



International Narcotics Control Strategy Report -2005

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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, Egypt, resulting in the arrest of four individuals, and possible indictment of two U.S. citizens. This was the first known occurrence of an MDMA laboratory in the Middle East. Egypt is party to the 1988 UN Drug Convention.

II. Status of Country

Egypt is not a significant producer or consumer of narcotics or precursor chemicals, despite the fact that opium and cannabis plants are grown here. The substances that are most commonly abused are cannabis, which is known here as "bango," and legitimate pharmaceuticals. Narcotics do pass through Egypt. Egypt's long and mostly uninhabited borders, combined with the high level of shipping passing through the Suez Canal, 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. The U.S. DEA office in Egypt has a superb relationship with ANGA, which is open, cooperative, and receptive to ideas and training. DEA assists ANGA in interdiction operations in the Suez Canal Zone and at Cairo International Airport, and crop eradication operations in the Sinai Peninsula and Upper Egypt. It also has funded and conducted training for ANGA officers at regional counternarcotics courses in Nairobi, Kenya and provided in-country training on airport interdiction and chemical controls. Despite limited resources, ANGA has demonstrated continual improvements in its capabilities.

III. Country Actions Against Drugs in 2004

The Government of Egypt (GOE) continues to aggressively pursue a comprehensive drug control strategy that was developed in 1998. ANGA, the Egyptian Ministry of Interior, the Coast Guard, the Customs Service, and select military units all cooperate in task forces designed to interdict narcotics shipments. Government and private sector demand reduction efforts exist but are hampered by financial constraints and logistical challenges.

Accomplishments. 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, Egypt may indict two U.S. citizens for connections to this operation. The MDMA produced from this laboratory would likely have been exported to the European and U.S. market. This was the first known discovery of an MDMA laboratory in Egypt, and according to DEA, the first in the Middle East, and may represent a new trend toward shifting artificial drug labs to the region due to the region's relatively lax regulation of commercial chemical products. With the passage of the first anti-money laundering law in 2002, which criminalized the laundering of proceeds derived from trafficking in narcotics and numerous other crimes, seizures of currency in drug related cases has amounted to over 3,000,000 Egyptian Pounds (\$485,000). In 2004, ANGA opened a new office dedicated to financial investigations and combating money laundering.

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. It 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 does operate its own drug awareness campaign in addition to other government and private sector demand reduction programs. ANGA's Eradication Unit conducts monthly operations against cannabis and opium crops in the Sinai. Continuing a trend over the past several years, the amount of narcotics seized during 2004 was again higher than that of the previous year. Drug seizures in 2004 included cannabis (80,249 kilograms), hashish (1,868 kilograms), and smaller amounts of heroin, opium, psychotropic drugs, and cocaine. Significant amounts of prescription and "designer" drugs such as Ecstasy (6,194 tablets), amphetamines, and codeine were also seized. During the course of 2004, Egyptian law enforcement officials eradicated 171 hectares of cannabis and 65 hectares opium poppy plants.

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 have had an extradition treaty in place since the 1860's. Egypt has been a party to the 1988 UN Drug Convention since 1991. Egypt also is a party to the 1971 UN Convention on Psychotropic Substances, the 1961 UN Single Convention on Narcotic Drugs, and the 1972 protocol amending the Single Convention. The U.S.-Egypt Mutual Legal Assistance Treaty entered into force on November 29, 2001. Egypt is a party to the UN Convention against Transnational Organized Crime and its protocol on trafficking in women and children.

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 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 2004, 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, 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, mostly located in the Cairo metropolitan area. These centers annually receive thousands of requests from addicts for help.

IV. U.S. Policy Initiatives and Programs

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; improve intelligence collection and analysis.

The Road Ahead. In fiscal year 2005, the U.S. Government plans to increase its joint operations with ANGA, moving beyond a previously predominant focus on monitoring the 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. The U.S. Government also plans to provide additional training in financial investigations, drug interdiction, anticorruption measures, border control operations, and chemical identification and control.

Jordan

I. Summary

Jordan is primarily a transit country for illicit drugs, due to its geographical location between drug producing countries to the north and drug consuming countries to the south and west. Historically, Jordanians themselves have neither consumed nor produced significant quantities of illicit drugs. There have been signs that this trend may be changing. The most notable narcotics-related statistic for 2004 is a nearly 400 percent increase in Captagon (fenethylline) tablet seizures, the bulk of which Jordanian authorities say were bound for the Gulf States. The drugs of choice among users arrested for drug possession in Jordan have been hashish (80 percent) and heroin (20 percent); The main target group is high school through college-aged students. Cooperation among neighboring countries is ongoing and growing. Jordan is a party to the 1998 UN Drug Convention.

II. Status of Country

Jordan's vast desert borders make it vulnerable to illicit drug smuggling operations. From the perspective of drug use, Jordanian authorities believe that drug consumption among Jordan's youth is not likely to increase sharply.

III. Country Actions Against Drugs in 2004

Policy Initiatives. Due to the threat from continuing usage of hashish and heroin among high school and university-aged individuals, Jordan continues its drug awareness campaign focused at educating young people of the dangers of drug use. In June 2004, a national conference on drugs took place in Amman, in cooperation with the United Nations Office on Drugs and Crime (UNODC), during which issues such as combating drugs, prevention of drug abuse among students, and law enforcement were discussed.

Law Enforcement. Jordan's Police (PSD) maintains an active counternarcotics bureau, which has excellent relations with the U.S. Drug Enforcement Administration through the Nicosia Country Office based in Cyprus. In 2004 the PSD began utilizing x-ray equipment on larger vehicles at two of its border crossings, which has led to some drug seizures. The PSD stated that since 1997, it has worked cooperatively with the military on the Syrian and Iraqi borders to intercept traffickers entering through those areas. Jordan continues to be concerned about heroin use in the more affluent areas of country, as statistics reflect yet another annual increase in heroin seizures. Although seizures of the synthetic amphetamine-type stimulant Captagon are up by nearly 400 percent, the PSD has not noted a significant abuse problem in Jordan. Drugs of this nature are predominantly bound for the Gulf Region. According to the PSD, 85 percent of all illicit drugs entering Jordan are destined for other countries in the region. The majority of Jordan's drug seizures take place at the Jabber-a border crossing point between Jordan and Syria.

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.

Agreements and Treaties. Jordan is party to the 1988 UN Drug Convention. Jordan continues to remain committed to existing bilateral agreements providing for counternarcotics cooperation between Syria, Lebanon, Iraq, Saudi Arabia, Turkey, Egypt, Pakistan, Israel, Iran, and Hungary. Jordan has signed but has not yet ratified the UN Convention Against Transnational Organized Crime.

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

Drug Flow and Transit. Jordan remains primarily a narcotics transit country. Jordan's primary challenge in stemming the flow of illicit drugs through the country remains its vast and open desert borders. While law enforcement efforts confirm cooperation with its neighbors, the desolate border regions and the various tribes, with a centuries old tradition of smuggling as a principle source of income, make interdiction difficult. None of the narcotics transiting Jordan is believed to be destined for the United States. Jordan has seen only four drug-related cases involving its border with Iraq in 2004.

Domestic Programs. Jordan maintains a robust program of awareness and education, interdiction, and rehabilitation. Education programs predominantly target high school and college-aged kids. Authorities continue to provide educational presentations in schools and universities throughout the country. Jordan also publishes a number of brochures and other materials aimed at educating Jordan's youth. Cartoons aimed at younger children designed to dissuade youngsters from trying drugs are also in the developmental stages, with an expected release timeframe of 2005. Jordan has also improved its rehabilitation programs. With United Nations' assistance, Jordan is modernizing its drug treatment centers and private hospitals. Cultural and religious norms help to control drug use. The PSD works in conjunction with the Ministry of Islamic Affairs, which directs sermons, lessons, and lectures on drug awareness and their effects.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In March 2004, DEA Nicosia and DEA's International Training Section sponsored a regional International Drug Enforcement Seminar in Amman. The DEA also

plans to sponsor a one-week Asset Forfeiture and Financial Investigations Seminar in Amman during the month of July 2005.

Bilateral Cooperation. DEA Country Attache in Cyprus and Embassy Amman officials maintain a close working relationship with Jordanian authorities on narcotics related matters.

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

Iran

I. Summary

The Islamic Republic of Iran is a major transit route for opiates smuggled from Afghanistan and through Pakistan to the Persian Gulf, Turkey, Russia, and Europe. There is no evidence that narcotics transiting Iran reach the United States in an amount sufficient to have a significant effect. Iran is no longer a major drug producing country. Trafficking routes for opiates from Afghanistan to Russia and beyond, by way of Central Asia, have grown in importance, but the largest single share of opiates leaving Afghanistan still passes through Iran to consumers in Russia and Europe. There are also an estimated 2 million opiate abusers in Iran, with 60 percent reported as addicted to various opiates and 40 percent reported as casual users.

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. Three thousand two hundred Iranian law enforcement personnel have died in clashes with heavily armed drug traffickers over the last two decades, and Iran reports that another 25 died in the first half of 2004. Iran spends a significant amount on drug-related expenses, including interdiction efforts and treatment/prevention education. Estimates range from \$250-\$300 million to as much as \$800 million each year, depending on whether treatment and other social costs are included. Traffickers from Afghanistan continue to cause major disruption along Iran's eastern border, but Iranian security forces seem to be having increased success by concentrating their interdiction efforts in the eastern provinces.

Iran has ratified the 1988 UN Drug Convention, but its laws do not bring it completely into compliance with the Convention. The United Nations Office of Drug Control (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. Another route to Europe and Turkey passes by way of Turkmenistan, Armenia, and Azerbaijan. Drugs are also smuggled by sea across the Persian Gulf. Iran is also a major opiate consuming country, with the highest share of population abusing opiates in the world. The UNODC estimates that 2.8 percent of the Iranian population over age 15 used opiates in 2001 (latest data available).

III. Country Actions Against Drugs in 2004

Policy Initiatives. Iran is spending at least 50 percent of its budgeted counter drug expenditures on demand reduction activities, a significant shift from recent expenditure patterns where most funds went for enforcement-related supply reduction. The shift seems to be a clear response to the growing social and health impact of more dangerous drug abuse (e.g., heroin vice opium) and the trend towards more intravenous heroin abuse, with certain addict populations sharing needles. Police forces engaged in narcotics suppression activities

have begun to complain publicly that their budgets are inadequate for their interdiction responsibilities.

Law Enforcement Efforts. The Drug Control Headquarters coordinates the drug-related activities of the police, the Islamic Revolutionary Guard Corps, and the Ministries of Intelligence and Security, Health, and Islamic Guidance and Education.

Iran pursues an aggressive border interdiction effort. A senior Iranian official told the UNODC that Iran had invested as much as \$800 million in a system of mud walls, moats, concrete dams, sentry points, and observation towers, as well as a road along its entire eastern border with Pakistan and Afghanistan. According to an official GOI Internet site, Iran has installed 212 border posts, 205 observation posts, 22 concrete barriers, 290 km of canals (depth-4m, width-5m), 659 km of soil embankments, a 78 km barbed wire fence, and 2645 km of asphalt and gravel roads. It also has relocated numerous border villages to newly constructed sites, so that their inhabitants are less subject to harassment by narcotics traffickers.

Thirty thousand law enforcement personnel are regularly deployed along Iran's border with Afghanistan and Pakistan. Interdiction efforts by the police and the Revolutionary Guards have resulted in numerous drug seizures. Iranian officials seized 181 metric tons (MT) of opiates (opium equivalent) just during the first six months of 2004. Opiate seizures in 2004 (projected) were on track to exceed those in 2003 by 48 percent. These increases are likely to continue as Afghanistan's largest opium harvest ever moves towards markets in Iran itself, and in the West. Iran is likely to remain the country with the highest volume of opiate seizures in the world.

Iranian opiate seizures in the first six months of 2004 display some interesting trends:

- Unrefined (raw) opium seizures increased sharply;
- Heroin was only 14 percent of all opiates seized, a surprisingly small share of the total;
- The morphine base share of seized drugs was also down from recent years to 39 percent of the total.

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

Hashish seizures in Iran in the first six months of 2004 were on track to exceed seizures registered last year by a wide margin. At slightly more than 49.5 metric tons, only raw, unrefined opium seizures at 85 metric tons exceed hashish seizures in volume.

Drug offenses are under the jurisdiction of the Revolutionary Courts. Punishment for narcotics offenses is severe, with death sentences possible for possession of more than 30 grams of heroin or five kilograms (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 between the ages of 16 and 18 are afforded some leniency. More than 60 percent of the inmates in Iranian prisons are incarcerated for drug offenses, ranging from use to trafficking. Narcotics-related arrests in Iran during the first six months of 2004 continued a sharp upward trend, mounting to 196,555. Almost three times more drug abusers were detained than drug traffickers. Iran has executed more than 10,000 narcotics traffickers in the last decade.

Corruption. Although there is no indication that senior government officials aid or abet narcotics traffickers, there are reports of corruption among lower/mid-level law enforcement, which is consistent with the transit of multiple-ton drug shipments across Iran. Punishment of corruption is harsh, and the evidence of Iran's commitment to keep drugs from its people is

compelling. Iran points to its drug interdiction efforts as benefiting countries in Western Europe and beyond.

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. Iran is also a party to the 1971 UN Convention on Psychotropic Substance, the 1961 UN Single Convention and the 1972 Protocol. Iran has signed, but has not yet ratified, the UN Convention on Transnational Organized Crime, and is a signatory to the UN Convention Against Corruption. 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 Iran is scheduled to host an expert round table of this group in 2005.

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

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

Most of the opiates smuggled into Iran from Afghanistan are 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 represents almost 40 percent of all opiates seized in the first six months of 2004, in Iran, is likely moving towards Turkey, as is some share of the much diminished 14 percent, or so, of opiates moving as heroin. Significant quantities of raw opium are consumed in Iran itself, but some share also moves 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, desert, sparse population 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, of acetic anhydride, used in the refining of heroin. All precursor chemicals seized were consigned to Afghanistan. Trafficking through Iran is facilitated by wide spread smuggling to provide necessities, and to escape high taxation. There are reports that enforcement authorities accept bribes to pass shipments, and fail to enforce laws against street sales 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 50 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. 2 million users.

Domestic Programs (Demand Reduction). Smoked opium is the traditional drug of abuse in Iran, but opium is also drunk, dissolved in tea. Opium and its residue are also injected, dissolved in water, by a small number of addicts. Iranians have clearly been using more heroin during the past several years. Heroin has not replaced opium, the traditional drug of choice in Iran, but lower street prices for heroin, and temporary shortages of opium, after the Taliban successfully prohibited opium production in Afghanistan for one year (2000/01), plus higher prices for opium, have encouraged some addicts to switch from opium to heroin. Some heroin is smoked or sniffed, but a growing share is injected.

Ninety-three percent of opiate addicts are male, with a mean age of 33.6 years (plus or minus 10.5 years), and 1.4 percent (about 21,000) are HIV positive. In the past, the Islamic Republic attacked illegal alcohol use with more fervor than drug abuse, and was reluctant to discuss drug problems openly. Since 1995, public awareness campaigns and attention by two successive Iranian presidents as well as cabinet ministers and the Parliament have given demand reduction a significant boost. Under the UNODC's NOROUZ narcotics assistance project, the GOI spent more than \$68 million dollars in the first year for demand reduction and community awareness. The Prevention Department of Iran's Social Welfare Association runs 12 treatment and rehabilitation centers, as well as 39 out-patient treatment programs in all major cities. Eighty-eight out-patient treatment centers are now operational. Some 30,000 people are treated per year, and some programs have three-month waiting lists. Narcotics Anonymous and other self-help programs can be found in almost all districts, as well, and several NGOs focus on drug demand reduction. There are no methadone treatment or HIV prevention programs, although HIV infection in the prison population is a serious concern.

IV. U.S. Policy Initiatives and Programs

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

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

Lebanon

I. Summary

Lebanon is not a major illicit drug producing or drug-transit country. The Lebanese government reported success against illicit poppy and cannabis crops for 2004. While the government claimed extensive crop destruction, other observers said that the threat of destruction made crop destruction unnecessary, since farmers sharply curtailed plantings. In any case, no significant illicit drug production took place during 2004 in Lebanon. Nevertheless, illicit crop cultivation is likely to continue to remain an option to local farmers due to an increasingly difficult economic climate and a lack of investment in alternative crops.

If government crop destruction claims are to be believed, cultivation of illicit crops increased slightly from 2003 to 2004. There is practically no illicit drug refining in Lebanon, and no production, trading or transit of precursor chemicals. Drug trafficking across the Lebanese-Syrian border has diminished substantially as a result of Lebanese and Syrian efforts to deter smuggling activity. The government continued its ongoing drug reduction efforts through public service messages and awareness campaigns. Lebanon is a party to the 1988 UN Drug Convention.

II. Status of Country

The deteriorating economic situation in Lebanon and the lack of investment in alternative crops continues to make illicit crop cultivation appealing to local farmers in the Bekka' Valley in eastern Lebanon. Government crop eradication operations have put some pressure on the amount of land farmers dedicated to illicit crops, based on the fear that investment in cultivation and labor would all be for naught if the crop is destroyed before harvest. The government tried to capitalize on this fear by continuing a counternarcotics campaign to discourage new planting.

According to the Internal Security Forces (ISF), approximately 68,000 square meters of poppy and 13,089,000 square meters of cannabis were eradicated in 2004. The Judiciary Police—the law enforcement agency tasked with counternarcotics responsibilities—claimed to have accomplished complete eradication in 2004.

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; small quantities of cocaine arrive in Lebanon to meet very modest local demand; and the government reported increased interest in synthetic drugs.

Lebanon is not a major transit country for illicit drugs, and most trafficking is done by "amateurs," rather than major drug networks. Marijuana and opium derivatives are trafficked to a modest extent in the region, but there is no evidence that the illicit narcotics that transit Lebanon reach the U.S. in significant amounts. South American cocaine is smuggled into Lebanon primarily via air and sea routes either directly or from Europe, Jordan, and Syria. Lebanese nationals living in South America in concert with resident Lebanese traffickers often finance these operations. According to a report issued by the Judiciary Police in 2003, very small quantities of cocaine were smuggled into Lebanon in 2003, as compared to an average of approximately 500 kilograms in previous years. Synthetics are smuggled into Lebanon primarily for sale to high-income recreational users.

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

III. Country Actions Against Drugs in 2004

Policy Initiatives. The Ministry of Interior again made counternarcotics a top priority. Notably, the Judicial Police made arrests in 2004 for narcotics-related offenses for the first time in over

35 years. The government also continued its public awareness advertising campaigns to discourage drug use, and this year took their message to university campuses. The Ministry of Interior sent counternarcotics messages on mobile phones. Counternarcotics posters and slogans were displayed throughout the country. Counternarcotics ads and video clips were broadcast on television stations, and tee-shirts reading "Together Against Drugs" were distributed to NGOs participating in the drug awareness and drug abuse reduction campaigns.

Accomplishments. In 2004, the Government of Lebanon continued cannabis and poppy eradication. A reliable local expert and director of an agricultural research center reported that the government's zero-tolerance policy has been a great success. Demand reduction campaigns were also on going and pervasive. The Government of Lebanon received from the UN Office on Drugs and Crime (UNODC) and the United Nations Development Program (UNDP) a \$362,000 grant for "the development and implementation of a national action plan on drug demand reduction in Lebanon" from 2004-2006.

Law Enforcement Efforts. The ISF reported seizures of 900 kilograms of hashish, and significantly lesser quantities of other illicit drugs. In 2004, Police arrested 960 persons for drug abuse, 847 for dealing in narcotics, and 142 for distribution of narcotics. Smaller numbers of arrests were registered for planting, smuggling, and transporting illegal narcotics. The total number of persons arrested in 2004 for drug related crimes was 1,949, including the arrest in June of one of the major drug dealers in Lebanon. Abou Ali Sadek el-Masri was apprehended in his home in the Bekka' Valley in a joint operation carried out by the ISF and the army.

Corruption. Corruption remains endemic in Lebanon up to the senior levels of government, but none of the corruption is reported to be connected with drug production or trafficking or the protection of persons who deal in illicit drugs. While low-level corruption in the counternarcotics forces is possible, there is no evidence of wide-scale corruption within the Judiciary Police or the ISF. ISF members appear to be genuinely dedicated to combating drugs.

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 has signed, but has not yet ratified the UN Convention Against Transnational Organized Crime.

Cultivation and Production. There are conflicting reports on cultivation of illicit crops. Statistics from the Judicial Police this year show that 68,000 square meters of poppy and 13,089,000 square meters of cannabis were eradicated during 2004. However, a respected agricultural research center reported that, in fact, there were no eradications of illicit crops because farmers did not plant illicit crops. According to the director of the center, farmers have been thoroughly intimidated by police efforts to eradicate illicit crops. Knowing that the crops will be destroyed, and given the poor economic climate, farmers are loath to invest in that which they believe will be destroyed.

Drug Flow/Transit. Illicit drug trafficking via traditional smuggling routes has been somewhat curtailed by joint Syrian-Lebanese operations, but nonetheless continues. Drug trafficking along the Israel-Lebanon border has been negligible since the Israeli withdrawal from Lebanon in May 2000 and the subsequent virtual sealing of the border. The primary route for smuggling hashish from Lebanon during 2004 was overland to Arab countries such as Saudi Arabia, Egypt, Kuwait, the United Arab Emirates, and via sea routes to Europe. According to the ISF, large exports of hashish from Lebanon to Europe are more and more difficult for smugglers due to increased seashore patrols and airport control. The ISF asserts that no hashish has been smuggled into the United States.

Domestic Programs (Demand Reduction). Lebanese leaders recognize the need to address the problem of illicit drug use. In 2002, the government launched a widespread public awareness campaign to discourage drug use, which remains on going. Textbooks approved

for use in all public schools contain a chapter on narcotics to increase public awareness. The current law on drugs dictates that a National Council on Drugs (NCD) be established, whose services and activities will include substance abuse treatment, prevention, awareness, assistance to substance users and their families, in addition to setting up a national action plan. The government has been engaged in the establishment of this council since 2001; however, the NCD has not yet been formed.

There are several detoxification programs, but the only entity in Lebanon that offers a comprehensive drug rehabilitation program is Oum al-Nour (ON), a Beirut-based NGO. The Government of Lebanon, through the Ministry of Social Affairs and the Ministry of Public Health, provided 36 percent of ON's \$1,000,000 budget in 2004 budget. ON estimates that the age of the average drug addict in Lebanon has been decreasing since the end of the country's civil war in 1990, with pre-college and college-age youth now being the most vulnerable. In 2004, 60 percent of ON's clients were under 24, compared to 5 percent for the same age group in 1990. ON statistics, based on their patient base, indicate that the most commonly abused illicit substance is heroin, but use of "designer" drugs such as methamphetamine and ecstasy is increasing.

ON operates three drug treatment centers in Lebanon, two for men and one for women. The centers, which have a maximum capacity of 70 patients, offer a yearlong residential program for hard-core addicts, and sometimes operate above nominal capacity. The centers provide detoxification, psychiatric, spiritual, and social programs without the use of substitution products. A new section, funded by USAID, was built in one of the men's centers and became operational in September. The new section, which can accommodate 12 to 15 patients, has taken in 21 patients since September. ON does not offer outpatient care for individuals whose addictions do not warrant hospitalization.

ON also engages in drug prevention activities such as distributing educational materials on college campuses and promoting drug awareness among the population through advertisements and education programs. The organization also has a research office and a center for statistical studies.

Another drug rehabilitation center for men opened in Zahleh in the Bekka' Valley in coordination with the Saint Charles Hospital and the Ministry of Health. The center can accommodate up to 16 patients. The center's team of psychiatrists, clinical psychologists and social workers also does clinical training for hospital staff.

A new walk-in outpatient therapeutic facility for addiction that offers prevention, awareness, and psychological treatment to drug users and their families called Skoun (which means "internal tranquility" or "silence" in Arabic) opened last year in downtown Beirut. The center is currently treating some 20 outpatients.

Other associations that fight drugs are: Jeunesse Anti-Drogue (JAD), which is primarily committed to drug awareness but also provides medical treatment and psychological rehabilitation on an outpatient basis; Jeunesse Contre la Drogue (JCD), which raises awareness of substance abuse and AIDS, and helps users get proper treatment and rehabilitation; and Association Justice et Misericorde (AJEM), which was established to assist prisoners. One recurrent problem is the lack of coordination between concerned ministries and sometimes between the various NGOs that work on substance abuse.

According to the report "Substance Use and Misuse in Lebanon", released by the UNODC in May 2003, ISF participants in the study reported that individuals arrested for substance-related offenses most commonly use heroin, hashish, marijuana, and cocaine. Furthermore, the participants noted that inappropriate use of licit medications is on the rise in prisons, and that the use of Ecstasy is uncommon. Data from treatment/rehabilitation centers, however, showed that Ecstasy and abuse of licit opiates are on the rise. Data gathered from street substance users showed that abuse of codeine and other licit medications is on the rise, and additionally, the young population is increasingly inhaling thinner.

IV. U.S. Policy Initiatives and Programs

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

Bilateral Cooperation. USAID, in close cooperation with the Embassy, 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. USAID also helped increase the receiving capacity of one of Oum el Nour's rehabilitation centers (see paragraph above on Domestic Programs). In 2003, State Department counternarcotics assistance funded a narcotics demand reduction program administered by a Beirut-based NGO, the Justice and Mercy Association (AJEM). The project was designed to create a drug treatment facility in Roumieh prison to provide treatment and social rehabilitation for drug addicted prisoners incarcerated there. The State Department also funded a second project aimed at expanding receiving and treatment capacity at Oum el Nour centers.

The Road Ahead. Given the close involvement of Lebanese and Syrian officials in the battle against illicit narcotics, success in combating narcotics cultivation and trafficking depends on the will of both the Syrian and Lebanese governments. The GOL, in cooperation with the Syrian government, appears to have either eradicated or prevented, through threat of eradication, all illicit cultivation during 2004. However, it has not successfully developed a socio-economic strategy to tackle the problem of crop substitution. The USG will continue to press the GOL to maintain its commitment to combating drug production and transit and implementing anticorruption policies.

Morocco

I. Summary

Morocco continues to be a major producer and exporter of cannabis. It produced an estimated 47,400 metric tons of cannabis in 2003, providing for potential cannabis resin (hashish) production of 3,080 metric tons, according to a joint study released in late 2003 by the United Nations Office on Drugs and Crime (UNODC) and Morocco's Agency for the Promotion and the Economic and Social Development of the Northern Prefectures and Provinces of the Kingdom (APDN). A Moroccan government (GOM) study examining production levels for 2004 is still underway. Evidence continues to indicate the United States is not a major recipient of drugs from Morocco. According to the UNODC report, an estimated 134,000 hectares of land were used to cultivate cannabis in 2003, greatly surpassing the GOM's earlier estimates of a growing area covering a total of 15,000-20,000 hectares. The UNODC study also states that approximately 800,000 Moroccans (2.7 percent of the country's 2002 population) were involved in cannabis cultivation. Morocco's efforts to combat cannabis cultivation are made more difficult by limited short-term economic alternatives for those involved in its production. Morocco is a party to the 1988 UN Drug Convention.

II. Status of Country

Morocco consistently ranks among the world's largest producers and exporters of cannabis, and its cultivation and sale provide the economic base for much of northern Morocco. Only very small amounts of narcotics produced in or transiting through Morocco reach the United States. According to the UNODC report, the illicit trade in Moroccan cannabis resin generates approximately \$12 billion a year. Independent estimates indicate that the returns from cannabis cultivation range from \$16,400-\$29,800 per hectare (little of which goes to the

grower himself), compared with an average of \$1,000 per hectare for one possible alternative, corn.

According to EU law enforcement officials, Moroccan cannabis is typically processed into cannabis resin or oil and exported to Europe, Algeria, and Tunisia. To date, Morocco has no enterprises that use dual-use precursor chemicals, and is thus neither a source nor transit point for them. While there has been a small but growing domestic market for harder drugs like heroin and cocaine, cannabis remains the most widely used illicit drug in Morocco. Although there is no substantial evidence of widespread trafficking in heroin or cocaine, press reports suggest Latin American cocaine traffickers may have started using well-established cannabis smuggling routes to move cocaine into Europe.

III. Country Actions Against Drugs in 2004

Policy Initiatives. In May, the Interior Ministry announced the government was drafting a "new integrated plan" to fight drug trafficking and was considering revitalizing the National Commission of the Struggle Against Drugs. The new plan will gradually reduce the areas in which cannabis is grown, intensify border controls, expand regional and international cooperation in training, and include an aggressive public awareness campaign. The GOM's partnership with the UNODC in conducting the 2003 cannabis survey reflects the GOM's most significant effort to compile accurate and comprehensive data about narcotics production.

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 has continued its 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.

Accomplishments. In September, Morocco and France agreed to reinforce bilateral counternarcotics cooperation by deploying liaison officers to Tangiers and France. Morocco has legislation providing the maximum allowable prison sentence for drug offenses to 30 years, as well as fines for narcotics violations ranging from \$20,000-\$80,000. Ten years imprisonment remains the typical sentence for major drug traffickers arrested in Morocco. The Ministry of Justice has drawn up a draft law to further strengthen drug trafficking sentences.

Law Enforcement Efforts. In May, the Criminal Court of Tetouan sentenced convicted drug trafficker Mounir Erramach to 20 years in prison for drug trafficking and related charges and fined him \$375 million for customs and criminal violations. The court also handed down sentences ranging from one month in jail to life imprisonment to 26 other defendants in the case, including a rival drug kingpin who is still at large. The Court of Appeals of Tetouan upheld in December the majority of these sentences, including those of the two lead defendants, but reduced the sentences of four defendants and acquitted three others. In February, the GOM dismantled a small-scale crack cocaine smuggling network in Marrakech, leading to the seizure of 70 grams of the drug and the sentencing of 22 individuals to prison terms varying from one month to six years.

As part of a 1992 counternarcotics initiative, an estimated 10,000 police were detailed to drug interdiction efforts in the North and Rif mountains in 1995. Since then, approximately every six months, the GOM has rotated personnel into this region and continued to maintain narcotics checkpoints. Moroccan forces also staff observation posts along the Mediterranean coast, and the Moroccan Navy carries out routine sea patrols and responds to information developed by the observation posts. None of these efforts, however, has changed the underlying reality of extensive cannabis cultivation and trafficking in northern Morocco.

Corruption. Investigations into charges of alleged "abuse of power, corruption, embezzlement of public funds, drug trafficking," and violations of professional confidentiality by senior police officers and customs officials, as well as magistrates, court clerks, and other local government officials linked to the Erramach case, were still underway in December. Despite enforcement efforts in this case, corruption, at some level, is likely to play a role in Morocco's continuing trafficking of cannabis products.

Agreements and Treaties. The U.S. and Morocco cooperate in judicial matters through a convention on mutual legal assistance. 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 amending the Single Convention. Morocco is a party to the UN Convention against Transnational Organized Crime.

Cultivation/Production. The center of cannabis production continues to be the province of Chefchaouen, although production has expanded in the last 20 years north to the outskirts of Tangiers, west to the coastal city of Larache, and east toward Al Hoceima. According to the UNODC report, small farmers in the northern Rif region grow most 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 of the South. The UNODC survey found that 75 percent of villages and 96,600 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 officials have indicated that crop substitution programs thus far appear to have made little headway in providing economic alternatives to cannabis production. The amount of cannabis production measured in 2003 suggests that the crop's cultivation has seen a steady increase over the past few years, to the detriment of other agricultural activities. The UNODC report warned that this agricultural monoculture represents an extreme danger to the ecosystem, as the extensive use of fertilizers and forest removal continue to be the methods of choice to make room for cannabis cultivation.

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

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

IV. U.S. Policy Initiatives and Programs

U.S. Policy Initiatives. U.S. policy goals in Morocco are designed to provide 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 money

laundering laws and efforts against terrorist financing may also contribute to the GOM's ability to monitor the flow of money from the cannabis trade.

Bilateral Cooperation. According to customs officials in northern Morocco, USG-funded border security training and equipment contributed directly to the dismantling of 37 smuggling and trafficking operations in the Nador region in 2003.

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.

Nigeria

I. Summary

Nigeria remains a major transit route for illicit trafficking of narcotic drugs. There is evidence that narcotics transiting Nigerian ports and borders reaches the United States, but the quantities are modest in comparison to the impact of narcotics trafficked by ethnic Nigerian criminals operating trafficking rings based outside of Nigeria, and thereby beyond much of the enforcement reach of the Nigerian government. However, Nigeria does not produce any of the narcotic drugs its nationals traffic, except marijuana. Cannabis/marijuana is grown domestically in Nigeria and is trafficked to the neighboring West African countries from where it is further trafficked to Europe. There is a small, but increasing local narcotics market. Nigeria's NDLEA (National Drug Law Enforcement Agency) is strongly committed to interdicting the movement of through Nigeria and reducing abuse by Nigerians. NDLEA has grown in experience and professional competence and their counternarcotics efforts have prevented a growing share of Nigerian-trafficked drugs from reaching markets in other countries. Nigeria is party to the 1988 UN Drug Convention.

II. Status of Country

Nigeria is not a major producer of narcotic drugs, but it is a major drug-transit hub. Heroin and cocaine transit Nigeria on their way to neighboring countries, Southern Africa, Europe and increasingly to the United States. In addition, Nigerian organized criminals are a major factor in the worldwide drug trade, especially in the trafficking of cocaine. Most drugs trafficked to and through Nigeria originate outside Africa. Drug interdiction is the sole responsibility of the NDLEA. Heroin and cocaine seizures have dominated the NDLEA activities at the Murtala Mohamed International Airport in Lagos. There was a major seizure of 30 kilograms of cocaine at the Benin-Nigerian border in December. The quantities of marijuana seized and number of arrests relating to marijuana indicate that trade in, and local consumption of, marijuana has been on the increase in 2004. On the whole there has been an increase in narcotic drugs business despite government efforts to combat illegal trafficking.

III. Country Actions Against Drugs in 2004

Policy Initiatives. The assistance relationship between USG and Nigerian agencies is generally good. Training programs, technical assistance and equipment donations have continued, especially to the NDLEA Academy in Jos, Plateau State. Other counterpart agencies include the Economic and Financial Crime Commission (EFCC) and the National Police Force (NPF), though in the case of the NPF, there have been some difficulties coordinating efforts to improve training at the Police Academy.

Accomplishments. In 2004, NDLEA commenced a systematic implementation of all anti-money laundering legislation. Five commercial banks have been investigated and prosecuted for aiding and abetting money laundering. NDLEA also intensified its bank inspection operations at other Nigerian financial institutions.

Law Enforcement Efforts. In 2004, by the end of October, NDLEA seized 51,022 kilograms of cannabis, 92.2 kilograms of cocaine, 53.3 kilograms of heroin and 198.1 kilograms of psychotropic substances. In the same period, the agency arrested 3,067 drug traffickers and over 98 percent of them were successfully prosecuted. The seizures were concentrated at airports, seaports and border posts. NDLEA continued to develop its capacity to conduct complex investigations and get arrests and convictions of narcotics kingpins.

Corruption. Corruption is fully entrenched in Nigerian society and still remains a significant barrier to effective narcotics enforcement. It is systemic and society tends to condone it. The socio-economic conditions in Nigeria seem to be the root cause. There is widespread unemployment and the salaries of civil servants are low. In addition, the government often fails to pay salaries on time. Law enforcement officers are most affected by this failure. The Independent Corrupt Practices and Other Related Offences Commission is empowered to receive and investigate reports of corruption and where justifiable, prosecute the offenders. It is also empowered to educate the public against bribery, corruption and other related offences. In 2004 the commission endeavored to execute its duties despite the problems it faced. ICPC has investigated and is in the process of prosecuting high profile Nigerian government officials. These include judges, commissioners, permanent secretaries and ministers. A proposed constitutional amendment would remove the immunity of state governors from prosecution for corruption and other crimes. ICPC now has 12 qualified and motivated prosecutors and is recruiting more private-sector prosecutors to replace its current police prosecutors. The Commission is scheduled to receive assistance from a Resident U.S. Legal Advisor (RLA). This project is scheduled to commence in March 2005 for an initial six months.

Agreements and Treaties. Nigeria is 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. Nigeria is a party to the UN Convention against Transnational Organized Crime and its protocols on migrant smuggling and trafficking in women and children. Nigeria is a signatory to the UN Convention Against Corruption. The U.S. and Nigeria cooperate in matters of extradition and judicial assistance through the 1931 U.S.-U.K. Extradition Treaty, which applies to Nigeria, and the U.S.-Nigeria MLAT, which entered into force in 2003.

Cultivation/Production. Marijuana/Cannabis is grown all over Nigeria, but cultivation is heaviest in the central and northern states of the country. It is also grown in large quantities in Ondo and Delta states. Its market is concentrated in West Africa and Europe. None is known to have found its way to the United States. NDLEA destroyed more than 200,000 hectares of marijuana in 2004.

Drug Flow/Transit. Nigeria remains a conduit for heroin and cocaine from Asia and South America destined for South Africa, Europe, and to a lesser degree, North America, including the U.S. Interdiction is mainly at the Murtala Mohamed International Airport in Lagos where NDLEA conducts 100 percent searches on both passengers and luggage. This has led to a change of routes by traffickers. Port Harcourt Airport, currently being used by British Airways, has been identified as a new narcotics smuggling route in Nigeria. Many observers suspect that seaports are important entry points because of the laxity of security at Nigeria's ports.

Domestic Programs (Demand Reduction). Drug abuse is on the rise in Nigeria. This is a result of the availability of imported drugs on the local market in Nigeria's large cities. Domestic cultivation and abuse of marijuana is also still a big problem. Treatment is not generally available.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. NDLEA is making continued strides, improving its interdiction efforts at Nigerian ports of entry, and working on its capacity to conduct sophisticated investigations successfully. The U.S., through State-Department narcotics assistance, is a significant factor in helping NDLEA to improve its interdiction performance.

The Road Ahead. The future of U.S. assistance to the Nigerian Police Force (NPF) is under review. The NPF has not been very cooperative in its dealings with the U.S. Government. This has been manifested in its failure to follow a new recruit curriculum and a mid-level in-service training program that were designed by Department of Justice advisors to the Nigerian Police Force. The remaining agencies receiving U.S. assistance (NDLEA, ICPC & EFCC) have shown that they are committed to their work and there are indicators that they are now more effective on the ground. Continuing assistance to these agencies is planned and under discussion.

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. Due to these factors, 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. Saudi and U.S. counternarcotics officials maintain excellent 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 Islamic values and 1988 UN Drug Convention obligations, 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 2004, the Saudi Government executed a number of people for narcotics-related offenses. 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 counternarcotics efforts, drug trafficking and abuse is a growing problem. Since the Saudi government provides no statistics on drug consumption, interdiction, and trafficking, it is difficult to substantiate this assessment with hard data. 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 Narcotics Police are currently collaborating with the Presidency of Youth Welfare to produce a film for schoolchildren to educate them about the dangers of illegal drugs. 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. There are no separate facilities for Saudi women, and 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. Heroin and hashish 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 is also reported.

III. Country Actions Against Drugs in 2004

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. drug enforcement officials regularly exchange information on narcotics cases. Drug seizures, arrests, prosecutions and consumption trends are not matters of public record, although reports of drug seizures by Saudi officials appear occasionally in local newspapers. Saudi interdiction efforts tend to focus more on individual carriers than on follow-on operations designed to identify drug distributors and regional networks.

Corruption. 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.

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

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

Drug Flow/Transit. Saudi Arabia is not a major transshipment point. Due in part to new detection techniques employed at major points of entry, seizures of narcotics (coming primarily from Pakistan, Nigeria and Turkey) have increased. Anecdotal evidence suggests that narcotics trafficking is a growing problem via the country's land borders.

Domestic Programs (Demand Reduction). In addition to widespread media campaigns against substance abuse, the Saudi Government sponsors drug eradication programs directed at school-age children, health care providers and mothers. 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 male 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.

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

Syria

I. Summary

In 2004, the Syrian government continued to give a high priority to, and devote significant resources to combating the drug trade. Although drug seizures increased measurably, domestic usage was negligible. Thus, Syria remains an important transit country. Jordan and the Gulf States remain the primary destinations for drugs transiting Syria from Lebanon and Turkey. Syrian authorities reported a reduction in the amount of opium transiting Syria from Pakistan and Afghanistan to Turkey. The Syrian government cooperated with Lebanese authorities on successful opium and cannabis eradication programs in the Syrian-controlled Lebanese Biqa' Valley. The government continued its strong counternarcotics cooperation with neighboring Turkey and Jordan, and in 2003 initiated cooperation with Saudi Arabia. Syria's domestic drug abuse problem remained small, due largely to the active enforcement of existing laws and the cultural and religious norms that stigmatize substance abuse. Syria is a party to the 1988 UN Drug Convention.

II. Status of Country

Most narcotics transiting Syria go to other parts of the region and to Europe. Syria is a transit country for hashish, cocaine, and heroin, particularly from Turkey, but also from Lebanon. Syria is a transit country for Captagon (fenethylline), a synthetic amphetamine-type stimulant, entering Turkey destined for Gulf Countries.

After almost a decade of essentially no illicit drug production (Opium poppy or commercial quantities of marijuana), in 2001, the production of both hashish (cannabis) and opium poppy escalated. Lebanon and Syria are not considered as important source countries for hashish and opium. A very effective eradication program in the Biqa' Valley by Lebanese and Syrian authorities from 2002 to 2004, sharply reduced the amounts of cannabis and opium cultivated in the valley. Both Syrian and Lebanese authorities expressed concerns that the international community has not fulfilled its promise to provide alternative crop substitutes for the farmers to cultivate in the Biqa' Valley. The authorities fear that due to a lack of alternative crops and economic opportunities, farmers may go back to cultivating cannabis and opium in the Biqa' on a larger scale. Syria occupies Lebanon, and thus Syria is an important factor in Lebanese affairs.

III. Country Actions Against Drugs in 2004

Policy Initiatives. In 2002 Syria upgraded the Counternarcotics Unit from a branch to a directorate of the Interior Ministry. The government also opened regional counternarcotics offices in Aleppo province, covering the Turkish border, and in Homs province, to monitor the Lebanese border, and eventually plans to open offices in every province, although no additional offices were opened in 2004.

In 2002 Syrian authorities prepared a draft decree, with an expected release date of early 2003, that was to provide financial incentives of up to several million Syrian pounds (1SP = \$51.50) to anyone providing information about drug trafficking and/or cultivation in Syria. The draft decree was not enacted in 2004 because of a lack of funding and there is no expectation that there will be sufficient funding to do so in 2005.

Accomplishments. In 2004, hashish, opium, and heroin seizures decreased, and there was a slight increase in cocaine seizures. Arrests and convictions for drug related offenses also increased. Within Syria, the Syrian authorities confiscated 40 kilograms of cocaine, 2 kilograms of opium, 563 kilograms of hashish, and 2.0 million Captagon pills. Syrian authorities reported the arrest of 3,677 individuals on narcotics-related charges in 2,540 narcotics-related cases in 2004.

In 2004, Lebanese authorities reported that over 130,014 square meters of cannabis fields were eradicated in the Biqa' as a result of cooperation between Syrian and Lebanese authorities. Key border stations were staffed with personnel and specialized dogs trained in detecting concealed drugs.

Law Enforcement Efforts. Syrian officials characterized cooperation on drug issues with neighboring Saudi Arabia, Jordan, and Lebanon as "excellent." Syria has legislation, which provides for seizure of assets financed by profits from the drug trade. The government has used this legislation to seize assets.

Corruption. In the past there have been unconfirmed reports of corruption among some Syrian military officials in Lebanon involving the issuance of passes permitting the free movement of goods and persons in return for bribes. 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 2004; information was not provided on whether any investigations were conducted.

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

Cultivation/Production. The government of the Syrian Arab Republic (SARG) has an effective counternarcotics system in place that has reduced cultivation and production in Syria to negligible levels.

Drug Flow/Transit. Drug interdiction remains the focus of the Syrian counternarcotics effort. Syrian officials estimate that in 2004, the overall flow of narcotics transiting Syria and destined for other countries in the region was approximately the same as in 2003. Transshipment of narcotics from Turkey continues to represent the major challenge to Syria's counternarcotics efforts. The SARG's reported seizure statistics suggest that either the overall flow of narcotics has increased, or that SARG counternarcotics efforts have been more effective in capturing shipments of hashish and cocaine transiting through Syria to Europe and other countries in the region, of opium transiting from Pakistan and Afghanistan through Syria to Turkey, and of Captagon pills transiting from Turkey through Syria to Saudi Arabia.

Domestic Programs/Demand Reduction. Due to the social stigma attached to drug use and 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, and drug awareness is also part of the national curriculum for schoolchildren. The Ministry also conducts awareness campaigns through university student unions and trade unions.

IV. U.S. Policy Initiatives and Programs

Policy Initiatives. In meetings with Syrian officials, DEA officials continue to stress the need for diligence in preventing narcotics and precursor chemicals from transiting Syrian territory; the need to work with the Lebanese government on crop eradication programs and on dismantling drug laboratories in Syrian-controlled areas of Lebanon; 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. In February, DEA officials based in Nicosia and Syrian Anti-Narcotics Department coordinated efforts, which led to the seizure of 18.8 kilograms of cocaine at Damascus Airport. Syrian Ministry of Interior officials characterize cooperation with the Nicosia DEA office as excellent.

The Road Ahead. The U.S. will continue to encourage the Syrian government to maintain its commitment to combating drug transit and production in the region; to follow through on plans to enact anti-money laundering legislation; and to continue to encourage Syria to improve its counternarcotics cooperation with neighboring countries. The U.S. will also encourage Syrian officials to continue their work with their Lebanese counterparts to ensure that drug production in Lebanon remains at low levels; to find and destroy drug processing laboratories in those areas where Syrian forces are present; and to work to minimize the involvement of Syrian officials in drug trafficking.

Tunisia

I. Summary

Tunisia is not a significant drug producing country nor is it a drug transshipment country. Tunisia is not involved in the production, trading and transit of drug precursor chemicals. The government has an active youth demand reduction education program and encourages NGOs' counternarcotics educational activities. During 2004, the government started

enforcement of a new money laundering law, created a new department within the Ministry of Interior to root out corruption among police and customs officers, started building the region's first drug rehabilitation center for addicts and continued to punish drug dealers and consumers with maximum sentences as provided under the law. Tunisia is a party to the 1988 UN Drug Convention, and its domestic law contains provisions mandated by the Convention.

II. Status of Country

Tunisia is not a drug producing country and does not produce drug precursor chemicals. The government claims to have totally eradicated cannabis cultivation. However in previous years, there were unconfirmed reports of continued illicit cannabis cultivation in northern Tunisia. Before independence, cannabis cultivation for local use was legal. Tunisia is not a significant drug transshipment country; individual smugglers carry small amounts of hashish from Morocco and Algeria to Europe. Most drugs that enter the country from Algeria or Morocco are for local consumption. The government does not publish figures for narcotics consumption. However, Tunisian media reports on a daily basis on drug-related crimes for warning and prevention. NGOs active in the field report drug consumption is limited, but has increased in recent years, primarily in high schools, universities, and tourist resorts.

III. Country Actions Against Drugs in 2004

Policy Initiatives. On March 17, 2004, the GOT appointed a magistrate to head a newly created inspection department for police and customs officers. The department included in its mandate investigation of narcotics-related corruption. Tunisia has inter-ministerial committees to oversee drug control matters, but lacks a comprehensive counternarcotics master plan. Tunisia enacted a comprehensive penal code and other laws related to drug enforcement in 1992 and updated in 2003; these laws bring Tunisia into conformity with the 1988 UN Drug Convention. Tunisia has adequate legal and law enforcement measures in place to accomplish the 1988 UN Drug Convention objectives.

Accomplishments. The Government of Tunisia (GOT) gives a high priority to counternarcotics law enforcement. Tunisian law contains provisions mandated by the 1998 UN Drug Convention. Tunisia does not have an applicable bilateral narcotics agreement with the USG but is part of narcotics-related multilateral bodies. Tunisian media routinely report on drug seizures (mostly hashish), arrests of drug abusers, and convictions of traffickers. Hard drugs remain difficult to find or buy in Tunisia.

Law Enforcement Efforts. The agency with primary responsibility for counternarcotics law enforcement is the "Surete Nationale." Tunisian authorities did not make publicly available comprehensive information on counternarcotics law enforcement. Media increasingly report on law enforcement efforts. Based on publicly available sources, Tunisia averages 20 seizures annually totaling approximately 580 kilogram of narcotics. Sentences for narcotics cases are a combination of prison time and a fine, depending on the amount and type of drug. The most severe punishment is reserved for drug traffickers, who can receive 10 to 20 years plus a fine of 20,000 to 100,000 dinars (\$16,300 to \$81,300).

For example, the media reported on the following cases during the month of December 2004: Customs officials interdicted four foreigners with 30 kilogram of heroin; Police arrested 11 drug sellers and users and sized 110 grams of drugs (Tunisian courts sentenced them to six years in prison and a fine of 5,000 dinars, equivalent to \$4,700; Tunisian courts sentenced two Tunisian traffickers from the Algerian border area to 28 years in prison; prison guards confiscated 130 psychotropic pills smuggled into prison; local police in a Tunis suburb arrested five for drug use.

Corruption. Tunisia has taken legal and law enforcement measures to prevent and punish public corruption, including corruption committed by senior government officials. In 2004, the Ministry of Interior established a special department to address corruption by police and customs officers. A special magistrate with investigative power heads the new department. To

minimize corruption in the customs service, the government routinely transfers regional customs officials and reassigns senior national-level customs officers. As a matter of government policy, the Government of Tunisia and its senior officials do not engage in, 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. During 2004, Tunisia had no publicized cases of public narcotics-related corruption.

Agreements and Treaties. Tunisia 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. Tunisia is also a party to the UN Convention against Transnational Crime and its protocols against migrant smuggling and trafficking in women and children.

Cultivation/Production. There are no current, confirmed reports of cultivation of cannabis. In previous years, some cannabis was reportedly grown in insignificant amounts in northern Tunisia.

Drug Flow/Transit. Tunisia is not a major drug transshipment country. There are regular reports of individual hashish smugglers from Morocco and Algeria who transit Tunisia en route to Europe. An unsubstantiated report indicated increasing transit of heroin from Libya through Tunisia to Europe. There are no reports of synthetic drugs trafficked through Tunisia in 2004.

Domestic Programs (Demand Reduction). Tunisia has no official numbers on drug abuse; however, an informal estimate indicates that Tunisia has roughly two thousand drug abusers, primarily school dropouts and jailed drug users. Tunisian officials reported a rising trend of abuse of illicit drugs, including: cannabis, heroin, cocaine, and volatile substances. The majority of Tunisian drug users consume a form of cannabis.

The GOT conducts drug education programs in schools and encourages NGOs to conduct complementary educational programs. Tunisia's Ministry of Health has yet to develop a comprehensive rehabilitation policy. Addicts are generally imprisoned and currently receive little rehabilitation assistance. In 2005, the government will start construction on the first specialized substance abuse rehabilitation center and halfway house for drug addicts in Tunisia.

IV. U.S. Policy Initiatives and Programs

Bilateral cooperation. DOD Headquarters European Command provided \$322,600 in humanitarian aid for construction of the Sfax rehabilitation center.

The Road Ahead. The U.S. will continue to work closely with Tunisia to improve narcotics law enforcement. The U.S. supports Tunisian efforts to comply fully with the 1988 UN Drug Convention, and it seeks Tunisian support for U.S. international counternarcotics initiatives.

United Arab Emirates

I. Summary

Although not a narcotics-producing country, the United Arab Emirates (UAE) is believed to be a transshipment point for traffickers moving illegal drugs from the major drug-producing countries, especially Afghanistan, westward. Frequent reports of seizures of illegal drugs in the UAE during the past year underscore this conclusion. Most seizures have been of hashish. There are several other factors that render the UAE a waystation, including its proximity to major drug cultivation regions in Southwest Asia and a long (700 kilometers) coastline. High volumes of shipping render UAE ports vulnerable to exploitation by narcotics traffickers.

Published statistics on narcotics seizures and domestic addiction reveal a growing drug problem among UAE and third-country nationals, which is notable given the country's harsh drug laws. A Ministry of Health report in late 1998 asserted that there were approximately 12,500 drug addicts in the country of 3.1 million people. 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 believed to be a transshipment point for illegal narcotics from the drug-cultivating regions of southwest Asia, to Europe, to Africa and, and less significantly, to the United States. Western Europe is the principal market for these drugs, and Africa is becoming an increasingly prominent secondary market. Factors that contribute to the role of the UAE as a transshipment point are the emergence of Dubai and Sharjah as regional centers in the transportation of passengers and cargo, a porous land border with Oman, and the fact that a number of ports in the UAE are de facto "free ports", where transshipped cargo are not subject to inspection, as are other goods that enter the country.

In the first half of 2004, Abu Dhabi Police reported that drug crimes increased 5 percent over 2003, with more than 800 drug-related crimes, of which more than 100 involved drug smuggling.

III. Country Actions Against Drugs in 2004

Policy Initiatives. The UAE continued in 2004 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, and rehabilitating drug addicts. The UAE's Federal Supreme Court issued an important ruling in 2003 regarding proof that drug-offenders actually consume drugs in the UAE before they can be prosecuted. The Supreme Court decided that UAE law enforcement officials could not prosecute drug-users if the consumption took place in another country. A positive blood test for drugs is considered evidence of consumption, but does not, of course, determine whether the drug-taking occurred in the UAE or abroad.

In November, the UAE announced the establishment of a UN sub-office on Drugs and Crimes. The UAE government funded the estimated \$3 million dollar cost of the office and contributed an additional \$50,000 to the UN counternarcotics program. The sub-office will operate under the Cairo-based UN regional Office on Drugs and Crime, and will be responsible for coordinating national counternarcotics strategies and integrating the strategies into the UN's comprehensive global program.

Law Enforcement Efforts. Counternarcotics agencies have been active in 4,774 cases from 1999 to September 2004 involving 7,611 suspected drug dealers. During this same time period, officials seized more than 18,700 kilogram of hashish, 400 kilogram of heroin, and 100 kilogram of opium, a street value of more than \$25 million dollars.

In 2003, the UAE Ministry of Interior established a countrywide law enforcement database that is accessible to emirate-level police departments. This is a major step forward in coordinating narcotics-related information throughout the UAE.

Punishment for drug offenses is severe. A 1995 law stipulates capital punishment as the penalty for drug trafficking. No executions, however, have ever taken place, and sentences usually are commuted to life imprisonment. In June, an Omani policeman was sentenced to life imprisonment for possessing and smuggling drugs over the land border. In December, an Asian woman was sentenced to death for drug dealing, although she is appealing the verdict.

Several other high-profile seizures in 2004 indicate that UAE authorities continue to take seriously their responsibility to interdict drug smuggling and distribution. In July, federal

authorities seized 203 kilogram of hashish in a Pakistani ship destined for Saudi Arabia and docked at Khor Fakkan Port. In a separate operation, the federal authorities seized more than 50 kilogram of heroin en route to Kuwait. Local authorities are also working to further secure land borders, with Abu Dhabi Police seizing more than 600 kilogram of hashish transiting the UAE from Oman to Saudi Arabia.

The UAE is cooperating more with other countries to stop trafficking gangs. Cooperation has resulted in arrests in several countries, including Saudi Arabia, Oman, Yemen, Pakistan, Iran, Australia, Canada, and Holland. Cooperation has also resulted in the arrests of drug gangs in 12 cases with neighboring Oman, Saudi Arabia, and Kuwait. The UAE signed a landmark counternarcotics agreement with Iran in 2003 providing for cooperation against production, distribution, and smuggling of illicit drugs across the UAE-Iran sea border.

Corruption. UAE officials aggressively pursue and arrest individuals involved in illegal narcotics trafficking and/or abuse. 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.

Cultivation/Production. There is no evidence of drug cultivation and/or production in the UAE.

Drug Flow/Transit. Narcotics smuggling from south and southwest Asia continues to Europe and Africa and—to a significantly lesser degree—the United States via the UAE. Hashish, heroin, and opium shipments originate in Pakistan, Afghanistan, and Iran and are smuggled in cargo containers, via small vessels and powerboats, and/or sent overland via Oman. The UAE, and Dubai in particular, is a major regional transportation and shipping hub. High volumes of shipping render the UAE vulnerable to exploitation by narcotics traffickers. UAE authorities recognize that the number of human carriers of illicit narcotics transiting local airports is also on the rise. The police also caught a number of traffickers trying to smuggle drugs over the UAE land border by truck and horseback.

Recognizing the need for increased monitoring at its commercial shipping ports, airports, and borders, the UAEG is making an effort to tighten inspections of cargo containers, as well as passengers transiting the UAE. In December 2004, the UAE signed the Container Security Initiative, which will result in the tightening and expansion of cargo-reporting requirements. Customs officials and inspectors received specialized training on ferreting out prohibited items from U.S. DHS and Commerce's Bureau of Industry and Security in 2004. UAE authorities also received training on seaport interdiction and global transshipment this year. Customs officials randomly search containers and follow up leads of suspicious cargo. Dubai Ports Authority purchased state-of-the-art equipment for rapid, thorough searches of shipping containers and vehicles.

Domestic Programs (Demand Reduction). A 2003 UAE report noted that the majority of UAE drug users take their first dose abroad, primarily because of peer pressure. Statistics reveal that 75 percent of drug users in the UAE prefer hashish, 13 percent use heroin, while 6 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 2 percent were university graduates. Local press reports the street value of one kilogram of Pakistani hashish to be an approximate 5,000 Dirhams (\$1,362) in Abu Dhabi and about 4,500 Dirhams (\$1,226) in Dubai. The price is said to be highest in Abu Dhabi and Dubai because the customer base in these two emirates tends to be more affluent. While the data is a few years old, trends reported are still likely to be 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 and the establishment of rehabilitation centers. UAE officials believe that adherence to Muslim religious mores 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 into local authorities are referred to the legal system for prosecution. Third-country nationals or "guest workers," who make up approximately 80 percent of the UAE's 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

The Road Ahead. The USG will continue to support the UAE's efforts to devise and employ bilateral/ multilateral strategies against illicit narcotics trafficking, border/export control and money laundering. The USG and UAE are starting discussions on MLAT and extradition treaties, which would facilitate the exchange of information related to drug and financial crimes. The USG will encourage the UAEG to focus enforcement efforts on dismantling major trafficking organizations and prosecuting their leaders, and to enact export control and border security legislation.