareness campaigns through

university student unions and trade unions. The SARG has increased the coverage in the government-owned press of its efforts to combat narcotics in 2006.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In discussions 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.

The Road Ahead. The United States will continue to encourage the Syrian government to maintain its commitment to combating drug transit and production in the region; to strengthen anti-money-laundering legislation; and to continue to encourage Syria to improve its counternarcotics cooperation with neighboring countries.

Tanzania

I. Summary

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

II. Status of Country

Recent economic liberalization has brought increased affluence to the expatriate community and some urban Tanzanians. This affluence has driven demand for new drugs like cocaine, heroin, mandrax and opium, which have found their way through Tanzania's porous borders. Domestic production of cannabis is growing. Drug abuse among the youth is also increasing, particularly abuse of the more affordable substances like cannabis. Hard drugs, like cocaine and heroin, are used in small quantities, primarily within affluent urban areas; however, domestic use of these drugs appears to be on the rise. The growth of the tourism industry, particularly in Zanzibar, has created a larger demand for narcotics there. Tanzania is located along trafficking routes with numerous possible illegal points of entry in its eight land borders and 600 kilometer coastline.

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, Mtwara and Bagamoyo. It is widely believed 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 sea ports and unofficial entry points. During the year, there were reports of "mules" or "swallowers" carrying hard drugs into and out of Tanzania. The Anti-Narcotics Unit of the Ministry of Public Safety and Security reportedly apprehended 8 "swallowers" in 2005 and 16 in 2006. An increasing trend is the use of Tanzanian land borders to enter neighboring countries, especially Kenya and Malawi, to catch international and regional flights.

III. Country Actions Against Drugs in 2006

Policy Initiatives. In 2005, the Drug Control Commission (DCC) finalized a set of amendments strengthening existing narcotics legislation and submitted the amendments to the Prime Minister's Office. The amendments have been passed to the President's Cabinet for approval and are expected to be read in Parliament in February 2007. According to both the DCC and the Anti-Narcotics Unit (ANU), which provided recommendations for the amendments, the revised legislation will increase the penalty for drug traffickers from monetary fines to include at least some jail time. The amendments also are aimed at expanding the mandate of the DCC to include enforcement. In 2003, the House of Representatives of semi-autonomous Zanzibar passed its own Prevention of Illicit Traffic and Drugs Act, which put Zanzibar narcotics law and sentencing in line with that on the mainland. Amendments to Zanzibar's narcotics legislation are expected to be tabled in the House of Representatives only after the Union Parliament passes the revised narcotics legislation for the

mainland. While Zanzibar does have its own ANU, according to Zanzibar's constitution, the Unit operates under the authority of the Mainland's Ministry of Public Safety and Security.

Accomplishments. Tanzania's judiciary convicted four individuals on drug-related crimes in 2005. Two persons were convicted in a case involving the smuggling of cannabis resin (hashish) in logs shipped from Zambia to Tanzania and two other individuals were convicted in a case involving a clandestine laboratory identified in 2001 producing mandrax in Dar es Salaam. All of these convictions led to jail sentences and fines for the four guilty defendants.

Law Enforcement Efforts. Tanzania has a counternarcotics police force of about 150, located in three branches: Dar es Salaam, Zanzibar, and Moshi. However, because of the still-limited training and operational capabilities of its counternarcotics officers, Tanzania's efforts are primarily focused on street pushers and individual "mule-carriers" or "swallowers." To date, Tanzania's law enforcement efforts have not yet proved successful in limiting narcotics trafficking by moving "up the chain" to kingpins. Although the number of smugglers apprehended has increased, Tanzanian law enforcement has not yet been able to translate small seizures into the prosecution of top leaders of organized rings.

While law enforcement officials have increased their efforts to combat narcotics trafficking, law enforcement has only sporadic seizures were made during 2005. According to the data from the police force's Anti-Narcotics Unit, the following seizures of hard drugs were made in 2005: almost 10 kg of heroin; 78.8kg of Cannabis Resin; 1.4kg of Morphine; and 361.5 grams of cocaine. In 2004, Tanzanian law enforcement engaged in widespread cannabis eradication efforts, seizing or destroying 964,000 kg of cannabis. Due to budget constraints in 2005, however, the police did not engage in widespread eradication efforts, seizing only 150,450 kg in small cases within urban areas. In 2005, law enforcement also seized 2kg of Khat.

Senior Tanzanian counternarcotics officials acknowledge that their officers are under-trained and under-resourced to effectively monitor Tanzania's eight land borders and long coast line. For example, the harbor antinarcotics 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 are not able to 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 encourage corrupt behavior. On the positive side, 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. Tanzania also cooperates formally with countries from the Southern African Development Community, including Zambia and South Africa. In 2005, 40 Tanzanian officers from Immigration, Customs and Police received counternarcotics training with 40 officers from Zambia.

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 police 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. In June 2006, two police officers were prosecuted following the disappearance of approximately 80 kg of cocaine and heroin from police custody. The case is still pending in court. 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. This option would close if new legislation passes as proposed.

Agreements and Treaties. Tanzania is a party to the 1988 UN Drug Convention. The 1931 U.S.-U.K. Extradition Treaty is applicable to Tanzania. The U.S. has one non-drug related request for extradition pending in Tanzania.

Cultivation and Production. Traditional cultivation of cannabis takes place in remote parts of the country, mainly for domestic use. It is estimated that an acre of land can produce up to \$1000 worth of cannabis crop as opposed to \$100 worth of maize. The Ministry of Public Safety and Security identified the following eight regions as the primary production areas for cannabis: Iringa, Tabora, Shinyanga, Mara, Arusha, Mwanza, Mbeya and Tanga. No figures on total production exist, but police and government officials report that production continues and has spread to different regions in response to eradication efforts. Given the availability of raw materials, and the simplicity of the process, it is possible that some hashish is also produced domestically. In 2001, police seized equipment used to manufacture mandrax from clandestine laboratories in Dar es Salaam, suggesting 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. Traffickers from landlocked countries of Southern Africa, including Zambia and Malawi, use Tanzania for transit. Control at the ports, especially on Zanzibar, is difficult as sophisticated methods of forging documents, and concealment are combined with poor controls and untrained and corrupt officials. According to the Anti-Narcotics Unit, heroin entering Tanzania from Iran and Pakistan is being smuggled to the U.S., China and Australia in small quantities by traffickers from Nigeria, Tanzania (with a significant number of traffickers from Zanzibar) and other countries in East Africa. Cocaine enters Tanzania from Brazil, Colombia, Peru, Venezuela, and Curacao in transit to South Africa, Europe, Australia and North America. Cannabis Resin, a drug that is not known to be consumed in Tanzania, enters Tanzania mainly by sea from Pakistan and Afghanistan and is often concealed with local goods such as tea and coffee and smuggled to Europe, North America and the Seychelles. The port of Dar es Salaam is also a major point of entry for mandrax from India, Nepal and Kenya headed toward South Africa. Tanzanians continue to be recruited for trafficking. In 2005, 19 Tanzanians were arrested abroad (mostly in East Africa and Pakistan) for smuggling drugs. Of these 19 cases, 18 were smuggling heroin while one was smuggling cocaine. From January to September 2006, 13 Tanzanians were arrested abroad, 11 trafficking heroin and two trafficking cocaine. In Tanzania, police forces apprehended 14 “swallowers,” in 2005, eight of whom had swallowed heroin; six of whom had swallowed cocaine. Recently, Tanzanian smugglers have been arrested coming into Tanzania through the land borders with Kenya and Malawi, after having arrived at international airports from Brazil, Iran, Pakistan and 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. Police reports confirm that cocaine and heroin is available locally and the tourist industry has brought Ecstasy (MDMA) to Zanzibar. The documented number of drug addicts seeking rehabilitation increased from 541 in 2000 to 1,306 in 2005 on the mainland, from 21 in 2000 to 69 in 2005 on Zanzibar. The spillover from trafficking and increased tourism have contributed to this increase in domestic demand. The abuse of marijuana is widespread. Khat is also widely used. The Tanzanian government has taken proactive measures to reduce demand and increase awareness about drug use and drug trafficking. The DCC,

under the Prime Minister's Office, manages a small demand reduction program. In 2005, the DCC trained over 200 nurses, counselors and teachers and organized five awareness campaigns in different urban centers. Without rehabilitation hospitals and sufficient capacity in regular hospitals, addicts are typically placed in psychiatric wards or mental hospitals. In 2006, the DCC completed an assessment of the capacity of urban hospitals to receive and treat drug addicts and found capacity lacking. The police also have a public sensitization program on the dangers of drug trafficking but lack funding for significant outreach.

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. For example, in June 2006, DHS ICE officials conducted financial crimes and bulk cash smuggling training in Dar es Salaam. The training course offered was entitled: “Detecting and Investigating the Smuggling of Currency by Cash Couriers” and it was presented to officials from the Tanzanian prosecutor’s office, Customs and Immigration Services, and local police. State Department law enforcement assistance includes funding the establishment of a forensics lab and training in its use. At the Tanzanian Government's request these facilities will include narcotics analysis capabilities. The State Department's counterterrorism bureau is funding the “PISCES” 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 2006, however, the drug trade (particularly of hard drugs) continued to increase. Nigerian traffickers dominate the Togolese drug trade. 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 fragile 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 is relatively rare, and there are few crimes resulting from drug abuse. There are three agencies responsible for drug law enforcement -- the police, the gendarmerie, and customs. The only locally produced drug is cannabis. Approximately two metric tons of cannabis are seized in Togo each year. Heroin and cocaine, while not produced in Togo, are also available. Heroin is smuggled from Afghanistan, while cocaine is transported from South America. Lome serves as a transit point for drugs on their way to Benin, Nigeria, Burkina Faso, northern Ghana, and Niger. Togolese are not significant consumers. Most smugglers are long-term Lebanese residents or Nigerians. Togolese typically purchase small amounts of drugs and then resell them to expatriates living in Lome. Togo's long and relatively porous borders permit narcotics traffickers easy access/egress. This 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 drug trafficking.

III. Country Actions Against Drugs in 2006

Policy Initiatives. The Central Office Against Drugs and Money Laundering is responsible for investigating and arresting all persons involved in drug-related crimes. The 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 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 in 2006. 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 most 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, in practice there is no effective reporting, record keeping, or cross-agency communication process.

Corruption. The Anti-Corruption Commission made no drug-related arrests of government officials. Togo's chief narcotics officer was held under house arrest for several months under suspicion that he had diverted a quantity of captured drugs being held as evidence for resale. He was released in September, but has not yet resumed his duties. Reports continue to 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. If these reports are true, they would help explain the growing transit of drugs through Togo.

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 is a party to the UN Corruption Convention, and is also a party to the UN Convention against Transnational Organized Crime.

Cultivation/Production. The only drug cultivated in quantity in Togo is cannabis. 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 Togo's 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 sent to final consumption markets.

Domestic Programs (Demand Reduction). The National Anti-Drug Committee (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 government improve its ability to interdict illicit narcotics entering Togo and to prosecute those traffickers who are caught.

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. Togo's emerging willingness to confront the issue of illicit drugs is hampered by the country's fragile democratic transition and the weak state of GOT finances.

Uganda

I. Summary

Uganda is not a major hub for narcotics trafficking. Government of Uganda (GOU) 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. Because of financial pressures and the continuing impact of war and disorder, the GOU Anti-Narcotics Unit (ANU) has experienced a decrease in total personnel from 126 to 80, with the number at the airport reduced from 15 to 7. The GOU is a party to the 1988 UN Drug Convention.

II. Status of Country

Drug production and trafficking within Uganda is not significant in comparison to other countries. Uganda offers more potential as a transit route (Entebbe Airport and porous borders). Drug production in Uganda is limited to growing of cannabis. Local authorities believe cannabis production will increase due to increased demand from Kenya and lack of more profitable crops.

III. Country Actions Against Drugs in 2006

Policy Initiatives. New comprehensive national drug legislation, pending enactment by Parliament, would lay the foundation for the establishment of a national coordinating body for drug control, treatment and rehabilitation of abusers, foster regional and international cooperation, and establish stiffer punishment for traffickers and authority for confiscation and forfeiture of assets.

Law Enforcement Efforts. The ANU reported that in 2006 there were eight heroin cases, leading to 6 arrests and convictions and 2.08 kg seized. There were 489 cannabis cases, leading to 499 involved individuals being arrested, 12,000 kg seized and the destruction of 402,674 cannabis plants. There were no cocaine-related cases.

There were no major traffickers among those arrested. The overwhelming majority of those arrested were drug couriers. The GOU is striving to combat illicit drugs, but there are few resources to support the campaign. Specifically, the ANU has experienced a decrease in total personnel from 126 to 80, with the number at the airport reduced from 15 to 7. The ANU has only 2 trained drug sniffing dogs whose ability to detect drugs has decreased due to lack of in-service refresher training. There is no x-ray machine available at the airport to assist the ANU in detecting drugs that might have been swallowed. The ANU has no reliable drug test kits to determine if suspected drugs are in fact prohibited substances. Uganda and United Arab Emirates cooperated regarding a controlled delivery of a heroin shipment.

Corruption. GOU addresses public corruption generally through the offices of the Ethics and Integrity Ministry. The Ugandan Police Criminal Investigative Division will also handle these types of cases from time to time. As a matter of government policy, the GOU 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. 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.

Demand Reduction. GOU has sensitized the public regarding dangers of drug abuse and trafficking. GOU has attempted to provide treatment and rehabilitation to users. GOU's interactions with the UNODC have been limited to information exchange, arrangements for training, and conference participation.

Cultivation/Production. There is domestic cannabis cultivation in Eastern Uganda, particularly in the Districts of Busia, Bugiri, Kabarole and Rakai. ANU Police operations against cannabis cultivation were initiated and results achieved, especially near the border with Kenya. Ultimately, 402,674 cannabis plants were destroyed. Instructions were sent to all regional and district police commanders to arrange operations for destruction of cannabis in their areas.

Drug Flow/Transit. The most common drug transited through Uganda is heroin. Most couriers travel by air via Entebbe airport smuggling drugs from Pakistan, Afghanistan, Iran, and India. There has been a relatively slight increase in number of traffickers/mules, especially those headed for Europe. Ugandan cannabis is trafficked to Kenya. Finally, the manufacturing and distribution of synthetic drugs is not a common practice in Uganda.

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 major drug production and transit 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 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. There are numerous reports that drugs leave Iran and Pakistan by dhow and move to the UAE, among other destinations, in the Persian Gulf. 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 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, as well as a key location for narcotics money laundering by international drug traffickers in the Gulf region. 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 easily accessible commercial banking system, 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 2006

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 Crime 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 2005, UAE counternarcotics forces reported 862 drug cases and a total of 529 arrests. This marked a decrease from 2004, when officials arrested 1,419 people in 901 cases. The largest number of arrestees were Emirati nationals (217) followed by Iranians and Pakistanis. In 2005, UAE officials seized 6 kg of opium, 185 kg of heroin, and 242 kg of hashish.

In the first four months of 2006, UAE officials seized 94 kg of hashish, 46 kg of heroin, 9 kg of opium and 85,040 narcotic tablets. 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 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 kg 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. In November 2006, the Dubai Criminal Court sentenced two Pakistanis and one African to life imprisonment for smuggling heroin into the UAE with the intent of trafficking. One of the Pakistani drug smugglers was caught at the Dubai International Airport with 40 capsules of heroin each weighing 9 grams, which he had swallowed.

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. 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 Convention 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. The UAE is a party to 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 and investment development opportunities render the UAE vulnerable to exploitation by narcotics traffickers and narcotics money laundering. The UAE—Dubai, in particular—is a major regional transportation, financial, 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 non-UAE nationals arrested in drug cases in 2005. 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.