



# AFGHAN OPIATE TRAFFICKING THROUGH THE SOUTHERN ROUTE



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## Glossary

AFP Australian Federal Police

AIDS Acquired Immune Deficiency Syndrome

AND Anti-Narcotic Department, Jordan ANF Anti-Narcotics Forces, Pakistan

ANSF Afghanistan's National Security Force

AOTP Afghan Opiate Trade Project
ARQ Annual Report Questionnaire
BBC British Broadcasting Corporation
BKA Bundeskriminalamt, Germany

CARICC Central Asian Regional Information and Coordination Centre

CCP UNODC Global Container Control Programme

CEN Customs Enforcement Network

CEWG Community Epidemiology Work Group

CMF Combined Maritime Forces

CNPA Counter-Narcotics Police of Afghanistan

DCHQ Drug Control Headquarters, Islamic Republic of Iran

DEA Drug Enforcement Administration, United States of America

DELTA Database on Estimates and Long Term Trend Analysis

DMP Drugs Monitoring Platform

EMCDDA European Monitoring Centre for Drugs and Drug Addiction

EU European Union

EUROPOL European Police Office FC Frontier Corps, Pakistan

FATA Federally Administered Tribal Areas

GCC Arab States of the Gulf

gm Grams ha Hectares

HDI Human Development Index
HIV Human immunodeficiency virus

IDS Individual Drug Seizures

IDU Injecting drug use

INCB International Narcotics Control Board

INCSR International Narcotics Control Strategy Report
INTERPOL International Criminal Police Organization
ISAF International Security Assistance Force

kg Kilograms km Kilometres

MAR-INFO An information system executed by the EU Council Customs Working Party

MCN Ministry of Counter Narcotics, Afghanistan MNC Ministry of Narcotics Control, Pakistan

MOI Ministry of Interior

mt Metric ton No. Number

NCA National Crime Agency, United Kingdom

NCB Narcotics Control Bureau, India

NDLEA National Drug Law Enforcement Agency, Nigeria

RCMP Royal Canadian Mounted Police
S.A.R Special Administrative Region
SOCA Serious Organised Crime Agency

UN United Nations

UNDP United Nations Development Programme

UNDSS United Nations Department of Safety and Security

UNODC United Nations Office on Drugs and Crime

USD U.S. dollar

WCO World Customs Organization

ZKA Zollkriminalamt

## Key findings

- Afghan heroin is trafficked to every region of the world except Latin America. The Balkan route (trafficking route through the Islamic Republic of Iran and Turkey) has traditionally been the primary route for trafficking heroin out of Afghanistan.<sup>1</sup> However, there are signs of a changing trend, with the southern route (a collection of trafficking routes and organized criminal groups that facilitate southerly flows of heroin out of Afghanistan) encroaching, including to supply some European markets.
- Unlike the northern or Balkan routes that are mostly dedicated to supplying single destination markets the Russian Federation and Europe respectively, the southern route serves a number of diverse destinations, including Asia, Africa and Western and Central Europe.<sup>2</sup> It is therefore perhaps more accurate to talk about a vast network of routes rather than one general flow with the same direction.
- The Islamic Republic of Iran and Pakistan face a tremendous challenge in dealing with the large flows of opiates originating from Afghanistan to feed their domestic heroin markets and to supply demand in many other regions of the world. The geographic location of the Islamic Republic of Iran and Pakistan makes them a major transit point for the trafficking of Afghan opiates along the southern route.



Map 1: Indicative heroin trafficking routes along the southern route

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. The final boundary between the Sudan and South Sudan has not yet been determined.

Source: UNODC elaboration, based on seizure data from Drug Monitoring Platform (DMP) ,Individual Drug Seizures (IDS) and Annual Report Questionnaire (ARQ), supplemented by national government reports and other official reports

<sup>&</sup>lt;sup>1</sup> UNODC (2013), World Drug Report 2013, UNODC, p.ix, Vienna: United Nations publication.

 $<sup>^{\</sup>rm 2}$  UNODC (2010), World Drug Report 2010, p.59. Vienna: United Nations publication.

- Seizures further out in the Indian Ocean have highlighted the potential for traffickers to send sizeable shipments using boats departing from unofficial ports and jetties along the coast of Islamic Republic of Iran and Pakistan. Maritime trafficking seemingly presents opportunities to smuggle large quantities of heroin (or opium) to third countries quickly, while trafficking using air transport would involve smaller quantities of drugs per consignment in order to avoid detection.
- The prominence of African sub-regions as potentially important consumption and transit zones for the trafficking of Afghan heroin along the southern route is a major finding of this report. The wide array of cargo and air links that have opened up to and through Africa offer many opportunities for traffickers. The information available at present suggests that different regions of Africa are developing important roles in facilitating the transit of southern route heroin, and networks from those regions have taken control of some trafficking routes.
- The Gulf region is another heroin market and a trans-shipment hub for the trafficking of Afghan opiates along the southern route. In Europe, networks operating between Pakistan and Europe have become more dominant in recent times with the United Kingdom, Belgium and the Netherlands as notable targets for trafficking via the southern route. A number of other countries that in the past were mainly being served by the Balkan route, including Spain and Italy, have recently noted Pakistan and African countries as prominent sources of opiates in transit from Afghanistan. Although it may be too early to identify this as a trend, heroin trafficked via the southern route has also been seized in East and Central Europe, with specific seizures in Slovenia and Ukraine, showing the need to closely monitor developments in this regard.
- India appears to be the main destination market for Afghan heroin smuggled along the southern route to South Asia while the largest potential revenues for southern route traffickers in East and South East Asia (ESEA) are to be found in China.
- Sources of heroin have fluctuated in Oceania, between Afghanistan and South East Asia, with a predominance of the latter in recent years. North America is similarly not a primary consumer of Afghan heroin, but It can provide a lucrative niche for some trafficking groups, in particular in Canada where most of the heroin seized originates from Afghanistan.
- Recent developments in illicit trafficking of opiates along the southern route highlight the importance of mutual cooperation between countries, regions and organisations. The Triangular initiative (that promotes collaboration between Afghanistan, Islamic Republic of Iran and Pakistan) has already demonstrated the tangible results of regional cooperation.

## Introduction

Afghan heroin is trafficked to every region of the world except Latin America. Trafficking heroin from production centres to heroin markets requires a global network of routes and facilitation by domestic and international criminal groups. Some routes appear to develop as a result of geographic proximity, while others are associated with lower risk, connections between migrants, higher profits or simpler logistics. This network is becoming increasingly intricate, but longer-lasting patterns are apparent. This report presents insights into the southerly flows of heroin out of Afghanistan – a collection of trafficking routes and organized criminal groups that constitute the southern route. UNODC has identified the northern route, the Balkan route and the southern route as the main heroin trafficking routes out of Afghanistan.<sup>3</sup>

The southern route is clear in its central thrust out of Afghanistan and through Pakistan and the Islamic Republic of Iran.<sup>4</sup> At the eastern and western fringes of that flow, and as trafficking proceeds further afield from South Asia, it becomes more challenging to distinguish the southern route from, for example, flows that could be pertaining to the Balkan route, or the tangle of different pathways supplying and transiting through the Middle East. The trafficking of Afghan opiates to East and West Africa is increasingly more clearly observable. Yet to the east of Pakistan, Afghan opiates<sup>5</sup> seem to supply markets in South Asia, South-East Asia and Oceania that are also supplied by Myanmar, in proportions that vary geographically and over time. These proportions and changes are not always clear-cut, but have important implications for those trafficking Afghan opiates and those working to stop them.

Overall, therefore, drawing a line around the southern route involves some arbitrary distinctions at the margins. Despite the difficulty of delineating its specifics, the southern route is a useful concept and focus for analysis, which can help to provide answers, for a number of reasons. Firstly, it is reasonable to presume there is some coherence and consistency among trafficking networks and drivers of the Afghan opiate trade along these trajectories, particularly since they begin with a relatively small number of movements out of Afghanistan and through the Islamic Republic of Iran and Pakistan.

Secondly, the collection of trafficking efforts that form part of the southern route would appear to deliver a large proportion of opiate flows dispatched from Afghanistan. A sprawling, transnational trade in Afghan opiates has to be categorised to some extent in order to focus on important features. Lastly, most findings will occur in specific places. This report aims to provide answers concerning the southern borders of Afghanistan and the popular routes transiting the Islamic Republic of Iran and Pakistan. For places further afield, it helps to identify how they are linked to specific supply chains that trace back to the southern route's central thrust.

Unlike the northern and Balkan routes, which are mostly dedicated to single destination markets, the southern route serves a number of diverse destinations, primarily Europe, Africa and Asia, and to a lesser extent even markets further afield in the Americas. The only major opiate destination market seemingly not targeted through this route is the Russian Federation. It therefore seems more accurate to talk about a vast network of routes rather than one direct flow. Moreover, the southern route relies heavily on maritime trafficking while both the Balkan and northern routes are mostly overland trajectories. With the possibility that global container throughput will hit one billion TEU (twenty-foot equivalent unit) in 2020, it is possible that more traffickers will turn to this mode of transportation to blend into the global commodity flow,<sup>6</sup> which would favour the southern route as a means of exporting opiates from Afghanistan into global maritime trade networks.

Map 2 illustrates the basic geography of the current analysis. Where relevant, the report also discusses drug flows or issues that are beyond the scope of the southern route, but which may affect it in some way. Generally, the focus of the report remains on the southern route itself, as a major example of illicit transnational opiate trafficking, and aims to identify patterns amenable to action by UNODC stakeholders.

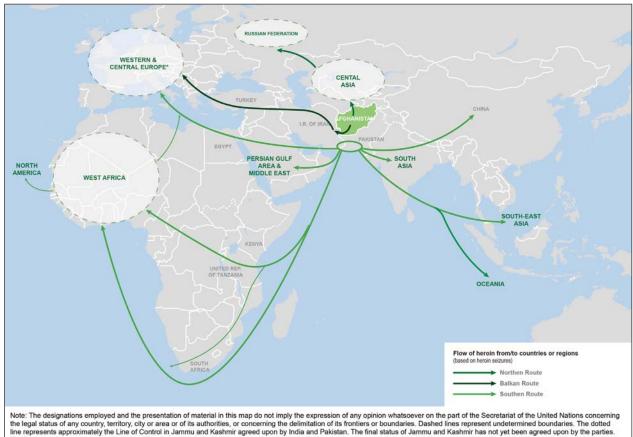
<sup>&</sup>lt;sup>3</sup> UNODC (2013). World Drug Report 2013, p.30. Vienna: United Nations publication.

<sup>&</sup>lt;sup>4</sup> UNODC (2013). World Drug Report 2013, p.30. Vienna: United Nations publication.

 $<sup>^{5}</sup>$  A subset of opioids comprised of the various products derived from the opium poppy plant, including opium, morphine and heroin.

<sup>&</sup>lt;sup>6</sup> Government of India, Ministry of Shipping, "Maritime Agenda: 2010 – 2020", January 2011, p. 6.

Map 2: Indicative Afghan heroin trafficking routes



Note: The designations employed and the presentation of material in this map do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dashed lines represent undetermined boundaries. The dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final boundary between the Sudan and South Sudan has not yet been determined. The tripe the presented on the above map should be considered broadly indicative and based on data analysis rather than definitive route outlines. Such analyses are based upon on data related to official drug seizures along the trafficking routes as well as official country report and Annual Response Questionnaires. Routes may deviate to other countries along the routes and there are numerous secondary flows that may not be represented.

Source: UNODC elaboration, based on seizure data from Drug Monitoring Platform (DMP), Individual Drug Seizures (IDS) and Annual Report Questionnaires (ARQ), supplemented by national government reports and other official reports.

# 1. Overview of Afghan opiate trafficking on the southern route

This chapter identifies some cross-cutting issues and themes apparent in Afghan opiate trafficking along the southern route. It sets the scene for the following chapters, which have a geographical focus, while the final chapter explores emerging threats and challenges and suggests the way forward.

#### Sources and data

The report draws from the following data sources:

- Data submitted by Member States to UNODC through the Annual Report Questionnaire (ARQ) on an annual basis.
- Drug seizure cases reported to UNODC through the Drug Monitoring Platform database (DMP). This is an online platform for officials to report and visualize seizure data, including data gathered from media reports and other open sources.
- The UNODC Individual Drug Seizure database (IDS). This contains data on significant individual drug seizures as reported by Member States.<sup>7</sup>
- UNODC Database on Estimates and Long-Term Trend Analysis (DELTA) aggregates official drug seizure data provided by Member States, inter alia, via the ARQ.
- Presentations and reports from Member States.
- Open source documents and information (duly referenced).

It is important to note that there is limited information regarding individual drug seizures from the Islamic Republic of Iran and from several countries in Africa. Even where seizures are reported, there is often sparse information on the destinations, methods of trafficking or other variables that would support deeper conclusions and enable to identify trafficking patterns. In some instances, seizure cases have been excluded from analysis due to the lack of detailed related information.

#### Interpreting drug seizure data

Despite gaps in datasets, the drug seizure data available to UNODC is relatively abundant compared to other sources on drug trafficking groups. Analysing seizure data, however, is not always straightforward, for a number of reasons.

Drug seizures are a direct indicator of drug law enforcement activity and therefore reflect their priorities and resources. As is the case in this report, seizures are often considered as an indirect indicator of drug flows and availability when linked with other information, based on the fact that law enforcement can only make seizures where drugs are present. On the other hand, geography and infrastructure influence the traffickers' choice of routes and methods. Where topographical features or facilities such as ports can influence traffickers' options, there may be greater confidence that a cluster of seizures indicates an important point in the underlying opiate trade.<sup>8</sup>

Leaving aside geography, seizures can also follow criminal connections. This occurs primarily because, in the course of law enforcement investigations, the arrest of one trafficker can provide tips pointing towards their associates, which may in turn lead to further drug seizures in relation to that particular network. The resulting pattern of seizures may follow criminal networks more than geographical contours.

Finally, seizure information is obviously retrospective, suggesting where trafficking attempts have been rather than where trafficking may be taking place now. Large sets of data generate patterns reflecting a combination

<sup>&</sup>lt;sup>7</sup> The defined threshold of 'significant' quantities per drug, as used by UNODC for reporting in the IDS database, are as follows: opium, cannabis herb, cannabis resin and cannabis plants: ≥ 1 kilogram; heroin, morphine, cocaine: ≥ 100 grams; seizures referring to trafficking by mail: all quantities. Quantities below the threshold do not have to be reported by Member States to UNODC, as stipulated by mandate.

<sup>8</sup> UNODC (2009). World Drug Report 2009, p.29-30. Vienna: United Nations publication; see also Farsight, "6 Ideas for Interpreting Drug Seizure Data", 28 November 2014.

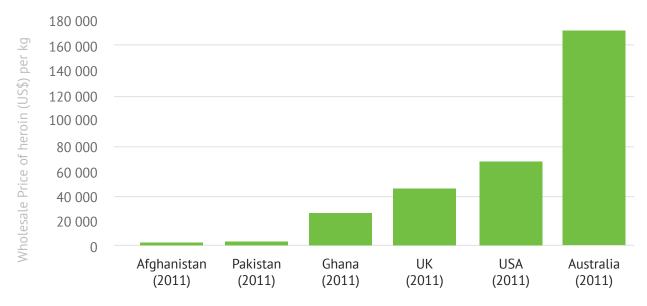
of variables including criminal networks, geography, law enforcement and other unknown factors, but may not always indicate where trafficking will take place in the future. Indeed, there are reasons to believe that seizures in one place will predict reduced trafficking activity there in future. For example, traffickers may shift away from an area that has been targeted repeatedly. This could even lead to a situation in which the number of seizures may be rising in a certain location because it is receiving increased law enforcement attention, even though trafficking may have actually decreased.

Given the challenges of interpreting seizure data, this report uses the information in three ways:

- 1. To describe patterns identified in the quantitative data.
- 2. To combine quantitative data with qualitative information in order to suggest potential trends regarding routes, methods and actors of the opiate trade.
- 3. To indicate possible trends in the opiate trade that may be worth researching further.

#### Trafficking risks and rewards

Figure 1: Wholesale price of heroin (of unknown purities) as it is smuggled along the southern route



Note: Figures are rounded; prices are not purity-adjusted

Source: Source: World Drug Report 2014 (UNODC) and information provided by Ghana in a personal communication

As previously described in relation to interpreting seizure data, factors such as physical geography, human infrastructure, criminal networks and law enforcement all affect trafficking patterns. User tastes, traffickers' experiences or habits, as well as their access to information and the personal circumstances of individual actors are among the variables that may play an important role in deciding what to traffic, where and how. These variables are of different nature and related data are scarce and patchy, if at all available.

Risk and reward are two common values that shape the traffickers' behaviour. To begin by using them in a simple model, the following would be logical statements, presuming all other variables remained unchanged:

- More effective law enforcement at a particular location increases the risk to traffickers and it will therefore decrease trafficking. If this holds true, one would expect that the high volume of seizures by Pakistani authorities in Balochistan in recent years should make it less attractive to smuggle drugs through Balochistan.
- A higher price of heroin in a particular place increases the reward for trafficking to that place and it will therefore increase trafficking of the drug. If this holds true, one would expect that increased retail prices in Western and Central Europe in recent years<sup>9</sup> would encourage traffickers to dedicate more effort to supply users there.

<sup>&</sup>lt;sup>9</sup> UNODC (2014). World Drug Report 2014, p.93. Vienna: United Nations publication.

• Growth in the number of heroin users in a particular location increases the reward for trafficking to that location and it will therefore increase trafficking of the drug. If this holds true, the growth in heroin use that is perceived to be occurring in West Africa<sup>10</sup> will increase its attractiveness to traffickers.

An additional layer of complexity would consider relative risks and rewards. For example:

- More effective law enforcement at a particular location will not increase the relative risk to traffickers if enforcement at alternative locations also becomes more effective. If the seizures in Balochistan are matched by increased seizures across Pakistan, the proportionate volume trafficked via Balochistan would not be expected to change.
- If an increased price of heroin reflects increased pressure from law enforcement (increased risk), then trafficking may not increase. This may have occurred in South Eastern Europe in 2011-2012 although the tighter enforcement occurred largely upstream, in Turkey.<sup>11</sup>
- An increasing number of heroin users would not generate greater rewards for trafficking if this trend is accompanied by a decrease in price. For example, if Afghan heroin becomes established in West Africa and becomes cheaper as the result of greater transit supplies, it may not on its own attract stronger attention by traffickers as a heroin market.

It may also be important to emphasise how different actors along the southern route assess risks and rewards differently. For example, a greater number of arrests would be expected to reduce the attractiveness of other illicit markets, but if enforcement risks are higher across all options facing those who are orchestrating the trafficking attempts, then it will not shift these organizers' balance of risks and rewards. Crucially, these changes depend on information flows; for instance, a low-level drug courier may not know about recent seizure patterns and therefore may not perceive their risk accurately. Or, an organizer may accept a marginal reduction in their own reward by paying a courier slightly more, which serves to shift the courier's assessment of rewards dramatically without changing much the situation facing the organizer. Considering such scenarios is useful to highlight the importance of individual decision-making, which is based on perception, rather than on objective facts alone.

With the potential to generate extremely complex models of trafficker decision-making, the challenge for this report is to choose a level of complexity that can be supported by data and is useful for actionable conclusions or further investigation. This largely depends on the context and specific issue being explored; the analysis presented in the chapters that follow suggests a few trends affecting the southern route overall, which are summarized in the next sections.

#### Diversification

A trend in many drug markets around the world is towards diversification.<sup>12</sup> This is occurring across several dimensions and creates greater complexity for both the analysis of the situation and law enforcement responses to opiate trafficking along the southern route.

#### Drug types

A first kind of diversification is in the proliferation of drug types available in a given market. When considering the breadth, volumes and impacts of the southern route, diversification of drug types in consumer markets makes analysis more difficult. A larger number of possibilities need to be addressed in relation to users' propensities to substitute between drugs. Predicting how trafficking groups will respond to enforcement or price changes becomes less certain when there are more products on the market. Predicting the evolution of product market shares is trickier when it is likely that new products will appear.

<sup>&</sup>lt;sup>10</sup> "Many small surveys of drug use involving heroin and cocaine have been conducted in several countries in the region, some with financial support from UNODC. What these rapid assessments highlight is that the prevalence of cocaine and heroin use in West Africa is about the estimated African average of 0.4 per cent and less than the global average of 0.7 per cent. While this estimate is relatively low, there has indeed been a substantial increase in the annual prevalence from the 0.2 per cent recorded in 2006. There is sufficient reason to believe that this increase has been sustained in recent years"; see West Africa Commission on Drugs, "Prevention and Treatment of Drug Dependence in West Africa", 2013, p.4.

<sup>11</sup> UNODC (2014), The Illicit Drug Trade through South-Eastern Europe, p. 74-75. Vienna: United Nations publication.

<sup>&</sup>lt;sup>12</sup> EMCDDA (2013), "EU drug markets report: a strategic analysis", p.13. Notably, UNODC's world drug reports over the years show increasing diversity of drugs both globally and in terms of their intermingling in each regional market analysed.

Along the southern route, diversification is apparent in several places. For example, drug users in West Africa seemed to use relatively negligible quantities of heroin until recent years. Now, however, there is evidence that they have access to Afghan opiates. In a different example, an emerging phenomenon among opioid-dependent drug users in the United States of America is that synthetic opioids are being partially replaced with heroin, driven by the increased availability of heroin in parts of the United States, and the lesser costs for regular users to maintain their dependency.<sup>13</sup> Overall, it appears that diversification of drug types affects southern route traffickers primarily in two ways. First, new drug markets are emerging as routes proliferate, particularly in Africa. Second, in established drug markets, the availability of alternative drugs is adding to competition for southern route traffickers. The balance of revenues, profitability and participating groups will vary by location, but this report suggests that diversification of drug types contributes to the sense of flux in this sector of the Afghan opiate trade.

#### Sources of supply

Even for a single type of drug, such as heroin, the development of the southern route suggests that sources of supply are diversifying. The most prominent cases are at the extreme ends of the southern route's networks, such as the USA, Australia and China. For example, since the 1990s the USA has relied on Latin America or Myanmar for its heroin. In recent years, greater importation and distribution of southern route heroin is reportedly associated with the growing participation in the Afghan opiate trade by nationals of countries in West Africa. Although the USA reports that heroin from South-West Asia remains a minority share of the market, <sup>14</sup> there would appear to be interest among southern route traffickers to ship consignments to the USA.

It is unclear whether there is any coordination between groups that favour different sources of supply. It seems plausible that heroin of different origin may mingle in some markets but remain well separated in others, depending on the structure of opiate trafficking in different locations and across different criminal networks.

In Australia, the number of heroin users is relatively small and until the 1990s it seems that they were almost entirely supplied from Myanmar. In the last decade, however, tests of seized samples show changes from year to year in the proportion of heroin from South-West Asia compared to South-East Asia. Again, it is unclear if there is any bifurcation in the distribution system between retailers and/or wholesalers with links to one source or the other.

China is geographically connected to both Afghanistan and Myanmar. There has generally been an evidence-based assumption that Myanmar is the dominant supplier to Chinese heroin users, but in the 2000s there were reports of Afghan heroin becoming more important as a source of supply. In recent years, China has estimated that Afghan heroin is maintaining a sizeable but still minority share of the market. It is reasonable to expect that most of this is trafficked overland via neighbouring Central Asia or northern Pakistan, but this report demonstrates that southern route traffickers also play a role in moving heroin to China - including Hong Kong - by air and sea.

#### Trafficking routes

With sources of supply diversifying, many markets are experiencing a parallel diversification of trafficking routes. Moreover, even with a focus only on the southern route, there has been a proliferation of trajectories connecting users to Afghanistan, Pakistan and the Islamic Republic of Iran. For example, Italy used to rely almost entirely on heroin trafficked along the Balkan route by land and sea. This has not ceased, but routes seem to have diversified to include more direct shipments from South-West Asia by sea, mail and air, as well as supplies through Africa.

To the East, between Pakistan, the Islamic Republic of Iran and Asia, there is evidence of direct shipments by sea (for example, from Pakistan to Malaysia), trans-shipment via Middle Eastern ports, direct air courier attempts (for instance, from Pakistan to Bangkok), circuitous air courier attempts via the Middle East, geographically dispersed postal trafficking, and trans-shipment via Europe, South-East Asia and onwards to Australia.

<sup>&</sup>lt;sup>13</sup> UNODC (2014). World Drug Report 2014, p.x. Vienna: United Nations publication.

<sup>&</sup>lt;sup>14</sup> US Department of Justice, Drug Enforcement Administration, "National Drug Threat Assessment 2014", p.9, (available at: www.dea.gov/resource-center/dir-ndta-unclass.pdf).

<sup>15</sup> See the chapter on Oceania.

In North America, attempts to supply Canada in recent years have included incoming flights from Africa and Europe, cargo by sea from Pakistan and mail arriving from multiple transit locations.

The migration flows across the globe, transport routes and communication connections appear to be important factors generating a profusion of potential supply lines for traffickers and supporting their capacity to use them. In any given case or pattern of trafficking along the southern route, a familiar set of enablers may be highlighted, but the web of supply lines overall is becoming more diverse. This has implications for law enforcement efforts, most notably in requiring cooperation among countries that may otherwise have little contact with one another. It may also be impacting the profitability and stability of trafficking networks, although this is difficult to gauge.

#### **Participants**

In terms of the nationalities and capacities of traffickers, a continuing trend apparent throughout this report is the involvement of nationals of African countries across several southern route countries, from producer to transit and destination.<sup>16</sup> In the heroin arrests data reported to UNODC, Pakistani nationals also appear to be involved in major markets such as Western and Central Europe.<sup>17</sup>

Available information indicates that trafficking syndicates from regions such as West Africa are active in almost all regions associated with the southern route. More information on these networks, which might be involved in the trafficking of different types of drugs, is necessary to design effective responses. Member States report to UNODC a greater need for intelligence sharing in this area, for example between destination countries such as Australia, countries in transit regions such as East and South-East Asia, and source countries in South-West Asia.

The rise of nationals of African countries is a prominent example of the shifting opportunities and market power that are accompanying the diversification of routes out of the Islamic Republic of Iran and Pakistan. A reasonable hypothesis to investigate is that globalisation increases opportunities for suppliers and retailers to disintermediate the many middlemen that have been a feature of drug trafficking out of Afghanistan. An important example on the southern route may be apparent in the increase of direct shipments from Pakistan to Europe, which among other consequences would reduce the participation and profits available to traffickers in Turkey and the Balkans. On the other hand, the growing use of transit points in Africa highlights that there are still opportunities for new middlemen to insert themselves into southern route supply lines.

#### Methods of trafficking on the southern route

There are four basic transportation methods monitored in this report, along with other sub-types. a) Trafficking by post, b) Trafficking by sea (including in cargo and small boats), c) Trafficking by air (in cargo, luggage and hidden on the body) and d) trafficking by land (including in vehicles through trade crossings and unguarded borders, in luggage and hidden on the body).

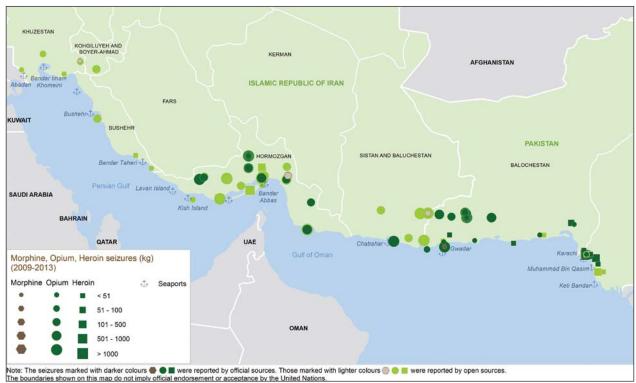
The furthest reaches of trafficking by land on the southern route appear to be through Pakistan into India and through the Islamic Republic of Iran to its southern coast. The major routes in which trafficking by land is dominant are through Balochistan province of Pakistan and the south-eastern provinces of the Islamic Republic of Iran (see Figure 1).

At sea, there are increasing numbers of opiate seizures (mostly heroin) related to the use of the coastal areas in Pakistan and the Islamic Republic of Iran. Sea and dry ports in South-West Asia have also seen an increase in general trade. In addition to official ports, traffickers use smaller jetties to move heroin to the Gulf region, the Gulf of Oman and further south to East Africa. Outside Afghanistan, Pakistan and the Islamic Republic of Iran, the largest seizures by volume have occurred at seaports or on the high seas, indicating that trafficking by sea remains the transportation method for smuggling larger quantities of heroin. Large maritime seizures made in Europe also indicate that significant heroin shipments are not detected at points of departure.

<sup>&</sup>lt;sup>16</sup> UNODC (2010). World Drug Report 2010, p.62. Vienna: United Nations publication.

 $<sup>^{17}</sup>$  UNODC (2014), The Illicit Drug Trade through South-Eastern Europe, p.90. Vienna: United Nations publication.

Map 3: Location of opiate seizures (opium, heroin, morphine) in the coastal areas of Pakistan and the Islamic Republic of Iran, as reported to UNODC presented in government reports and the media, 2010-2013

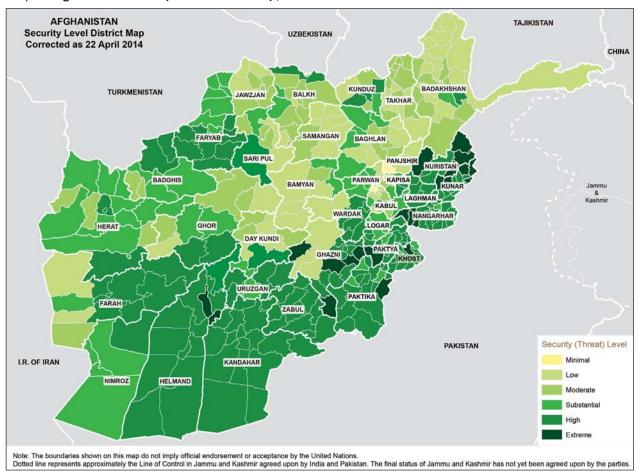


Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Interceptions of opiate shipments by air and mail suggest that these methods have become increasingly popular for southern route traffickers. Although the average quantity seized is small, the sheer number of shipments intercepted indicates that the aggregate volumes trafficked using these transportation methods may be large.

## 2. Afghanistan

In recent years Afghanistan has accounted for around 80 per cent of global heroin production<sup>18</sup>. This situation is intertwined with a number of other challenges facing the country, particularly issues related to governance and security. The rule of law does not extend to all regions of the country because of the dominating presence of anti-government elements in many provinces, notably in the south of the country. This provides a conducive environment for opium production and for morphine and heroin processing and trafficking.<sup>19</sup> After many years of drug production, Afghanistan has one of the highest opiate prevalence rates in the world with 2.65 per cent of population reportedly abusing opiates.<sup>20</sup>



Map 4: Afghanistan security level district map, 2014

Source: United Nations Department of Safety and Security (UNDSS)

The Afghan opium economy is best conceptualized as multiple industries producing various products for different markets. Afghan opium poppies are cultivated and processed to then be sold as opium, morphine and various grades of heroin. Each of these products have domestic and export markets and different regions within Afghanistan supply products for different domestic and export markets. The focus of this report is on the southern route; this chapter will also analyse some general production and trafficking trends in Afghanistan to provide context from which a clearer understanding of the role of the southern route can be developed.

 $<sup>^{\</sup>rm 18}\,$  UN News Centre, "Opium harvest in Afghanistan hits new high in 2014".

<sup>&</sup>lt;sup>19</sup> According to the United Nations Mission in Afghanistan, most civilian deaths and injuries caused by anti-government elements were in the south and south-east of the country.

<sup>&</sup>lt;sup>20</sup> Opiates are substances derived from opium poppy, such as morphine and codeine, including their derivatives, such as heroin; see UNODC (2012), Opiate flows through northern Afghanistan: a threat assessment, p. 17. Vienna: United Nations publication

#### Major opiate seizures in Afghanistan 2011-2013

Major opiate seizures in Afghanistan point to the size of the industry and the difficulties the region faces in stemming the flow of opium, morphine and heroin out of Afghanistan along the southern route. Below are some of the major seizures made between 2011 and 2013.

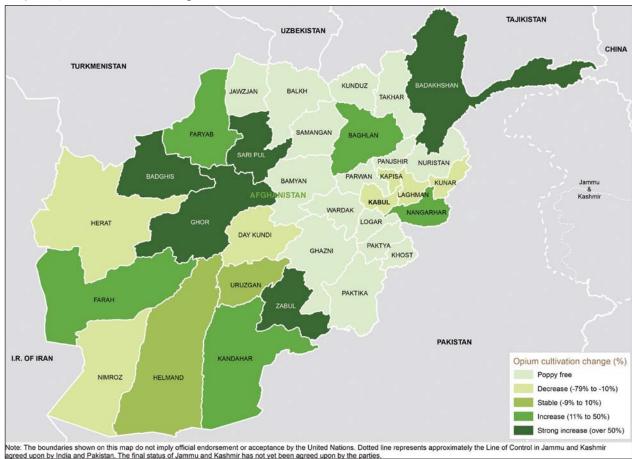
- 700 kg in February 2011: Afghanistan National Security Force (ANSF) and the International Security Assistance Force (ISAF) conducted a counter-narcotics operation in the Achin district of Nangarhar province and discovered an illicit heroin processing laboratory and weapons cache. 700 kg of heroin, 100 kg of opium, 210 kg of acetic anhydride and 50 litres of ammonium chloride were confiscated.
- 10,800 litres of morphine solution in September 2011: the seizure was made near Shahtut, in the Bahran district of Helmand province. Three large drug-processing laboratories were destroyed. Over 5 tons of precursors were seized along with 100 kg of heroin, 4 metric tons (mt) of morphine base and 80 kg of illicit morphine, 5 heroin presses, over 300 55-gallon drums and 6 generators were also seized.
- 190 kg in February 2012: ANSF seized 149 kg of heroin hydrochloride, 41 kg of heroin base and 51.5 kg of opium. Two suspects were arrested in the Washir district of Helmand province.
- 240 kg in September 2012: during a three-day operation in the Washir district of Helmand, coalition forces recovered a large amount of narcotics, weapons and explosives. This included over 240 kg of heroin and 300 kg of opium.
- 104 kg in September 2012: in Chakhansur district, Afghan-led security forces seized 560 kg of opium, 104 kg of heroin and arms. Two individuals were detained, under suspicion of facilitating the movement of weapons and narcotics across southern Afghanistan,.
- 600 kg in January 2013: Counter-Narcotics Police of Afghanistan (CNPA) seized 600 kg of heroin and arrested two suspects.
- 833 kg in November 2013: in Nangarhar province, four laboratories were seized and thousands of kilograms of heroin, opium and morphine were confiscated.
- 252 kg in December 2013: heroin was seized in Nimroz province from a motor vehicle.

## 2.1 Opium production

Despite efforts by the Government of Afghanistan and the international community, opium-poppy cultivation in Afghanistan has increased in recent years. In 2014 the area under opium-poppy cultivation was estimated at 224,000 hectares<sup>21</sup>, a record high and a rise of around 7 per cent compared with 2013. The vast majority (89 per cent<sup>22</sup>) of opium-poppy cultivation in 2014 took place in nine provinces in the south and west of the country.

<sup>&</sup>lt;sup>21</sup> UNODC and Afghanistan Ministry of Counter Narcotics, "Afghanistan Opium Survey 2014", p. 6.

<sup>&</sup>lt;sup>22</sup> UNODC and Afghanistan Ministry of Counter Narcotics, "Afghanistan Opium Survey 2014", p. 6.



Map 5: Opium cultivation in Afghanistan, 2014

Source: Afghanistan Opium Survey 2014, UNODC

Many factors contributed to the high level of opium-poppy cultivation in 2014, including the decrease in eradication efforts by 63 per cent from 7,348 hectares in 2013 to 2,692 hectares in 2014.<sup>23</sup>

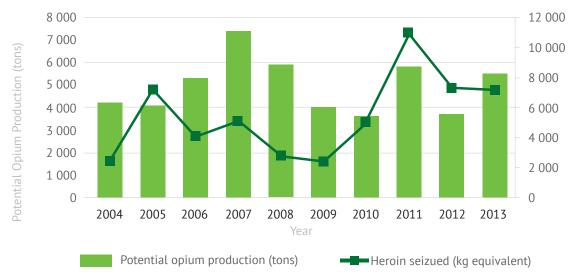
In accordance with the increased area under cultivation, opium production spiked to 6,400 tons in 2014, an increase of 17 per cent from 2013, when it totalled 5,500 tons. UNODC estimates suggest that 62 per cent of opium is processed into heroin, with the remaining 38 per cent being left unprocessed<sup>24</sup>. Scarce data is available as regards the purity of heroin exported from Afghanistan and when considering heroin of export quality produced, an average purity of 52 per cent is assumed for wholesale.<sup>25</sup>

<sup>&</sup>lt;sup>23</sup> UNODC and Afghanistan Ministry of Counter Narcotics, "Afghanistan Opium Survey 2014", p. 6.

 $<sup>^{\</sup>rm 24}$  UNODC and Afghanistan Ministry of Counter Narcotics, "Afghanistan Opium Survey 2014", p. 41.

 $<sup>^{\</sup>rm 25}$  UNODC and Afghanistan Ministry of Counter Narcotics, "Afghanistan Opium Survey 2014", p. 40.

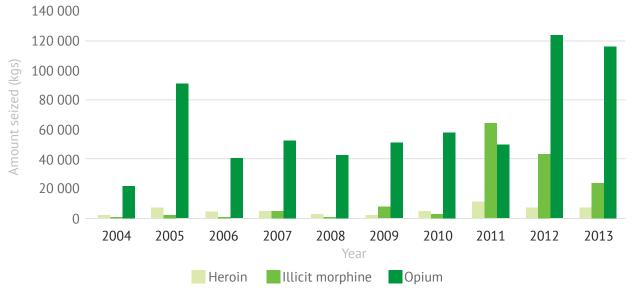
Figure 2: Opium production and heroin seizures in Afghanistan, 2004-2013



Source: UNODC World Drug Report 2014

The amount of opium interdicted annually remained below 60,000 kg between 2006 and 2011, before rising sharply in 2012 and 2013. Local opium markets are responsible for driving the majority of the movement of opium in the region,<sup>26</sup> but given the large quantity in circulation it is possible that a portion is being used for further processing into heroin in transit locations before being trafficked to destination countries.

Figure 3: Seizures of opium, morphine and heroin in Afghanistan 2004-2013



Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

In Afghanistan, the Helmand province reports the largest amount of seized opium; other provinces in the south and south-west bordering the Islamic Republic of Iran and Pakistan such as Herat, Nimroz, Kandahar, Zabul and Uruzgan, also reported multi-ton seizures during the 2010-2013 period. This aligns with the regional data on seizures, with the majority of opium seizures taking place in neighbouring the Islamic Republic of Iran. It is likely that cross-border movements of opium use the same routes as heroin and morphine exports but remain within the region for local use or may undergo further processing outside Afghanistan.<sup>27</sup>

<sup>&</sup>lt;sup>26</sup> There are no reports, however, of Afghan opium being trafficked to Africa, South Asia (except Pakistan) and South-East Asia. Only a negligible amount is thought to be shipped to Gulf countries and is limited to local use. There are also few indication of morphine or opium seizures in European countries (including Turkey).

<sup>&</sup>lt;sup>27</sup> UNODC (2012), Misuse of Licit Trade for Opiate Trafficking in Western and Central Asia, p. 54. Vienna: United Nations publication.

TURKMENISTAN

UZBEKISTAN

RUNDIZ TASHAR

BADDKISHAN

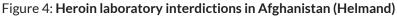
B

Map 6: Location of opium seizures in Afghanistan as reported to UNODC and presented in government reports, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

## 2.2 Heroin production

The main opium-producing regions in Afghanistan also serve as major opiate processing locations. The accessibility of raw materials, the insecurity of the regions and proximity to transit countries make them optimal sites for establishing processing laboratories.







Source: CNPA Afghanistan

According to CNPA data, nearly two thirds of the heroin laboratories in the country are located in the south, with other major sites in the western provinces as well as Nangarhar in the East and Badakhshan in the north.<sup>28</sup> Table 1 provides information on the destruction of laboratories from 2012 to 2013.

Table 1: Heroin Laboratory Destruction in Afghanistan 2012-13

Province	2012	% of 2012 Total	2013	% of 2013 Total
Uruzgan	3	4.1	-	0.0
Badakhshan	7	9.6	12	19.7
Farah	3	4.1	1	1.6
Kandahar	3	4.1	6	9.8
Nangarhar	9	12.3	11	18.0
Helmand	48	65.8	31	50.8
TOTAL	73	100.0	61	100.0

Source: CNPA, February 2014 - data for previous years was unavailable at the time of writing

Heroin seizures have fluctuated in recent years with a peak of 10,983 kg in 2011, followed by seizures totalling 7,262 kg in 2012 and 7,156kg in 2013. Despite this decrease from 2011 to 2013, over the long-term the figure for 2012 remains relatively high. This overall increase in heroin seizures is mirrored by a similar surge in seizures of morphine in 2011 and 2012, which is later addressed further. The majority of the heroin and morphine seizures occurred in the south, west and eastern regions of the country. This is consistent with likely trans-shipments through Pakistan and the Islamic Republic of Iran on the southern route, as well as the Balkan route, particularly from the western provinces of Afghanistan.

 $<sup>^{\</sup>rm 28}$  Afghanistan, Ministry of Counter-Narcotics, "Afghanistan Drug Report 2012", , p. 135.

TAJIKISTAN

CHINA

TURKMENISTAN

BALGH

RAPYAB

SAMANGAN

BALGH

RANGARHAR

RAPYAB

SAMANGAN

BALGH

RANGARHAR

RANGARHAR

RANGARHAR

RANGARHAR

RANGARHAR

SAMANGAN

BALGH

RANGARHAR

RAN

Map 7: Location of heroin seizures in Afghanistan as reported to UNODC and presented in government reports, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

## 2.3 Morphine production

Unlike heroin, which is manufactured using tightly controlled chemicals, morphine is much easier to produce with chemicals that are widely available in Afghanistan.



Figure 5: Opium to morphine conversion

Source: "Documentation of a heroin manufacturing process in Afghanistan", Federal Criminal Police Office, Wiesbaden, Germany, 2007

Across the region, 2011 and 2012 saw unprecedented seizures in Afghanistan, with significantly higher morphine seizures than in previous years. The reason for the increase is unclear, but it is part of a longer trend of fluctuating seizure data across Afghanistan, Pakistan and the Islamic Republic of Iran. This is also reflected in increased seizures of opium and heroin from 2011 to 2013, as discussed above and later on in this report.

Since 2010, morphine seizures in Afghanistan have taken place largely in the remote border regions of the provinces of Helmand, Kandahar and Nangarhar. Information about the intended destinations of the consignments is not available, but the location of the seizures could indicate trans-shipment through tothe Islamic Republic of

Iran and Pakistan. Importantly, there is a gap in current information on the final use of morphine trafficked from Afghanistan<sup>29</sup>, especially given that it does not have a large user base worldwide. It is possible that, in a similar fashion to opium, it is further processed in a transit location before distribution to consumer markets as heroin.

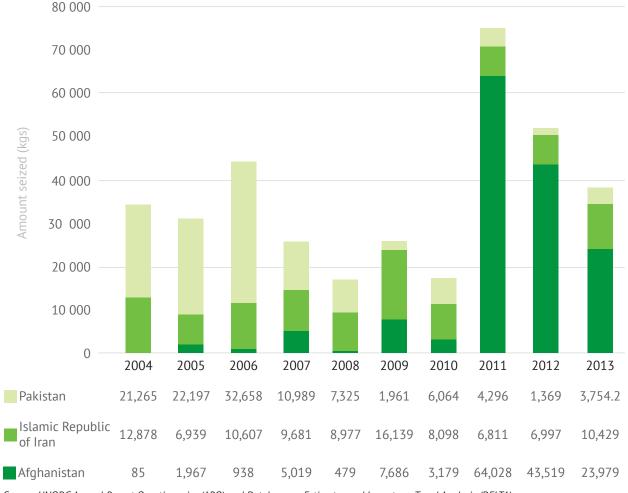


Figure 6: Morphine seizures in South-West Asia, 2004-2013 (kg)

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA).

It is interesting to note that in Pakistan, morphine seizures have only been reported in Balochistan, located near the Afghan and Iranian borders. However, in the Islamic Republic of Iran, the locations of morphine seizure reports have been more scattered, primarily near its borders with Pakistan, Afghanistan, Turkey and Iraq. Furthermore, for the first time in 2011 morphine seizures were reported along the coastline of Pakistan and the Islamic Republic of Iran. Morphine seizures reported in the Islamic Republic of Iran and Pakistan also seem to correlate with anecdotal reports of morphine-to-heroin processing outside Afghanistan. In 2008, for example, the Government of the Islamic Republic of Iran reported that morphine trafficked via Pakistan had been transferred to Qazvin, in north-west Iran, for conversion at a dairy farm.<sup>30</sup>

<sup>&</sup>lt;sup>29</sup> Paris Pact Expert Working Group on Precursors, November 2013; UNODC Workshop on Afghan opiate trafficking through the southern route, March 2014.

<sup>&</sup>lt;sup>30</sup> Islamic Republic of Iran, Drug Control Headquarters, "Drug Control in 2008: annual report and rapid situation assessment", p.18.

ARMENIA AZERBAIJAN KYRGYZSTAN UZBEKISTAN ISLAMIC REPUBLIC OF IRAN **ESFAHAN** KHUZESTAN IRAQ KUWAIT Illicit morphine seizures (kg) 0 - 50 51 - 100 101 - 500 501 - 1000 Note: The seizures marked with darker colours • were reported by official sources. Those marked with lighter colours • were reported by open sources.

The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties.

Map 8: Location of morphine seizures in Pakistan and the Islamic Republic of Iran as reported to UNODC and presented in government reports and the media, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

## Acetic anhydride trafficking

The transformation of morphine into heroin requires the use of the precursor chemical acetic anhydride. Morphine is plentiful in Afghanistan but since there is no licit requirement for acetic anhydride in Afghanistan, it must be procured outside the country from its producers in Europe, South Asia and East Asia among other regions. Afghan heroin production is thus indirectly dependent on diversion of acetic anhydride manufactured legally by the chemical sector worldwide.

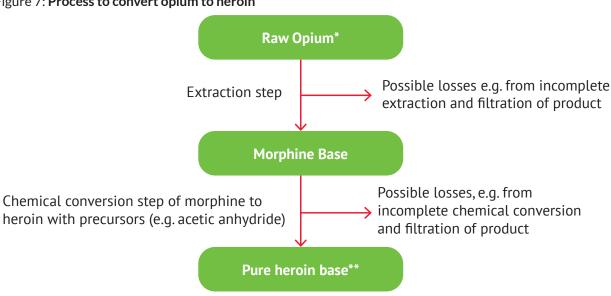


Figure 7: Process to convert opium to heroin

Note: \*oven - dried values are used in estimation; \*\*For the purpose of comparability, 100% pure heroin base is considered.

Source: Afghanistan Opium Survey 2014. UNODC and Afghanistan Ministry of Counter Narcotics, p. 38

To reach Afghanistan, acetic anhydride shipments must pass through one of the neighbouring states of the Islamic Republic of Iran, Pakistan or the Central Asian countries to the north. As recently as 2008, virtually all acetic anhydride was brought into Afghanistan without being seized. Since then, significant seizures have been reported, with seizures totalling approximately 41,000 litres in 2012.

70 000 60 000 50 000 40 000 30 000 20 000 10 000 0 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013

Figure 8: Acetic anhydride seizures in Afghanistan, 2004-2013

Source: CNPA

There is also evidence that Afghan heroin is adulterated by manufacturers and/or by traffickers, wholesalers and retailers. The practice of cutting heroin has been previously reported in Afghanistan but it was not until the establishment of a dedicated forensic team within Kabul's CNPA in 2008 that adulterants could be properly identified. Commonly used adulterants identified in 2008-2012<sup>31</sup> seizures<sup>32</sup> included caffeine, chloroquine (antimalarial medication),<sup>33</sup> phenolphthalein, paracetamol and dextromethorphan.<sup>34</sup>



Figure 9: Chloroquine and Caffeine



Source: UNODC Country Office Afghanistan

 $<sup>^{\</sup>rm 31}$  UNODC (2009). World Drug Report 2009, p.61. Vienna: United Nations publication.

<sup>&</sup>lt;sup>32</sup> Laboratory Information Bulletin, 2008 and information provided by CNPA Farah. CNPA, Laboratory Information Bulletin LIB 1/2011; Laboratory Information Bulletin LIB II/2009

<sup>&</sup>lt;sup>33</sup> CNPA, Laboratory Information Bulletin LIB 1/2011.

<sup>&</sup>lt;sup>34</sup> Pre-Review Report of World Health Organization, Expert Committee on Drug Dependence Thirty - fifth Meeting Hammamet, Tunisia, 4 - 8 June 2012.

Producers may be offsetting the relatively high prices of key precursors such as acetic anhydride<sup>35</sup> by using adulterants, therefore increasing the value of the final product. By adulterating heroin, producers are able to keep prices stable and maintain their profit margin.

In 2011, a random sample of 300 powdered drug submissions was tested at the CNPA laboratory in Kabul. Most samples consisted of low purity heroin with numerous cutting agents identified and only 34 samples (11.33 per cent) could be regarded as reasonably pure heroin.<sup>36</sup> Disaggregating adulterants by countries bordering Afghanistan would likely provide even more discernible insight. Unfortunately, the composition and quality of the various forms of heroin available in Pakistan, the Islamic Republic of Iran and some Central Asian countries remain unknown.

## 2.5 Trafficking routes

Afghan heroin is brought to drug users worldwide via three main trafficking routes out of Afghanistan: the Balkan route, the northern route and the southern route.<sup>37</sup> The gateway to these routes is through the long and remote borders of Afghanistan, about 2,430 km with Pakistan, 2,230 km with Central Asia and 1,923 km with the Islamic Republic of Iran. Within Afghanistan, the western provinces have been the primary locations for heroin seizures in recent years, until 2013 when the southern provinces (bordering Pakistan) registered higher volumes.

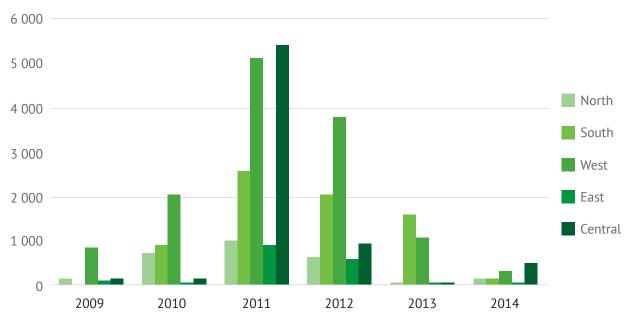


Figure 10: Regional heroin seizures in Afghanistan, 2009-2014

Source: CNPA (until June 2014).

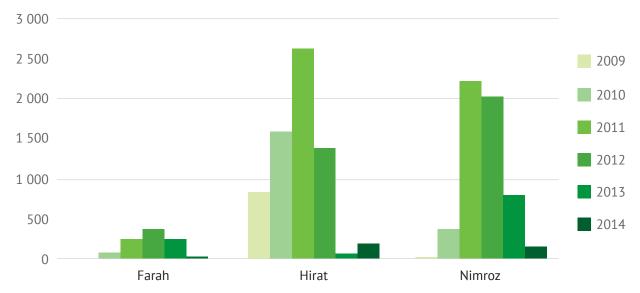
One potential factor explaining this western dominance may be the dual role of Nimroz, a remote province which borders both Pakistan and the Islamic Republic of Iran, thus serving as a conduit for flows into both the Balkan and southern routes.

<sup>&</sup>lt;sup>35</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.147-152. Vienna: United Nations publication.

<sup>&</sup>lt;sup>36</sup> Peter Bottomley, "Towards better intelligence from drug analysis", presentation by UNODC, CARICC, Kazakhahan, 3 October 2012.

<sup>&</sup>lt;sup>37</sup> UNODC (2010). World Drug Report 2010, p.45. Vienna: United Nations publication.

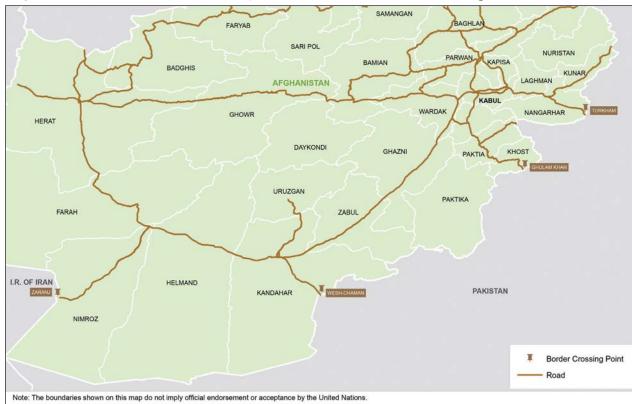
Figure 11: Annual heroin seizures in Afghanistan, 2009-2014 (June)



Source: CNPA (until June 2014)

The overwhelming majority of Afghan opiates are trafficked into the Islamic Republic of Iran, Pakistan or Central Asia. Considering the Afghan provinces of most relevance to the southern route,<sup>38</sup> there are four official border crossings with border control facilities along these borders. These crossings are the Zaranj-Nimroz border crossing (Nimroz province) to the Sistan-Baluchistan province of the Islamic Republic of Iran, the Ghulam Khan border crossing (Khost province) with Pakistan, the Torkham border crossing (Nangarhar province) with Pakistan, and the Wesh-Chaman border crossing (Kandahar province) with Pakistan. In addition to these, there are hundreds of natural passes and desert roads coursing across the entire border, most of which are unmanned and unsupervised.

<sup>&</sup>lt;sup>38</sup> In Afghanistan, it is difficult to estimate with complete accuracy which provinces supply which routes (if indeed such a division can be made). However, for the purpose of this report it is assumed that seizures in provinces in the, eastern and central regions of the country, along with Nimroz in the west, are an indication of trafficking along the southern route. This assumption is based on the proximity of these regions to borders with Pakistan and the Islamic Republic of Iran, through which heroin is trafficked and which serve as the starting point of the southern route (see chapters on Pakistan and the Islamic Republic of Iran). Hence, while this chapter presents seizures made throughout Afghanistan, the primary focus is on provinces which are most relevant to the southern route.



Map 9: Road network and border control points in east, south and south-west Afghanistan

Source: UNODC, The Global Afghan Opium Trade: a threat assessment, 2011, p.34.

Although large one-ton seizures were reported in 2009-2011 in heroin producing provinces like Helmand, only one seizure above 500 kg was reported during 2012-2013. It is noteworthy that, during this same period, much larger seizures were reported outside of Afghanistan, notably in the Islamic Republic of Iran and Pakistan, as outlined in the relevant chapters. The diversification of supply locations inside Afghanistan has made it difficult to extrapolate routes directly and solely from heroin production areas.<sup>39</sup> However, it would seem peculiar if heroin produced in southern Helmand or eastern Nangarhar were directed anywhere but across the border into Pakistan. Although producing most of the world's heroin, Afghanistan ranks fifth for quantity of heroin seized worldwide.

<sup>&</sup>lt;sup>39</sup> For example, the northern region of Afghanistan which is mostly 'poppy free', is likely to receive opiates from other producing regions since it cannot supply the entire northern route by itself, see UNODC (2012), Opiate flows through northern Afghanistan: a threat assessment. Vienna: United Nations publication

Pakistan Islamic Republic of Iran China Afghanistan United States of America Russian Federation Australia India Italy 0 2 000 4 000 6 000 8 000 10 000 12 000 14 000 Amount of heroin seized (kg)

Figure 12: Top ten heroin seizing countries in the world, 2012

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA).

## 2.6 Summary

The Balkan route has traditionally been the primary route for trafficking heroin out of Afghanistan.<sup>40</sup> However, there are signs of a changing trend, with the southern route encroaching, including to supply some European markets. As mentioned, it is not always possible to categorise movements as either southern or Balkan route until further along in the supply chain.<sup>41</sup> Indeed, heroin trafficked from south-western Afghanistan into the Islamic Republic of Iran could be diverted north through Turkey via the Balkan route or south towards the Middle East and Gulf countries along the southern route. Unlike the northern or Balkan routes that are mostly dedicated to supplying single destination markets - The Russian Federation and Europe respectively - the southern route serves a number of diverse destinations, primarily Western and Central Europe, Africa and Asia and, to a lesser extent, North America.<sup>42</sup> It therefore seems more accurate to talk about a vast network of routes rather than one general flow with the same direction. By examining each node in this network, it is possible to draw a clearer picture of the dynamics and trends in heroin trafficking along this emerging supply route.

Afghanistan is first and foremost important for the southern route as the basic foundation of heroin supply. However, it is difficult to predict in detail how changes to production sites and trafficking networks in Afghanistan may impact the dynamics along the southern route. There would appear to be trade-offs between use of the Balkan route and use of the southern route. Some of these trade-offs are likely influenced by decisions made in Afghanistan. However, the extent to which producers in Afghanistan respond to demands from traffickers just across the border, as opposed to demands from wholesalers and traffickers in more distant locations, is not clear. As this report and its recommendations reflect, the Afghan domestic counter-narcotics challenge is an international concern. Afghanistan has recognised the benefits that come from cooperation with neighbouring countries in particular. The most important of these on the southern route are the Islamic Republic of Iran and Pakistan, covered in the next two chapters.

 $<sup>^{\</sup>rm 40}$  UNODC (2013). World Drug Report 2013, p.ix. Vienna: United Nations publication.

<sup>&</sup>lt;sup>41</sup> Notably the market of the United Kingdom, see UNODC (2014), The Illicit Drug Trade through South-Eastern Europe. Vienna: United Nations publication.

<sup>&</sup>lt;sup>42</sup> UNODC (2010). World Drug Report 2010, p.59. Vienna: United Nations publication.

## 3. Pakistan

Pakistan has the sixth largest population in the world<sup>43</sup>, over 2,400 km of border with Afghanistan, and bears the brunt of large-scale heroin trafficking on the southern route. It is among the most significant countries for analysis of opiate trafficking on the southern route and would be a primary partner for anyone interested in reducing the scale and damage caused by Afghan heroin trafficking networks. This chapter begins by addressing flows into and through Pakistan, then studies its own heroin market, before analysing the flows that leave the country.

### 3.1 Flows into and through Pakistan

The latest estimates by UNODC (2009) would suggest that some 45 per cent of illicit Afghan opiates are trafficked through Pakistan.<sup>44</sup> The overwhelming majority of this is in transit to global markets, while a minority is consumed by opiate users in Pakistan, as detailed below. With the relatively small exception of trafficking through northern Pakistan to China, almost all trafficking through Pakistan occurs along the southern route. However, it is important to differentiate Pakistan as a country from the southern route as a transnational trafficking route passing through numerous countries (including Pakistan). From the traffickers' point of view, it does not matter what land, roads and ports are to the south of Afghanistan – they are simply useful points of transit.

Pakistan's geographical proximity to Afghanistan makes it one of the most significant countries for analysing opiate trafficking on the southern route. The analysis included in this report has significantly benefitted from the data submitted by Pakistan and the country represents a good example of data on drug markets being made available to the international community. On the southern route, Pakistan is one of the few countries that openly and regularly reports data to UNODC on individual drug seizures that provide detailed information on the dynamics of significant seizures and allow the identification of trafficking routes. Pakistan also regularly submits to UNODC (through its responses to the Annual Report Questionnaire) wide-ranging information on drug seizures, modes of transportation, prices of illicit drugs in the country along with information on broad drug trafficking routes to and from Pakistan. Pakistan is also among the few countries in the region that have recently conducted a population-based drug use survey making available accurate data on drug use in the country.

The physical and human geography across the opium producing areas of Afghanistan and transit routes through Pakistan provides a broad, deep canvas on which traffickers can operate. There are only three official border crossing points – two are located in the Federally Administered Tribal Areas (FATA) and the other in Balochistan province. The topography of the border areas includes numerous mountain ranges, whose natural passes, trails and desert roads provide likely smuggling routes. Most of these passes, trails and roads are unmanned and as a result, the movement of people crossing the border areas remains largely unchecked. This represents a challenge to the efforts to prevent the overall movement of heroin through these areas, although the recent increase in seizures in the country would suggest a significant increase in law enforcement effectiveness.

Heroin seizures in Pakistan increased by more than 550 per cent between 2008 and 2012, going from 1,900 kg to 12,630 kg. This trend is driven by a combination of larger flows and greater law enforcement activity. This is all the more impressive given active insurgencies in Afghanistan, FATA and Balochistan, which have required the attention of law enforcement agencies.

As Figure 13 shows, the volume of heroin seizures in Pakistan has grown faster than the growth in global seizures overall. In 2013, Pakistan made almost 16.6 per cent of the world's heroin seizures.

<sup>&</sup>lt;sup>43</sup> United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Prospects: The 2012 Revision. Vienna: United Nations publication.

<sup>44</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.28. Vienna: United Nations publication.(estimates for 2009)

Figure 13: Heroin seizures in Pakistan, by volume and quantity of global seizures, 2004-2013



Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

Among the many consequences of its proximity to opium production in Afghanistan, Pakistan seizes a variety of opiates. For most countries on the southern route, analysis of opiate trafficking mostly entails analysing heroin trafficking and heroin consumption. In Pakistan, however, traffickers handle opium, morphine and heroin of various grades. Users seem to consume various forms of opiates, a diversity resulting in a more complex picture of the trade.

Figure 14: Southern Afghan border with Pakistan



Source: UNODC

As shown in Figure 15 and in Map 10, heroin has been interdicted in a number of locations, with some notable patterns. The largest collection of seizures occurred along the central border that Balochistan province holds with Afghanistan, down towards the coast near the port of Gwadar. There is no official border crossing near that section of the border between Afghanistan and Pakistan, so traffickers have either brought heroin across at the official border crossing to the north-east (Weish-Chaman) and have been repeatedly interdicted travelling westwards towards the Islamic Republic of Iran, or they have taken advantage of a long, remote and porous border to come directly across from neighbouring areas of Afghanistan. Information

from Pakistani authorities suggests that the latter explanation is more common<sup>45</sup>, highlighting that freedom of movement is valuable to traffickers. For Pakistani officials, traffickers expecting non-detection can pose a threat when confronted; the Anti-Narcotics Forces (ANF) lost seven men in counter-narcotics operations in 2012, all serving in Quetta, the provincial capital of Balochistan.<sup>46</sup>

Sindh 21%

Punjab 12%

Balochistan 53%

KPK 9%

Islamabad 4%

FATA 1%

Gilgit-Baltistan 0.04%

Figure 15: Reported heroin seizures by provinces/regions in Pakistan, 2010-2013 (% of total in kg)

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Map 10 also indicates a cluster of seizures around Quetta, which is likely a combination of heroin collected in Quetta for redistribution among global supply options (and local demand), and individual shipments in transit from Weish-Chaman through Quetta and directed further southwards.

 $<sup>^{\</sup>rm 45}$  Pakistan, Anti Narcotics Force, Yearly Digest 2012, p. 12

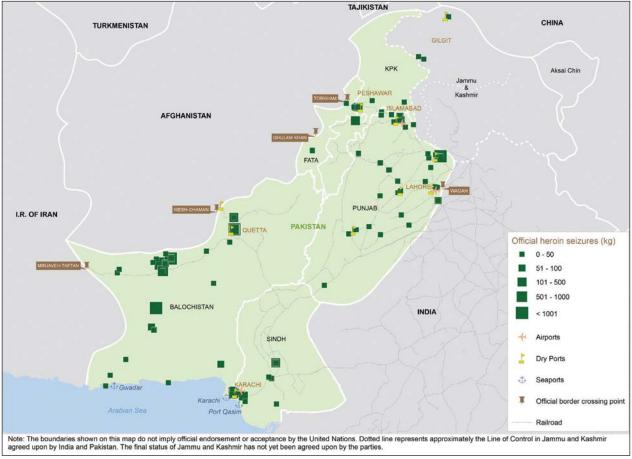
 $<sup>^{\</sup>rm 46}$  Pakistan, Anti Narcotics Force, Yearly Digest 2012, p. 6

Map 10: Location of heroin seizures in Pakistan as reported to UNODC, presented in government reports, 2010-2013

TAJIKISTAN

TURKMENISTAN

CHINA



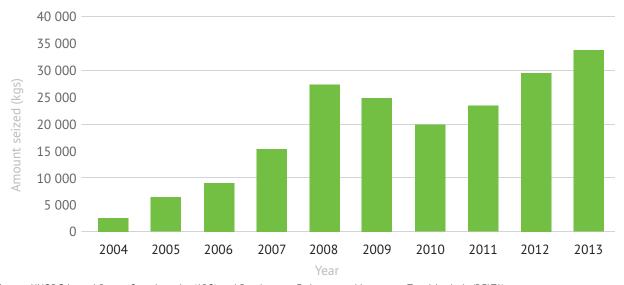
Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Figure 16 and Map 11 show opium seizures made in Pakistan in recent years,<sup>47</sup> totalling 29,481 kg in 2012. Opium cultivation used to occur in parts of north-western Pakistan,<sup>48</sup> but these were subject to strenuous efforts by the Pakistani counter-narcotics forces, which appear to have been largely successful. Residual production is unlikely to be sufficient even to supply the volume of opium being seized. Compared to heroin seizures, the volume of opium seizures is even more strongly skewed towards Balochistan and the routes heading south and west from the southern border of Afghanistan – accounting for 96 per cent of seizures by volume – although numerous seizures have also been made in Punjab, FATA and Khyber Pakhtunkhwa (KP).

<sup>&</sup>lt;sup>47</sup> Direct comparison of seizure sizes between these maps should be made carefully, since a kilogram of heroin is more valuable than a kilogram of opium.

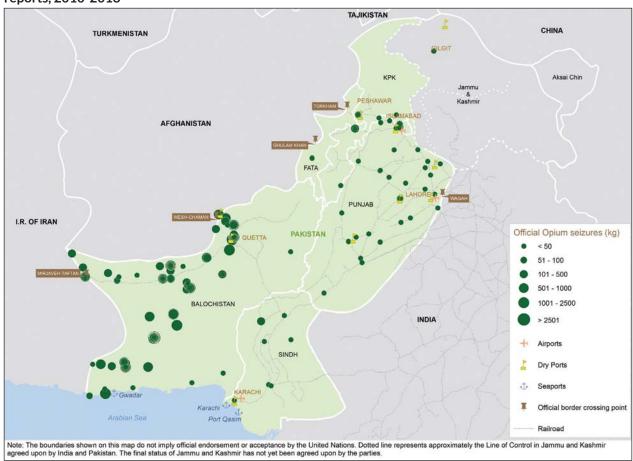
<sup>&</sup>lt;sup>48</sup> UNODC (2008), Illicit Drug Trends in Pakistan, p.8. Vienna: United Nations publication.

Figure 16: Opium seizures in Pakistan, 2004-2013 (kg)



Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

Map 11: Location of opium seizures in Pakistan as reported to UNODC and presented in government reports, 2010-2013



Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Table 2: Number of opium seizures and proportion of opium seized in Pakistan by province, 2010-2013

Province/Region/Territory	Distribution (%) of no. of seizures	Distribution (%) of total amount (kg)
Balochistan	37	96
Sindh	6	1.3
Khyber Pakhtunkhwa	15	1.2
Punjab	27	1.2
Islamabad	11	0.2
Federally Administered Tribal Areas	3	0.1
Gilgit-Baltistan	1	0.01
TOTAL	100	100

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

The movement of opium from Afghanistan into Pakistan suggests at least three possibilities. First, it could point to significant opium markets in Pakistan, in neighbouring countries or more distant regions. As detailed further below, a survey carried out in 2012 estimated that there were 320,000 opium users in Pakistan in 2012,<sup>49</sup> indicating that this is at least part of the explanation. However, given the concentration of seizures in Balochistan, domestic demand would not seem sufficient to absorb the large quantities of opium that appear to be smuggled from Afghanistan into Pakistan.

Secondly, the presence of sizeable quantities of opium could indicate that processing is taking place along the southern route.

Thirdly, opium seizures – particularly those in Balochistan – may indicate that opium consumption in the Islamic Republic of Iran and/or opiate processing along the Balkan route are the magnets for these shipments. This possibility is discussed further in the chapter concerning the Islamic Republic of Iran.

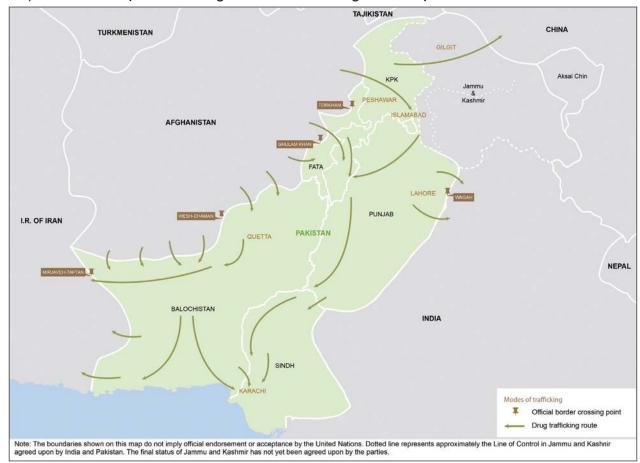
#### 3.1.1 Routes into and through Pakistan

Map 12 summarizes suspected opiate trafficking routes into and through Pakistan, based on seizure data obtained in Pakistan and abroad, as well as information reported by Pakistani authorities<sup>50</sup>. Although only tentatively, the numerous arrows coming over the Afghan border illustrate the challenge facing Pakistan. However, little is known about the multiplicity of routes through Pakistan itself, beyond the fact that many routes terminate at seaports and airports – with the important exception of those traversing Balochistan and heading over the border to the Islamic Republic of Iran, or possibly departing the coast outside of official ports.

Below, the analysis returns to modes and intentions of trafficking through Pakistan, but first it is important to examine consumption in Pakistan itself, which may structure the local opiate trade and help to understand export patterns.

<sup>&</sup>lt;sup>49</sup> UNODC and Government of Pakistan, "Drug Use in Pakistan 2013", , p.vi.

 $<sup>^{50}</sup>$  Including information submitted by Pakistan in response to the Annual Report Questionnaire, across a number of years.



Map 12: Indicative opiate trafficking routes into and through Pakistan prior to 2011

Source: The Global Afghan Opium Trade: A Threat Assessment, UNODC, 2011 based on seizure data from Drug Monitoring Platform (DMP), Individual Drug Seizures (IDS) and Annual Report Questionnaires (ARQ), supplemented by national government reports and other official reports

### 3.2 Consumer market

Some of the opiates trafficked into Pakistan are consumed there. An estimate based on a survey carried out in 2012 suggested that a little under 1.06 million people are opiates users – 860,000 heroin users and 320,000 opium users – and that they showed high levels of drug dependence.<sup>51</sup> The highest prevalence of users was found in Balochistan (1.6 per cent of the provincial population). There appears to be a correlation between prevalence rates and major trafficking routes through Pakistan, suggesting that a share of the opiates trafficked along the southern route supply domestic markets along the route.

<sup>&</sup>lt;sup>51</sup> UNODC and Government of Pakistan, "Drug Use in Pakistan 2013", p.13-14. A small number of people may be abusing both heroin and opium, hence the sum of both being greater than the total number of opiate users. 1.6 million people also reported non-medical use of prescription opioids in the previous year.

### 3.3 Export routes

When combining information from Pakistani authorities<sup>52</sup> with data on opiates seized elsewhere that departed from Pakistan, some interesting patterns emerge. From a geographical standpoint, opiates trafficked by sea out of Pakistan must be dispatched from the coasts of Balochistan and Sindh provinces. In regards to seizures made at seaports or the immediate vicinity, 15 seizures alone accounted for 2,419 kg of heroin. Maritime trafficking out of Pakistan presents opportunities for traffickers to quickly move large quantities of heroin – or opium – to third countries.

By contrast, for trafficking by air, if traffickers want to reduce risks by hiding opiate couriers or parcels among passengers and cargo of commercial flights, they have opportunities to do so using the busier air routes, which would mean favouring departures from Karachi, Lahore, Peshawar and Islamabad. All these cities have multiple connections to the Middle East, with Karachi and Lahore also offering several connections to South and South-East Asia, as well as Europe. As described below, air trafficking relies to a greater extent on numerous small shipments to mitigate risk of detection.

When examining seizure data for evidence on the most popular export routes out of Pakistan, one of the challenges encountered is that most seizures are reported without details on the intended points of departure from Pakistan. For instance, if a seizure is made in Punjab from a car in the open air, the mode of trafficking will usually be reported as 'land'. What is generally unknown is whether it was intended to leave Pakistan via, for example, Karachi seaport, Lahore airport, across the Iranian border or by mail.

In FATA and the Gilgit-Baltistan region, all seizures reported to UNODC<sup>53</sup> show land as the mode of trafficking, which is not surprising. In Balochistan province, the vast majority of heroin seizures, by number and by weight, also occur on land. On the one hand, this is not surprising, given its limited air connections<sup>54</sup> and the large flows of heroin likely to be trafficked across the province using vehicles.<sup>55</sup> The largest seizures in Pakistan are typically reported in Balochistan, near the border with Afghanistan. The ANF recorded the largest seizure in its history in this area, seizing 1,096 kg of heroin from a house in the Chagai district in January 2013,<sup>56</sup> reportedly destined for the Islamic Republic of Iran. It is, however, surprising that there have been few interdictions of heroin trafficked by sea, despite Balochistan's ample coastline and data provided by other countries.<sup>57</sup> In fact, for several years there have been reports of heroin trafficking via the coastal areas of Balochistan.<sup>58</sup> As suggested by the ANF, "the coastal areas of Pakistan (Karachi, Port Qasim and the small fishing ports along the Makran coast) are also vulnerable to drug smuggling activities towards Gulf States and beyond".<sup>59</sup>

Table 3: Weekly schedule of International Flight Operations from Balochistan (Pakistan)

No.	Departing from	Destination	Flights per week
1	Turbat (Makran Division, Balochistan)	Sharjah (United Arab Emirates)	03
2	Turbat (Makran Division, Balochistan)	Muscat (Oman)	01
3	Gwadar (Makran Division, Balochistan)	Muscat (Oman)	01

Source: Pakistan International Airlines

<sup>&</sup>lt;sup>52</sup> Including information submitted by Pakistan in response to the Annual Report Questionnaire, across a number of years.

<sup>&</sup>lt;sup>53</sup> Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS) database of UNODC

<sup>&</sup>lt;sup>54</sup> Pakistan International Airlines; (available at:http://www.piac.com.pk/schedule/display\_abc.asp?date=6:32:53%20PM – accessed on 15 December 2014)

<sup>55</sup> UNODC (2011), The Global Afghan Opium Trade: a threat assessment, p.37. Vienna: United Nations publication.

<sup>&</sup>lt;sup>56</sup> Pakistan, Anti Narcotics Force, "Major seizures in January 2013" (available at: http://www.anf.gov.pk/majorsz.php?grp\_id=Jan-2013&currentItem=grou – accessed on 1 November 2014)

<sup>&</sup>lt;sup>57</sup> See other chapters, which note sea-based trafficking linked to Pakistan in many regions of the world.

<sup>58</sup> United States, Drug Enforcement Administration, "Drug trafficking from South-West Asia: drug intelligence report", 1994.

 $<sup>^{\</sup>rm 59}$  Pakistan, Anti Narcotics Forces, "Counter Narcotics Achievements", 2010, p.10

Figure 17: Gwadar beach and Gwadar seaport



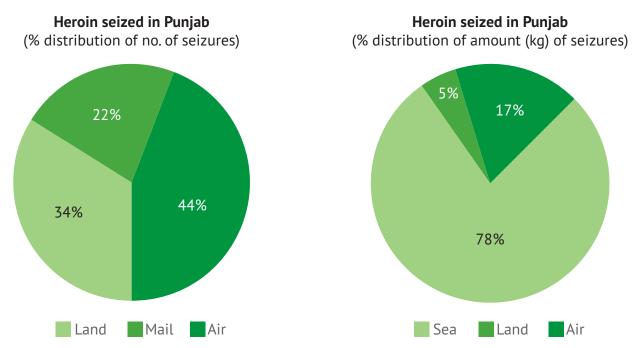


Source: UNODC

The data for Khyber Pakhtunkhwa, Punjab and Sindh show different patterns. In Khyber Pakhtunkhwa, land is the dominant mode of trafficking as regards heroin volume, accounting for over three-quarters of seized weight. However, the majority of interdictions were made against attempts to traffic opiates by air. The most plausible explanation is that flows intercepted on land are a mixture of heroin trafficked through Khyber Pakhtunkhwa to depart from other provinces, and bulky cargos that is later broken down into small consignments to be trafficked by air.

A similar situation has prevailed in Punjab, where three-quarters of seizures by volume have occurred on land, but around 40 per cent of seizures by number have been attempts to export heroin using air routes. A difference between Punjab and Khyber Pakhtunkhwa is the greater prevalence of attempts by mail from Punjab, which accounts for about 20 per cent of cases (see Figure 18).

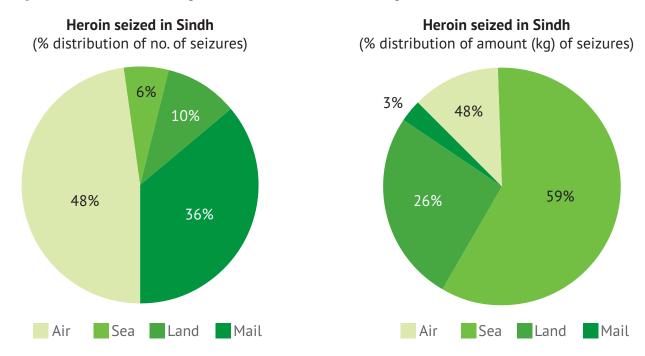
Figure 18: Modes of trafficking in Punjab. Left: number of cases. Right: Amount of heroin, 2010-2013



Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Finally, Sindh's experience has been unique. By quantity of heroin seized, the majority has been intended for trafficking by sea, with shipments averaging over 100 kg; that said, these accounted for only 6 per cent of cases. Seizures resulting from trafficking by air consisted of around 10 per cent of the total quantity seized in Sindh, but this is spread over a greater number of attempts – around half of all interdicted attempts. Even more than Punjab, trafficking by mail has featured prominently in the number of seizures in Sindh (around one-third of cases), but makes up only 2 per cent of the quantity seized.

Figure 19: Modes of trafficking in Sindh. Left: number of cases. Right: Amount of heroin 2010-2013



Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Individual chapters of this report further detail southern route trafficking to other regions. Here, it is important to note that heroin is trafficked out of Pakistan along a vast array of trajectories. Table 4 shows the destinations of heroin seized, known to be transiting Pakistan. Map 13 illustrates some of the known connections and modes of trafficking that connect the southern route to the rest of the world, via Pakistan.

Table 4: Intended destinations of seized heroin that transited Pakistan, 2010-2013

Destination	nation Number of seizures	
	Percentage of total (9	%)
Middle East and Gulf States	34	28
Africa	2	5
Europe	37	37
South Asia	8	5
East and South-East Asia	13	20
North America	4	4
Oceania	2	1

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)



Map 13: Indicative heroin trafficking routes from Pakistan, 2010-2013

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. The final boundary between the Sudan and South Sudan has not yet been determined.

Source: UNODC elaboration, based on seizure data from Drug Monitoring Platform (DMP) ,Individual Drug Seizures (IDS) and Annual Report Questionnaire (ARQ), supplemented by national government reports and other official reports

In terms of modes of trafficking, there are some apparent differences between the various regions. For example, seizures of heroin trafficked from Pakistan to South Asia by mail are generally larger than interdicted attempts to mail heroin from Pakistan to Europe. In another example, seizures of heroin intended for trafficking by sea are generally much larger when destined for Africa, Europe and the Middle East than interdicted attempts by air, although these are more frequent.

The existence of drug trafficking connections between Pakistan and Africa is also suggested by the nationalities of those arrested in Pakistan for drug trafficking offences. Although over 90 per cent of these were Pakistani nationals,<sup>60</sup> the remainder originated primarily from Africa – primarily Nigerian and Zambian nationals, with less frequent arrests of people from Ghana, Mali, Tanzania, Mozambique and South Africa. Interdicted trafficking attempts from Pakistan, made outside the country, involved the arrest of at least 100 Pakistani nationals between 2010 and 2013, as well as more than 60 nationals of African countries, primarily Nigerians.<sup>61</sup>

## 3.4 Summary

Pakistan faces a tremendous challenge in dealing with the large flows of opiates originating from Afghanistan to feed its heroin market and to supply demand in many other regions of the world. Along with the Islamic Republic of Iran, the geographic location of Pakistan makes it a major transit point for trafficking of Afghan opiates along the southern route. Balochistan witnesses the largest flows but trafficking through other parts of

<sup>60</sup> Information submitted by Pakistan in its response to the Annual Report Questionnaire, 2013.

<sup>&</sup>lt;sup>61</sup> Information submitted by Pakistan in its responses to the Annual Report Questionnaire, 2010-2013.

Pakistan for domestic consumption and global export should not be discounted. This is particularly important in relation to exports from Karachi and the numerous consignments that appear to be trafficked by air. Seizures further out in the Indian Ocean have also highlighted the potential for traffickers to send sizeable shipments using boats departing from unofficial ports and jetties along the coast of Pakistan and the Islamic Republic of Iran. Maritime trafficking out of Pakistan seemingly presents opportunities to smuggle large quantities of heroin (or opium) to third countries quickly, while trafficking using air transport would smuggle smaller quantities of drugs per consignment in order to avoid detection.

So long as Afghanistan is a major producer of opiates, Pakistan will struggle to contain transnational trafficking. Recent years have shown that Pakistan has intercepted large volumes of opiates –just under 18 per cent of the global total of heroin seizures in 2012 and 16.5 per cent in 2013.<sup>62</sup> This is to the benefit of countries downstream on the southern route. In the last decade, Pakistan has also considerably developed its international counternarcotics cooperation; as a frontline state on the southern route, supporting progress in Pakistan in this regard will be critical to ensuring counter-narcotics progress overall.

<sup>62</sup> UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA).

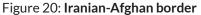
# 4. The Islamic Republic of Iran

In 2012, the Islamic Republic of Iran accounted for around 14 per cent of global heroin seizures and about 70 per cent of global opium seizures.<sup>63</sup> In the 1970s, the Islamic Republic of Iran was one of the largest opium producing countries in the world; however, a decade or so later, its opium production ceased.<sup>64</sup> Today, the major anti-narcotics challenges relate to the country's location as a key transit point along the southern and Balkan routes, and to its sizeable domestic drug market.

The country's geography, particularly its 1,923 km-long<sup>65</sup> eastern border with Afghanistan and Pakistan, makes it a major crossroads for the movement of illicit drugs from Afghanistan to other markets. The border between the Islamic Republic of Iran and Pakistan crosses mountainous and desert terrain, making it extremely difficult for anti-narcotics police and border officials to identify and interdict trafficking ventures in the area.

Islamic Republic of Iran reported that 14 national law enforcement officials have been killed or gone missing in counter-narcotics operations in 2013 alone.<sup>66</sup> Iranian drug law enforcement agencies report an average of four armed clashes with drug traffickers per day.<sup>67</sup> The country has also been implementing a large-scale construction programme involving the erection of barriers and embankments along its borders, with a view to prevent drug trafficking as well as the cross-border movement of other armed groups (see Figure 20).<sup>68</sup>

The impact of the counter-narcotic measures implemented by the Islamic Republic of Iran is illustrated through national price data. Figures for 2012 show sharp increases in price for opium and heroin between common entry and exit points. For example, the price of opium is 400 USD per kg at the eastern border with Afghanistan, but rises to 1,700 USD per kg at the western border with Turkey. For heroin, the price increases from 5,000 USD to 13,500 USD per kg at those same locations.<sup>69</sup> Nevertheless, seizure data suggests that traffickers and individual drug couriers continue to rely on the Islamic Republic of Iran as a key transit point to markets in Europe or elsewhere, and enjoy some success in traversing the country undetected.





Source: Drug Control Headquarters the Islamic Republic of Iran

Islamic Republic of Iran also faces a major challenge in terms of domestic use of heroin and opium. The prevalence of opiate use in the country is among the highest in the world, reported at 2.8 per cent in 2009. This number reflects 1.36 million opiate users in the country including about approximately 390,000 heroin users, 530,000 opium users and 440,000 users of other opiates. <sup>70</sup> 15 per cent <sup>71</sup> of people injecting drugs in the Islamic Republic of Iran have HIV, adding further to the threat posed to drug users.

 $<sup>^{63}</sup>$  DELTA database, Opium – 387,606 kg (the Islamic Republic of Iran) / 556,523 kg (world) = 69. 64%; Heroin = 10,181 kg (the Islamic Republic of Iran) / 71,549 kg (world) = 14.22%

<sup>&</sup>lt;sup>64</sup> UNODC (2012). World Drug Report 2012, p.89. Vienna: United Nations publication..

<sup>&</sup>lt;sup>65</sup> UNODC, the Islamic Republic of Iran: Drug trafficking and border control: Situation Analysis.

<sup>&</sup>lt;sup>66</sup> 70% of illicit drugs were confiscated along the eastern borders;, the Islamic Republic of Iran, Drug Control Headquarters of the Islamic Republic of Iran; (available at: http://dchq.ir/en/index.php?option=com\_content&view=article&id=1213:iranian-official-70-of-illicit-drugs-confiscated-along-eastern-borders-2&catid=351&Itemid=1145- accessed on 14 April 2014)

<sup>67</sup> Islamic Republic of Iran, Drug Control Headquarters of the Islamic Republic of Iran, "Drug Control in 2011: Annual Report", 2011, p. 44

<sup>68</sup> Islamic Republic of Iran, Drug Control Headquarters of the Islamic Republic of Iran, "Drug Control in 2013: Annual Report", 2013, p. 33

<sup>69</sup> Islamic Republic of Iran, Drug Control Headquarters of the Islamic Republic of Iran; (available at: http://www.dchq.ir/index.php?option=com\_content&view=article&id=3784:2013-10-09-05-24-31&catid=90&Itemid=5266 - accessed on 28 December 2014)

<sup>&</sup>lt;sup>70</sup> UNODC (2009), Addiction Crime and Insurgency – The Transnational Threat of Afghan Opiates, p.28

<sup>&</sup>lt;sup>71</sup> UNODC (2013). World Drug Report 2013, p.8. Vienna: United Nations publication.

### 4.1 Heroin trafficking

Heroin seizures in the Islamic Republic of Iran increased steadily between 2005 and 2010.<sup>72</sup> However, in 2011 and 2012 the amounts fell by 15 per cent and 56 per cent respectively. In 2009, the Islamic Republic of Iran accounted for 85 per cent of heroin seizures made in the region. This share rose to 75 per cent in 2010, before falling to 55 per cent in 2011 and 34 per cent in 2012.<sup>73</sup>

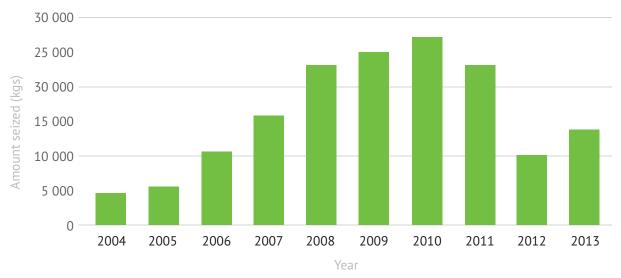


Figure 21: Heroin seizures in the Islamic Republic of Iran, 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and database on estimates and long-term trend analysis (DELTA)

Heroin trafficking routes traversing Pakistan and the Islamic Republic of Iran supply two global heroin routes – the Balkan route and the southern route. The Balkan route leads to Europe through Turkey, while traffic on the southern route is diverted through Gulf States to Europe or via maritime routes through Africa, Asia, and Oceania. There also appears to be substantial trafficking by air to multiple destinations around the world (elaborated further in the next chapters).

The use of the southern route to traffic heroin through the Islamic Republic of Iran is not a new occurrence. Research carried out by UNODC<sup>74</sup> in 2002 highlighted the use of the southern route departing from Pakistan (Gwadar port) into the Iranian province of Sistan-Baluchistan (Chabahar port) or continuing through Hormuzgan province (Bandar-Abbas port) all the way to Khuzestan (south-west of the country, bordering the Iraqi province of Basra and the Persian Gulf<sup>75</sup>). The exit points identified at the time were the following:

- Bandar Abbas-United Arab Emirates.
- Iranian sea coast-Kuwait.
- Iranian sea coast-Iraq.

However, a crucial difference is that this route was thought to be used mostly for hashish trafficking. A similar assessment was made of the coastline of Pakistan at the time.<sup>76</sup> It would appear that heroin traffickers have simply made use of pre-existing routes to export opiates out of the Islamic Republic of Iran.

<sup>&</sup>lt;sup>72</sup> UNODC Annual Report Questionnaire and Database on Estimates and Long-term Trend Analysis (DELTA).

<sup>&</sup>lt;sup>73</sup> The total heroin seizures in the Islamic Republic of Iran were compared against the total seizures in South-West Asia over the 2009-2012 period. UNODC Annual Report Questionnaire and Database on Estimates and Long-term Trend Analysis (DELTA).

<sup>&</sup>lt;sup>74</sup> UN Office for Drug Control And Crime Prevention (2002), Illicit drugs situation in the regions neighbouring Afghanistan and the response of ODCCP, p. 11-12.

 $<sup>^{75}</sup>$  The term "Persian Gulf" is used in documents, publications and statements emanating from the United Nations as the standard geographical designation for the sea area between the Arabian Peninsula and the Islamic Republic of Iran

<sup>&</sup>lt;sup>76</sup> According to the report, "The sea coast area of Pakistan, including the main ports of Karachi, Port Qasim, the smaller fishing ports and open areas of the Makran coast, are vulnerable to drug traffic to the Gulf States and beyond. Consignments of hashish are loaded into containers in secret storage areas or in the various dry places throughout the country before being carried to Karachi or to the container depot at the nearby Port Qasim, the only two international container ports in the country. The drugs are often concealed in a legitimate export consignment"; see UN ODCCP (2002), Illicit drugs situation in the regions neighbouring Afghanistan and the response of ODCCP; October 2002 (available at: https://www.unodc.org/pdf/afg/afg\_drug-situation\_2002-10-01\_1.pdf, p.13)

ARMENIA AZERBAIJAN UZBEKISTAN TURKMENISTAN KHAVAR ZANJAN MAZANDARAN KURDISTAN MARKAZ LORESTAN ESFAHAN IRAQ ISLAMIC REPUBLIC OF IRAN **AFGHANISTAN** CHAHARMAHALI AND BAKHTIARI KOHGILUYEH AND BOYER-AHMAD HELMAND KERMAN KUWAIT HORMOZGAN PAKISTAN SISTAN AND BALUCHESTAN Heroin trafficking routes Major roads BAHRAIN Official border crossing point UNITED ARAB Heroin trafficking route Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

Map 14: Indicative heroin trafficking routes through the Islamic Republic of Iran

Source: UNODC (2011), The Global Afghan Opium Trade: a threat assessment, p.40

Historically, Western and Central Europe has been supplied with Afghan heroin almost exclusively through the Balkan route, but there have been reports of declining flows along this route.<sup>77</sup> The strengthening of borders at crucial locations along the route<sup>78</sup> and the successful arrest and conviction of high-level traffickers engaged in the importation and distribution of heroin from the Islamic Republic of Iran through Turkey to Western and Central Europe, may have impacted trafficking along the Balkan route and encouraged some traffickers to seek alternative routes.<sup>79</sup> In addition to the southern route, this could involve bypassing the Turkish-Iranian border altogether by trafficking via the Caucasus<sup>80</sup> or the adjacent Iraqi border.<sup>81</sup>

Distinguishing between heroin trafficking destined for the southern or the Balkan route inside the Islamic Republic of Iran is likely to be difficult. Yet, heroin located in provinces bordering Pakistan, the Persian Gulf and the Gulf of Oman is more likely to be diverted through the southern route, while heroin located further north is

 $<sup>^{77}</sup>$  UNODC (2014). World Drug Report 2014, p.24. Vienna: United Nations publication

<sup>&</sup>lt;sup>78</sup> This includes, for example, the deployment of x-ray machines and ion scanners to the Eastern borders of Turkey. See United States Department of State, "International Narcotics Control Strategy Report (INCSR)", 7 March 2012.

<sup>&</sup>lt;sup>79</sup> SOCA, Annual Report and Accounts 2011/12, p.11, states that, "sustained SOCA activity carried out in conjunction with the Turkish National Police led to significant successes against organised crime groups trafficking heroin overland". Similarly, the Netherlands reports that, "the smuggling route from Afghanistan via the Islamic Republic of Iran, Turkey and the Balkan countries still seems to be the main routes (mentioned in two investigations from 2009), although it is noticed that this route might be less attractive because of the intensified enforcement efforts in Turkey". See also EMCDDA, "Report to EMCDDA by the Reitox National Focal Point", The Netherlands Drug Situation 2012, p.148

<sup>&</sup>lt;sup>80</sup> Large heroin seizures in Georgia (116 kg and 598 kg) and Armenia (927 kg) in 2013-2014 illustrate the way in which traffickers use the Caucasus to reach Europe. See Ministry of Internal Affairs of Georgia, official website, "Ministry of Internal Affairs exposed the fact of international drug traffic", 4 July 2013 (available at: police.ge/en/shinagan-saqmeta-saministros-gantskhadeba/5077); Customs Services of Armenia official website, "Nearly one ton of heroin detected at Meghri Customs point", 18 January 2014 (available at: www.customs.am/csMD\_News.aspx?ntname=csMD0fficialNews&nid=1522)

<sup>81</sup> UNODC (2013). World Drug Report 2013, p.33. Vienna: United Nations publication.

more likely to be trafficked via the Balkan route. The specific provinces of relevance for the southern route are Sistan-Baluchistan, Kerman, Hormozgan, Fars, Bushehr, Kohgiluyeh and Boyer-Ahmad, Khuzestan, Ilam, Loristan and Kermanshah. Map 15 shows two broad clusters of seizures, one in the south-east, in provinces primarily related to the southern route and the other further north and towards the west of the country, where heroin is more likely destined to Europe via the Balkan route.

AZERBAIJAN TURKMENISTAN TURKEY GOLESTAN AZARBAYJAN-E GHARBI ALBOR2 KURDISTAN SEMNAN HAMADAN KERMANSHAH MARKAZI ESFAHAN LORESTAN SOUTH KHORASAN IRAQ **AFGHANISTAN** ISLAMIC REPUBLIC OF IRAN AND BAKHTIARI KHUZESTAN KOHGILUYEH AND BOYER-AHMAD KERMAN Heroin seizures (kg) < 50 51 - 100 KUWAIT 101 - 500 501 - 1000 1001 - 2500 > 2501 Airports BAHRAIN Official border crossing point QATAR UAE Dry Ports OMAN Note: The seizures marked with darker colours 📕 were reported by official sources. Those marked with lighter colours 🥛 were reported by open sources. The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations

Map 15: Location of heroin seizures in the Islamic Republic of Iran as reported to UNODC, presented in government reports and as reported by the media, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Data on individual drug seizures in the Islamic Republic of Iran is sparse and it is therefore difficult to disaggregate flows associated with the Balkan route from those affiliated with the southern route. It is also likely that some traffickers in the Islamic Republic of Iran make use of both routes, based on a variety of factors including enforcement obstacles, market demand and ease of logistics – relationships between and within trafficking networks play an especially important role. Nevertheless, heroin and opium trafficked through Sistan-Baluchistan, Kerman and Hormozgan have a geographical advantage for allocation to the southern route, while opiates trafficked directly from western Afghanistan are more easily pushed through the Balkan route. It is relevant to note that Nimroz, a major producing and processing province in Afghanistan, lies between these two major pathways and therefore is a strategic location to direct opiate shipments north-west towards the Balkan route or south towards the coast and along the southern route. Table 5 shows the dominance of Hormozgan, Kerman and Sistan-Baluchistan among southern route related seizures, with 87 per cent of all quantities seized reported in these provinces.

Table 5: Reported heroin seizures in Iranian provinces relevant to the southern route, 2010-2013

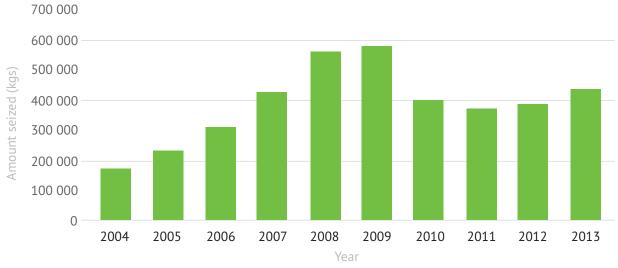
Province	Number of Seizures	Amount seized (kg)	Distribution (%) of amount seized
Bushehr	1	315	5.1
Fars	5	422	6.8
Hormozgan	11	2289	37.0
Kerman	19	1699	27.5
Sistan-Baluchistan	23	1389	22.5
Kermanshah	2	13	0.2
Khuzestan	1	14	0.2
Kohkiluyeh and Boyer-Ahmad	1	41	0.7
Lorestan	2	5	0.1
TOTAL	65	6187	100

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

## 4.2 Opium trafficking

The majority of opium seized worldwide is intercepted in the Islamic Republic of Iran. After a peak in 2009 at nearly 600 tons, seizures have since stabilized at around 400 tons (Figure 22). According to official reports, opium seizures carried out in the country between 2009 and 2011 represented more than 80 per cent of the regional total. In 2012, this share fell to 72 per cent. Opium seizures in the Islamic Republic of Iran largely mirror the country's general pattern of seizures related to heroin trafficking.

Figure 22: Opium seizures in the Islamic Republic of Iran, 2004-2013 (kg)



Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

Between 2010 and 2013, seizures involving 1,598 metric tons of opium were officially reported in the Islamic Republic of Iran.<sup>82</sup> Similarly to heroin, the highest number of opium seizures was reported in Sistan-Baluchistan, Kerman and Hormozgan. Map 16 shows a particularly prominent cluster in areas along the border between the Islamic Republic of Iran and Pakistan, such as Saravan and Zabol. The large quantities of heroin interdicted in this border region matches data from Pakistan that shows a pattern of seizures in Balochistan (Pakistan) moving south towards the Islamic Republic of Iran.

<sup>82</sup> UNODC Annual Report Questionnaire and Database on Estimates and Long-term Trend Analysis (DELTA).

A second cluster of seizures around the coastal areas (Map 16) may be an indication of large-scale trafficking by sea exiting from the Islamic Republic of Iran. Improved licit trade routes between Afghanistan and the Islamic Republic of Iran can provide a cloak of protection for traffickers moving opiates out of south-western Afghanistan through the Islamic Republic of Iran. The road route leading from Delaram in Nimroz province (Afghanistan) via Zaranj to Malik and on to the seaport of Chabahar (Islamic Republic of Iran) has been improved and extended as a result of the transit trade agreement between the Islamic Republic of Iran and Afghanistan in January 2003.<sup>83</sup> That trade agreement, following an earlier transit trade agreement between the two countries in 1974, permits Afghanistan to freely receive and export goods via the Iranian seaports at Bandar Abbas and Chabahar.<sup>84</sup>

AZERBAIJAN TURKMENISTAN ARDABIL TURKEY NORTH MAZANDARAN QAZVIN KURDISTAN SEMNAN KERMANSHAH SOUTH KHORASAN **AFGHANISTAN** IRAO ISLAMIC REPUBLIC OF IRAN KHUZESTAN Opium seizures (kg) < 50 51 - 100 KUWAIT 101 - 500 501 - 1000 1001 - 2500 SISTAN AND BALUCHESTA > 2501 BAHRAIN Official border crossing point QATAR UAE Dry Ports Note: The seizures marked with darker colours 

were reported by official sources. Those marked with lighter colours 

were reported by open sources. The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

Map 16: Location of opium seizures in the Islamic Republic of Iran as reported to UNODC, presented in government reports and the media, 2010-2013

Source: UNODC elaboration, based on Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

<sup>&</sup>lt;sup>83</sup> The trade agreement was in fact part of a trilateral transit trade agreement that was reached between the Islamic Republic of Iran, Afghanistan and India. The road route that was to be extended from Chabahar seaport to Delaram in Afghanistan as a result of the agreement was primarily a joint effort between the Islamic Republic of Iran and India.

<sup>&</sup>lt;sup>84</sup> UNODC (2012), Misuse of Licit Trade for Opiate Trafficking in Western and Central Asia: A Threat Assessment, p.49. Vienna: United Nations publication.

### 4.3 Opiate trafficking routes

According to the Iranian Drug Control Headquarters (DCHQ), border embankments and other obstacles designed to deter trafficking have led to a shift of incoming routes. Opiate traffickers are now using sea routes that originate in the south of Pakistan (Makran coast) and land routes that transit the unblocked parts of the border with the Islamic Republic of Iran into Sistan-Baluchistan.<sup>85</sup>

According to information from the Afghan Ministry of Counter-Narcotics, <sup>86</sup> heroin is trafficked out of Afghanistan and into the Islamic Republic of Iran through the western regions of Afghanistan. From Nimroz in Afghanistan, heroin likely to continue along the southern route is trafficked primarily via the Abreshem-Milak bridge, which connects Nimroz to the Islamic Republic of Iran. The opiates are subsequently trafficked to global markets via Bandar Abbas.<sup>87</sup>

Available information on officially reported seizures made in Pakistan over the 2010-2013 period, involving cargo destined for the Islamic Republic of Iran, reveals that all seizures were made on land in the Balochistan province of Pakistan, bordering the Sistan-Baluchistan province of the Islamic Republic of Iran. Three seizures were made in Chagai (a few hundred kilometres inside Balochistan, near the Afghan border), one in Nokkundi and one in Girdi jungle.

There is little information available, from official or open sources, regarding the intended destination of heroin dispatched from the Islamic Republic of Iran. The limited data from seizure cases in the Islamic Republic of Iran<sup>88</sup>, combined with information from seizures made globally of heroin trafficked from the Islamic Republic of Iran, suggests a few main trajectories of relevance to the southern route. Map 17 shows the movement of heroin towards the Middle East and various seaports, from which it can be exported to various regions around the world, noting that flows through Iraq in particular are difficult to classify between the Balkan route and southern route – some heroin appears to be transported from Iraq through Turkey and the Balkans.<sup>89</sup>

<sup>85</sup> Islamic Republic of Iran, Drug Control Headquarters, "Drug Control in 2011: Annual Report" 2011, p. 48.

<sup>&</sup>lt;sup>86</sup> Afghanistan, Ministry of Counter-Narcotics, "Afghanistan Interprovincial Opiate Trafficking Dynamics", 2013, p. 13-16.

<sup>&</sup>lt;sup>87</sup> UNODC (2012), Misuse of Licit Trade for Opiate Trafficking in Western and Central Asia: A Threat Assessment, p.54. Vienna: United Nations publication.

<sup>&</sup>lt;sup>88</sup> Considering officially-reported seizures as well as seizures reported in open sources.

<sup>89</sup> UNODC (2014), The Illicit Drug Trade through South-Eastern Europe, p.14. Vienna: United Nations publication.

ARMENIA AZERBAIJAN TURKEY NORTH GILAN GOLESTAN AZARBAYJAN-E GHARBI ZANJAN MAZANDARAN ALBORZ QAZVIN RAZAVI KHORASAN SEMNAN HAMADAN KERMANSHAH MARKAZI LORESTAN ISLAMIC REPUBLIC OF IRAN **AFGHANISTAN** IRAG SOUTH KHORASAN CHAHARMAHALL AND BAKHTIARI YAZD KHUZESTAN KOHGILUYEH AND BOYER-AHMAD KERMAN FARS KUWAIT BUSHEHR SAUDI ARABIA HORMOZGAN SISTAN AND BALUCHESTAN PAKISTAN Modes of trafficking Air routes UAE QATAR Maritime routes OMAN Official border crossing point TO AFRICA

Map 17: Indicative heroin trafficking routes through the Islamic Republic of Iran and the Middle East and Gulf countries, 2010-2013

Source: UNODC, based on UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

The main routes identified are directed towards the Middle East and Africa, for both local use and onward shipment to markets in Europe and North America. In some cases, consignments of heroin have been sent directly to these markets. The distribution of seizures is shown in Table 6. In Europe, destinations for seized heroin include Belgium, France, the Netherlands and the United Kingdom. In Africa, they include Nigeria, Kenya and Ghana. Closer to the Islamic Republic of Iran, seizures were made of heroin destined for the United Arab Emirates and Kuwait. Other shipments intercepted were en route to Australia by sea and Malaysia by air.

<sup>&</sup>lt;sup>90</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). See also UNODC (2012), Misuse of Licit Trade for Opiate Trafficking in Western and Central Asia: A Threat Assessment. Vienna: United Nations publication.

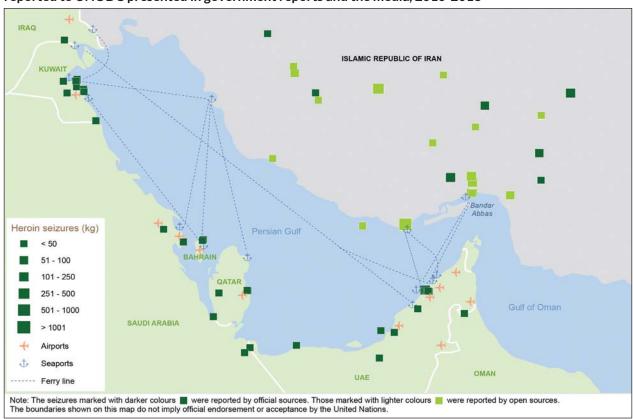
Table 6: Seized heroin trafficked from the Islamic Republic of Iran, by destination identified, 2010-2013

Destination region	Frequency of route detected	Seizure amount (kg)	Percentage of total heroin seized (outside the Islamic Republic of Iran)
Middle East and Gulf States	2	1,016	60
Africa	4	247	14
East and South-East Asia	1	20	1
Europe	6	275	16
Oceania	3	149	9
TOTAL	16	1,707	100

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

The relatively sparse seizure data available suggests that continued vigilance is required in relation to trafficking via the southern coast of the Islamic Republic of Iran and its nearby islands, which are linked by numerous ports and ferry routes (see Map 18). The stretch of water that divides the Islamic Republic of Iran and its neighbours across the Persian Gulf is just 21 nautical miles wide at its narrowest point in the Strait of Hormuz and can be traversed using a variety of vessels. Interceptions of heroin destined for East Africa (see Chapter 10) indicate that trafficking also occurs using smaller boats, ferries and dhows 2, not only ships and container cargo. Importantly, other drugs apart from heroin continue to be trafficked along this route. In January 2013, information exchanges between the Islamic Republic of Iran and Pakistan led to the seizure of 2.5 tons of hashish and 380 kg of opium that departed from Pakistan and were destined for the Gulf States.

Map 18: Reported heroin seizures, including seaports and main ferry lines across the Persian Gulf, as reported to UNODC presented in government reports and the media, 2010-2013



Source: UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

<sup>91</sup> World Bank, "Pakistan - Balochistan Economic Report", 2008, p. 11.

<sup>&</sup>lt;sup>92</sup> Dhow is the standard name used to describe various different types of traditional sailing vessels with one or more masts used in the Red Sea and the Indian Ocean; See "The history and construction of the dhow" (available at: http://nabataea.net/ships.html - accessed on 10 December 2014).

<sup>93</sup> The chapter on Africa suggests that an important method for trafficking heroin along the southern route is via dhows to East Africa.

<sup>&</sup>lt;sup>94</sup> Information provided by UNODC country office in the Islamic Republic of Iran, March 2013.

While the Islamic Republic of Iran straddles both the Balkan route and the southern route, <sup>95</sup> it is rarely identified as a departure country for southern route air trajectories – or Balkan route air trajectories. An interesting exception relates to Turkish organized crime, indicating the extent of its reach upstream. In 2010, cooperation between the Serious Organised Crime Agency (SOCA) in the United Kingdom and the Turkish National Police resulted in the arrest of criminal group members and the seizure of 150 kg of heroin following a controlled delivery to the United Kingdom. Rather than using maritime routes, the Turkey-based group was responsible for transporting large quantities of heroin by airfreight from the Islamic Republic of Iran directly to the United Kingdom. <sup>96</sup> Further investigations demonstrated that over 160 kg of heroin had been previously trafficked successfully. <sup>97</sup> The flexibility of trafficking groups to adapt to new routes and methods shows the importance of a coordinated response across both the southern and Balkan Routes in the Islamic Republic of Iran. Islamic Republic of Iran highlights in particular that activities by trafficking networks "through maritime routes from Pakistan maritime territories to the Gulf region and the Islamic Republic of Iran, have developed a new route that needs more cooperation among countries for countering this threat. <sup>98</sup> The tangible benefits of international cooperation can already be seen in the activities of the Joint Planning Cell (part of UNODC-facilitated Triangular Initiative) that had planned and coordinated 17 operations by December 2012, resulting in the seizure of more than eight tons of drugs. <sup>99</sup>

Figure 23: Seizure of opium and hashish, Islamic Republic of Iran, 2013



Source: Joint planning cell, Islamic Republic of Iran

### 4.4 Summary

The Islamic Republic of Iran faces a major challenge from southern route traffickers and its south-eastern provinces straddle some of the most important trafficking routes for opiates originating in Afghanistan and intended for onwards trafficking by land, sea and air to a number of countries worldwide. However, analysing these flows is particularly difficult in the Islamic Republic of Iran, for two main reasons. First, there appear to be overlaps between trafficking from the Islamic Republic of Iran via the southern route and trafficking from the Islamic Republic of Iran via the Balkan route. With the low level of detail available in seizure case reports, it is not possible to distinguish meaningfully between these networks, except in south-eastern Iran. Secondly, seizure data from and in relation to the Islamic Republic of Iran is sparse, so it is difficult to highlight trafficking patterns confidently in relation to Southern route trafficking.

That said, it is clear that the Islamic Republic of Iran is threatened by trafficking groups moving opiates out of Afghanistan and targeting onward shipments from the Iranian coast or via the Gulf. Iranian cooperation with Afghanistan and Pakistan has been important in setting the foundation for joint action against trafficking networks on the southern route. Similarly, the Islamic Republic of Iran and the Gulf region will benefit from increased cooperation, as they have much to gain from effective action against southern route traffickers operating through south-eastern the Islamic Republic of Iran.

<sup>&</sup>lt;sup>95</sup> UNODC (2013). World Drug Report 2013, p.30. Vienna: United Nations publication.

<sup>&</sup>lt;sup>96</sup> British Parliament, "Home Affairs Committee - Drugs: Breaking the Cycle: Written evidence submitted by the Serious Organized Crime Agency (DP065)", 2012; See also KOM, Annual Report 2010, p.10 (available at: http://www.tadoc.gov.tr/Dosyalar/2010\_En(1).pdf).

<sup>&</sup>lt;sup>97</sup> Presentation by SOCA Head of Expert Evidence for Drug Trafficking "SOCA Expert Evidence and United Kingdom Heroin market summary", CARICC Conference, Almaty, Kazakhstan, February 2012.

<sup>98</sup> Islamic Republic of Iran, Annual Report Questionnaire 2013, part iv.

<sup>99</sup> At Triangular Initiative Ministerial Meeting, UNODC Chief stresses regional cooperation in face of illicit drug threat - http://www.unodc. org/unodc/en/frontpage/2012/December/at-triangular-initiative-ministerial-meeting-unodc-chief-stresses-regional-cooperation-in-face-of-illicit-drug-threat.html

# 5. Middle East and Gulf countries

For the purposes of this report, the Middle East and Gulf countries includes Bahrain, Iraq, Syrian Arab Republic, Saudi Arabia, State of Palestine, Lebanon, the United Arab Emirates, Oman, Qatar, Yemen, Israel, Jordan, and Kuwait. This region contains major air and maritime hubs that connect the globe. The region's drug market ranges from amphetamines (captagon) and hashish to opiates. Some countries in the region face great security and governance challenges; for example, Iraq and Syrian Arab Republic are grappling with internal conflicts. In such situations, law enforcement faces enormous challenges to operate effectively and opportunities for traffickers increase.

The Middle East is wedged between the Balkan and southern routes for heroin trafficking and thus flows pertaining to both of these routes transit through the region. For the purposes of this report, this chapter focuses mostly on countries in the Gulf, since they are the most clearly linked to the southern route. Opium and heroin from transiting Pakistan and the Islamic Republic of Iran, and trafficked through the southern Gulf region and the global transport hub of the United Arab Emirates are more commonly associated with the southern route. On the other hand, Balkan route trafficking can be diverted west from the Islamic Republic of Iran through Iraq and northern Syrian Arab Republic, also in order to avoid border controls and law enforcement in Turkey.

#### 5.1 Heroin seizures

Compared to other regions, the information available on heroin seizures in the Middle East and Gulf countries is limited, due to the lack of drug monitoring systems in many countries. Information from countries which have reported seizure data shows a rather erratic trend (Figure 24). Although officially reported heroin seizures in this region account for only around 1 per cent of the global total over the 2004-2013 period, 101 recent years have shown a clear trend of increasing heroin seizures – apparently originating from Afghanistan – with a peak being reached in 2010 and then seizures decreasing, yet still remaining at a level significantly higher than 2004.

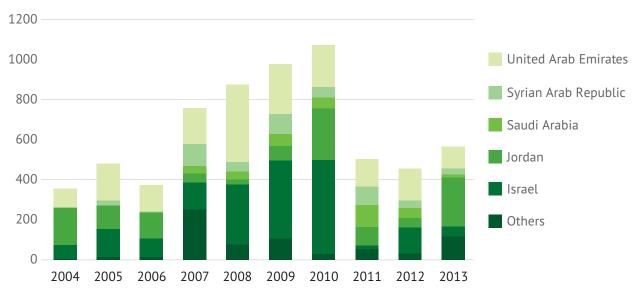


Figure 24: Reported heroin seizures in the Middle East and Gulf countries, 2004-2013 (kg)

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA); Mini-Dublin group reports; Arab Bureau for Narcotic Affairs; documents of the 28th Arab conference of the heads of drug law enforcement agencies and Report forwarded by countries to the Council of Arab Ministers of Interior on efforts on combating drug trafficking in 2013, figures have been rounded.

Table 7 provides heroin seizure data by country. The United Arab Emirates and Israel have made the most consistent seizures, noting that it is not always clear whether these consignments were trafficked along the southern route.

<sup>100</sup> MENAHRA (2012), "Assessment of situation and response of drug use and its harms in the Middle East and North Africa".

<sup>101</sup> UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA).

Table 7: Heroin seizures in the Middle East and Gulf region by country, 2004-2013 (kg)<sup>102</sup>

Countries	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Bahrain		1		1	14	32	9	4	8	1.7
Israel	68	140	92	136	303	392	471	18	130	52
Jordan	186	118	131	43	23	70	256	92	46	244
Kuwait				39	36	19	15	12	4	17
Lebanon	2	1	3	13	3	69	6	12	20	16 <sup>103</sup>
Oman	4	4		9	23	30		14		98
Qatar		9	1	2	0	6		12		0.003
Saudi Arabia	53	0		40	41	60	56	111	51	17
State of Palestine	0.04	0.01	10.6	0.02	0.06	0.26	0.14	1.09	0.59	
Syrian Arab Republic	6	25	7	110	47	102	51	92	38	28
United Arab Emirates	91	183	130	178	388	250	210	135	158	108
Yemen	0			189	0					
TOTAL	357	481	375	759	878	981	1074	503	455	565

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA); Mini-Dublin group reports; Arab Bureau for Narcotic Affairs; documents of the 28th Arab conference of the heads of drug law enforcement agencies and Report forwarded by countries to the Council of Arab Ministers of Interior on efforts on combating drug trafficking in 2013, figures have been rounded.

Map 19 illustrates heroin seizures reported in the region between 2010 and 2013, with two prominent patterns. Firstly, ports and airports have clearly been important sites at which interdictions have occurred. This is in contrast, for example, to the situation in Pakistan, where many major seizures happen along roadsides. Between 2010 and 2013, according to the seizure cases for which information was available, the common mode of trafficking was by sea, accounting for two thirds of seizures by weight. The next most common modes were by land (19 per cent) and air (14 per cent). Consignments sent by mail accounted for less than 1 per cent of the overall weight of heroin seized. In terms of the number of seizures made, 74 per cent of those reported involved heroin trafficked by air and 20 per cent by land.<sup>104</sup>

Numerous seizures have been made at airports in the region; various shipments destined for the region were also intercepted at airports in other countries. Although the amounts trafficked by air are small, the frequency is high and indicates the need for improved vigilance at airports. In relation to maritime trafficking opportunities, it is notable that most of the berths for trade and cruise vessels, including cruise facilities, passenger liners and ferries, dhows<sup>105</sup> and small speedboats, are located within commercial shipping ports. This presents opportunities to traffickers and makes detecting and seizing drugs difficult for law enforcement agencies.

Secondly, Map 19 illustrates a clear cluster of seizures in Israel, southern Syrian Arab Republic and northern Jordan. It is unclear whether this suggests the existence of an integrated network of opiate trafficking, or results instead from a higher law enforcement activity. Some cases reported to UNODC have involved, for

<sup>&</sup>lt;sup>102</sup> Although Iraq did not officially submit information in its Annual Reports Questionnaire (ARQ), a report from a meeting of epidemiological experts in 2012 presented some limited data on seizures in the country. According to this report, hashish and opium were the two most commonly seized drugs between 2004 and 2013. Interim Report of the Inaugural Iraq Community Epidemiology Work Group (CEWG), 8-9 May 2012, Baghdad, Iraq, Al-Diwan, J., Al Hemiary, N., Hasson, A., and Rawson, R.A.(available at: www.uclaisap.org/iraq/html/CEWG-publications-reports.html).

<sup>&</sup>lt;sup>103</sup> Council of the European Union, Report to the Mini-Dublin Group by the Romanian Chair, "Regional report on the Near East", December 2014, (available at: //data.consilium.europa.eu/doc/document/ST-16959-2014-INIT/en/pdf).

<sup>&</sup>lt;sup>104</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>105</sup> Dhow is the standard name used to describe various different types of traditional sailing vessels with one or more masts used in the Red Sea and the Indian Ocean; See http://nabataea.net/ships.html

example, interdictions in Jordan that were apparently headed for Israel. These trajectories, however, appear to be linked to the Balkan route, reaching from Turkey or the Islamic Republic of Iran into Iraq, The Syrian Arab Republic, Italian Jordan and further to Israel towards Egypt through the Sinai peninsula, Italian involving mostly the use of trucks until Israel is reached. This route, destined to the Egyptian market, is distinct from the southern route, which targets mostly Gulf countries and continues to Africa and Europe. However, recent seizures in Egypt of heroin shipments transported through the Red Sea and into the country from its south-eastern coasts heroin guith few air trafficked heroin consignments from East Africa to Egypt, Italian indicate that the emergence of the southern route towards Egypt cannot be excluded.

Most of the reported seizures made in the Middle East and Gulf countries during the 2010-2013 period involved heroin departing from Afghanistan, or transiting Pakistan. This is likely supported by excellent transport and trade connections between the countries of the Middle East and Gulf region. Despite the vicinity of the Islamic Republic of Iran, there have been few seizures reported in recent years of heroin trafficked from the Islamic Republic of Iran to the Middle East. A shipment of 1,000 kg of heroin intercepted in the Islamic Republic of Iran in May 2013 was apparently destined for Kuwait and another in 2010, involving 15.5 kg of heroin, was destined for the United Arab Emirates. While it can be assumed that this consists mostly of transiting shipments, the apparent popularity and relatively high price of heroin in Middle Eastern countries like Kuwait (36,700 USD/kg in 2012), 116 is presumably attractive to traffickers.

<sup>&</sup>lt;sup>106</sup> Council of the European Union 2014, Report to the Mini-Dublin Group by the Romanian Chair, "Regional report on the near east", p.3-4; see also: Israel. Annual Report Ouestionnaire 2012.

<sup>&</sup>lt;sup>107</sup> In recent years, due in part to the strengthened Iranian – Turkish border, there is evidence that heroin is trafficked from the Islamic Republic of Iran to Iraq. UNODC (2013). World Drug Report 2013, p.33. Vienna: United Nations publication.

<sup>&</sup>lt;sup>108</sup> Additionally, since 2011, Syrian Arab Republic started to report Iraq as a source country for heroin (Syrian Arab Republic, Annual Report Questionnaire 2011 and 2012).

<sup>&</sup>lt;sup>109</sup> There was a significant increase in heroin seizures within Jordan (237 Kg in 2013 in the first six months). Of the significant heroin seizures reported to UNODC in Jordan in 2013, only one seizure was reported at Jaber border (bordering Syrian Arab Republic) and another at the Iraqi border. The rest of the heroin was seized within the country and closer to Israel and Egypt (the main destinations). The source of the heroin seized in Jordan in 2013 is not clear but the continuing civil war in Syrian Arab Republic is likely to have impacted trafficking flows and law enforcement priorities.

<sup>110</sup> Israel, Anti Drug Authority (IADA), "Israeli Drug Market".

<sup>&</sup>lt;sup>111</sup> ANGA Report of 2013.

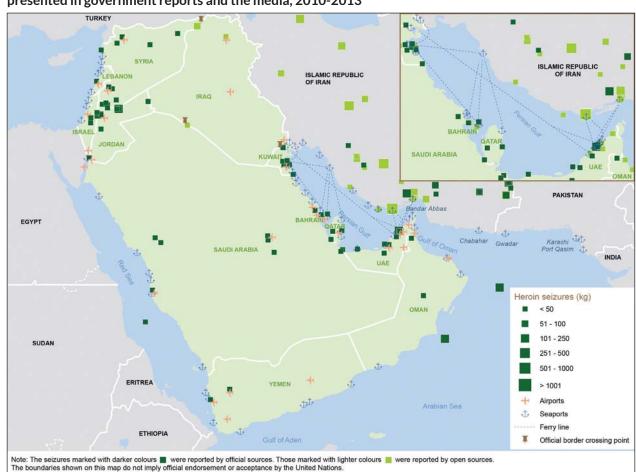
<sup>&</sup>lt;sup>112</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>113</sup> ANGA Report of 2013.

<sup>&</sup>lt;sup>114</sup> In cases where Afghanistan was reported as the direct source, the smuggling attempt was made by air and the seizures were undertaken in various countries of the Middle East and the Gulf States.

<sup>&</sup>lt;sup>115</sup> According to the 2012 Mini-Dublin group report "the most commonly used drug in Kuwait and the Gulf region is heroin sourced from Afghanistan, Islamic Republic of Iran and Pakistan."; see Council of the European Union, Report to the Mini-Dublin Group by the Greek Chair, "Regional report on the Near East", 2012, p.39.

<sup>&</sup>lt;sup>116</sup> Converted from euros using the exchange rate in June 2012 – Council of the European Union, Report to the Mini-Dublin Group by the Greek Chair, "Regional report on the Near East", 2012, p.39.



Map 19: Location of heroin seizures made in the Middle East and Gulf countries as reported to UNODC, presented in government reports and the media, 2010-2013

Source: UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

### 5.2 Heroin trafficking routes and methods

Table 8 summarizes the seizure data for heroin trafficked into the Gulf, by region of origin, or departure. Flows from Pakistan account for the majority of cases and by far the largest quantity of heroin interdicted in the Gulf countries. The United Arab Emirates, Saudi Arabia and Bahrain have experienced the highest numbers of seizures, with the following patterns reported over 2010-2013:

- In the United Arab Emirates, most seizures were made at Dubai airport<sup>117</sup> and involved couriers having ingested heroin capsules.<sup>118</sup> The majority of these couriers had come from Afghanistan or Pakistan.
- In Saudi Arabia, most seizures were made at King Fahd Airport (close to Dammam port), King Khalid Airport (close to Riyadh) or King Abdulaziz Airport (in Jeddah). The majority of seizures involved heroin that had been ingested by couriers or concealed on their body or in their clothing. One potential route is direct trafficking from Pakistan, as some seizures in Saudi Arabia can attest to. 120
- In Bahrain, every seizure involved heroin that had been ingested. In all cases, couriers had travelled from Pakistan.<sup>121</sup>

<sup>&</sup>lt;sup>117</sup> Abu Dhabi was listed only once.

<sup>&</sup>lt;sup>118</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by the World Customs Organizaton (WCO), Drug Department of the United Arab Emirates, Abu Dhabi Police and Dubai Customs.

<sup>&</sup>lt;sup>119</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>120</sup> For example, on 24 October 2012, on information of the Anti Narcotics Force (ANF) of Pakistan, KSA authorities intercepted 3 Pakistani nationals at Jeddah International Airport and recovered 7.5 kg of heroin. Information provided by the ANF of Pakistan, January 2015.

<sup>121</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

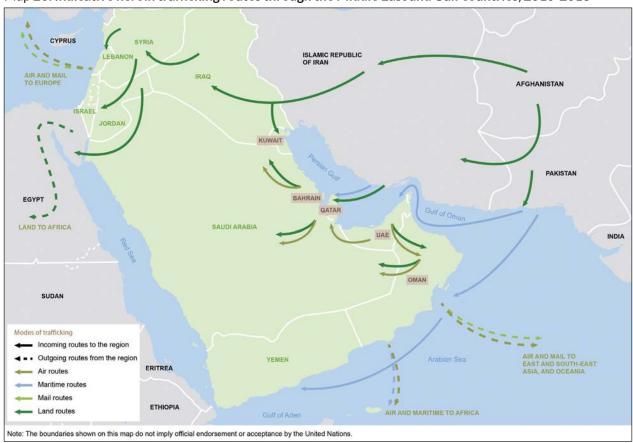
Table 8: Heroin trafficked to the Gulf States via the southern route by region of origin/ departure, 2010-2013

Region of origin/ departure	Number of cases	Amount of heroin seized (kg)
South-West Asia		
- Afghanistan	2	1
- Pakistan	347	721
- Islamic Republic of Iran	1	15.5
South Asia	3	1
Africa	2	2.5
East and South-East Asia	1	2
Other	1	2

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Likely trafficking routes to and through the Middle East are represented in Map 20. It should be noted that westward movements from Afghanistan through the Islamic Republic of Iran are included, although as previously stated they are more likely to supply the Balkan route, passing either directly into Turkey or through Kurdish Iraq and potentially Syrian Arab Republic before moving into Turkey.

Map 20: Indicative heroin trafficking routes through the Middle East and Gulf countries, 2010-2013



Source: UNODC, based on seizure data from Drug Monitoring Platform (DMP), Individual Drug Seizures (IDS) and ARQ, supplemented by national government reports and other official reports

The largest heroin seizures in the region, in the 2010-2013 period, involved heroin trafficked by sea. Trafficking by sea appears to involve two different destinations. First, shipments are bound for heroin markets in the Gulf, to be broken up into smaller shipments for onward shipping by air or mail, or are being trans-shipped onwards via the region's major ports (including those in Oman and the United Arab Emirates). Second, the Middle East provides useful coastlines for consignments intended for Africa, primarily on ships or dhows coming from Pakistan.

For seizures of heroin trafficked by air, the most commonly listed countries of last departure relevant to the southern route during 2010-2013 were Afghanistan, Nigeria and Pakistan. The main route appeared to be Pakistan to Saudi Arabia or the United Arab Emirates. Other routes included Pakistan to Bahrain and Qatar, as well as Afghanistan to Kuwait and the United Arab Emirates. Notably, while a number of seizures were reported in Pakistan involving heroin destined for Oman, there were no reported seizures made in Oman of heroin trafficked from Pakistan. This suggests that consignments to or through Oman are passing undetected. It is also possible that Oman is making seizures that are not reported to UNODC, which would explain the gap in knowledge. In 2013, Oman reported seizing 98 kg of heroin, the largest seizure of the past decade, but limited information is available on individual seizures. Half of the seized heroin was trafficked by sea and 35 per cent and 15 per cent by air and land respectively.<sup>122</sup>

Aside from the Israel-Syrian Arab Republic-Jordan cluster mentioned above, it also appears that trafficking by land across Iraq is becoming more prevalent. Seizures were reported in 2012, involving heroin trafficked through the Iraqi-Kuwaiti and Iraqi-Saudi Arabian border crossings (Safwan-Abdali<sup>123</sup> and Ar Ar respectively), as well as via Rabia, a small Iraqi town at the Syrian Arab Republic border, where 100 kg<sup>124</sup> of heroin were intercepted. Reports indicate that the increase in use of these routes may be the result of strengthened drug law enforcement measures on the border between the Islamic Republic of Iran and Turkey (the Balkan route).<sup>125</sup>

#### 5.2.1 Destinations

In the case of opiates not intended for the local market, onward trafficking from the Gulf has occurred in many directions. With regard to seizures for which information was available for the 2010-2013 period, Table 9 shows that a significant amount of heroin was destined for Africa (42 per cent), followed by Europe (37 per cent), East Asia and South-East Asia (12 per cent) and North America (9 per cent). Towards Europe, the country listed most frequently as the country of departure in terms of both number of seizures and weight was the United Arab Emirates (nine cases totalling 34 kg). With regard to heroin destined for Africa, the majority of seizures listed the United Arab Emirates (three cases totalling 127 kg) as the country of departure. Towards East and South-East Asia, most of the seizures involved heroin trafficked from the United Arab Emirates to mainland China (five cases and 26 kg), and Hong Kong (four cases and 5 kg). An additional case involved 7 kg of heroin trafficked from Qatar to mainland China. Finally, towards North America, there were six reported cases (17 kg) involving heroin trafficked from Qatar to the USA. In addition, there was a single case (10 kg) of heroin smuggled from Qatar to Canada.

Table 9: Heroin trafficked from or through the Gulf countries by destination, 2010-2013

Destination region	Number of Cases	Approx. % of total number of cases in region	Amount of heroin seized (kg)	Approx. % of total amount seized
Europe <sup>126</sup>	19	42	116.5	37
Africa	5	11	131	42
East and South- East Asia	10	22	38	12
North America	11	25	29	9
TOTAL	45	100	314.5	100

Source: UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

<sup>122</sup> Oman, ARQ 2013

<sup>&</sup>lt;sup>123</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by Iraq Customs, Ministry of Interior (available at at: www.customs.mof.gov.iq/index.php?q=node/32).

<sup>&</sup>lt;sup>124</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported in Iraqi media.

<sup>&</sup>lt;sup>125</sup> UNODC (2013). World Drug Report 2013, p.33. Vienna: United Nations publication; Report of the Subcommission on Illicit Drug Traffic and Related Matters in the Near and Middle East on its Forty-seventh session, held in Antalya, Turkey, 19-23 November 2012 (UNODC/SUBCOM/47/5).

<sup>&</sup>lt;sup>126</sup> Of the total cases available for Europe, 4 seizures amounting to 21 kg were reported to be destined to East and South-East Europe (Russian Federation, Serbia and Ukraine).

As regards trafficking attempts made by sea, there is limited data available, but the seizures are relatively large. For example, in April 2011, a seizure of 202 kg<sup>127</sup> was made, involving heroin departing from Karachi, Pakistan, which had been shipped through three other ports – Salalah in Oman, Valencia in Spain, and Lomé in Togo, before reaching the Republic of Benin. Another example was the seizure of 20 kg<sup>128</sup> of heroin made in June 2012 at a seaport in the Republic of Côte d'Ivoire. The consignment was seized from a sea container shipment of carpets, which had transited the United Arab Emirates before reaching Côte d'Ivoire. Ghana was the intended destination.

For interdictions by air, a significant number of cases involved heroin trafficked from Pakistan or Afghanistan that was transiting the Gulf towards various countries in Europe and Africa. For example, popular transits towards Europe and North America have included Qatar to Spain onwards to the USA, as well as from the United Arab Emirates to Italy. With regard to heroin destined for Africa, popular routes included Qatar and the United Arab Emirates to Nigeria. There were also several consignments of heroin sent from the United Arab Emirates and Qatar either directly to mainland China or through Hong Kong. In addition, single seizures were made of heroin trafficked from Bahrain, Iraq, Kuwait, Qatar, Oman, Syrian Arab Republic and the United Arab Emirates, destined for countries in West and Central Europe, Africa<sup>131</sup> and North America, as well as China. There are also records of a small number of seizures of heroin bound for Russian Federation, Ukraine, Bangladesh, the Maldives and Malaysia.

The largest seizures (above 10 kg) likely to be linked to trafficking from the southern route were effected in the United Arab Emirates. Large shipments of heroin trafficked in sea containers have been seized at the ports of Dubai, Khawr Fakkan and Abu Dhabi in the United Arab Emirates destined for Europe and Africa (see Table 10). Departure countries for air and maritime shipments through the United Arab Emirates are Pakistan, the Islamic Republic of Iran and Afghanistan—with Pakistan and the Islamic Republic of Iran as the primary departure points for maritime shipments. One recent case involved the seizure of 764 kg of heroin in May 2014 in Rotterdam Harbour, Netherlands. The container originated from the Islamic Republic of Iran, via the United Arab Emirates.

Figure 25: Record heroin seizure at Rotterdam (Netherlands), 2014



Source: KLPD Central Unit, Central Intelligence Division

Trafficking through the United Arab Emirates has been observed for a number of years. In 2005, Dubai authorities seized 78 kg of heroin shipped by air from Pakistan to Dubai and destined for Burkina Faso, in West Africa. The largest seizure in United Arab Emirates history occurred in 2008 and consisted of 202 kg of heroin trafficked by Afghan nationals who had planned on handing it over to African nationals for subsequent trafficking to China. Dubai and Abu Dhabi are global transport hubs for licit products and, as other hubs for licit trading in the Netherlands and Belgium, they are likely to be targeted by illicit traffickers.

 $<sup>^{127}\,</sup>UNODC\,Drugs\,Monitoring\,Platform\,(DMP)\,and\,Individual\,Drug\,Seizures\,(IDS).\,Reported\,by\,UNODC\,Regional\,Office\,for\,West\,Africa.$ 

<sup>128</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS) Reported by UNODC Regional Office for West Africa.

<sup>129</sup> The originating country is unknown.

<sup>130</sup> United Arab Emirates law enforcement, ANF Pakistan, UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>131</sup> These countries include Côte d'Ivoire, Kenya, Liberia, Mozambique, Nigeria, South Africa, Uganda, Zambia and Zimbabwe.

<sup>&</sup>lt;sup>132</sup> UNODC (2013). World Drug Report 2013, p.33. Vienna: United Nations publication.

<sup>&</sup>lt;sup>133</sup> Dubai police, General Department of Anti Narcotic (available at: http://www.dubaipolice.gov.ae/dp/jsps/content/layout\_content.do?contentCode=76653&switchLanguage=en&noCache=1409903009267 – accessed on 15 December 2014)

<sup>&</sup>lt;sup>134</sup> Dubai police, General Department of Anti Narcotic (available at: http://www.dubaipolice.gov.ae/dp/jsps/content/layout\_content.do?contentCode=76653&switchLanguage=en&noCache=1409903009267 - accessed on 15 December 2014)

Table 10: Reported seizures in the United Arab Emirates above 10 kg linked to the southern route, 2010-2013

Date	Amount (kg)	Mode of Trafficking	Departed From	Intended Destination	Information Source
28-03-2010	15.5	Unknown	Islamic Republic of Iran	United Arab Emirates	Ministry of Interior, United Arab Emirates
23-12-2011	120	Maritime	Pakistan	Nigeria	ANF Pakistan
25-11-2011	130	Maritime	Pakistan	Unknown	Dubai Police <sup>135</sup>
6-6-2011	58	Maritime	n/a	Nigeria	Dubai Police <sup>136</sup>
19-02-2012	53	Air	n/a	n/a	Dubai Police
5-04-2012	52	n/a	Pakistan	n/a	Dubai Police
16-03-2013	24	Sea transport	n/a	n/a	Dubai customs

Source: United Arab Emirates law enforcement, ANF Pakistan, UNODC

The large volume of maritime shipments renders United Arab Emirates ports vulnerable to exploitation by drug traffickers. In addition, a number of United Arab Emirates ports have free trade zones where trans-shipped cargo is not subject to the same inspection as goods that enter the country.<sup>137</sup> In 2011, more than 13 million twenty-foot equivalent units (TEUs) of cargo were processed at the Dubai port alone,<sup>138</sup> a trade flow that may be exploited by drug traffickers as camouflage for their illicit trade.

Data from other regions has indicated extensive use of mail for trafficking out of southern route transit points; that said, in the Middle East and Gulf there are fewer interdictions of these attempts than might be expected, particularly for airports and seaports that are part of global logistics networks. Seizures mainly involved heroin trafficked from the United Arab Emirates to countries in West and Central Europe, and to the United States and Canada in North America. In one case, a consignment was sent to South Africa, while in another case, 10 kg of heroin were sent to Rome in 2012. 140

Arrest information was available for almost 80 per cent of reported seizures in the Middle East and Gulf countries over 2010-2013, involving almost 80 per cent of the heroin seized by weight. However, only 20 per cent of these cases listed the nationality of the arrestees. Of those, over 40 per cent were Jordanian nationals, 22 per cent were from Pakistan, 14 per cent from Syrian Arab Republic and 10 per cent from Lebanon. Nationals of Bahrain, the Islamic Republic of Iran Iraq, Kuwait, Saudi Arabia and the United Arab Emirates were also arrested. In Pakistan, of the arrests made between 2010 and 2013<sup>141</sup> involving heroin destined for the Middle East, the nationality of most of the couriers detained was Pakistani. Traffickers from Afghanistan, Ghana, Kenya, Nigeria, the Philippines and Zambia were also arrested in Pakistan. The presence of African nationals among traffickers caught at airports in Pakistan, the Middle East and India suggests a substantial flow of heroin moving west toward Africa by air from various points across the region. This is in addition to the large maritime trade evidenced by seizures at ports in West Africa and off the eastern coast of Africa. It is worth noting that in 2013 the United Arab Emirates performed 105 international cooperation operations with 36 countries. Pakistan topped the list with 17 operations but out of the 105 operations, 35 were with African countries (33 per cent), primarily Nigeria and South Africa, highlighting the importance of the continent in regional drug flows and the need for continued international cooperation.

<sup>&</sup>lt;sup>135</sup> Dubai police, Anti Narcotic Site (available at: http://www.dubaipolice.gov.ae/dp/portal/public/editorUploadedFiles/497879\_MAG55. pdf - accessed on 15 December 2014)

<sup>&</sup>lt;sup>136</sup> Dubai police, Anti Narcotic Site (available at: http://www.dubaipolice.gov.ae/dp/portal/public/editorUploadedFiles/497879\_MAG55. pdf - accessed on 15 December 2014)

<sup>137</sup> Council of the European Union 2013, Report to the Mini-Dublin Group by the Greek Chair, "Regional report on the near east.

 $<sup>^{\</sup>rm 138}$  UNCTAD (2012), Review of Maritime Transport 2012.

<sup>&</sup>lt;sup>139</sup> Dubai Police website, February 2009; (available at: http://www.dubaipolice.gov.ae/dp/jsps/media/news\_details. do?contentCode=NEWS\_9559 - accessed on 15 December 2014)

<sup>&</sup>lt;sup>140</sup> Dubai Customs website, (available at: http://www.dubaicustoms.gov.ae/ar/NewsCenter/Pages/NewsDetail.aspx?NewsID=41 - accessed on February 2015)

<sup>&</sup>lt;sup>141</sup> Information from 2013 subject to change. Information from UNODC DMP and IDS. Reported by various sources such as the ANF of Pakistan, and the WCO.

<sup>&</sup>lt;sup>142</sup> Arab Bureau documents and report forwarded by the United Arab Emirates to the Council of Arab Ministers of Interior on efforts of the United Arab Emirates on combating drug trafficking in 2013.

### 5.3 Summary

The Gulf is both a market and a trans-shipment hub for the trafficking of Afghan opiates along the southern route. It receives opiates by air and sea from the Islamic Republic of Iran and Pakistan. Some of this is reserved for the local market, but most is for onward trafficking, with evidence that this occurs in every region of the world with the exception of South America. Major consignments are trafficked by sea, apparently taking advantage of large-scale cargo movements through Gulf trade hubs. Numerous smaller consignments are trafficked by air, in most cases carried by couriers. The multiple connections that the Gulf has to various destinations represent a challenge for countries to manage in terms of international cooperation. Clearly, however, the most important relationships are with the Islamic Republic of Iran, Pakistan and Afghanistan – the more effective the region is at promoting joint action to reduce flows coming out of the major southern route trajectories, the better the impact for the Gulf and for all countries downstream.

# 6. South Asia

For the purposes of this report, South Asia refers to India, Bangladesh, Sri Lanka, Nepal and Bhutan. In a region of more than 1.4 billion people, the countries of South Asia sit between the world's top two heroin producers, Afghanistan and Myanmar. Trade and flight connections with the Middle East<sup>143</sup> and East Asia<sup>144</sup> are developing, while drug use patterns show a range of opiate use traditions and prevalence rates.

### 6.1 Regional overview

In 2012, the annual prevalence of opiate use in the region was estimated at 0.3 per cent, or approximately 2.8 million people. Although this rate is relatively low in global terms—particularly when compared to Pakistan, Afghanistan and the Islamic Republic of Iran—the sheer size of the population of South Asia makes it an important market for opiates. Furthermore, with India sharing a long and active border with Pakistan, it is a convenient transit point for trafficking heroin from South-West Asia to various markets farther East and West.

Seizure data available to UNODC (see Figure 26) indicates that India consistently seizes the largest quantity of heroin. Sri Lanka has seen a relatively large increase in seizures in 2013 compared to previous years, reversing a recent downward trend, as later explained. Nepal does not appear frequently in seizure data; all sources seem to agree that it is not a large market or transit point for illicit opiates. Across the region, air and land transportation were reported as the primary methods of transport for the heroin seized, with maritime trafficking also prevalent into Sri Lanka.<sup>147</sup>

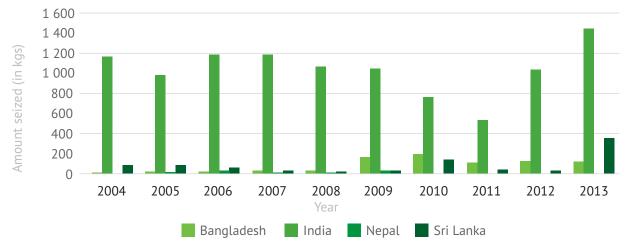


Figure 26: Heroin seizures in South Asia (kg), 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA); Narcotics Control Bureau (India); Annual report questionnaire replies submitted by Sri Lanka for 2013; Department Of Narcotics Control, Bangladesh (data was not available for heroin seizures in Nepal for 2004), 2010-12

Geographically, as shown in Map 21, there are clusters of seizures along the border between Pakistan and India and at international air and seaports, particularly those associated with major cities such as Calcutta, Colombo, Dhaka, Kathmandu and New Delhi. This illustrates the region's position as both a transit and destination point along the southern route. The sections that follow discuss the specific challenges faced by each country.

<sup>&</sup>lt;sup>143</sup> Kemp G. (2010) The East Moves West - India, China, and Asia's Growing Presence in the Middle East. Washington DC: Brookings Institution Press

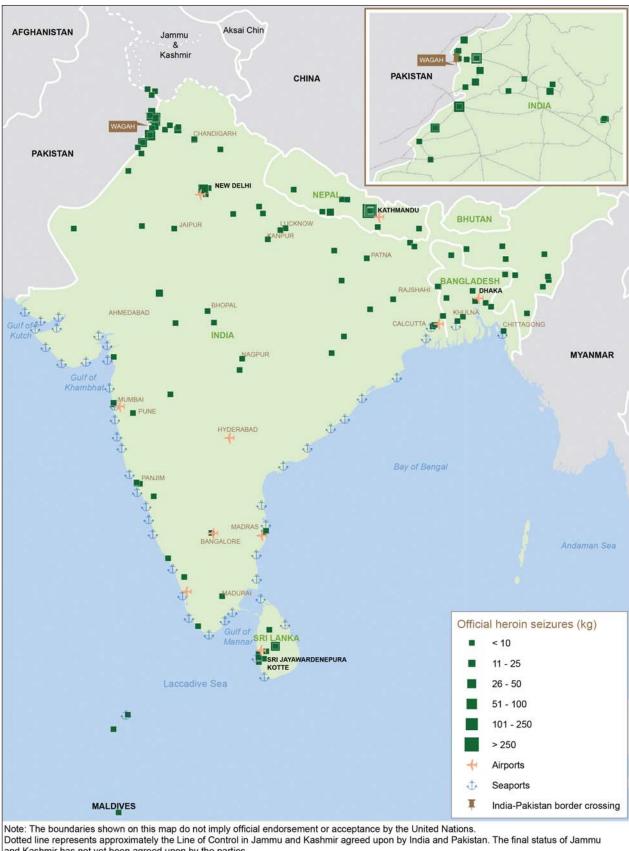
<sup>&</sup>lt;sup>144</sup> Asian Development Bank Institute Working Paper "Assessing the Experience of South Asia – East Asia Integration and India's Role". February 2014.

<sup>&</sup>lt;sup>145</sup> UNODC (2013). World Drug Report 2013, Annex I. Vienna: United Nations publication.

<sup>&</sup>lt;sup>146</sup> UNODC (2013). World Drug Report 2013, p.27. Vienna: United Nations publication.

<sup>&</sup>lt;sup>147</sup> UNODC Drug Monitoring Platform (DMP).

 ${\it Map\,21:} \ Location\, of\, heroin\, seizures\, made\, in\, South\, Asia\, as\, reported\, to\, UNODC\, and\, presented\, in\, government\, reports,\, 2010-2013$ 



and Kashmir has not yet been agreed upon by the parties.

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

### 6.2 India

The country's size, geography and position in global licit trading routes contribute to giving it multiple roles in the southern route. India is a destination country in its own right and it has been a transit point for trafficking towards Africa, Europe, North America and East and South-East Asia.

The Indian heroin market has at least three sources of opiate supply: Afghanistan, Myanmar and domestic production.

The most recent assessments have determined that 45 per cent of the heroin in India originates from Afghanistan and 54 per cent from domestic production.<sup>148</sup> Domestic production appears to be largely illicitly grown opium, rather than diversion of legal poppies supplying the pharmaceutical industry, and primarily caters to the domestic market. Although other countries in South Asia, such as Bangladesh and Sri Lanka, report seizures of Indian heroin, Afghan heroin seems to be the primary supplier to these markets.<sup>149</sup>

A nexus of quality, price and access are the primary factors that would influence market preference for heroin produced domestically over that from Afghanistan<sup>150</sup> Given that domestically produced heroin is cheaper than imported heroin due to the absence of cross-border trafficking costs (including risks), it is possible that a large portion of the Afghan heroin trafficked into India is destined for onward trafficking to other regions.

In addition to heroin, important amounts of raw opium are also used in India. Between 2011 and 2013, opium seizures in the country have been fluctuating – initially increasing and then declining in 2013, while heroin seizures have been steadily increasing.

India also has a large acetic anhydride manufacturing industry used to supply pharmaceutical, textile and chemical factories within the country. Given the proximity to Pakistan and Afghanistan, and the production of heroin domestically, acetic anhydride is vulnerable to diversion.<sup>151</sup> India reported the dismantling of three heroin and morphine laboratories during 2012. The three heroin and morphine laboratories were detected in those states where illicit cultivation of opium poppy was identified.<sup>152</sup>

Given the hazardous nature of the chemicals, it is generally considered that acetic anhydride diverted for illicit drug manufacturing is transported in container trucks and other vehicles with large cargo capacity, with the goods disguised either with false waybills<sup>153</sup> or as other legitimate liquid products, such as engine oil.

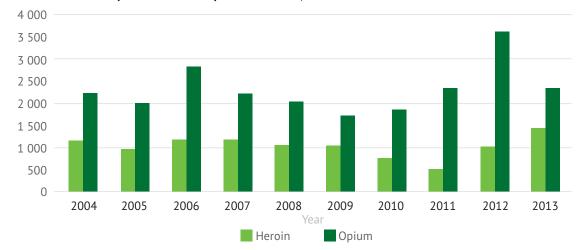


Figure 27: Heroin and opium seizures reported in India, 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA); Narcotics Control Bureau (India)

<sup>&</sup>lt;sup>148</sup> According to the 2013 Annual Report of the Indian National Narcotics Control Bureau, regardless of changes in the overall volume of heroin seized each year, the proportion that is apparently from South-West Asia has been fairly consistent at 40-50% of the total seized except in 2009 and 2010 (note that this does not necessarily correlate to the total amount in circulation).

<sup>&</sup>lt;sup>149</sup> UNODC (2013). World Drug Report 2013, p.31. Vienna: United Nations publication.

<sup>&</sup>lt;sup>150</sup> UNODC (2013). World Drug Report 2013, p.31. Vienna: United Nations publication.

<sup>&</sup>lt;sup>151</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.107-108. Vienna: United Nations publication; Mr A.P. Kala, Deputy Director General (Enforcement), Narcotics Control Bureau of India, "Problem of diversion of precursors and their use in illicit production of drugs in Indian context".

<sup>152</sup> India, Narcotics Control Bureau, "Annual Report 2012", p.18.

<sup>&</sup>lt;sup>153</sup> A.P. Kala, Deputy Director General (Enforcement), Narcotics Control Bureau of India, "Problem of diversion of precursors and their use in illicit production of drugs in Indian context".

The vulnerability of India to southern route trafficking begins with its border with Pakistan, which is reportedly crossed by traffickers bringing a range of Afghan opiate products, some destined for use in India and others for onward shipping to eastern and western markets.<sup>154</sup> A majority of the heroin seizures in India in 2013 took place in the western part of the country, in the states of Punjab and Haryana, which border Pakistan (Figure 28). For example, in April 2013, Indian authorities seized 31.8 kg of heroin in the vicinity of the border between Pakistan and India, as the traffickers were attempting to push drugs through a plastic pipe across the border fence.<sup>155</sup> One of the largest seizures of 2012 consisted of 105 kg, which had been trafficked by rail from Pakistan.<sup>156</sup> On the other side of the country, the large number of heroin seizures in West Bengal, which borders Bangladesh, may be an indicator of heroin trafficking from India to Bangladesh – a flow of heroin also noted by Bangladeshi authorities.<sup>157</sup>

India has also developed strong trade and community links with Afghanistan,<sup>158</sup> including hosting a sizeable number of Afghan migrants. Although only a very small minority of Afghans may be involved in trafficking, broader connections between people across borders have proven useful for drug traffickers everywhere. In December 2013, Indian authorities seized 46 kg of heroin in a number of operations in Delhi that also resulted in the arrest of four people including three Afghan nationals.<sup>159</sup> Seizures of acetic anhydride smuggled to Afghanistan from India<sup>160</sup> and heroin trafficked the opposite direction by air also demonstrate that recently improved air connections between the two countries have been exploited by traffickers.

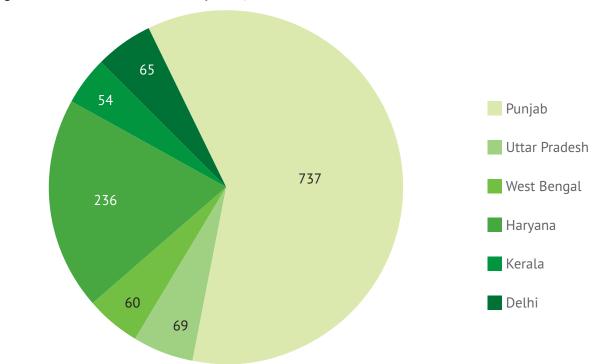


Figure 28: Heroin seizures in India by state, 2013

Source: Annual Report 2013, Narcotics Control Bureau, India

 $<sup>^{\</sup>rm 154}$  India, Narcotics Control Bureau, "Annual Report 2013", p. 5.

 $<sup>^{\</sup>rm 155}$  India, Narcotics Control Bureau, "Annual Report 2013", p. 8.

<sup>&</sup>lt;sup>156</sup> On 8 October 2012, officers of the Customs (Preventive), Rail Cargo, Amritsar recovered 101 packets containing 105.5 kg of heroin and 500 live cartridges from a wagon of a goods train coming from Pakistan; see India, Narcotics Control Bureau, "Annual Report 2012", p.5.

<sup>&</sup>lt;sup>157</sup> Bangladesh, Department of Narcotics Control, "Annual Drug Report of Bangladesh, 2013", p. 38 (available at: http://www.dnc.gov.bd/report\_dnc/annual\_report\_2013.pdf).

<sup>&</sup>lt;sup>158</sup> Deepali Gaur Singh, "Afghan Women in the Diaspora: Surviving Identity and Alienation", Centre for Non-Traditional Security Studies, NTS - Asia research paper No 4.

<sup>&</sup>lt;sup>159</sup> India, Narcotics Control Bureau, "Annual Report 2013", p. 10.

<sup>&</sup>lt;sup>160</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.108-109. Vienna: United Nations publication.

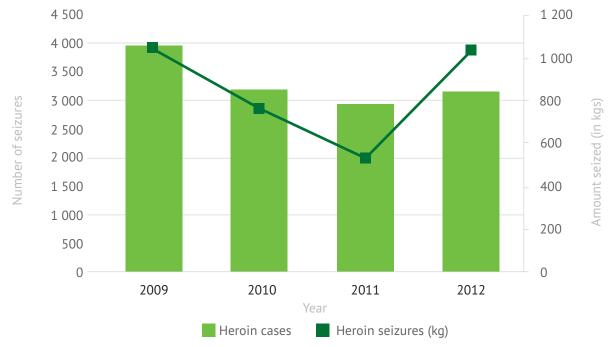
Figure 29: Trucks heading from Pakistan to India through the Wagah border crossing



Source: UNODC Country Office for Pakistan

Figure 30 shows heroin seizures in terms of volume and number of cases, as reported by the Indian Narcotics Control Bureau. 2013 saw a significant increase in the volume of heroin seized, when compared to 2012 – from 3,155 kg to 4,609 kg.

Figure 30: Number and amount of annual heroin seizures in India, 2009-2012



Source: Annual Report 2013, Narcotics Control Bureau, India (data for 2013 was unavailable at the time of writing)

Seizure data and information analysed by Indian authorities<sup>161</sup> suggest that India is a transit country for shipments to East and South-East Asia, as well as North America and West Africa.<sup>162</sup> Canada has noted India, as well as Pakistan, as a major departure point for heroin reaching its market, as revealed in a number of seizures effected among commercial air traffic in 2012 and 2013 (see chapter on North America). Both India and the USA have also reported a flow of heroin from India to North America. In East and South-East Asia, India appears to be the place of origin for heroin trafficked by mail, with China as the most frequently reported destination.<sup>163</sup>

 $<sup>^{161}</sup>$  Including information submitted by India in its response to Annual Report Questionnaires.

<sup>&</sup>lt;sup>162</sup> Nigeria, ARQs 2011-2013

<sup>&</sup>lt;sup>163</sup> India, Narcotics Control Bureau, "Annual Report 2011", p. 50.

Trafficking by mail has also occurred from India to Indonesia. However, shipments by sea from South Asia to East and South-East Asia primarily depart from Pakistan<sup>164</sup> rather than India, which may reflect simpler logistics in accessing and departing from the coast or ports of Pakistan. Western and Central Europe are also targeted; Germany in particular has reported India as a departure country.<sup>165</sup>

In recent years, India has reported an increase in the number of seized parcels containing drugs. Seizures indicate that the postal system — both courier services and ordinary mail — is exploited to smuggle heroin from India to a broad cross section of destinations in Europe, North America, Asia, Africa and Australia (Figure 31). Table 11 shows an increasing trend in seizures of heroin trafficked by mail out of India. This may be the result of both increased trafficking and improved law enforcement, as new methods are being detected by authorities.

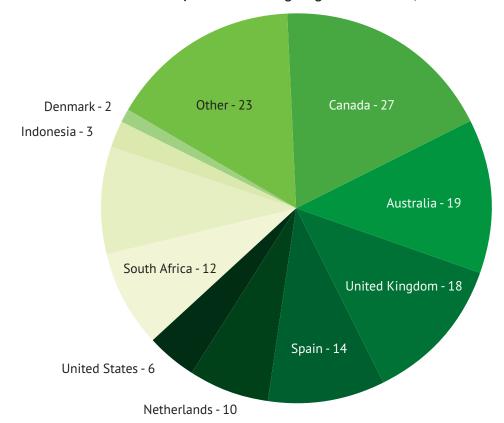


Figure 31: Intended destinations of parcels containing drugs seized in India, 2011

Source: Narcotics Control Bureau (NCB), India, 2011 (data for 2012-2013 was unavailable at the time of drafting)

Table 11: Parcels containing heroin seized at mail centres in India, 2009-2011

	2009	2010	2011
Number of parcels	40	65	109
Quantity of heroin seized (kg)	26	29	39

Source: Narcotics Control Bureau (NCB), India, 2011. Data for 2012-2013 was unavailable at the time of drafting.

<sup>&</sup>lt;sup>164</sup> Information submitted by India and Pakistan in response to their respective Annual Report Questionnaire, UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>165</sup> Germany, ARQs 2012-2013, part iv

#### **Arrests**

Figure 32 shows data regarding foreign nationals arrested in India for drug-related offences. Although Nepalese nationals feature prominently, they are reportedly involved primarily in hashish trafficking. <sup>166</sup> In relation to heroin, Indian authorities have reported Nigerian nationals as particularly involved in heroin trafficking and distribution. <sup>167</sup> Other nationals of African countries have also appeared in the data – for example, in January 2014, India reported one case involving a Tanzanian national and another involving a South African national. <sup>168</sup> There is no comprehensive official data available on the destinations of heroin seized during arrests of African nationals, although open source reports mention Nigeria and the USA as possible destinations. <sup>169</sup>

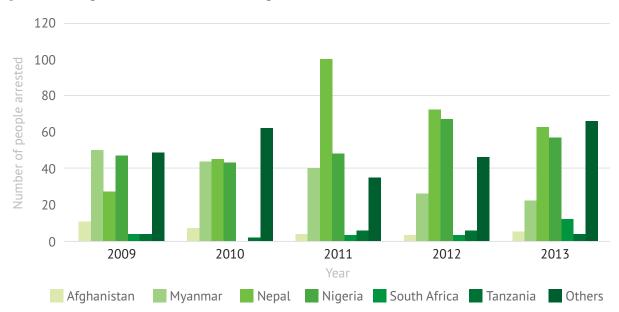


Figure 32: Foreigners arrested in India for drug-related offences, 2009-2013

Source: Indian Narcotics Control Bureau, (data for previous years was unavailable at the time of writing)

### 6.3 Bangladesh

Bangladesh is not a major opiate producer but it is facing a significant problem of illicit drug use. Its drug markets appear to focus around Dhaka, which is home to an estimated 2.5 million drug users and represents over 50 per cent of the national market. Average purity levels of heroin sold on the streets of Bangladesh are unknown, but Bangladeshi authorities assess that retail heroin is adulterated several times after entering Bangladesh.<sup>170</sup>

It is unclear whether the southern route is a major provider of heroin to Bangladesh. Bangladeshi authorities believe that India is the primary departure point for heroin trafficking into Bangladesh. Most seizures reported in Bangladesh take place either in major cities or in towns close to the border. The country is bordered by India in the west, north and in the east and trafficking occurs across both its western and eastern borders, although the western plains appear to be favoured. However, there is little data available with which to assess whether heroin dispatched from India is produced from Indian opium cultivation, or whether it is the case of Afghan production transiting India.

<sup>166</sup> India, Narcotics Control Bureau, "Annual Report 2012",, p.1

<sup>&</sup>lt;sup>167</sup> India, Narcotics Control Bureau, "Annual Report 2013", p.5 . For example, in 2013 five Nigerian nationals were arrested for heroin-related offences.

<sup>&</sup>lt;sup>168</sup> India, Ministry of Home Affairs, Narcontrol: a journal of narcotics Control Bureau, March 2014, Issue 1.

<sup>&</sup>lt;sup>169</sup> The Indian Express, 'Nigerian national arrested, heroin worth 2.5 crore seized', 28 August 2014.

<sup>&</sup>lt;sup>170</sup> Bangladesh, "Annual Drug Report 2013", p.24.

 $<sup>^{\</sup>rm 171}$  Bangladesh, "Annual Drug Report 2013", p.24.

#### 6.4 Sri Lanka

Heroin use in Sri Lanka was previously restricted to foreign tourists and a small number of Sri Lankans, but this began to change during the 1980s. Heroin use has become more prevalent in recent years, especially in major cities such as Colombo. Echoing the challenge for South Asia as a whole, Sri Lanka has also emerged as a transit point for heroin trafficking towards Europe.

On the basis of seizures made between 2008 and 2012, Sri Lankan authorities have estimated that the street level supply of heroin was around 2 kg per day – this quantity of heroin in the country was considered sufficient to supply 45,000 users daily.<sup>172</sup> A reported average price of \$27,100 per kg<sup>173</sup> in 2012 – is far higher than the price in India<sup>174</sup>. However, street prices have fluctuated greatly, with a reported 45 per cent increase between 2011 and 2012, for example.<sup>175</sup>

Traditionally, most of the heroin was trafficked into Sri Lanka on fishing boats from South India to the western coast of Sri Lanka, or by air with couriers entering as tourists<sup>176</sup>. Sri Lankan authorities report that most of the heroin was smuggled into the country through India or Pakistan. As with Bangladesh, the degree to which heroin of Indian origin has been produced from opium cultivation in India — as opposed to Afghan opium — is not clear. Sri Lanka reported almost 90 per cent of the heroin seized in 2013 as coming from Pakistan. It should be noted, however, that the overall volume of seizures effected in Sri Lanka is relatively small, making it susceptible to fluctuations based on individual seizure cases. A significant proportion of seizures in 2013 were attributable to a single case in August of that year, in which the Sri Lanka Narcotics Police Bureau seized 261 kg of heroin from a container that was shipped to Sri Lanka from Karachi (Pakistan), and arrested a Pakistani national. It is noteworthy that the first seizure of this kind consisted of 2.7 kg of heroin (June 2009) seized from a container by Sri Lankan Customs following a tip-off from Pakistani officials. Several seizures made in Pakistan in recent years also appear to indicate drug trafficking activity towards Sri Lanka (see Table 12).

Table 12: Selected drug seizures in Pakistan destined for Sri Lanka, 2010-2014

Date	Amount	Location	Remarks
2010	1194 kg hashish	Karachi seaport	Container
30 Jul 2013	202 Ks heroin	Karachi seaport	Container
27-11-2014	64 kg heroin	Karachi seaport	Container

Source: ANF website, ANF Yearly Digest 2013

As regards the nationality of couriers and other arrestees, Figure 33 shows data for all drug-related offences and highlights two trends. First, until 2012 Pakistani nationals were clearly the dominant nationality arrested; second, 2012 saw a strong increase in the arrest of Indians and other nationalities, which have included Iranian and Maldivian nationals.

 $<sup>^{172}</sup>$  National Dangerous Drugs Control Board of Sri Lanka, Ministry of Defence and Urban Development, "Handbook of Drug Abuse Information in Sri Lanka 2013", p.x.

<sup>&</sup>lt;sup>173</sup> Sri Lanka, ARQ 2013.

 $<sup>^{174}</sup>$  The 2011 average price in India was calculated at 6,432 – less than a quarter of the price in Sri Lanka.

<sup>&</sup>lt;sup>175</sup> National Dangerous Drugs Control Board of Sri Lanka, Ministry of Defence and Urban Development, "Handbook of Drug Abuse Information in Sri Lanka 2013", p. 32.

<sup>&</sup>lt;sup>176</sup> National Dangerous Drugs Control Board of Sri Lanka, Ministry of Defence and Urban Development, "Handbook of Drug Abuse Information in Sri Lanka 2013", p. ix.

<sup>&</sup>lt;sup>177</sup> Sri Lanka Police, "Significant Drug Seizures by Police Narcotics Bureau 2013" (available at: http://www.police.lk/index.php/narcotic-bureau/806-police-narcotic-bureau-significant-drug-seizures-by-police-narcotics-bureau-20130101-20130731)

<sup>&</sup>lt;sup>178</sup> The heroin had been hidden inside artificial potatoes in a refrigerated container; see WCO and UNODC Container Control Programme, "Annual Report 2014"..

18 16 Number of people arrested 14 12 10 8 6 4 2 0 2009 2010 2011 2012 Year India Pakistan Others

Figure 33: Foreigners arrested in Sri Lanka for drug-related offences, 2009-2012

Source: Handbook of Drug Abuse Information in Sri Lanka 2013

### 6.5 Nepal

Nepal does not appear to be a major source or transit country for illegal drugs. The national Narcotics Control Bureau reports an increasing number of Nepalese nationals involved in drug trafficking operations, previously dominated by foreign nationals.<sup>179</sup> There are also anecdotal reports of illicit cultivation of opium poppies along the border with India and in the inland.

Heroin from South-West and South-East Asia is smuggled into Nepal across the border with India and through Kathmandu's International Airport. Air cargo at Kathmandu International Airport is also vulnerable to drug trafficking. Evidence<sup>180</sup> suggests that heroin originates from Afghanistan, and transits through Pakistan and India. Heroin is also reported to be trafficked by passengers who ingest the drug. Between January and September 2013, Nepalese authorities arrested 2,184 individuals on drug trafficking charges. Government officials are known to have indicated that the common drug trafficking route is from Pakistan to India via Nepal.<sup>181</sup>

## 6.6 Summary

India appears to be the main destination market for Afghan heroin smuggled along the southern route to South Asia, although it is difficult to discern with certainty the degree to which use is based on local production versus imports from Afghanistan. Presumably, there is some trade-off between southern route supplies and local supplies. It is reasonable to expect that India will remain an important heroin market given the size of its population and thus there may be opportunities for southern route traffickers to supply whatever demand is not fulfilled by local sources. southern route trafficking also represents a problem for Sri Lanka, which acts both as a heroin market and a transit country. India and Sri Lanka appear likely to continue acting as trafficking hubs for onward shipment by sea and air to several regions of the world, although this role seems less important compared to countries in the Gulf region.

<sup>&</sup>lt;sup>179</sup> International Narcotics Control Strategy Report (INCSR), 2014.

<sup>&</sup>lt;sup>180</sup> International Narcotics Control Strategy Report (INCSR), 2013.

 $<sup>^{\</sup>rm 181}$  Anbarasan Ethirajan, "Nepal steps up battle against drug traffickers", BBC News, 4 April 2013

## 7. East and South-East Asia

East and South-East Asia (ESEA) is home to approximately 31 per cent of the world's population<sup>182</sup> and is one of the fastest growing regions in the world. The development, socio-economic conditions and systems of governance vary considerably across the region. A number of countries are global transportation hubs and host some of the busiest seaports and airports in the world, which handle a large amount of international cargo and passenger traffic.<sup>183</sup> China, for example, witnesses a large volume of air passenger traffic each year (318.5 million people in 2012)<sup>184</sup> and air cargo traffic (15,569 million tons in 2012).<sup>185</sup> Airports in Beijing, Shanghai and Guangzhou<sup>186</sup> are categorised as the busiest in the world in terms of volumes of passenger and/or cargo traffic. China also has the busiest seaports in the world,<sup>187</sup> with an estimated 250,000 containers transiting these seaports every day. In addition, Hong Kong and Singapore are established global transport, finance and passenger hubs, while Bangkok, Kuala Lumpur and Ho Chi Minh City are rapidly growing in terms of international connections.

In 2012, the prevalence of opiate use in ESEA was estimated at 0.2 per cent – approximately 3.3 million people. Similarly to South Asia, despite a relatively low drug use rate, the large population size of the region translates into immense potential revenues for heroin traffickers. The southern route has traditionally been a marginal supplier as compared to dominant suppliers of opiates from Myanmar. However, various reports have indicated that Myanmar is unable to meet the regional demand, resulting in larger volumes of heroin being trafficked from Afghanistan. Not all of this is necessarily smuggled via the southern route — it is quite likely that a portion is trafficked north from Afghanistan overland via Central Asia to China, the primary consumer in the region. In 2011, China reported the intensification of trafficking from Afghanistan, with 223 cases totalling 831 kg. In 2012, there was a substantial decrease with China reporting a total of 98 Afghan heroin cases with 192.4 kg seized. Although 2013 saw an increase in the number of cases, the overall tendency in recent years has been a decrease in the number of seizures identified by Chinese authorities as of Afghan opiates.

<sup>182</sup> United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Prospects: The 2012 Revision.

<sup>183 &</sup>quot;Where are the world's busiest airports?", The Guardian: World News Datablog, 30 September 2013.

<sup>&</sup>lt;sup>184</sup> "Air transport, passengers carried", The World Bank.

<sup>&</sup>lt;sup>185</sup> "Air transport, freight (million ton-km)", The World Bank.

<sup>&</sup>lt;sup>186</sup> Airports Council International (2011), "Cargo Volume: Loaded and unloaded freight and mail in metric tonnes".

 $<sup>^{\</sup>rm 187}$  World Shipping Council, "Top 50 World Container Ports"

 $<sup>^{188}</sup>$  UNODC (2014). World Drug Report 2014, Annex 1. Vienna: United Nations publication.

<sup>&</sup>lt;sup>189</sup> UNODC (2014). World Drug Report 2014, p.28. Vienna: United Nations publication..

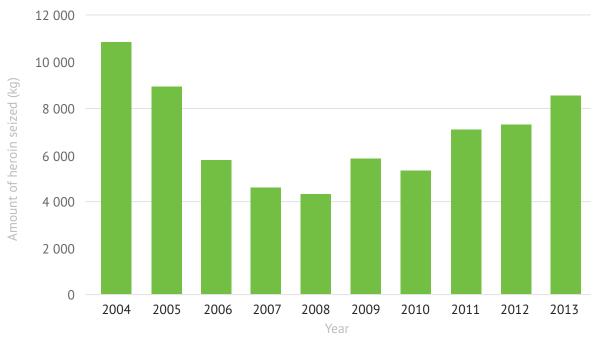
<sup>&</sup>lt;sup>190</sup> UNODC (2010). World Drug Report 2010, p.50. Vienna: United Nations publication.

<sup>&</sup>lt;sup>191</sup> Even more confusingly, at times traffickers seem to use western China as a transit zone between Pakistan and Central Asia. For example, in August 2011, Chinese authorities seized 591 kg of heroin from a vehicle in Xinjiang province, Western China, reportedly trafficked from Pakistan with the intended destination being Kazakhstan. It is difficult to define this as northern route or southern route. (UNODC DMP and IDS database, reported by WCO).

<sup>&</sup>lt;sup>192</sup> Presentation by Chinese officials at a workshop on "Afghan Opiate Trafficking through the Southern Route", Vienna (Austria), 24 March 2014.

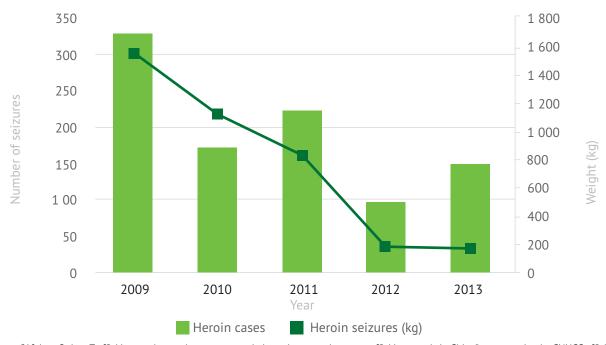
<sup>&</sup>lt;sup>193</sup> Council of the European Union, Report to the Mini-Dublin Group by the Australian Chair, "Regional report on South East Asia and China", October 2013, p.34.

Figure 34: Heroin seizures in China, 2004-2013



Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

Figure 35: Number and amount of annual Afghan heroin seizures in China, 2009-2013



Source: "Afghan Opiate Trafficking on the southern route: statistics, seizures and recent trafficking trends in China", presentation by CNNCC official for the regional workshop entitled "Afghan opiate trafficking on the southern Route", Vienna, Austria, March 2014.

At a regional level, seizure data suggests that Afghan heroin reaching ESEA uses both sea and air transport. Figure 36 shows the number of officially reported heroin seizures in East and South-East Asia between 2004 and 2013, in comparison with the global total. As a percentage of the global total, the region's share fluctuates significantly, between 7 per cent and 20 per cent. In 2012, heroin seizures in the region totalled 9,934 kg, equal to approximately 15 per cent of the global total. Most of the seizures were reported in China, Malaysia, Myanmar, Thailand and Vietnam.

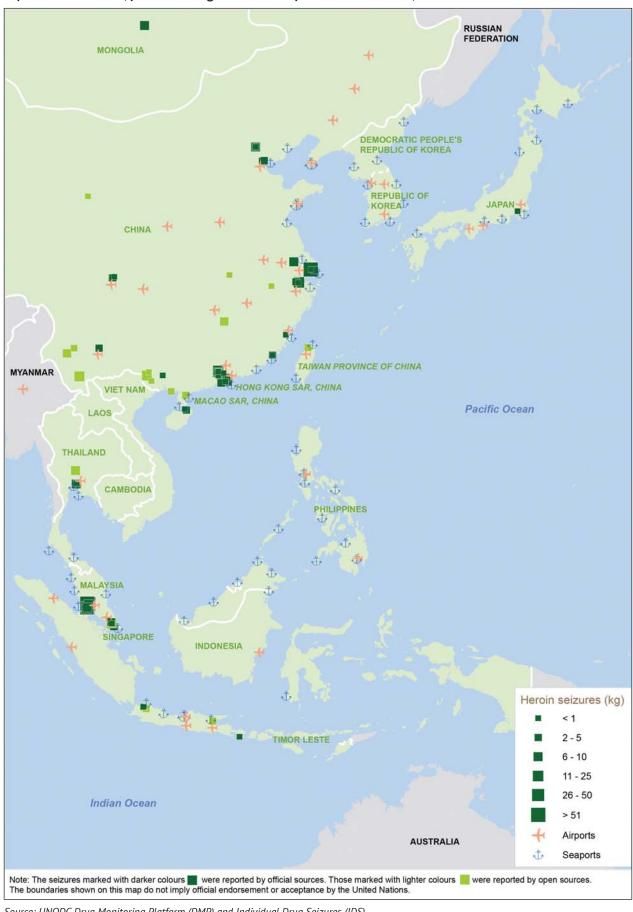
Figure 36: Heroin seizures in ESEA compared with global total, 2004-2013



Source: UNODC Annual Reports Questionnaire (ARQ) and database on estimates and long-term trend analysis (DELTA)

Map 22 shows the location of seizures involving heroin originating in Afghanistan that could be associated with the southern route. The reported seizures are concentrated in mainland China, Hong Kong, Indonesia, Japan, Malaysia, Mongolia, Singapore and Thailand. Most of these seizures were made at or close to transportation hubs, such as airports and seaports.

 $\label{eq:map22:Location} \mbox{Map 22: Location of heroin seizures associated with the southern route made in East and South-East Asia as reported to UNODC, presented in government reports and the media, 2010-2013$ 



Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

The most common sea routes seem to be originating from Pakistan.<sup>194</sup> By air, however, the web of trajectories moving heroin from Afghanistan, Pakistan and the Islamic Republic of Iran to ESEA are diverse, with three general patterns. First, heroin is trafficked through South Asian airports. Second, traffickers use air connections from Pakistan, Afghanistan and the Islamic Republic of Iran to the Middle East and Gulf region as transit points to ESEA destinations. Third, several seizures indicate that African countries are also transit points. The most commonly mentioned have been Tanzania and Ethiopia, and less frequently South Africa, Liberia and Togo. These consignments were either trafficked directly to ESEA or transited Qatar or Hong Kong. South-East Asia is not only a destination for the southern route; it is also a transit point. Data provided to UNODC suggests that a portion of the heroin seized in South-East Asia is intended for onward shipment, a primary destination being Oceania.<sup>195</sup> Chinese authorities also observe that South-East Asia is often used as a transit point for trafficking into China, particularly via mail and air travel.<sup>196</sup>

In the case of heroin being trafficked by mail, it usually departs from Afghanistan, Pakistan and India, with the most frequently reported destination being China. Other routes for heroin trafficked by mail have been from Afghanistan and Pakistan to Thailand, from India to Indonesia, from Afghanistan to Vietnam, and from Pakistan to Hong Kong. Table 13 and Table 14 show breakdowns of seizure data by regions of departure and destination.

Table 13: Seizures of heroin trafficked along the southern route destined for East and South-East Asia by region of departure, 2010-2013

Origin/departure region	No. of seizures	Amount of heroin seized (kg)	Distribution (%) of no. of seizures	Distribution (%) of amount of heroin seized
Pakistan	139	2,280	56 %	93 %
South Asia other than Pakistan	29	27	12 %	1 %
Africa	70	94	28 %	4 %
Middle East and Gulf States	10	38	4 %	2 %
TOTAL	248	2,439	100%	100%

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Table 14: Seizures involving heroin trafficked from East and South-East Asia along the southern route to external markets by destination, 2010-2013

Destination	No. of seizures	Amount of heroin seized (kg)	Distribution % of no. of seizures	Distribution % of amount of heroin seized
South Asia	2	4	3%	1%
Africa	2	2	3%	1%
Oceania	23	377	40%	89%
North America	10	18	17%	4%
Europe	20	21	34%	5%
Middle East and Gulf States	1	2	2%	0%
TOTAL	58	424	100%	100%

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

<sup>&</sup>lt;sup>194</sup> Presentation by Malaysian officials at a workshop on "Afghan opiate trafficking through the southern route", Vienna (Austria), 24 March 2014. For example, in September 2009, 147 kg of heroin found in a container (concealed in cotton yarns) were seized in China; see WCO and UNODC Container Control Programme, "Container Seizures for 2014".

<sup>&</sup>lt;sup>195</sup> UNODC Annual Report Questionnaire and Database on Estimates and Long-term Trend Analysis (DELTA).

<sup>&</sup>lt;sup>196</sup> Presentation by Chinese officials at a workshop on "Afghan opiate trafficking through the southern route", Vienna (Austria), 24 March 2014.

## 7.1 The southern route and the economic integration of Asia

Calculating the share of ESEA opiate use attributable to the southern route is challenging. The Government of China has estimated that 10-15 per cent of its heroin supply comes from Afghanistan.<sup>197</sup> This would roughly translate into an estimated 9-15 metric tons of Afghan heroin<sup>198</sup> trafficked into the country, according to a recent Chinese national survey.

For the broader population of opiate users in ESEA, the fluidity of supply chains seems likely to develop further. The many trajectories and nodes of trafficking routes reaching and transiting ESEA echo the creation of complex trade supply chains in the region and its economic integration, both internally and with other regions of the world. For example, in the ten years prior to October 2014, Pakistan saw imports from mainland China more than double, reaching 15.2 per cent, while its exports to China quadrupled, reaching 8 per cent. <sup>199</sup> This was in a period during which the overall exports and imports of Pakistan doubled. On a different note, the volume of air passenger traffic in Malaysia and Thailand is comparable to that in Beijing. <sup>200</sup>

The intensification and diversification of trade and travel routes between ESEA, South Asia, the Middle East and Africa likely reflect the trafficking routes that feed ESEA's opiate markets. Myanmar opiates still enjoy an advantage in terms of proximity, history and established relationships with many heroin retailers in ESEA, but southern route traffickers might still benefit from increased opportunities to deliver supplies throughout the region. Trade agreements that facilitate economic growth have also been helpful to transnational organized crime. The rapid growth of air connections provides logistical efficiency and an expanding menu of options for traffickers, with a corresponding challenge for drug law enforcement agencies.<sup>201</sup>

Table 15: Significant heroin seizures reported by Malaysia

Date	Origin/ transit country	Weight	Number and nationality of arrestees
15.07.2000	Dakiston	9.5 kg	3 Pakistani nationals
15.07.2009	Pakistan ———	26.2 kg	3 Pakislaili Ilalionals
14.05.2010	Malaysia	117.8 kg	3 Iranian nationals
06.04.2011	Malaysia	158.47 kg	2 Pakistani nationals
22.01.2012	Pakistan	40.219 kg	3 Pakistani nationals
21.05.2012	Nigeria	30.8 kg	1 Nigerian national
24.07.2047	Theilend	11.4 kg	3 Malaysian nationals
21.06.2013	Thailand ——	75.5 kg	2 Indian (Malaysian)

Source: Ministry of Home Affairs Malaysia

<sup>&</sup>lt;sup>197</sup> Presentation by CNNCC official at the southern route workshop, "Afghan Opiate Trafficking on the southern route: statistics, seizures and recent trafficking trends in China", Vienna (Austria), February 2014.

<sup>&</sup>lt;sup>198</sup> Presentation by CNNCC official at the southern route workshop, "Afghan Opiate Trafficking on the southern route: statistics, seizures and recent trafficking trends in China", Vienna (Austria), February 2014.

<sup>&</sup>lt;sup>199</sup> State Bank of Pakistan, "Exports (Balance of Payments) by all Countries and Imports (Balance of Payments) by all Countries", 21 November 2014, (available at: http://www.sbp.org.pk/ecodata/index2.asp#external)

<sup>&</sup>lt;sup>200</sup> Including both domestic and international aircraft passengers of air carriers registered in the country. Data obtained from the World Bank, "Air transport, passengers carried/year". (available at: http://data.worldbank.org/indicator/IS.AIR.PSGR).

<sup>&</sup>lt;sup>201</sup> The Pacific Asia Travel Association (PATA) predicts further massive growth in visitor numbers, for example of 17.7% annual average growth in Myanmar from 2014 to 2018, 13.2% in Cambodia and 27.5% in Thailand; PATA presentation of preliminary forecasts for the ASEAN Tourism Forum, "Asia Pacific Visitor Forecasts 2014-2018 Report", January 2014.

Malaysia has been very open in sharing data and seeking cooperation in counter-narcotics operations. A series of reports from Malaysia provide examples of ESEA's connections to the southern route for local use and onward trafficking of heroin. Until 2007, Malaysian authorities believed that heroin in the country was almost exclusively originating from Myanmar, but since then they began noticing it was being increasingly trafficked via the southern route from the Islamic Republic of Iran, and especially Pakistan.<sup>202</sup> Malaysia has also reported an increase in loosely organized Nigerian groups that deal in a variety of drugs, including Afghan heroin smuggled along the southern route.<sup>203</sup>

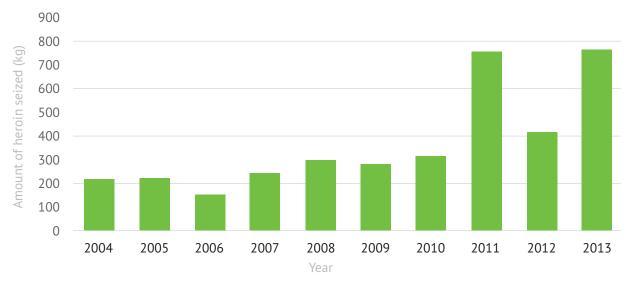


Figure 37: Heroin seizures in Malaysia, 2004-2013

Source: UNODC Annual Reports Questionnaire (ARQ) and database on estimates and long-term trend analysis (DELTA), Ministry of Home Affairs Malaysia (2013 data)

During two separate seizures in April 2011, 527 kg of heroin were intercepted in Malaysia. In the first case, 369 kg of heroin<sup>204</sup> were concealed in freight en route from Pakistan to Malaysia. In the second seizure, 158 kg of heroin were concealed in a box and were part of sea freight transiting Pakistan.<sup>205</sup> Later, in May 2012, 193 kg of heroin were seized at Karachi seaport, <sup>206</sup> followed by a seizure of 60 kg in October 2012 from a warehouse in Kelantan province in Malaysia.<sup>207</sup> The consignment had departed from Pakistan and was intended for the local Malaysian market – a Pakistani national was arrested as a result of this seizure.

More recently, in January 2013, 80 kg of heroin were seized<sup>208</sup> at a seaport in Selangor province, to the west of Kuala Lumpur. The consignment was being transported from Pakistan to Malaysia and the seizure resulted in the arrest of 11 people, including Mongolian nationals and nationals from West African countries. During the follow-up investigation, a further 10 kg of heroin was recovered through a seizure in March 2013 and 9 Nigerian nationals were arrested. Malaysian authorities have also noted the collaboration between Nigerian and Pakistani organized crime groups in smuggling heroin from Afghanistan to Malaysia with a view to trafficking it onward to Australia and China.<sup>209</sup> Meanwhile in Pakistan, 58 kg and 151 kg of heroin were seized in two separate instances in January 2013, and identified as container shipments destined to Malaysia.<sup>210</sup> In April of that same year, an additional 23 kg of heroin were seized following a container profiling at Karachi seaport. Finally, in 2014, 45 kg of heroin destined for Malaysia were seized at Karachi International container port.<sup>211</sup>

<sup>&</sup>lt;sup>202</sup> Presentation by Malaysian Customs at a workshop on "Afghan opiate trafficking through the southern route", Vienna (Austria), 24 March 2014.

<sup>&</sup>lt;sup>203</sup> Presentation by Malaysian Police at a workshop on "Afghan opiate trafficking through the southern route", Vienna (Austria), 24 March 2014.

<sup>&</sup>lt;sup>204</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by ANF, Pakistan.

<sup>&</sup>lt;sup>205</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by ANF, Pakistan.

<sup>&</sup>lt;sup>206</sup> WCO and UNODC Container Control Programme, "Container Control in Pakistan: seizures", 2014

<sup>&</sup>lt;sup>207</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by E-Drugs, Malaysia National Anti-Drug Agency.

<sup>&</sup>lt;sup>208</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by ANF, Pakistan.

<sup>&</sup>lt;sup>209</sup> Presentation by Malaysian officials at a workshop on "Afghan opiate trafficking through the southern route", Vienna (Austria), 24 March 2014.

<sup>&</sup>lt;sup>210</sup> WCO and UNODC Container Control Programme, "Container Control in Pakistan: seizures", 2014

<sup>&</sup>lt;sup>211</sup> Pakistan, Anti Narcotics Force, "Major seizures in October 2014" (available at: http://www.anf.gov.pk/majorsz.php?grp\_id=Oct-2014&currentItem=groupHQ).

According to the information available to UNODC,<sup>212</sup> Malaysia has also been a common departure point reported for heroin trafficking by mail, with a significant number of mail consignments containing heroin being seized in Canada and having transited the United States. Australia and European countries have also been destinations for heroin trafficked by mail from Malaysia, with consignments often transiting Germany and the Republic of Singapore.

## 7.2 Summary

The largest potential revenues for southern route traffickers in ESEA are to be found in China. The last decade has seen an increase in the prominence of Afghan supplies in Chinese heroin markets, with concrete examples of these being delivered via the southern route. Throughout ESEA, there are presumably trade-offs between southern route supplies and supplies from Myanmar. So long as Myanmar continues to produce opiates, it is reasonable to expect that southern route supplies will be complementary to supplies from Myanmar, not vice versa. Nevertheless, this still leaves opportunities for those importing and trans-shipping southern route heroin through the region. Developing cooperation with Pakistan is the most pressing priority in relation to this problem, with an additional need to strengthen cooperation with India and countries in the Gulf region to deal with southern route trafficking by air.

<sup>&</sup>lt;sup>212</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

## 8. Oceania

A small proportion of opiates trafficked along the southern route are destined to Oceania, primarily Australia. Data from the Australian Federal Police (AFP) suggests that the balance among sources of opiate supply to Australia is supple and capable of shifting quite rapidly. In addition, there is evidence of domestically produced<sup>213</sup> heroin on the market. As shown in Table 16, the country is a mixed market. Beginning in 2006-2007, the proportion of heroin from South-West Asia grew relative to that originating in South-East Asia. This balance then seesawed in 2009-2012 and the latest data seems to heavily favour South-East Asia. The southern route certainly appears capable of providing a significant proportion of the Australian heroin market, but can be crowded out by South-East Asian supplies. It also appears that both sources overlap in South-East Asian transit points, such as Malaysia. It is unclear whether shifts between sources of supply are the result of changing importer preferences, or perhaps due to discord among prominent individuals in charge of importing, who bring different connections to overseas suppliers.

Table 16: Geographical origin of heroin border seizures in Australia, 2005–2013<sup>215</sup>

Year	Proportion of heroin originating in South-East Asia (%)	Proportion of heroin originating in South-West Asia (%)	Unknown origin (%)
Jan-Jun 2013	93.6	6.4	-
2012	90.4	1.2	8.4
2011	39.4	60.6	_
2010	93.3	5.8	0.9
2009	48.2	40.9	10.9
2008	26.0	66.3	7.7
2007	47.9	50.6	1.5
2006	70.1	27.4	2.7
2005	78.9	18.0	3.1

Source: Australian Federal Police, Forensic Drug Intelligence, 2013. The percentages are calculated as proportions of total bulk weight of heroin seizures analysed by AFP.

In contrast to the fluctuating supply sources suggested in Table 16, opiate use in Australia and New Zealand appears relatively low and stable – 2012 estimates indicate the annual prevalence of opiate use in the region is at 0.2 per cent, or approximately 40,000 people. On the other hand, Oceania is a high-priced market for opiates, relative to Afghanistan and surrounding countries. The price differential between a kilogram of heroin sold in Australia (185,000 Australian \$ in 2012)<sup>216</sup> and one sold in Pakistan (4,068 US\$ in 2011) provides a clear illustration of the economics involved, in this scenario showing a kilogram of heroin in Pakistan increasing in price by at least 46 times once it is transported, diluted and prepared for sale on the street in Australia. The precise cost structure facing southern route traffickers targeting Oceania is not known, but the price differential suggests that it could be highly profitable for several intermediaries in the chain moving and distributing the product from Pakistan or the Islamic Republic of Iran.

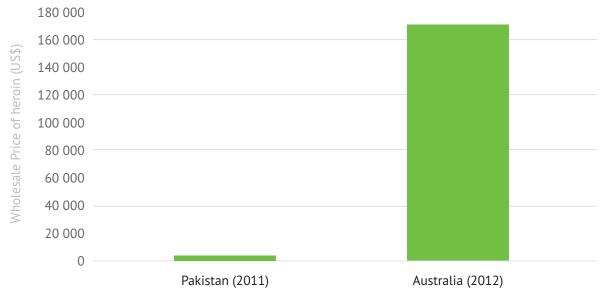
<sup>&</sup>lt;sup>213</sup> 'Homebake heroin' is a street substance created from pharmaceutical opiates such as morphine or codeine through a simple chemical process using acetic anhydride.

<sup>&</sup>lt;sup>214</sup> Australian Crime Commission website.

<sup>&</sup>lt;sup>215</sup> Of note, analysed seizures in 2010 and 2011 were influenced by single large seizures from South-East Asia and South-West Asia respectively. The significant influence of these 2 seizures on the profiling data demonstrates that strategic assessments of the market must be made with caution.

<sup>&</sup>lt;sup>216</sup> Australia, ARQ 2012, part IV.

Figure 38: US\$ per kg of wholesale heroin in Pakistan (2011) and Australia (2012)



Source: Australia, ARQ 2012; Pakistan, ARQ 2011; Note: figures are rounded; prices are not purity adjusted.

In 2011, Customs officials in Sydney reported a 27 kg seizure of heroin shipped from Pakistan.<sup>217</sup> Later that year, a consignment of opium and heroin was reportedly seized in Sydney, discovered in a cargo allegedly consisting of samovars flown from the Islamic Republic of Iran. Another seizure occurred that year at Port Botany in Sydney, consisting of 98 kg of heroin concealed within a shipment from the Islamic Republic of Iran said to be carrying red raisins.<sup>218</sup> In February 2012, an Iranian-born Australian citizen and an Australian-Iranian dual citizen were reportedly arrested in Sydney for smuggling heroin within juice boxes.<sup>219</sup> Seizures upstream are more rare. UNODC is aware of only one seizure of heroin in Pakistan that was reportedly destined for Australia. In September 2011, Pakistani officials recovered 7 kg of heroin powder from a consignment of furniture destined for Sydney, Australia, at the Peshawar dry port.<sup>220</sup>

Table 17: Selected seizures reported in Oceania involving opiates trafficked from Pakistan and the Islamic Republic of Iran, 2011-2012

Date	Drug	Amount (kg)	Transportation	Seized Country	Trafficked from
Mar-11	Heroin	27	Maritime	Australia	Pakistan
Jul-11	Opium	15	Air Freight	Australia	Islamic Republic of Iran
Nov-11	Heroin	98	Maritime	Australia	Islamic Republic of Iran
Feb-12	Heroin	50	n/a	Australia	Islamic Republic of Iran

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Note: the figures in this table have been rounded. Data for 2009-2010 and 2013 was unavailable at the time of writing.

Seizures reported in Oceania account for only a small percentage of the global total. With just under 4 per cent of the world's population in 2010,<sup>221</sup> its share of global heroin seizures by volume in 2012 was 1.5 per cent. Virtually all of these (99 per cent) were reported in Australia (Table 18). Officially reported seizures in Australia fluctuated between 2001 and 2009 (remembering that the proportion of Afghan heroin has varied). Since 2009 the total has grown noticeably, reaching 1,090 kg in 2012, which was almost double that recorded for 2011. Most seizures took place at seaports on the eastern coast of Australia, or at airports (See Map 23). According to Australian agencies,<sup>222</sup> despite a reduction in the number of heroin seizures in recent years, the weight of the consignments has been large.

<sup>&</sup>lt;sup>217</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

 $<sup>^{\</sup>rm 218}$  UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>219</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>220</sup> Information provided by Pakistan ANF, January 2015.

<sup>221</sup> United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Prospects: The 2012 Revision.

<sup>222</sup> Australian Crime Commission website; Australian Crime Commission 2013, "Illicit Drug Data Report 2011–12", ACC, Canberra, p. 65

Table 18: Heroin seizures in Oceania, 2009-2013 (kg)

Country	2009	2010	2011	2012	2013
Australia	194.5	513.5	609	1,090	428.84
New Zealand	0.04	0.02	0.3	0.002	0.016
TOTAL	194.5	513.5	609	1,090	429

Source: UNODC Annual Report Questionnaire and Database on Estimates and Long-term Trend Analysis (DELTA)

Map 23: Location of heroin seizures associated with the southern route made in Oceania as reported to UNODC, presented in government reports, 2010-2013



Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

By weight, 52 per cent of the heroin seized in Australia was transported by air, 33 per cent transported by sea and 15 per cent by mail.<sup>223</sup> Trafficking by sea has involved heroin hidden in furniture, appliances and food items; trafficking by air has involved heroin concealed as powder or liquid in tea, coffee, hair products and books.<sup>224</sup> In terms of the number of cases, the most frequently reported method of trafficking is by mail.

Patterns of trafficking by mail to Oceania provide a striking demonstration of the globalized trade in Afghan opiates and the convoluted links in the southern route chain. For example, in 2013 Australia reported that at least 13 per cent of heroin seized on its territory came from the Netherlands, which is not a heroin producing country but a recipient of Afghan heroin. For New Zealand, all of the six seizures of heroin registered departed from the Netherlands, four by air and two by mail. On the one hand, the trans-shipment of heroin through Europe to Australia highlights the flexibility of supply routes to meet lucrative demand. On the other, it also

<sup>&</sup>lt;sup>223</sup> Australia, ARQ 2013.

 $<sup>^{\</sup>rm 224}$  Australian Customs and Border Protection Service, "Annual report 2013-2014".

<sup>&</sup>lt;sup>225</sup> Australia, ARQ 2013.

<sup>&</sup>lt;sup>226</sup> New Zealand, ARQ 2014.

raises the point that the most attractive available option for traffickers serving southern route destinations is not always obvious and, from a purely logistical perspective, may present some inefficiencies. This may also indicate barriers to organizing simpler heroin supply chains stemming from factors external to pure logistics.

## 8.1 Summary

Heroin is trafficked into Australia from both South-West and South-East Asia. The analysis of seizure data shows a growth in the presence of heroin originating in South-West Asia beginning in 2006-2007, as compared to that coming from South-East Asia. There were fluctuations in this balance from 2009 to 2012 and the latest data from Australian authorities indicates that heroin originating in South-East Asia has a significantly larger presence in the illicit drug market. While a majority of the heroin headed to Australia was trafficked by air, trafficking of opiates through mail is also common, illustrating the globalization of the Afghan opiate trade.

# 9. Africa

Africa consists of several distinct subregions based on geography and other social, ethnic, historical and cultural factors. Many countries in Africa, especially in the Sub-Saharan part of the continent, are characterized by high population growth rates and high levels of poverty. Some of the countries in the region have faced enormous challenges in terms of governance and security. Moreover, ongoing conflicts and tension in several countries in East and West Africa make the region fragile and vulnerable to exploitation by organized criminal groups. On the other hand, the continent is developing economically,<sup>227</sup> with unique geographical and historical strengths, along with natural resource wealth. A third of the population of Africa has now entered the middle class.<sup>228</sup> Paradoxically, this can prove to be an ever-bigger incentive for traffickers who now have an increasing amount of potential drug users to whom they can sell, without having to continue trafficking onwards to Europe or other lucrative markets.

Heroin is not new in Africa, and has been trafficked to and from the continent since the 1980s in small but increasing quantities. As of 2009, this picture changed with a series of significant seizures seemingly indicating that the southern route had increased the flow of Afghan heroin into and within the region. Various countries, especially in East Africa, are geographically situated on the path from the heroin-producing region in South-West Asia to Europe. With coastlines dotted with ports, these countries are of strategic importance as transit areas for heroin trafficked along one branch of the southern route. This chapter examines how the Southern route interacts with different regions of Africa – primarily Eastern and Southern Africa on one hand and West and Central Africa on the other.

Heroin seizures in Africa have increased markedly in recent years. In 2012, seizures totalled 674 kg, compared with 716 kg in 2011 and 684 kg in 2010. This is in addition to large seizures made at sea en route to Africa. Based on the seizure cases available, seizures made in East and West Africa involved heroin primarily trafficked by sea and air, while seizures made in the Northern and Southern parts of the region involve heroin primarily trafficked by land.<sup>229</sup>

Map 24 illustrates seizure data for all of Africa. Based on the seizure cases available, seizures made in East and West Africa involved heroin primarily trafficked by sea and air, while seizures made in North Africa involve heroin primarily trafficked by land.<sup>230</sup> Maritime-based trafficking to West Africa occurs largely through the use of containers, while boats and dhows are the preferred mode of transportation of heroin trajectories into East Africa. Finally, North Africa is relatively isolated from African intraregional trafficking with regard to heroin, partly because it is much less dependent on the maritime southern route and receives most of its heroin from a southern branch of the Balkan route, which passes through the Middle East.

<sup>&</sup>lt;sup>227</sup> Statement submitted by Takyiwaa Manuh Director, Social Development Policy Division, United Nations Economic Commission for Africa at Forty-Seventh Session of the Commission on Population and Development, April 2014.

<sup>&</sup>lt;sup>228</sup> AfDB, "The middle of the pyramid: dynamics of the middle class in Africa", Market Brief, April 2011.

<sup>&</sup>lt;sup>229</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Further details about the seizures and modes of trafficking are in the subsequent sections.

<sup>&</sup>lt;sup>230</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

and the media, 2010-2013 1 MOROCCO ALGERIA LIBYA EGYPT MAURITANIA MALI NIGER SUDAN CHAD SENEGAL NIGERIA SOMALIA CENTRAL SOUTH D'IVOIRE ETHIOPIA AFRICAN SUDAN LIBERIA CAMEROON REPUBLIC UGANDA-CONGO DEM. REP. OF THE CONGO UNITED REP. SEYCHELLES OF TANZANIA ANGOLA ZAMBIA Heroin seizures (kg) <10 11 - 25 NAMIBIA BOTSWANA 26 - 50 Réunion (FRANCE) 51 - 100 101 - 250 SWAZILAND > 251 SOUTH AFRICA Airports 210 Seaports

Map 24: Location of heroin seizures made in Africa as reported to UNODC, presented in government reports

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The final boundary between the Sudan and South Sudan has not yet been determined.

Note: The seizures marked with darker colours were reported by official sources. Those marked with lighter colours were reported by open sources

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

Overall, opiate use in Africa is estimated at the same level as the global average with estimates of regular heroin users ranging between 190,000 and 300,000 in Southern Africa (0.2 – 0.4 per cent of the adult population) and between 420,000- 1,120,000 in West and Central Africa (0.2 – 0.5 per cent of the adult population). Mauritius, Kenya, Nigeria, and South Africa remain the countries with the highest prevalence of opiate use in Africa. However, in recent years, in parallel to the increase in heroin trafficking to Africa, increasing use of heroin and drug injecting have been reported in several countries in Eastern and Southern Africa, particularly Kenya, Mauritius, Seychelles and the United Republic of Tanzania and to a lesser extent South Africa. Both in Kenya and Tanzania, a higher level of heroin use is reported in towns or areas located near the coast. Overall in Sub-Saharan Africa, 1.78 million drug users (range: 535,000 – 3,022,500) are estimated to be injecting drugs and an estimated 221,000 injecting drug users (range: 26,000 – 572,000) are living with HIV.

<sup>&</sup>lt;sup>231</sup> UNODC (2013). World Drug Report 2013, Annex 1, p.4. Vienna: United Nations publication.

<sup>&</sup>lt;sup>232</sup> UNODC (2013). World Drug Report 2013, p.11. Vienna: United Nations publication.

<sup>&</sup>lt;sup>233</sup> There are signs that heroin use is most significant on the Swahili Coast (including Zanzibar) and in Nairobi; see UNODC ROEA response to the request for assistance by Tanzania in the implementation of national response measures to combat and address trafficking in persons and illicit drug trafficking, Dar es Salaam, Tanzania, August 2013.

<sup>&</sup>lt;sup>234</sup> UNODC (2013). World Drug Report 2013, p.18. Vienna: United Nations publication.

heroin use and injecting may exacerbate the already precarious situation of HIV and AIDS in Africa. As reported in regards to treatment demand from countries in the region, heroin also remains the second primary drug, after cannabis, for which most drug users have been seeking treatment.

Possibly potentiating this situation is the growing evidence that tramadol, an analgesic opioid not under international control, is being trafficked into West Africa and Egypt. According to experts, the use of tramadol has greatly increased, especially in the Sahel region. Although the prescribed dosage usually does not exceed 50 mg, recent seizures in the region are generally in high dosages of 100-250 mg. According to data provided by a number of Indian ports and airports, 157 shipments of unauthorized tramadol took place from India to West Africa in 2012. The shipments increased to 882 in 2013 - a 560 per cent increase compared to 2012 - while between January and mid-April 2014, 232 shipments were reported. The main points of destination or transit of tramadol in West Africa appear to be Benin, followed by Nigeria, Ghana, Togo, Niger, Sierra Leone, Cameroon and Côte d'Ivoire. Approximately 900 shipments of tramadol were seized in these countries between January 2012 and mid-April 2014. Tramadol seized in Ghana and Benin was destined for Niger. In 2012, 153 tons of tramadol were seized by the customs services in Benin and Togo as part of a series of 32 shipments. In 2013, Benin alone reported the seizure of 55 tons over ten operations; the drugs were destined once again for Niger. Tramadol was concealed in shipping containers from India. Misuse of tramadol has created a situation of dependency in many users and may become a public health problem in the years to come, <sup>235</sup> particularly if users decide to switch to another opioid like heroin.

#### 9.1 Eastern and Southern Africa

Narcotics-smuggling routes and methods across Africa are less well known than in other parts of the world. Historically, heroin was known to reach East Africa using air routes.<sup>236</sup> Commercial air couriers and in some cases flight crews made use of airlines from Eastern Africa, therefore transiting the region, as they made their way to European markets.<sup>237</sup>

However, movements of large shipments of heroin from South-West Asia across the Indian Ocean to East and Southern Africa may have become more apparent, based on recent seizures; such movements had been suspected for decades.<sup>238</sup> The majority of these shipments presumably count Western and Central Europe as their final destination, with relatively small but growing local markets,<sup>239</sup> appearing to be both a consequence and a cause of the trade.

Dhows - traditional trading vessels from Arab and South Asian countries -<sup>240</sup> are known to be used for trafficking opiates between South-West Asia and Kenya and Tanzania<sup>241</sup>. However, recent increases in law enforcement may have pushed some of this trade further south to Mozambique and South Africa (Map 25). Once the cargo is offloaded, a variety of means and routes are used to traffic heroin through Eastern and Southern Africa and further to its final destination.

<sup>&</sup>lt;sup>235</sup> "Current situation with respect to subregional and regional cooperation in countering drug trafficking", Twenty-fourth Meeting of Heads of National Drug Law Enforcement Agencies, Africa Addis Ababa, 15-19 September 2014.

<sup>&</sup>lt;sup>236</sup> UNODC (2009), "Organized Crime and Trafficking in Eastern Africa: a discussion paper". Vienna: United Nations publication.

<sup>&</sup>lt;sup>237</sup> UNODC (2013), "Threat Assessment for Eastern Africa". Vienna: United Nations publication.

<sup>&</sup>lt;sup>238</sup> United States Drug Enforcement Administration, "Drug trafficking from Southwest Asia: drug intelligence report", 1994.

<sup>&</sup>lt;sup>239</sup> UNODC (2014). World Drug Report 2014, p.27. Vienna: United Nations publication.

<sup>&</sup>lt;sup>240</sup> Dhow is the standard name used to describe various different types of traditional sailing vessels with one or more masts used in the Red Sea and the Indian Ocean; See http://nabataea.net/ships.html

<sup>&</sup>lt;sup>241</sup> UNODC (2013), "Transnational Organized Crime in Eastern Africa: A Threat Assessment", p. 23. Vienna: United Nations publication.

Map 25: Heroin maritime routes to Eastern and Southern Africa

IRAQ

IRAMISTAN

PAKISTAN

OMAN

SUDAN

YEMEN

SOUTH SUDAN

SOUTH SUDAN

KENYA

MOZAMBIQUE

UNITED REP. OF TANZANIA

MALAWI

DEM. REP. OF THE CONGO

Onwards to West Africa

BOTSWANA

SOUTH AFRICA

ZAMBIA

ZIMBABWE

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. The final boundary between the Sudan and South Sudan has not yet been determined.

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

Source: UNODC elaboration, based on seizure data from Drug Monitoring Platform (DMP), Individual Drug Seizures (IDS) and ARQ, supplemented by national government reports and other official reports.

Main producing country

Heroin flows

#### Sea routes to Africa

In the late 1990s a number of countries in East and Southern Africa, including Tanzania, Kenya, South Africa and Mozambique, were identified as trans-shipment points for transnational drug routes. <sup>242</sup> The major maritime heroin trafficking route for the region is from the Makran Coast of Baluchistan in the Islamic Republic of Iran and Pakistan, to the Swahili Coast of Eastern Africa. The importance of this route has become apparent since large seizures were made onshore in Tanzania in 2010 and offshore by an international naval coalition, the Combined Maritime Forces (CMF)<sup>243</sup>, since 2012. Dhows<sup>244</sup> are used as mother ships to traffic heroin consignments, which in several cases have been over 500 kg and up to 1,000 kg. UNODC is not aware of any seizures of heroin on the coastlines of Pakistan or the Islamic Republic of Iran moving to East Africa, which suggests that interdiction is limited to the high seas.

The offshore course taken by the trafficking dhows runs south, keeping offshore to avoid the threat of piracy off the coast of Somalia before turning into the coast.<sup>245</sup> The Combined Maritime Forces have tracked trafficking dhows directed to Kenya, Tanzania and on a course towards Mozambique.<sup>246</sup> In 2014, the multinational naval partnership effectuated more than 10 seizures for a combined total of more than 16,000 kg of hashish and more than 2,200 kg of heroin. This amount is greater than the total reported heroin seizures for all of Africa between 2010 and 2012, and equivalent to more than 40 per cent of heroin seizures for all of Western and Central Europe in 2012.

Map 26 shows heroin seizures made by the Combined Maritime Forces from 2010 to May 2014 on the Indian Ocean; a clear path headed south along the East African coastline is evident. In total, over 4 tons of heroin were seized including a record seizure involving 1,032 kg in April 2014. The large shipments are generally hidden in dhows among other cargo. The size and lack of sophistication of these operations suggest that a prior absence of law enforcement in the region had made this a relatively safe route for traffickers to quickly move large quantities of opiates out of Pakistan and the Islamic Republic of Iran. It also suggests that high-level traffickers orchestrating these shipments may have less to fear from law enforcement agencies than their counterparts in the same position in Pakistan and the Islamic Republic of Iran.

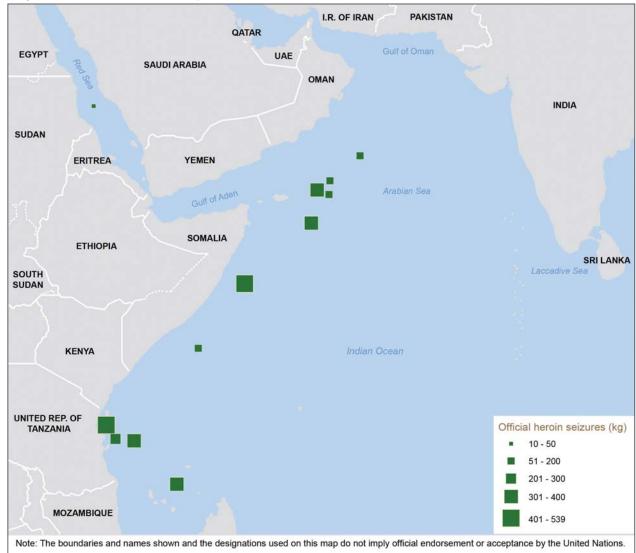
<sup>&</sup>lt;sup>242</sup> Institute for Security Studies (2010), "Organized crime in Southern Africa", p. 4

<sup>&</sup>lt;sup>243</sup> Combined Maritime Forces (CMF) is a multi-national naval partnership that promotes security, stability and prosperity across approximately 2.5 million square miles of international waters, which encompass some of the world's most important shipping lanes. Further information is available at: http://combinedmaritimeforces.com/

<sup>&</sup>lt;sup>244</sup> Dhow is the standard name used to describe various different types of traditional sailing vessels with one or more masts used in the Red Sea and the Indian Ocean; see "The history and construction of the dhow" (available at: http://nabataea.net/ships.html)

<sup>&</sup>lt;sup>245</sup> Council of the European Union, "2012 Dublin Group country report on Mozambique" (15457/12), , Brussels, 2012.

<sup>&</sup>lt;sup>246</sup> "Jane's Intelligence Review," IHS Defence Magazines, May 2014



Map 26: Heroin seizures made by the Combined Maritime Forces, 2010-2014

Source: Combined Maritime Forces (CMF)

Table 19: Record heroin seizure on the Indian Ocean

Date	Amount	Method	Route	Remarks
21 April 2014	1032 kg	Dhow	Pakistan-Tanzania	Result of information sharing between Pakistan ANF and UNITED KINGDOM NCA and CMF





Source: ANF (Anti Narcotics Force), Combined Maritime Forces (CMF)

Forensics testing on seizures<sup>247</sup> in the Indian Ocean show adulterated heroin that still manages to retain a high level of purity, between 55 and 65 per cent. This entails that the purity level of heroin leaving the laboratory would be higher. The presence of adulterants in the seized heroin is not surprising, given that this practice has been reported in Afghanistan since the 1990s.<sup>248</sup> Data on reported seizures in countries receiving Afghan heroin, as well as in Afghanistan itself,<sup>249</sup> suggest that a proportion of Afghan heroin continues to be adulterated - or cut - either at the point of manufacture or by wholesale traffickers. From a law enforcement perspective, the identification of adulterants may help establish not only adulterant routes to processors, but also heroin routes. That process would require enhancing regional forensic capacity and stimulating information-sharing between regional agencies.

Table 20: Composition of heroin seized in the Indian Ocean, 2012-2013

Date	Amount	Purity
13-Apr-12	182 kg	59.5% (+/-2.7%) & 60.8% (+/-2.8%) (2 samples) Heroin Hydrochloride & caffeine & Methorphan.
29-Mar-13	500kg	57.7% (+/-2.7%) Heroin Hydrochloride & caffeine & Methorphan
6-May-13	317kg	57.7% (+/-2.7%) Heroin Hydrochloride & caffeine & Methorphan.
14-May-13	195kg	64.0% (+/-2.8%) Heroin Hydrochloride & caffeine & Methorphan

Source: Combined Maritime Forces (CMF)

Based on the limited data available to UNODC, the Afghan heroin tested by the Counter-Narcotics Police of Afghanistan (CNPA) in 2011 has been adulterated and is of low quality (see chapter on Afghanistan). This immediately contrasts with the heroin seized on the Indian Ocean which, based on five seizures, appears to be of high purity. Another interesting finding is that all seizures consist of heroin hydrochloride, which appears to be rarer than brown heroin in Europe<sup>250</sup> and which, in Western and Central Europe, is only reported by some Scandinavian countries, France<sup>251</sup> and Italy,<sup>252</sup> while most countries do not distinguish when reporting.

Figure 39: Dhow docking at Mombasa seaport



Source: UNODC, March 2012.

<sup>&</sup>lt;sup>247</sup> Presentation by Combined Maritime Forces officials at a workshop on "Afghan Opiate Trafficking through the southern route", Vienna (Austria), 24 March 2014.

<sup>&</sup>lt;sup>248</sup> United Nations International Drug Control Program (UNDCP), (1998), Afghanistan Strategic Study #2, "The Dynamics of the Farmgate Opium Trade and the Coping Strategies of Opium Traders", p. 18.

<sup>&</sup>lt;sup>249</sup> UNODC (2012), Initial Assessment Report on the Capabilities of the Forensic Drugs Laboratories in Afghanistan, Pakistan and the Central Asian Republics. Vienna: United Nations publication.

 $<sup>^{\</sup>rm 250}$  Monitoring the supply of heroin to Europe, EMCDDA, 2008, p.5

<sup>&</sup>lt;sup>251</sup> According to EMCDDA data, only Denmark, Sweden and France report white heroin purity. See details on purity provided by EMCDDA under http://www.emcdda.europa.eu/data/2014#displayTable:PPP-6-1

 $<sup>^{\</sup>rm 252}$  Italy, ARQ 2013, part iv.

Onshore, both Tanzania and to a lesser extent Kenya started seizing significant quantities as of 2010 (Figure 40). Most of the heroin was reported to departing from the Islamic Republic of Iran and Pakistan, although India was also mentioned as a departure country.

Table 21: Heroin seizures in Southern and East Africa greater than 50 kg, 2009-2013

Date	Amount (kg)	Country	Location	Trafficking method
13/09/2009	115	South Africa	Durban	Warehouse
8/03/2010	95	Tanzania	Tanga	Vehicle
18/12/2010	50	Tanzania	Tanga	Vehicle
21/02/2011	179	Tanzania	Dar es Salaam	Maritime
24/03/2011	102	Kenya	Mombasa	Vehicle
7/09/2011	67	Tanzania	Dar es Salaam	Maritime
12/01/2012	211	Tanzania	Lindi	Maritime
26/07/2012	396	Somalia	Indian Ocean (International Waters)	Maritime
3/03/2013	590	Mozambique	Namoto	Vehicle
15/08/2013	186	Tanzania	Dar es Salaam	Air

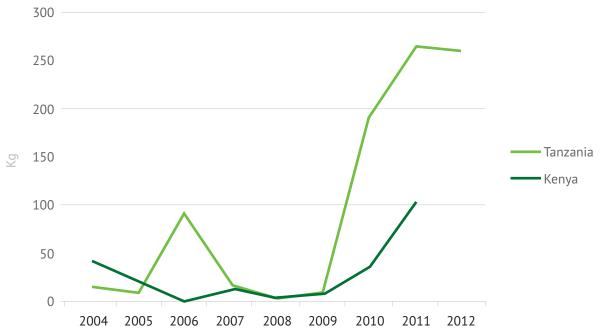
Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Heroin seizures from the maritime dhow route have been made onshore in Kenya and Tanzania, but not in Mozambique. A series of onshore seizures took place in Kenya and Tanzania between 2010 and 2012 when six large interceptions, totalling just over 700 kg, were made. The landing points of these shipments appear to have progressively moved south, in an apparent attempt to evade law enforcement, down to the Mozambique border. Given this trend, it cannot be excluded that shipments are already reaching Mozambique undetected.

In Eastern Africa traffickers from the coastal towns are involved in landing heroin consignments that arrive on the maritime route and handling these consignment onshore. Small boats typically collect the heroin and bring it ashore, a role that would be difficult for foreign traffickers unfamiliar with the coastline, local languages and security patrols. The considerable scale of the heroin flow on the maritime route to Eastern and Southern Africa may, however, have increased the prominence of organized crime groups in the region. Several large-scale seizures have counted Iranian, Pakistani and other foreign nationals among the arrestees.<sup>253</sup>

<sup>&</sup>lt;sup>253</sup> For example, on 30 October 2014, Tanzanian law enforcement arrested 13 Iranians in a dhow in territorial waters with 41 kg of heroin; information provided by the President's Office State House, November 2014.

Figure 40: Heroin seizure in Tanzania and Kenya, 2004-2012



Note: data was not available for 2012 for Kenya

Source: UNODC Database on Estimates and Long Term Trend Analysis.

While dhows make up the majority of interdictions, there appears to be a number of traffickers utilizing ships. On 2 July 2014, as a result of information sharing between ANF Pakistan, NCA of the United Kingdom and Kenyan authorities, a vessel originating in the Islamic Republic of Iran was intercepted and some 341 kg of heroin were seized.

Table 22: Record heroin seizure at Mombasa, 2014

Date	Amount	Method	Route	Remarks
02 July 2014	341.70 kg.	ship	Bandar Bushehr(Islamic Republic of Iran)-Karachi- Somalian Port of Mogadishu - Mombasa	intercepted by the Kenya Navy off the Lamu coast, some 350 km north of Mombasa.



Source: ANF, CMF

In addition to the dhows and ships, Eastern and Southern Africa have notable sea and inland container ports. To date, seizures at container ports have been limited, which may indicate a lack of enforcement. A 2010 Institute of Security Studies (ISS) report claims that large amounts of heroin concealed in containers are trafficked into mainland Africa via the Indian Ocean.<sup>254</sup> Moreover, in northern Mozambique, shipping containers have recently become more prominent, replacing traditional dhow trading routes from the Islamic Republic of Iran, Pakistan

 $<sup>^{254}</sup>$  Institute of Security Studies (ISS), "Organized crime in Southern Africa. First annual review", 2010, p.31/32.

and India to Eastern Africa.<sup>255</sup> As container ports expand and develop, the risk of them being misused by heroin traffickers will increase, particularly given the effective enforcement efforts against the dhows in the Indian Ocean. The only evidence of container trafficking to East or Southern Africa available to UNODC involves two seizures. The first concerns 44 kg of heroin bound for South Africa in February 2013 seized by Port Control Units (PCU) officials in Karachi, a shipment declared as towels;<sup>256</sup> the second, in December 2013, was a seizure of 375 kg of heroin at Qasim International Container Terminal, in Pakistan, also destined for Uganda.<sup>257</sup> This does not, however, preclude that much greater opiate trafficking is taking place via containers through East and Southern Africa.

To date, significant drug trans-shipment has not been indicated in other countries in Southern Africa beyond Mozambique and South Africa. However, Namibia is considered vulnerable to maritime trafficking given the country's port infrastructure and proximity to South Africa.<sup>258</sup>

#### Land and air movements

In contrast to reports of multi-ton maritime drug shipments transiting the region, officially reported drug seizures on land are minimal. Seizure data available for the region is heavily skewed towards inbound shipments from the Islamic Republic of Iran and Pakistan and intraregional movements. This obscures information on the final destination of the heroin that transits the region.

Tanzania would appear to be a major departure point. In 2012, World Customs Organization (WCO) data recorded 42 cases globally (totalling 1,342 kg) involving Tanzania as a departure country.<sup>259</sup> From the main Kenyan airport, the picture is a mixed one with West Africa appearing as a major destination.

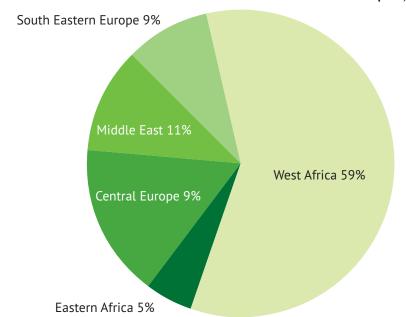


Figure 41: Reported destination of heroin seizures at Nairobi International Airport, 2011-2013

Source: UNODC Regional Office for Eastern Africa

Data on the extent of heroin use in the region are scarce and contradictory, but existing data suggests the presence of a market for 2.5 tons of pure heroin per year, worth some US\$160 million. The volumes trafficked to the region are estimated to be much larger, up to 22 tons, suggesting that up to 90 per cent of heroin is bound for trans-shipment.<sup>260</sup>

<sup>&</sup>lt;sup>255</sup> Oil Review Africa, "Bolloré Africa Logistics plans Mozambique port expansion", 25 March 2013.

<sup>&</sup>lt;sup>256</sup> WCO and UNODC Container Control Programme, "Container Control in Pakistan: seizures", 2014.

<sup>&</sup>lt;sup>257</sup> Customs Today, "375 kg of heroin seized from container at QICT", 4 December 2013

<sup>&</sup>lt;sup>258</sup> Namibia, "International Narcotics Control Strategy Report" (INCSR), 2010.

<sup>&</sup>lt;sup>259</sup> World Customs Organization (2012), "Illicit Trade Report 2012", p.45.

<sup>&</sup>lt;sup>259</sup> Spain, ARQ 2011, part iv

<sup>&</sup>lt;sup>260</sup> UNODC (2013), Transnational Organized Crime in East Africa: a threat assessment, p.4. Vienna: United Nations publication.

The limited seizure data available also point to limited capacity or motivation of law enforcement to investigate drug trafficking groups onshore. Information on common routes and methods used to smuggle heroin from arrival ports to final destination is almost non-existent. There are anecdotal reports that drug traffickers use the same transnational crime networks used for migrant smuggling, human trafficking and the trafficking of wildlife products, but there is no concrete evidence of these practices.

The absence of any large-scale seizures on land suggests that direct trans-shipments of large quantities to final destinations in Europe are not being detected or that they are broken down into smaller shipments upon arrival in Eastern and Southern Africa, before further trafficking and distribution. In 2012, the Dublin Group reported that large drug consignments arriving in Mozambique were being broken down before onwards shipment, pointing to the presence of warehouse facilities in the region.<sup>262</sup> This was also supported by the discovery of warehouse facilities in Durban in 2009. Mid-size seizures in the United Kingdom have also indicated Mozambique and South Africa as transit points.<sup>263</sup> Perhaps the best evidence of storage in the region concerns the shipping of a container transporting 864 kg of heroin from Malawi to the Netherlands, and which was seized in Belgium in 2013. The container had reportedly arrived in Malawi empty and was loaded in the country before continuing to Mozambique and further to Belgium.<sup>264</sup>

Table 23: Heroin seizure in South Africa destined to the United Kingdom

Date	Amount	Method	Route	Remarks
October 2009	116 kg in South Africa (additional 265 kg seized in London)	Air freight	South Africa- United Kingdom	Along with the heroin, police in Durban, South Africa seized 1500kg of compressed cannabis and 6 tons of hashish in storage.





Source: Directory for Priority Crime Investigation of South Africa, January 2015

Small sporadic seizures of heroin have also been made at land borders between Eastern and Southern African countries (Table 21). These smaller seizures are likely intercepting supply for domestic markets in the region and smaller operations transporting heroin to Europe by air. Of the data available to UNODC, many of the interceptions were of heroin trafficked south from Tanzania to South Africa. In South Africa, the drug trade has primarily been controlled by Nigerian nationals, followed by Pakistani and Indian syndicates.

<sup>&</sup>lt;sup>261</sup> Council of the European Union, "2012 Dublin Group country report on Mozambique" (15457/12), , Brussels, 2012, p.8.

<sup>&</sup>lt;sup>262</sup> The 2012 Dublin Group report stated: "These figures are borne out by a number of multi-kilo seizure and arrest operations in 2010 that have taken place in South Africa, United Kingdom and Canada involving all three commodities"; see also Department of State, INCSR (2006), Volume I, p. 507: "Many drug liaison officers, as well as South African Police Service officers, believe that South Africa is becoming a place for traffickers to warehouse their stocks of various drugs before sending them on to other countries."

<sup>&</sup>lt;sup>263</sup> South African Government News Agency, "Cabinet welcomes SA-British cooperation on drug bust" (available at: http://www.sanews.gov. za/features/cabinet-welcomes-sa-british-cooperation-drug-bust); see also BBC, "South African Hawks in drugs bust" (available at: http://news.bbc.co.uk/1/hi/8259456.stm).

<sup>&</sup>lt;sup>264</sup> Information provided by Belgian Customs, February 2014.

<sup>&</sup>lt;sup>265</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

 $<sup>^{\</sup>rm 266}$  Department of State, INCSR (2006), Volume I, p.504.

Interceptions at various Southern and Eastern African airports point to an array of movements that can be categorized into three primary groups. First, flights out of those regions to destinations that include China, Hong Kong, <sup>267</sup> Thailand, Greece, Italy and the United Arab Emirates. Second, flights within Africa, generally from Kenya or Tanzania to South Africa, Mauritius or various countries in West Africa such as Nigeria, Liberia, Ghana, and Togo; and third, flights into East and Southern Africa from South-West Asia – here flights came from Pakistan, the Islamic Republic of Iran and South Asia to Kenya, South Africa and Swaziland. <sup>268</sup> No seizures were made in destination markets which are linked to heroin shipments travelling out of Africa by sea, even though other drugs are at times shipped out of the region in containers. <sup>269</sup>

ZIMBABWE NAMIBIA MOZAMBIQUE BOTSWANA REHOBOTH PRETORIA MBABANE JOHANNESBURG MANZINI ETERMARITZBURG (ULUNDI) LESOTHO SOUTH AFRICA Heroin seizures (kg) 2009 - 2013 < 5 6 - 10 EAST LONDON 11 - 20 21 - 50 CAPE TOWN Note: The seizures marked with darker colours me were reported by official sources. Those marked with lighter colours ewere reported by open sources. The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

Map 27: Location of heroin seizures in South Africa as reported to UNODC, presented in government reports or in the media, 2009-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

#### 9.2 West and Central Africa

West and Central Africa suffers from a combination of economic, social and political factors that make it vulnerable to organized crime.<sup>270</sup> West Africa has been known primarily as a departure region of small-scale heroin trafficking involving couriers.<sup>271</sup> Late in the 2000s, several large shipments of heroin trafficked in sea containers or as air freight were seized in West Africa,<sup>272</sup> suggesting that traffickers are now able to improve the logistics of trafficking and move much larger quantities. In addition to serving as a key transit point, West and Central Africa has a significant domestic market for heroin with a prevalence rate of heroin use of 0.4 per cent - the highest in Africa.<sup>273</sup> This would represent approximately 1,000,000 users.<sup>274</sup> If each user were abusing an estimated 27.6 g per year,<sup>275</sup> consumption would equal 27.6 tons annually.

Heroin seizures in West Africa have shown significant year-on-year variation, with an increasing trend from 2008 onwards (Figure 42). In the global context, total quantity of heroin seized in West and Central Africa is generally

<sup>&</sup>lt;sup>267</sup> Hong Kong, ARQ 2013; WCO Regional Intelligence Liaison Office for Asia and the Pacific, "Analysis Report," 2nd issue of 2013, p.24.

<sup>&</sup>lt;sup>268</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

<sup>&</sup>lt;sup>269</sup> For example, in 2011 authorities at Antwerp, Belgium seized 4,150 kg of herbal cannabis that had departed from the Tema Port in Ghana. See UNODC-WCO Container Control Programme, "2011 report", p.11.

<sup>&</sup>lt;sup>270</sup> UNODC (2009), Transnational Trafficking and the Rule of Law in West-Africa: a Threat Asssessment. Vienna: United Nations publication.

<sup>&</sup>lt;sup>271</sup> UNODC (2013), Transnational Organized Crime in East Africa: a threat assessment, p. 19. Vienna: United Nations publication.

<sup>&</sup>lt;sup>272</sup> UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

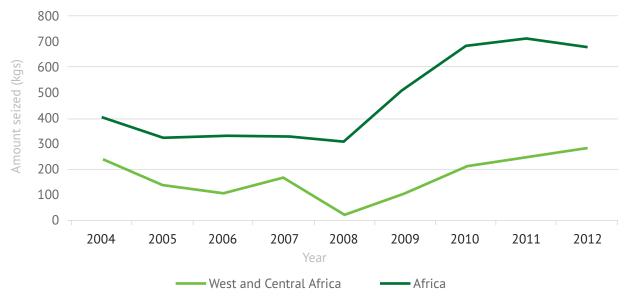
<sup>&</sup>lt;sup>273</sup> UNODC (2014), World Drug Report 2014, Annex 1, p.x. Vienna: United Nations publication.

<sup>&</sup>lt;sup>274</sup> UNODC (2014), World Drug Report 2014, Annex 1, p.x. Vienna: United Nations publication.

 $<sup>^{\</sup>rm 275}$  UNODC (2005), World Drug Report 2005, p. 133. Vienna: United Nations publication.

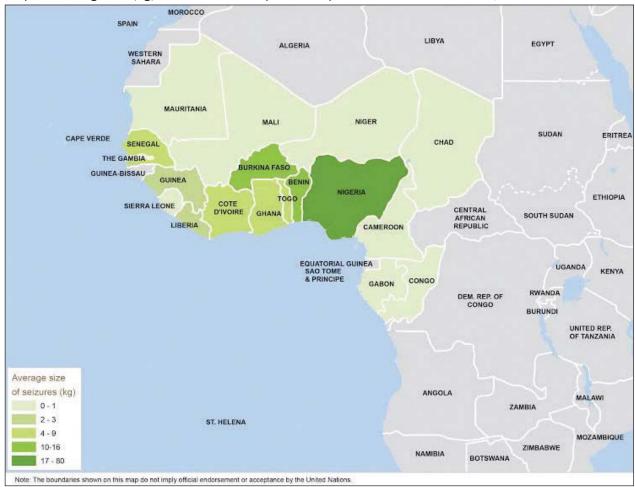
low. If treated as a single space, the region accounts for less than 0.4 per cent of the total quantities seized worldwide in 2012. When compared with total seizures in Africa, however, West and Central Africa accounts for approximately one third of the amount of heroin intercepted on the continent<sup>276</sup> (Figure 42).

Figure 42: Heroin seizures in West and Central Africa as compared to heroin seizures across Africa, 2004-2012



Source: UNODC DELTA DATABASE (2013 figures were unavailable at the time of writing)

Map 28: Average size (kg) of heroin seizures per country in West and Central Africa, 2010-2013



Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The final boundary between the Sudan and South Sudan has not yet been determined.

Source: UNODC Database on Estimates and Long-term Trend Analysis (DELTA)

 $<sup>^{\</sup>rm 276}$  This excludes the CMF seizures between South-West Asia and East Africa.

Seizure data for the region, illustrated in Map 28, suggests that Nigeria is the epicentre of the heroin nexus in West Africa. However, drug traffickers exploit the region's geographic, political and economic vulnerabilities. Many opiates flow through Benin and into Nigeria for further distribution in destination markets, which also include countries of the African continent. Indeed, some observers have noted the emergence of an African market for cocaine and heroin, pushed by traffickers who want to diversify their sales by creating a new market targeting the nascent middle class of Africa in particular.<sup>277</sup> In Benin, traditionally a transit country, it now appears that criminal organizations have been working to create local demand for heroin and other drugs.<sup>278</sup> Similarly in Ghana, law enforcement officials expressed concern regarding an apparent increase in the use of heroin, resulting in a corresponding increase in the amount of heroin that would remain in the country to supply the domestic market; there is, however, insufficient data to substantiate this assertion.<sup>279</sup> All of this must be caveated by noting that data is patchy in these regions and concerted efforts to remedy that problem have only recently started.

The first West African seizure of a containerized Afghan heroin shipment known to UNODC took place in November 2010 in Nigeria, when the National Drug Law Enforcement Agency (NDLEA) apprehended 130 kg of heroin originating from the port of Bandar Abbas in the Islamic Republic of Iran.<sup>280</sup> In May 2012, the NDLEA seized an additional 113 kg of heroin from a container that had been imported from Islamabad, Pakistan.<sup>281</sup> In both cases, the seizures were the result of tip-offs from European and American law enforcement agencies. The targeting of Nigeria by heroin traffickers is an ongoing phenomenon; each year of the 2002-2012 period, Nigeria consistently ranked between eighth and twelfth among all countries mentioned in the annual report questionnaire as countries of provenance of trafficked heroin.<sup>282</sup>

Table 24: Maritime heroin seizures in Nigeria

Date	Amount	Method	Route	Remarks
11-2010	130	Container	Islamic Republic of Iran-Nigeria	The drug was destined to Europe and was concealed in auto parts.
06-2012	113	Container	Islamabad-Nigeria	The drug was concealed in three molding machines that had to be cut open to reveal the drug.







Source: National Drug Law Enforcement Agency (NDLEA)

Similar seizures have been reported in Benin, Ghana and Côte d'Ivoire in recent years. For example, in April 2011, a seizure of 202 kg<sup>283</sup> was made of heroin departing from Karachi, Pakistan. It had been shipped through three other ports – Salalah in Oman, Valencia in Spain, and Lomé in Togo, before reaching the Republic of Benin. The seizure was made in Cotonou port in Benin and four Beninese nationals were arrested, although it presumably involved many more people who went seemingly undetected. Investigations conducted by the Benin anti-drugs office have revealed that it is primarily Nigerians who are behind such trafficking, with the Beninese profiting from it on a secondary basis.<sup>284</sup> That same year (2011), 575 kg of heroin bound for Benin were

<sup>&</sup>lt;sup>277</sup> Council of the European Union, "Report to the Mini-Dublin Group by the French delegation", Regional report on West Africa, 2014.

<sup>&</sup>lt;sup>278</sup> Council of the European Union, "Report to the Mini-Dublin Group by the French delegation", Regional report on West Africa, 2014, p.11.

<sup>&</sup>lt;sup>279</sup> Twenty-fourth Meeting of Heads of National Drug Law Enforcement Agencies, Africa Addis Ababa, 15-19 September 2014, p.3.

<sup>&</sup>lt;sup>280</sup> NDLEA, "NDLEA intercepts 130 kg-worth of heroin worth 99 million", 2010.

<sup>&</sup>lt;sup>281</sup> International Narcotics Control Strategy Report (INCSR), 2013.

<sup>&</sup>lt;sup>282</sup> UNODC (2014). World Drug Report 2014, p. 31. Vienna: United Nations publication.

<sup>&</sup>lt;sup>283</sup> Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS) of UNODC. Reported by UNODC Regional Office for West Africa.

<sup>&</sup>lt;sup>284</sup> Council of the European Union, "Report to the Mini-Dublin Group by the French Chair, Regional report on West Africa", May 2012.

seized in Pakistan.<sup>285</sup> This includes the recovery of 108 kg of heroin in a container and, following a backtracking investigation, the recovery of another 268 kg of heroin from warehouses.<sup>286</sup> More recently, 57.6 kg of heroin destined for the Republic of Benin were seized at Karachi container terminal.

Table 25: Selected heroin seizures (10 kg or more) reported in West Africa, 2010-2013

Year	Amount (kg)	Transportation	From	Seized in
Mar-2010	80	air	Islamic Republic of Iran	Ghana
Nov-2010	150	maritime	Islamic Republic of Iran	Nigeria
Apr-2011	202	maritime	Pakistan	Benin (destined for Nigeria)
Apr-2012	16	air	Islamic Republic of Iran	Nigeria <sup>287</sup>
Jun-2012	113	maritime	Pakistan	Nigeria
Jan-2013	127	maritime	Pakistan	Benin (destined for Nigeria)

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

All of the above shipments were stopped at the time of import; it is therefore very difficult to ascertain destinations, as there are no seizures of heroin in containers that departed from West Africa.<sup>288</sup>

Figure 43: Nigerian officials inspecting a container at Tin Can Port, Lagos (2011)



Source: UNODC

<sup>&</sup>lt;sup>285</sup> Council of the European Union, "Report to the Mini-Dublin Group by the French Chair, Regional report on West Africa", May 2012.

 $<sup>^{286}\,</sup>WCO$  and UNODC Container Control Programme, "Container Control in Pakistan: seizures", 2014.

<sup>&</sup>lt;sup>287</sup> NDLEA, "Sniffer dogs of the National Drug Law Enforcement Agency (NDLEA) record first major seizure of narcotics in 2012.

<sup>&</sup>lt;sup>288</sup> The only maritime drug shipment departing from Nigeria that UNODC is aware of was seized on 20 August 2010, a container containing around 1 ton of cannabis was seized in Senegal.

These large maritime shipments of heroin dwarf other heroin seizures made in the region. For example, from the information available to UNODC, the two major maritime seizures in Benin listed in Table 25 represent more than 93 per cent of all heroin seized in the country between 2010 and 2013. For Nigeria, the two shipments listed in Table 24 that occurred in November 2010 and June 2012 represent more than 54 per cent of all seizures made in the country over 2009-2013, with the remainder deriving from an additional 65 seizures.<sup>289</sup> For the entire region, these four maritime seizures represent over 61 per cent, by weight, of all heroin seized over the same period.

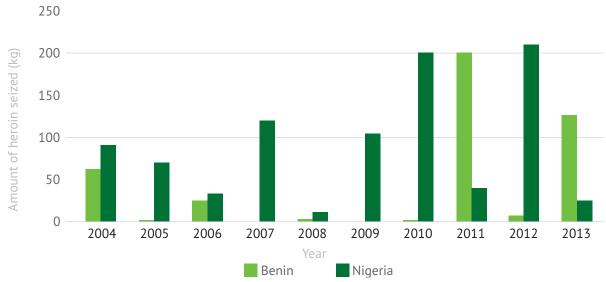


Figure 44: Heroin seizures in Benin and Nigeria, 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

Similarly, in Côte d'Ivoire, 20 kg<sup>290</sup> of heroin were intercepted at a seaport in June 2012.<sup>291</sup> The consignment was seized from a sea container shipment of carpets which had transited the United Arab Emirates before arriving in Côte d'Ivoire, and was directed to Ghana. That same month, based on information from ANF Pakistan, Côte d'Ivoire authorities intercepted a consignment of electric fans and recovered 11.84 kg of heroin, concealed in wooden pallets; the following month, again based on information provided by ANF Pakistan, Côte d'Ivoire authorities recovered 13.7 kg of heroin at Abidjan.<sup>292</sup>

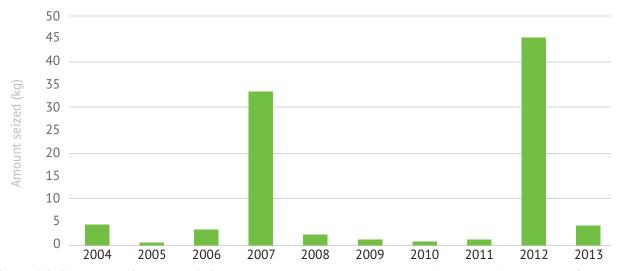


Figure 45: Heroin seizures in Côte d'Ivoire, 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA) Interministerial Committee for Drugs Control (CILAD, 2013)

 $<sup>^{289}</sup>$  Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS) of UNODC, 2009-2013.

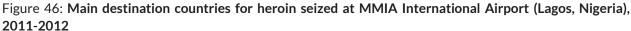
<sup>&</sup>lt;sup>290</sup> UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS). Reported by UNODC Regional Office for West Africa.

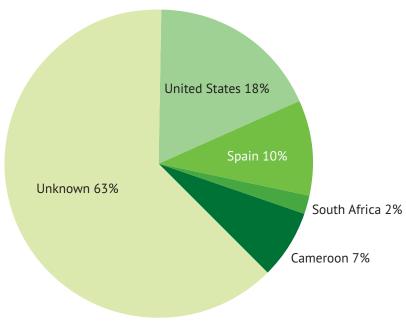
<sup>&</sup>lt;sup>291</sup> The originating country is unknown.

 $<sup>^{\</sup>rm 292}$  Information provided by ANF, January 2015

The majority of seizures effected in West and Central Africa were of heroin shipments destined for the region, or for shipments without a specified destination. Once received by local traffickers, these shipments are likely compartmentalised for domestic sale and export by air, land and sea to various destinations. For example, a 2011 seizure of 23.4 kg of heroin at an airport in Milan, Italy had departed with a courier from Mali, and transited via Brussels.<sup>293</sup> It is interesting to note that while Mali has never seized more than 1 kg of heroin annually<sup>294</sup> observers assess that in Bamako, the capital, cocaine and heroin use appears to be growing at an alarming rate.<sup>295</sup>

Seizures of heroin from air routes in West Africa, paint a similar picture to that of East Africa with three main types of movements. First, there are flights from South-West Asia, Pakistan, the Islamic Republic of Iran and India as well as the Middle East,<sup>296</sup> moving heroin from the production areas to West Africa, primarily Nigeria<sup>297</sup> and to a lesser extent Benin and Côte d'Ivoire. Second, there are flights from East to West Africa, transporting heroin from Tanzania and Kenya (or Ethiopia and Sudan)<sup>298</sup> to Lagos and other urban centres such as Accra.<sup>299</sup> Lagos seems to be a trafficking hub since it receives shipments from other West African countries like Togo and Liberia.<sup>300</sup> Third, there are seizures of heroin departing West and Central Africa towards other destinations – these ventures regularly cite the USA<sup>301</sup> as their destination but also various countries in Western Europe (United Kingdom, Italy)<sup>302</sup>, Australia, China, Malaysia and Japan.<sup>303</sup>





Source: NDLEA

<sup>&</sup>lt;sup>293</sup> UNODC DMP and IDS. Reported by UNODC Regional Office for West and Central Africa. (available at: http://www.agenziadogane.it/wps/wcm/connect/ff2a998048d5554ca16aeb780682f008/cre-s-20111026-126268-MPX-eroina.pdf?MOD=AJPERES&%3BCACHEID=ff2a998 048d5554ca16aeb780682f008)

<sup>&</sup>lt;sup>294</sup> UNODC Database on Estimates and Long-term Trend Analysis (DELTA), 1990-2011

<sup>&</sup>lt;sup>295</sup> Council of the European Union, Report to the Mini-Dublin Group by the French Chair, "Regional report on West Africa", May 2014, (available at: http://data.consilium.europa.eu/doc/document/ST-9778-2012-INIT/en/pdf)

<sup>&</sup>lt;sup>296</sup> For example, there is a Dubai (United Arab Emirates) – Abidjan (Côte d'Ivoire) route, via Accra (Ghana), which was used frequently by couriers until 2012, for both South American cocaine and Afghan heroin. It remains an important route even though seizures on it have become less frequent. See Council of the European Union, Report to the Mini-Dublin Group by the French delegation, "Regional report on West Africa", October 2014.

<sup>&</sup>lt;sup>297</sup> Nigeria, ARQ 2013, part iv

<sup>&</sup>lt;sup>298</sup> Council of the European Union, Report to the Mini-Dublin Group by the French delegation, "Regional report on West Africa", October 2014 (available at: http://data.consilium.europa.eu/doc/document/ST-14894-2014-INIT/en/pdf); Côte d'Ivoire ARQ 2013, part iv.

<sup>&</sup>lt;sup>299</sup> For example, the seizure of 10 kg of heroin at Accra airport on 15 April 2014, carried by a Ghanaian passenger arriving from Tanzania, and the arrest of three passengers (two Nigerians and one Ghanaian) who had ingested 200 packets of heroin at Accra airport on 9 April 2014; see Council of the European Union, Report to the Mini-Dublin Group by the French delegation, "Regional report on West Africa", October 2014 (available at: http://data.consilium.europa.eu/doc/document/ST-14894-2014-INIT/en/pdf)

<sup>300</sup> Nigeria, ARQ 2013, part iv.

 $<sup>^{301}</sup>$  Nigeria, ARQ 2013, part iv.

<sup>302</sup> Nigeria, ARQ 2013, part iv.

 $<sup>^{303}</sup>$  Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS) of UNODC.

In addition to a majority of seizure destinations being unknown (see Figure 46), there is an important caveat which skews any conclusions on destination data: most seizures are effected at the time of import rather than export. Thus, out of the 80 kg seized at Murtala Muhammed International Airpoirt (MMIA), Lagos, in 2012, 76 kg consisted of incoming heroin. While this may entail that most of the heroin is dispatched from Nigeria without being detected, 304 it also means that the sample size for determining destinations is small.

## 9.3 Summary

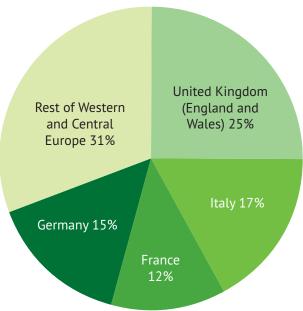
The prominence of African sub-regions as potentially important markets and transit zones for the trafficking of Afghan heroin along the southern route is a major finding of this report. The continent's growing economic dynamism, internal integration and external trading relationships are mirrored in the diversity of connections to Afghan opiate trafficking. The wide array of cargo and air links that have opened up to and through Africa offer many opportunities for traffickers. While the volume and detail of data remains limited, a worrying picture is certainly emerging. The information available at present suggests that different regions of Africa are developing important roles in facilitating the transit of southern route heroin – and networks from those regions have taken control of some trafficking routes.

<sup>304</sup> NDLEA, "Third Quarter Report", July-September 2008, p.18.

# 10. Europe

Europe has been a lucrative market for traffickers of Afghan heroin for more than 20 years. The latest UNODC estimates would suggest a heroin market value of some US\$ 13 billion per year in Western and Central Europe. The Latest data available suggest that two thirds of the heroin market in West and Central Europe would be accounted for by only four countries- the United Kingdom, Italy, France, and Germany in terms of number of users. In the United Kingdom alone, law enforcement agencies estimate that 18-23 tons of heroin are imported annually, a vast majority of which comes from Afghan opiates. The suggestion of the latest UNODC estimates and Central Europe would be accounted for by only four countries- the United Kingdom, Italy, France, and Germany in terms of number of users. The United Kingdom alone, law enforcement agencies estimate that 18-23 tons of heroin are imported annually, a vast majority of which comes from Afghan opiates.

Figure 47: Distribution of the number of opiate users in the main markets of Western and Central Europe, 2012 or latest year available



Source: UNODC Annual Report Questionnaires (ARQs); World Drug Report 2014

Table 26: Estimated number of opiate users in the main markets of Western and Central Europe, 2014 or latest year available

Country	Estimated number of users	From	Seized in
United Kingdom (England and Wales)	280,607	Opiates 2014 (may include methadone users)	ARQ and World Drug Report 2014 (estimated in 2010, best estimates available)
Italy	190,351	Opiates	ARQ and World Drug Report 2014 (estimated in 2011, best estimates available)
France	131,539	Opiates	ARQ and World Drug Report 2014 (estimated in 2010, best estimates available)
Germany	172,313	Opiates	ARQ and World Drug Report 2014 (estimated in 2010, best estimates available)
TOTAL	774,810		
Western and Central Europe	1,120,000	UNODC World Drug Report 2014 (2010 & 2011 estimates)	UNODC best estimate, World Drug Report 2014 (annex 1)

Source: UNODC Annual Report Questionnaires (ARQs); UNODC World Drug Report 2014

<sup>&</sup>lt;sup>305</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.57. Vienna: United Nations publication.

<sup>&</sup>lt;sup>306</sup> NCA (2014), "National Strategic Assessment of Serious and Organized Crime 2014", p.20.

Traditionally, European opiate users have been served by trafficking routes through the Islamic Republic of Iran and Turkey (the Balkan route). More recently, it has become clear that Europe - specifically Western and Central Europe - is increasingly a destination for heroin trafficked from Afghanistan along the southern route.

Until the early 2000s, Turkish organized crime groups were very active in heroin trafficking, together with groups in South-Eastern Europe. Law enforcement activity has impacted Turkish dominance, while Pakistani networks have become increasingly active.<sup>307</sup> Furthermore, the use of the southern route has brought with it new trafficking modus operandi, including the use of new regions, such as the Middle East and Gulf countries (particularly Dubai) and East and West Africa as transit points.

Notable targets for trafficking via the southern route have been the United Kingdom,<sup>308</sup> Belgium and the Netherlands.<sup>309</sup> There are good reasons to believe that a part of the heroin trafficked to Belgium and the Netherlands is also destined for the United Kingdom.<sup>310</sup> Europol has also suggested that some groups working with southern route supplies appear to be trying to avoid Turkish groups — and likely also law enforcement along the Balkan route — by sending direct shipments by sea.<sup>311</sup>

Figure 48 suggests the potential financial incentives for this kind of trafficking -1 kg of heroin costs around US\$ 4,000 in Pakistan, but US\$ 45,500 in the United Kingdom. Disintermediation by groups working directly with supplies from Pakistan - cutting out the facilitators in the Islamic Republic of Iran, Turkey and the Balkans - may generate additional profit. This may also result in greater specialization of supply routes, since it would imply that some of the opiates transiting through the Islamic Republic of Iran are intended solely for drug markets closer than Europe. Along the Balkan route, shipments need to cross between five and ten borders before reaching their final destination. On the southern route, despite less direct itineraries, shipments can be larger in size and the geographical regions of transit at times have a lesser law enforcement capacity.

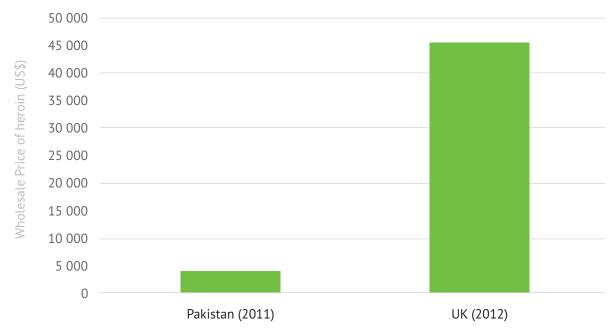


Figure 48: US\$ per kg of heroin wholesale in Pakistan (2011) and the United Kingdom (2012)

Source: UNODC Annual Report Questionnaire (ARQ) 2012 (United Kingdom); UNODC Annual Report Questionnaire (ARQ) 2011 (Pakistan). Note: figures are rounded; prices are not purity-adjusted.

<sup>307</sup> UNODC (2014), The Illicit Drug Trade through South-Eastern Europe, p.14. Vienna: United Nations publication.

<sup>&</sup>lt;sup>308</sup> Europol, "Organized Crime Threat Assessment", 2011, p.12.

 $<sup>^{\</sup>rm 309}$  EMCDDA, "EU Drug Market Reports, A Strategic Analysis", 2013.

<sup>&</sup>lt;sup>310</sup> According to the 2013 ARQ from United Kingdom (part iv), "the Netherlands and Belgium still remain important transit points for heroin trafficking to the United Kingdom via large goods vehicles and ferries."

<sup>311</sup> Europol, "EU Serious and Organized Crime Threat Assessment", March 2013, p.8.

The British market has for some years been supplied by the Balkan route via Turkey.<sup>312</sup> In 2012, the United Kingdom reported a reduction in heroin entering the country via Turkey and an increase in heroin departing from Pakistan, adding that heroin seized at or near United Kingdom borders had been predominantly trafficked directly from Pakistan.<sup>313</sup> Official reports from Pakistan also appear to indicate that the United Kingdom is a main destination.<sup>314</sup>

Heroin has long been trafficked by air to the United Kingdom from Pakistan,<sup>315</sup> whereas the large volumes of heroin arriving via the maritime route from Pakistan appears to be a new phenomenon. In 2011-2012, most of the country's heroin seemed to arrive in containers from Pakistan, either directly or through Belgium and the Netherlands.<sup>316</sup> Figure 49 shows that 84 per cent of seizures of 10 kg or more, effected at the United Kingdom border in 2012, involved heroin trafficked from Pakistan. It should be noted however, that as of 2014, the United Kingdom assesses that while heroin continues to be imported from Pakistan, "it appears that Turkish-controlled trafficking is increasing",<sup>317</sup> which would suggest a revival of the use of the Balkan route.

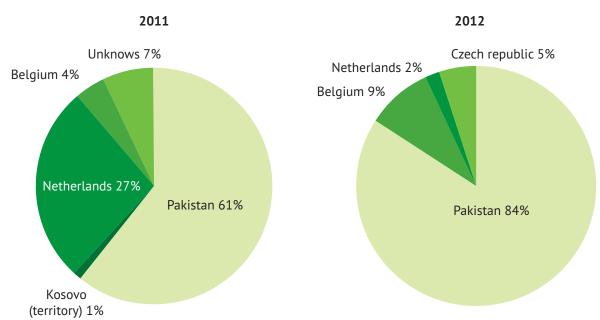


Figure 49: Departure country for United Kingdom border seizures, 2011-2012 (10 kg or more)

Source: Illicit drug trends through South Eastern Europe, UNODC, March 2014. Based on 31 seizures of 1,546 kg.

Other countries that would traditionally report being supplied from the Balkan route, have recently reported supplies from the southern route. Spain traditionally cited the Balkan route as being dominant up to  $2011.^{318}$  This appeared to change as of 2012 when, for the first time, the main departure (transit) countries for heroin mentioned in official Spanish reports were Pakistan, Belgium and - perhaps unexpectedly -Uganda<sup>319</sup>. In 2013,

<sup>&</sup>lt;sup>312</sup> As stated by SOCA, "until the beginning of 2010, forensic comparisons of heroin samples showed that approximately 75 per cent of heroin seized in the United Kingdom was likely to have been trafficked via Turkey, reflecting the extent of the influence of Turkish organised crime groups over the United Kingdom heroin market. The past year saw a reduction in the amount of heroin available in Turkey and in the number of United Kingdom-based criminals able to import heroin using this route". See SOCA, "Annual Report and Accounts 2011/12", p.11.

 $<sup>^{\</sup>rm 313}$  United Kingdom ARQ 2012, part iv

<sup>314</sup> Pakistan, ARQ 2011, part iv

 $<sup>^{\</sup>rm 315}$  SOCA, "United Kingdom Threat Assessment of Serious Organized Crime 2006/7", Chapter 5.

<sup>&</sup>lt;sup>316</sup> According to the 2012 United Kingdom ARQ, "The Netherlands and Belgium still remain prominent as transit points for heroin trafficking to the United Kingdom via large vehicles and Ro-Ro ferries". SOCA also states that, "Seven members of a prolific Birmingham-based heroin smuggling organized crime group were sentenced in July and August to a total of 125 years' imprisonment for drug supply and money laundering offences following joint activity between SOCA and the Dutch authorities. The group was responsible for smuggling heroin to the United Kingdom from Pakistan via the Netherlands". See SOCA, "Annual Report and Accounts 2011/12", p.11.

<sup>&</sup>lt;sup>317</sup> NCA, "National Strategic Assessment of Serious and Organized Crime 2014", 2014, p.19.

<sup>&</sup>lt;sup>318</sup> That year, Spain reported that most heroin seized in the country had been trafficked via the Balkan Route and that "the main means of transporting the heroin seized in Spain is customarily overland, by road". See 2011 National Report (2010 data) to the EMCDDA by the Reitox National Focal Point.

<sup>&</sup>quot;SPAIN: New Developments, Trends and In-Depth Information on Selected Issues", p.212.

<sup>&</sup>lt;sup>319</sup> Spain, ARQ 2011-2012, part iv.

Pakistan continues to be a major country of departure (transit) for heroin found in Spain,<sup>320</sup> while France reports it as a departure (transit) country in 2013.<sup>321</sup> Similarly, reporting from previous years saw the Balkan route completely dominating heroin statistics in Italy.<sup>322</sup> However, the 2012 Annual Report by the Italian national anti-drug service, the Direzione Centrale per i Servizi Antidroga (DCSA), assesses the growing number of heroin seizures linked to the East Africa region as confirming the relevance of the southern route for the country; "the consolidation of the so-called African route: heroin, leaving producing areas, mainly from airports and ports (especially the one in Karachi) in Pakistan, reaches Western markets through the Eastern part of the African continent".<sup>323</sup> West Africa may also be used as a transit area, but less prominently. One noteworthy seizure, made in 2011, involved the interception of 23 kg of heroin travelling from Mali and transiting Belgium before reaching Italy.<sup>324</sup>

Figure 50 illustrates this new southern route connection for Italy, with approximately as many interdictions of heroin coming through East Africa as coming through South-Eastern Europe. This is all the more striking, given the proximity of Italy to the Balkan route in South-Eastern Europe. The United Kingdom also reported increasing trafficking from East Africa in 2012, dubbing it a key nexus point for heroin departed from (transiting in) Pakistan.<sup>325</sup> This is supported by data from WCO, which recorded 42 cases worldwide (totalling 1,342 kg) in which Tanzania was a departure (transit) country.<sup>326</sup>

UNODC is not aware of proportionally significant amounts of heroin being trafficked from Africa to West and Central European major markets of France, Germany or the United Kingdom, but in all cases where Africa is concerned, the region of East Africa features prominently. For example, based on the data on drug seizures in Paris Charles De Gaulle Airport, between 2010 and 2012, only 3.8 kg of heroin originating in Cameroon, Benin, and Nigeria were seized at the airport compared with more than 17 kg from East Africa. Data from Belgium seems to show the same East African prominence.

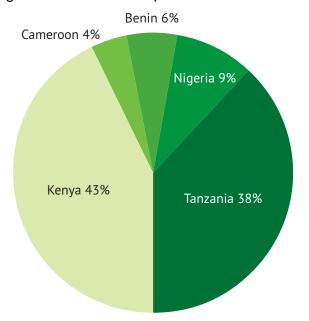


Figure 50: Heroin transiting from Africa and intercepted at Charles De Gaulle Airport, 2010-2012

Source: Data provided by Charles De Gaulle Airport, Paris, France, 2013; UNODC Regional Office for West Africa.

<sup>320</sup> Spain, ARQ 2013, part iv.

<sup>321</sup> France, ARQ 2013, part iv.

<sup>322</sup> UNODC (2014), The Illicit Drug Trade through South-Eastern Europe, Vienna: United Nations publication.

<sup>323</sup> DCSA, "Annual Report 2012".

<sup>324 &</sup>quot;Aeroporto di Malpensa sequestrati oltre 23 kg di eroina proveniente dall' Africa" (available at: http://www.agenziadogane.it/wps/wcm/connect/ff2a998048d5554ca16aeb780682f008/cre-s-20111026-126268-MPX-eroina.pdf?MOD=AJPERES&CACHEID=ff2a998 048d5554ca16aeb780682f008)

<sup>&</sup>lt;sup>325</sup> The 2012 United Kingdom ARQ states, "There are also indicators that East Africa is developing as a key nexus point for heroin sourced from Pakistan. However, The Netherlands and Belgium still remain prominent as transit points for heroin trafficking to the United Kingdom via large goods vehicles and Ro-Ro ferries".

 $<sup>^{\</sup>rm 326}$  World Customs Organization, "Illicit Trade Report 2012", p.45.

 $<sup>^{\</sup>rm 326}$  Spain, ARQ 2011, part iv.

Table 27: Heroin seizures (kg) in Belgian airports identified as departing from Africa, 2011-2012

Year	Qty (kg)	Departure	Transit	Destination	Arrests	Route
2011	1.12	Uganda	Belgium	Spain	Cameroon national	Entebbe - Brussels
2012	7.26	Tanzania	Ethiopia	Belgium	Estonian national	Kilimanjaro - Addis Abeba - Brussels
2012	2.43	Benin	n/a	Belgium	Nigerian national	Cotounou - Brussels
2012	2.36	Kenya	Belgium	Slovenia	Tanzanian national	Nairobi - Brussels - Ljubljana
2012	5.115	Burundi	Belgium	Italy	British national	Bujumbura - Brussels - Italy
2012	2.46	Kenya	n/a	Belgium	Tanzanian national	Nairobi - Brussels
2012	2.08	Kenya	Belgium	Italy	Tanzanian national	Nairobi - Brussels - Rome

Source: Belgian Federal Police

Although too early to tell whether this is a trend, southern route trafficking has also affected East and Central Europe, which is unprecedented. In 2012, Slovenia reported its first seizures of heroin travelling from East Africa by air, and destined for Italy.<sup>327</sup> Two of the seizures were of high purity (50 per cent) and cut with caffeine. An additional 2.6 kg of heroin travelling from Nairobi and destined for Slovenia was seized in Brussels on 25 June 2012.<sup>328</sup> It is also interesting to note that Kenyan authorities reported a seizure of 5.4 kg of heroin in January 2013 directed to Hungary by air.<sup>329</sup>

Table 28: Heroin seizures in Slovenia linked to East Africa, 2012

Date	Amount	Method	Route	Remarks
15.10.2012	2,970 g		- Nairobi-Slovenia-Italy -	Heroin hydrochloride, 25 per cent purity, cut with caffeine.
17.10.2012	4,919 g	Air		Heroin hydrochloride, 50 per cent purity (cut with caffeine.
22.10.2012	2,977 g			Heroin hydrochloride, 50 per cent purity, cut with caffeine.





Source: General Police Directorate, Criminal Police Directorate of the Ministry of the Interior of Slovenia, February 2013

<sup>&</sup>lt;sup>327</sup> Information provided by the General Police Directorate, Criminal Police Directorate of the Ministry of the Interior of Slovenia, February 2013.

 $<sup>^{\</sup>rm 328}$  Information provided by the Central Drug Service of Belgium, July 2013.

 $<sup>^{\</sup>rm 329}$  Information provided by OC anti-narcotics unit, Kenya, June 2013.

Further eastward, in November 2014 the Ukrainian police in Kharkiv seized 20 kg of heroin. The cargo was trafficked by sea to Ukraine from Pakistan in a shipping container. From the seaport of Odessa, the container was delivered to Kharkiv, and was destined for Italy.<sup>330</sup> Upstream, Pakistan has reported a single seizure of 25 kg at Karachi, destined for Ukraine by maritime trafficking (June 2012).<sup>331</sup>

While it is unwise to base broad conclusions on these single events, these incidents may indicate that Eastern and Central Europe are increasingly within the reach of the southern route. Until now no seizures have been reported in the Russian Federation, suggesting that Afghan heroin may be imported via the southern route.

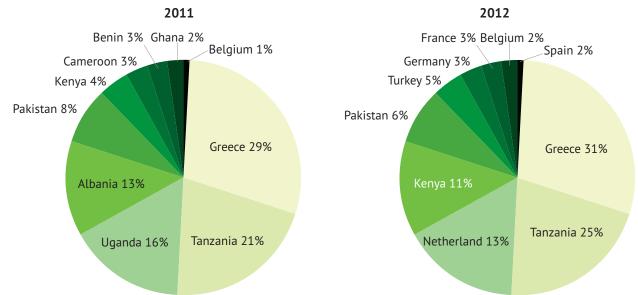


Figure 51: Departure countries for heroin seized in Italy, 2011-2012

Source: 2012 Annual Report, Direzione Centrale per i Servizi Antidroga (DCSA). Based on n seizures of 140 kg (2011) 216 kg (2012) and 331 kg (2013)

In 2013, the Balkan route seems to reassert itself in Italy (see Figure 52), with nearly two thirds of identified seizures coming from Greece and Albania, two key stopovers countries along the Balkan route through South-Eastern Europe.

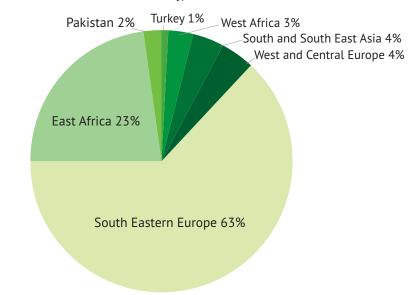


Figure 52: Departure countries for heroin seized in Italy, 2013

Source: Direzione Centrale per i Servizi Antidroga (DCSA)332. Based on seizures of 331 kg (2013)

<sup>&</sup>lt;sup>330</sup> The criminal group arrested was comprised of 1 Pakistani national and 1 Spanish national of Pakistani descent; see http://mvs.gov.ua/mvs/control/main/uk/publish/article/1232792

<sup>&</sup>lt;sup>331</sup> WCO Container Control Programme, "Annual Progress Report 2012", p.53.

 $<sup>^{\</sup>rm 332}$  Direzione Centrale per i Servizi Antidroga (DCSA), "2012 Annual Report".

That said, it appears that it will become increasingly difficult to disentangle the Balkan route from the southern route. The largest heroin seizure in Greek history was effected in June 2014. It consisted of over 2.1 tons of heroin that were transported aboard a maritime oil tanker vessel, that allegedly travelled from the Gulf of Oman via the Suez Canal into the port of Elefsina, Greece. Greek law enforcement report that the heroin originated in Afghanistan, and transited the Islamic Republic of Iran or Pakistan before being placed on the maritime vessel in the Gulf of Oman. Available information indicates that the heroin was destined for Western Europe, mainly to Belgium and the purity of the heroin (base) was reported at over 60 per cent. That same year, several important seizures of heroin trafficked directly from Pakistan were reported in Greece. It is significant to note that such seizures could simply be the result of more targeted screening by the Hellenic authorities; however, in the context of other southern route seizures across Europe, increased trafficking from Pakistan via Greece cannot be excluded.

Table 29: Selected seizures in Greece with Pakistan as a departure (transit) country, 2014

Date	Amount	Method	Route
5-9-1014	13.1 kg	Air trafficking, false bottom luggage, 1 Pakistani national arrested.	Lahore Pakistan, Istanbul-Athens- United Kingdom
11-9-2014	12.3 kg	Air trafficking, false bottom luggage, 1 Pakistani national arrested	The arrested person had reached Athens by flying from Lahore Pakistan, via Istanbul (Turkish Airlines).
7-11-2014	10.3 kg	Air trafficking, false bottom luggage, 1 Pakistani national arrested	Lahore - Doha - Athens
17-11-1014	11.6 kg	Air trafficking, luggage, 1 Pakistani national arrested	Karachi - Doha - Athens

Source: Narcotics Subdivision general investigation office, Hellenic Police (figures have been rounded)

Traffickers based in Pakistan also appear to have targeted Turkey for container trafficking. For example, in August 2014, 80 kg of heroin destined for Turkey were seized at Qasim International Container Terminal,<sup>334</sup> perhaps indicating that cooperation and competition between Pakistan-based and Turkey-based traffickers can occur simultaneously.

Between 2010 and 2013, heroin seizures associated with the southern route were reported in several European countries: Austria, Belgium, the Czech Republic, Denmark, Finland, France, Germany, Greece, Ireland, Italy, Lithuania, Netherlands, Portugal, Serbia, Slovenia, Spain, Sweden, Switzerland, Ukraine and the United Kingdom. It is not clear whether this is simply a response to opportunities presented by lower perceived levels of law enforcement along the southern route or a significant, durable change in the illicit trafficking of opiates.

Thirty significant seizures (of 20 kg and above) were reported to UNODC by these countries over 2010-2014 involving a total of 5,284 kg of heroin, some of which are listed in Table 31. In particular, a number of large seizures were made at seaports in Belgium, Spain and the Netherlands, including a seizure at Rotterdam, of 744 kg of heroin in 2013 and a seizure of 863 kg in Antwerp, Belgium, also in 2013 (Table 30). This last case did not simply involve sending shipments to a container port in the hope that they would blend into licit trade flows. Traffickers had recruited hackers to break into computers that tracked and monitored the movement and location of shipping containers arriving at Antwerp seaport. Similar to other seizures discussed in this report, the heroin was of high purity (over 50 per cent), but already cut with adulterants (dextromethorphan and caffeine).

<sup>&</sup>lt;sup>333</sup> According to DEA analysis, the heroin samples returned values of 61.2% and 63.2% purity of South-West Asian origin. Information provided by the US DEA, 7 January 2015.

<sup>334</sup> UNODC Pakistan communiqué – Issue Number 8, December 2014, p.15

<sup>335</sup> Information provided by Federal Politie, Centrale Dienst Drugs (Belgian Federal Police), July 2013.

<sup>336</sup> Information provided by Belgian Customs, March 2013.

Table 30: Record seizure of 863 kg of heroin at Antwerp, smuggled via Mozambique to the Netherlands, March 2013

Date	Amount	Method	Route	Remarks
2013	863 kg	Container	Malawi-Mozambique – Belgium – the Netherlands	Purity 57-66%, cut with caffeine







Source: Belgium Customs

Several smaller seizures were also made at airports in countries including Denmark, France, Germany, Italy, Portugal, Spain and the United Kingdom over 2010-2014. For smaller seizures, the most common modes of trafficking have been air and mail. Of these, almost 60 per cent of consignments listed Pakistan as the country of departure (transit).

Table 31: Selected southern route heroin seizures in Spain, Belgium and the Netherlands, 2010-2014 (kg)

Country of seizure	Date	Transportation method	Departure (transit).country	Destination	Amount
Belgium	Dec-10	Container	Islamic Republic of Iran	Netherlands	127
Belgium	Apr-11	Container	Pakistan	Netherlands	60
Belgium	Feb-13	Container	Pakistan	Netherlands	230
Belgium	Mar-13	Container	Mozambique	Netherlands	863
Netherlands	Aug-13	Container	Pakistan	United Kingdom	202
Netherlands	May-14	Container	Islamic Republic of Iran (via United Arab Emirates)	Netherlands	744
Spain <sup>337</sup>	Sep-11	Container	Pakistan	n/a	150
Spain	Jan-13	Container	Pakistan	n/a	58

Source: SOCA; Belgian Customs; WCO-UNODC CCP, Year End Report 2011, p.11; Official website of the Ministry of Interior of Spain; KLPD, Central Unit, Central Intelligence Division (data for 2009 was unavailable at the time of writing).

Map 29 illustrates heroin seizures across Europe for all routes and countries of origin from 2010 to 2013. The majority of large interceptions occurred at seaports, with heroin originating from southern route departure points.

<sup>&</sup>lt;sup>337</sup> It should be noted that, according to Spanish authorities, this shipment was in fact destined for Côte d'Ivoire and made an unscheduled stop in Spain. Information provided by Spanish Customs, April 2013.

RELAND

DENMARK

DENMARK

LATVIA

LATV

Map 29: Location of heroin seizures associated with the southern route made in Europe, as reported to UNODC and presented in government reports, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

# 10.1 Major routes and methods

Analysis of 2010-2013 seizure case data concerning heroin en route to Europe via the southern route shows that consignments were sent in containers and hidden amongst different wares or within the container walls or boards. With regard to heroin trafficked by air, it was hidden in different types of hand and checked luggage. Only a small amount of the heroin seized was ingested. Of the consignments sent by mail, heroin was often concealed in parcels containing perishable food items or in merchandise such as a jewellery boxes. Sometimes heroin consignments were simply grouped into small packets as part of a parcel.

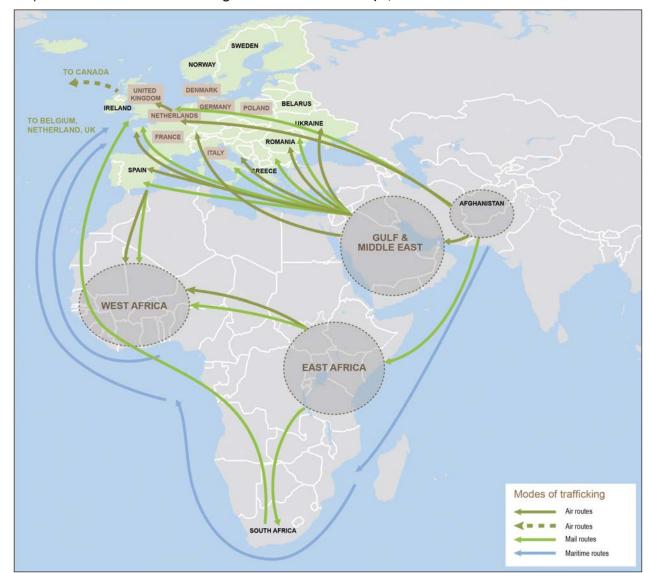
Based on the information available, about 60 per cent of the southern route heroin seized in Europe between 2010 and 2013 was trafficked from Pakistan, 16 per cent from East Africa, 10 per cent from South Asia and 7 per cent from Southern Africa.

Table 32: Heroin trafficked into and seized in Europe via the southern route by region of origin/transit, 2010-2013

Origin/transit region	No. of seizures	Distribution (%) of no. of seizures	Quantity of heroin seized (kg)	Distribution (%) of quantity of heroin seized
South-West Asia				
- Afghanistan	2	0.26	1.5	0.02
- Pakistan	399	52.3	3,810	60
- Islamic Republic of Iran	5	0.65	268	4.2
South Asia	258	33.8	610	9.6
East Africa	42	5.5	1,036	16.3
West and Central Africa	10	1.3	34	0.5
Southern Africa	1	0.1	451	7.1
North Africa	2	0.2	10	0.15
East and South-East Asia	21	2.7	22	0.3
Middle East and Gulf States	22	2.8	106	1.6
TOTAL	762	100	6348.5	100

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Map 30 summarizes demonstrated or suspected routes that have been used to traffic heroin along the southern route to Europe.



Map 30: Indicative heroin trafficking routes to and from Europe, 2010-2013

Note: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations. Dashed lines represent undetermined boundaries. The dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan. The final status of Jammu and Kashmir has not yet been agreed upon by the parties. The final boundary between the Sudan and South Sudan has not yet been determined.

Source: UNODC, based on seizure data from Drug Monitoring Platform (DMP), Individual Drug Seizures (IDS) and ARQ, supplemented by national government reports and other official reports

The numerous stopovers in the Middle East involved trafficking by air in particular. There have also been many attempts to smuggle heroin via Africa, some apparently destined to Europe and some in transit to Canada. The most common routes for these two trajectories are shown in Table 33.

Table 33: Most frequent air and mail heroin trafficking routes from the Middle East and Gulf countries and from Africa to Europe, 2010-2013

### From the Middle East and Gulf countries

Origin		Destination
Iraq, Lebanon, Qatar, Syrian Arab Republic	$\rightarrow$	Denmark, Germany, Italy, Switzerland, Ukraine

#### From Africa

Origin				Destination
Ethiopia, Kenya, Madagascar, Tanzania, Uganda	$\rightarrow$	Italy, France, Slovenia, Switzerland, Belgium, Netherlands	$\rightarrow$	Canada
Mozambique, South Africa	$\rightarrow$	Belgium, Netherlands	$\rightarrow$	Canada
Benin, Ghana, Côte d'Ivoire, Mali, Nigeria	$\rightarrow$	Belgium, France, Germany, Italy, Netherlands	$\rightarrow$	Canada
Morocco	$\rightarrow$	Italy, Netherlands	$\rightarrow$	

Source: UNODC elaboration, based on Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS). It should be noted that the shipments departing the Middle East are more closely linked with the Balkan route than the southern route.

In terms of quantity, the majority of significant seizures (of 20 kg and above) reported to UNODC in Europe over 2010-2013 concerned heroin trafficked by sea — these seizures accounted for 57 per cent of the heroin seized by quantity, but only consisted of 3 per cent of cases. The major maritime attempts have circled Africa in container or other commercial cargo.<sup>338</sup> Known routes include Pakistan to the United Kingdom, with transit in Belgium and the Netherlands.

A large number of the total reported seizures over 2010-2013 involve heroin trafficked via air and by mail – by number of seizures, 61 per cent were trafficked by mail and 35 per cent by air.<sup>339</sup> The available information shows that consignments originating in South-West Asia regularly transit more than one country in Europe. For example, a number of consignments departed from Pakistan and transited Germany on their way to other European countries. In some cases, consignments were transiting Germany on their way to a non-European country, such as Canada, Nigeria or South Africa. In one case, heroin was sent from Pakistan to Côte d'Ivoire via Spain. Some consignments from Pakistan and Afghanistan transited countries in the Middle East and Gulf States, such as the Kingdom of Bahrain or the United Arab Emirates. The prominence of Germany and the United Arab Emirates as transit points probably is a reflection of their role as global transport and logistics hubs. The global Deutsche Post DHL courier disbursement facility is located in Germany and Frankfurt is a major entry point for the EU while the United Arab Emirates is home to Emirates and Etihad airlines, both with large passenger and cargo operations.

## **10.2 Summary**

Europe has been an important market for Afghan heroin for a few decades. The opiate market within the continent is concentrated in four countries (the United Kingdom, Italy, France and Germany), accounting for around two thirds of users in West and Central Europe. European opiate users have traditionally been served by the Balkan route (trafficking route through the Islamic Republic of Iran and Turkey). Pakistani networks have become more dominant in recent times with the United Kingdom, Belgium and the Netherlands as notable targets for trafficking via the southern route. A number of other countries that in the past were mainly being served by the Balkan route, including Spain and Italy, have recently noted Pakistan and African countries as prominent sources of opiates in transit from Afghanistan. Although it may be early to tell whether this is a trend, heroin trafficked via the southern route has also been seized in East and Central Europe, with specific seizures in Slovenia and Ukraine, showing the need to closely monitor developments in this regard.

<sup>&</sup>lt;sup>338</sup> Some have also stopped in West Africa – see Chapter 10.

 $<sup>^{\</sup>rm 339}$  UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS).

# 11. North America

Geographical proximity and the support of trafficking connections developed for the cocaine trade made Latin America the traditional source of heroin for opiate users in North America. Geographically, it is hard to find any major heroin market that is further away from Afghanistan than North America. The development of opiate routes reaching the USA and Canada out of the southern route might therefore be seen as a transnational triumph for traffickers in weaving webs around the world. North America is unlikely to become a primary market for Afghan heroin in the near future, but can provide a lucrative niche for some trafficking groups.

Of a total estimated 1.67 million heroin users in the Americas, 1.2 million were located in the USA and 114,000 in Canada.<sup>340</sup>

### 11.1 The influence of the southern route

Information generated from the analysis of heroin seizures suggests a distinction between Canada and the USA as regards the importance of Afghanistan as a heroin supplier. According to the Royal Canadian Mounted Police (RCMP) National Intelligence Coordination Center, between 2009 and 2012, at least 90 per cent of the heroin seized in Canada originated from Afghanistan.<sup>341</sup> Outside of the traditional drug markets of Afghanistan<sup>342</sup>, it is rare to find it dominating a country's supply in this way. Of the seizures effected in Canada, the southern route is reportedly a major conduit, with nearly 50 per cent having transited Pakistan, India and the Islamic Republic of Iran.<sup>343</sup> As of 2013, South Africa is also listed as a main departure country by Canadian authorities, with the United Arab Emirates and Germany listed as transit locations.<sup>344</sup>

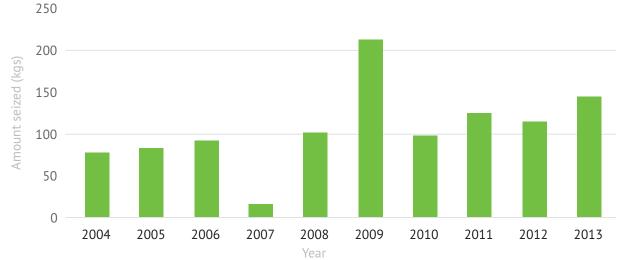


Figure 53: Heroin seizures in Canada (kg), 2004-2013

Source: UNODC Annual Report Questionnaire (ARQ) and Database on Estimates and Long-term Trend Analysis (DELTA)

In 2011 and 2012, US authorities suggested that the availability of South-West Asian heroin was growing, but estimates of its share of the heroin market show it remaining below 10 per cent of the total market in 2012. The USA reports that West African groups are the primary traffickers in heroin from South-West Asia, operating in many major cities  $^{346}$  — a development noted in several markets served by the southern route. It is important to note that this is occurring in the context of increasing general use of heroin  $^{347}$  as some US prescription opioid users may be turning to heroin due to lower price and easier access.  $^{348}$ 

<sup>&</sup>lt;sup>340</sup> UNODC (2011), The global Afghan opium trade: a threat assessment, p.73. Vienna: United Nations publication.

<sup>341</sup> Email communication with the Royal Canadian Mounted Police (RCMP)/National Intelligence Coordination Center, October 2013.

<sup>&</sup>lt;sup>342</sup> For example, in Pakistan, the Islamic Republic of Iran, Central Asia and Western and Central Europe.

 $<sup>^{343}</sup>$  Report on the Illicit Drug Situation in Canada, Royal Canadian Mounted Police, 2009.

 $<sup>^{\</sup>rm 344}$  Information from the Canada, ARQ 2013.

 $<sup>^{345}</sup>$  US Drug Enforcement Administration, "National Drug Threat Assessment Summary 2014".

 $<sup>^{\</sup>rm 346}$  United States, ARQs 2011-2012.

<sup>347</sup> USDEA, National Drug Threat Assessment, 2014 (available at: https://info.publicintelligence.net/DEA-DrugThreats-2014.pdf).

<sup>&</sup>lt;sup>348</sup> US Drug Enforcement Administration, "National Drug Threat Assessment Summary 2014".

The USA accounts for a substantial majority of overall heroin seizures in North America. The quantity of heroin seized in the USA has increased steadily since 2007, rising from 1,889 kg in that year to 5,484 kg in 2012.<sup>349</sup> By contrast, seizures in Canada have fluctuated over this period, remaining within the range of 100 kg to 200 kg, with a reported 114 kg seized in 2012.

Map 31 shows the location of seizures in North America and reveals some interesting patterns. In Canada, primary locations for seizures have been Toronto and Montreal, cities with major airports connecting the country to distant destinations, such as the Middle East. In the USA, Afghan heroin is found predominantly in major cities and in locations far from the US-Mexican border — the primary point of entry for Latin American heroin. Geographically, the weight and number of seizures of Afghan heroin favours eastern USA and particularly the north-eastern cities of New York, Boston and Washington DC.

Map 31: Location of heroin seizures associated with the southern route made in Canada and the United States as reported to UNODC and presented in government reports, 2010-2013

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

Table 34 shows example seizures of heroin over 10 kg that appeared to have used the southern route to reach North America between 2010 and 2013. The majority used air couriers or were trafficked by mail. Beyond these larger seizures, numerous smaller attempts were seized: 227 in the USA totalling 299.5 kg of heroin and 13 in Canada involving 36 kg of heroin. In addition, a number of efforts to smuggle heroin along the southern route to North America have been interdicted in other regions. For example, 246 kg of heroin was seized in March 2013 at Port Qasim in Karachi, Pakistan, with an indicated destination of Toronto, Canada. This is echoed in the most recent official reports issued by Pakistan, where Canada features as a main destination for heroin.

<sup>&</sup>lt;sup>349</sup> Note this is all heroin, not just heroin from Afghanistan or trafficked via the southern route. Although there is evidence of sustained networks importing southern route heroin from Africa to the USA, authorities' testing in the USA still suggests that it constitutes a minor share of the US market. "In 2012, heroin from South America accounted for 51 per cent (by weight) of the heroin analyzed through the DEA Heroin Signature Program. Heroin from Mexico accounted for 45 per cent and South-West Asia accounted for 4 per cent"; see USDEA, "National Drug Threat Assessment", 2014, p.8.

 $<sup>^{350}\,</sup>UNODC\,DMP\,and\,IDS\,database;\,WCO\,and\,UNODC\,Container\,Control\,Programme,\,"Container\,Control\,in\,Pakistan:\,seizures",\,2014.$ 

<sup>351</sup> Pakistan, ARQ 2013.

Table 34: Selected heroin seizures in North America over 10 kg associated with the southern route, 2010-2013

Date	Amount (kg)	Mode of Trafficking	Seized In	Departed From	Intended Destination	Information Source
15-04-2011	36	Maritime	Canada	Pakistan	Canada	MAR-INFO
19-05-2013	22	Air	Canada	Pakistan	Canada	Canada Border Services Agency
02-03-2012	20	Air	Canada	Pakistan	Canada	MNC, Pakistan
11-07-2012	18	Mail	USA	Pakistan	Canada	WCO
21-04-2013	13	Air	Canada	Pakistan	Unknown	Canada Border Services Agency
30-07-2010	11	Mail	Canada	Pakistan	Canada	Canada Border Services Agency
04-09-2012	11	Maritime	USA	United Arab Emirates	USA	WCO
11-02-2011	11	Air	USA	Pakistan	USA	WCO
19-02-2013	11	Air	Canada	Pakistan	Canada	Canada Border Services Agency
10-07-2011	10	Air	USA	Ghana	USA	WCO
28-04-2013	10	Air	Canada	Pakistan	Unknown	Canada Border Services Agency
02-07-2013	10	Air	Canada	Pakistan	Canada	Canada Border Services Agency

Source: UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

# 11.2 Trafficking routes and methods

In 2013, Canada reported that approximately 70 per cent of heroin seizures had arrived by air and 30 per cent by mail.<sup>352</sup> Despite this prominence of air and mail trafficking, the Canadian seaports have been assessed as vulnerable to opiate trafficking from Pakistan, the Islamic Republic of Iran and Afghanistan.<sup>353</sup> As previously mentioned, a large seizure of 246 kg of heroin was made in 2013 in Pakistan destined for Canada by sea. Table 35 shows selected seizures at Canadian marine ports between 2006 and 2011.

Table 35: Selected heroin seizures at Canadian marine ports, 2006-2011

Date of Seizure	Quantity (kg)	Point of Origin/ Transit	Smuggling / Concealment Methods	Source
July 2006	27	India	Container / Among bags of rice	RCMP, 2007a
October 2008	28	Pakistan	Container / in walls of boxes	RCMP, 2009, 25
July 2009	108	Afghanistan via Pakistan & United Arab Emirates	Container	RCMP, 2010, 28
April 2011	35	Pakistan	Container / Among pallets	Montréal Police (Annual Report 2011)

Source: Economic Sectors Vulnerable to Organized Crime: Marine Port Operations, January 2011 (more recent data was not available at the time of writing)

<sup>352</sup> Canada, ARQ 2013.

<sup>353</sup> Government of Canada publications, "Economic Sectors Vulnerable to Organized Crime: Marine Port Operations", January 2011.

By air, key routes where seizures have been made have involved transit via the Middle East and Africa en route to the USA. Transit points included Ghana, Nigeria and India, with examples of cases also transiting Ethiopia, Qatar, Tanzania, Mali, the United Arab Emirates and Europe. In October 2012, Canadian law enforcement officials reportedly<sup>354</sup> seized 22 kg of heroin smuggled by air from Pakistan in a box. For traffickers, this hands-off method can aggregate into significant volumes with low personal risk and attractive profit margins. The aforementioned seizure had an estimated value of almost US\$ 9 million. It should be noted that at least one Canadian seizure (35 kg in 2011) departing from Pakistan has been linked to Turkish groups, potentially indicating a reach into the southern route.<sup>355</sup>

In air trafficking, seizure data recorded in the UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS) suggests that the USA has itself been a transit country to Canada for flows coming from the southern route. This travel pattern likely occurs due to the larger United States network of air connections.

By mail, seizure data recorded in the UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS) suggests that the southern route branch with the most frequent seizures has been from India to the USA; other source countries include Kenya and the United Arab Emirates. For Canada, India has also been a source of mail trafficking attempts, as well as Pakistan, either directly or transiting the USA. Other, less frequent mail routes to Canada have departed from Bangladesh and Malaysia, again usually transiting through the USA. Interestingly, Canadian authorities reported that between 17 and 28 October, 2014, border services officers at a mail processing centre in Quebec made five similar seizures totalling some 2,635 grams of suspected heroin. The five packages originated in Tanzania.<sup>356</sup>

Overall, seizure data recorded in the UNODC Drug Monitoring Platform (DMP) and Individual Drug Seizures (IDS) suggests that the majority of the heroin quantity interdicted along the southern route destined to North America was trafficked by mail, via transit countries such as France, Germany, India, Nigeria, Pakistan and Switzerland. This predominance of trafficking by mail is unique among regions serviced by the southern route. It likely represents both the difficulty in reaching North America from South-West Asia and the secondary role that Afghan heroin plays in the North American market.

The distinction between Canada and the USA as destination countries is reinforced in Table 36. In general terms, amongst the southern route transit points on the way to North America, attempts through Europe and Pakistan are the most common for Canada, whereas South-West Asia and Africa are much more relevant for the USA. It remains unclear why there would be distinct links for each country in North America; this may suggest parallel and perhaps localized connections focusing on Canada and the USA, rather than strong coordination of southern route trafficking to North America.

Outside of North America, heroin traffickers arrested in attempts to target Canada or the USA were identified as 46 per cent Nigerian nationals, 21 per cent Pakistani nationals, 21 per cent Indian nationals and 8 per cent Dutch nationals<sup>357</sup>. The large proportion of Nigerians is likely explained by the observation by the USA that its South-West Asian heroin is primarily imported and distributed by West African groups.

<sup>354 &</sup>quot;\$8.8M worth of heroin seized at Toronto airport", CBC News. 5 November 2012.

<sup>355</sup> Montréal Police, "Annual Report 2011"; see also: "Montreal police in record heroin haul from Pakistan container" (available at: - http://tribune.com.pk/story/154582/montreal-police-in-record-heroin-haul-from-pakistan-container/).

<sup>356</sup> Canada Border Services Agency.

<sup>357</sup> UNODC Drug Monitoring Platform (DMP).

Table 36: Heroin trafficked into and seized in North America via the southern route by country of departure, 2010-2013

Region of departure/ transit	No. of cases	Distribution (%) of cases	Quantity of heroin seized	Distribution (%) of quantities seized
		Canada		
Pakistan	35	29%	427	29.3
Middle East and Gulf States	1	<1%	1	<.5
Africa	1	<1%	0.065	<.5
South Asia	10	8%	11	0.75
East and South-East Asia	1	<1%	4	0.25
Europe	71	60%	1,010	69.5
TOTAL	119	100%	1453.065	100%
		USA		
Pakistan	7	3%	33	9
Middle East and Gulf States	10	4%	27	7.5
Africa	71	30%	140	39
South Asia	116	49%	109	30
East and South-East Asia	6	3%	10	2.7
Europe	26	11%	41	11
TOTAL	236	100%	360	100%

Source: UNODC Drugs Monitoring Platform (DMP) and Individual Drug Seizures (IDS)

# **11.3 Summary**

North America is geographically amongst the farthest markets for Afghan heroin. The growth of opiate routes out of the southern route to the USA and Canada may therefore be seen as an illustration of the benefits of globalization being utilized by drug traffickers. North America is unlikely to become a primary user of Afghan heroin in the near future, but can provide a lucrative niche for some trafficking groups. This is especially possible for Canada where at least 90 per cent of the heroin seized between 2009 and 2012 originated from Afghanistan.

# 12. Responding to the challenges of the southern route

This concluding chapter identifies some broader challenges arising from the report, along with potential responses that these generate. While the purpose of this report is not to provide detailed recommendations, its analysis has highlighted a number of issues and specific needs, some relevant to the southern route as a whole, while others are more narrowly addressed at specific trajectories, and in particular:

- Trafficking mostly overland and to a lesser extent by sea to the Islamic Republic of Iran, Pakistan and the Middle East.
- Trafficking through Pakistan and the Islamic Republic of Iran to Africa, by sea and air.
- Trafficking through Pakistan and the Islamic Republic of Iran to East Asia, South-East Asia and Oceania, mostly by air but with major shipments by sea.
- Trafficking via Africa to North America and Europe, mostly by air but with major shipments by sea.
- Trafficking via the Middle East to Europe, North America and East Asia, mostly by air.

While the rise of the southern route appears to be supported by evidence from at least two major markets (the United Kingdom and Italy) and large seizures in the Indian Ocean, it is difficult to establish with certainty the reasons behind this apparent growth. One driver may be greater border control and highlevel arrests along the Balkan route.<sup>358</sup> The resulting gap may have been filled by Pakistani groups, which are increasingly active in the United Kingdom<sup>359</sup> and other European countries, such as Spain.<sup>360</sup> Moreover, according to Europol, some trafficking networks would appear to be trying to avoid Turkish groups by sending shipments by sea to final heroin markets.<sup>361</sup> At the same time, there is evidence that Turkish groups can organize southern route trafficking via the Islamic Republic of Iran and Pakistan,<sup>362</sup> which may indicate that Turkish groups are not solely dependent on the Balkan route. The rise in prominence and apparent strength of West African groups in heroin trafficking would also favour increased trafficking through the southern route.

It is likely that a combination of these factors, among others, has played a role in shifting some traditionally overland routes to maritime trajectories, notably via the Indian Ocean. Although more research is needed to understand the drivers behind this displacement, the weakness and vulnerability of the African coastline could also have played a role. Major challenges across much of Africa result from the lack of capacity and resources to address the growing trade in illicit drugs. South Africa has a well developed law enforcement capacity, but also faces many other crime-related challenges. Porous borders exacerbate the difficulty in interdicting transnational organized crime groups trafficking drugs between countries in Africa.

## 12.1 Law enforcement capacity and cooperation

The resources and capacity of law enforcement agencies fighting opiate trafficking along the southern route vary greatly between and within countries. Just as importantly, the diversity of trafficking routes, modus operandi and actors demands a diverse set of law enforcement responses.

In many countries along the southern route, most seizures involve relatively small consignments of heroin. Outside of Pakistan and the Islamic Republic of Iran, it is reasonable to presume that, for the most part, the majority of countries receive more shipments of heroin by air and by mail than any other methods. Basic capacities for screening mail services and passengers at airports would be therefore important first steps for places that currently lack such systematic control procedures.

<sup>&</sup>lt;sup>358</sup> UNODC (2014), The Illicit Drug Trade through South-Eastern Europe. Vienna: United Nations publication; See also United Kingdom ARQ 2012, which states that, "The prominence of Turkish organised crime groups, within the heroin supply chain has diminished in the last eighteen months. However, the threat from these crime groups remains."

<sup>359</sup> EMCDDA, "EU Drug Markets Report", 2013, p.32

<sup>&</sup>lt;sup>360</sup> Europol, "OCTA", 2011, p.12.

<sup>&</sup>lt;sup>361</sup> Europol, "SOCTA", March 2013, p.8.

<sup>&</sup>lt;sup>362</sup> Turkish National Police, KOM, "Turkish Report of Anti-Smuggling and Organized Crime", 2010, p.10, (available at http://www.tadoc.gov.tr/Dosyalar/2010\_En(1).pdf); KLPD (Korps landelijke politiediensten), "Heroine: criminaliteitsbeeldanalyse", 2010, p. 15.

To amplify the impact of these investments, it would also be highly beneficial to use existing mechanisms and develop new ones to cooperate efficiently with countries of origin to counter trafficking attempts by mail and air. In the past, most countries were only used to collaborate in the fight against opiate trafficking with a small number of other countries; this report shows that routes have multiplied and span across the globe, highlighting the need for an increased global cooperation. At a minimum, building on existing efforts and developing new partnerships with other countries will enable countries performing seizures to alert others of specific attempts and to seek information that may be useful to unravel a network. Furthermore, such cooperation is more likely to facilitate preventive intelligence-sharing that can support more efficient law enforcement and the targeting of high-level opiate traffickers.

UNODC has facilitated the creation of several international cooperation frameworks in this domain with tangible results. Specifically, the Triangular Initiative brings together the Islamic Republics of Afghanistan, the Islamic Republic of Iran and Pakistan. Joint operations between the three countries under the Initiative resulted in more than three tons of drugs being seized in March 2011.<sup>363</sup> The Joint Planning Cell (part of the Triangular Initiative) had planned and coordinated 17 operations by December 2012, resulting in the seizure of more than eight tons of drugs.<sup>364</sup> UNODC supported the countries of Central Asia, Azerbaijan and Russia to establish Central Asian Regional Information and Coordination Centre focused on combatting drug related crime. CARICC was built based on the best practices and models of existing regional and international law enforcement cooperation structures which allowed it to serve as a strong regional platform for criminal intelligence exchange and coordination of long term multilateral operations.

UNODC provides technical and advisory support to the governments of South Asia in their plans to establish South Asian Regional Information and Coordination Centre on Transnational Organised Crime - SARICC-TOC. Initiatives such as UNODC-WCO (World Customs Organization) Global Container Control Programme (aimed at developing capacities of the member states to focus on risks related to use of container shipments for the illicit trafficking) and Global Programme on Money Laundering (focused on illicit financial flows originating form organised crime) are of vital importance. Reflecting the need to connect various stakeholders, UNODC has developed an interregional drug control approach with the "Networking the Networks" initiative which assists Member States strengthen their capacities to effectively prevent, investigate and successfully prosecute offences relating to transnational organized crime and drug trafficking at a national, regional and international level through the creation and developing stronger linkages between existing networks and organisations such as Interpol, World Customs Organisation, Europol, Central Asian Regional Information and Coordination Centre, Southeast Europe Law Enforcement Centre, Joint Planning Cell, Gulf Cooperation Council's Criminal Intelligence Centre, ASEANAPOL and others based on exchange criminal intelligence and use their platform for coordination of multilateral investigations and operations targeting organized crime.

Under the Law Enforcement Training Network - "LE TrainNet" initiative UNODC encourages the adoption of a common approach to law enforcement training and promoting cooperation between the law enforcement training and educational institutions through setting up networks between these entities across regions, which will allow them to exchange curriculum, training materials, training methodologies, best practices and trainers. It will also help to develop, jointly with international and regional partners, training materials related to the new emerging crimes including cybercrime, illicit financial flows, wild life etc.

These capacities would also be useful to identify, interdict and follow up on the larger shipments by sea that are evident along the southern route. Without intelligence indicating specific cargos or small boats, the likelihood of detecting heroin on board is low. The results of interdictions by the Combined Maritime Forces in the Indian Ocean are encouraging in terms of the potential to interdict significant quantities of heroin in what was previously a 'black hole'. Moreover, there is some advantage to law enforcement in the slower movement of heroin by sea, which allows more time for coordination between countries. Nevertheless, for coordination to occur and for seizures such as those effected by the Combined Maritime Forces to trigger judicial responses, a channel for cooperation between law enforcement agencies must be strengthened. As this report indicates, the diversification of trade routes by sea entails that many countries are vulnerable to heroin imports from places which they have weak relationships with.

<sup>&</sup>lt;sup>363</sup> Dublin group country report on the Islamic Republic of Iran - http://register.consilium.europa.eu/doc/srv?l=EN&f=ST%2010815%20 2011%20INIT

<sup>&</sup>lt;sup>364</sup> At Triangular Initiative Ministerial Meeting, UNODC Chief stresses regional cooperation in face of illicit drug threat - http://www.unodc.org/unodc/en/frontpage/2012/December/at-triangular-initiative-ministerial-meeting-unodc-chief-stresses-regional-cooperation-inface-of-illicit-drug-threat.html

### 12.2 Information gaps

The sources and data gaps described in this report highlight that there has been a significant growth in information-sharing over the last decade, bearing in mind that this has occurred from a low baseline. A lack of structured data and qualitative reporting hampers evidence-based information on the southern route. Gaps range from basic seizure data through to operationally-relevant profiling of organized crime networks. Whether sharing occurs through UNODC or through stronger bilateral and regional groups, there are clearly benefits to be enjoyed from developing these arrangements. As one small example, this report would not have been possible ten years ago. More importantly, UNODC receives reports from Member States of interdictions and prosecutions made possible by growing awareness of the information-sharing gaps that have existed, and in which traffickers have thrived. Building on this momentum will be crucial to reduce criminal profits and social impacts on the southern route.

### 12.3 The source of the southern route

This report has been dedicated to trafficking along the southern route and it has therefore not focused on the source of these opiates, that is production in Afghanistan. Evidently, eliminating production in Afghanistan would have huge implications for the southern route overall. Unfortunately, it is unlikely that production will cease in the medium term; thus, it may be more useful to consider how production changes and how activities close to the source may impact trafficking along the southern route.

In distant markets, a reduction of Afghan heroin supply would likely drive up prices in places that have little access to alternatives, such as in West Africa. In most places, however, reduced supply from Afghanistan would likely lead to greater demand for heroin from Myanmar and Latin America, or for other psychoactive substances including synthetic opioids. In time, it may also discourage new users to take up heroin. Such trends would hit networks that have specialized in supplying Afghan heroin to these markets, perhaps for example Pakistani nationals shipping to Australia or couriers from African countries moving heroin to the USA. Closer to the source, it is reasonable to presume that a significant reduction in supply would increase competition among major traffickers operating out of Afghanistan to Pakistan and the Islamic Republic of Iran. The unknown factor in these dynamics is how tight the current supply-consumption balance is at present, a question on which there is no consensus.

More concretely, there are likely to be large returns on investment in supporting Pakistan and the Islamic Republic of Iran in their efforts to increase risks and costs for the trafficking of opiates along the southern route. This is particularly the case in Balochistan. An important focus for capacity development would be on increasing the proportion of seizures that result in effective prosecution and sanctions, and raising awareness for the need of a consistent approach across countries.

### 12.4 Africa

Africa deserves special attention in these conclusions, given its emergence as a transit and consumption area for the Afghan opiates trafficked along the southern route and its unfamiliarity with the challenge. It is clear from the work of the Combined Maritime Forces that large consignments of heroin continue to be trafficked towards the Eastern seaboard of Africa, and concerted interdiction efforts can lead to significant results. Despite this cooperation, many consignments are likely to reach the coast and be shipped to heroin markets across Africa and Europe unhindered. Law enforcement cooperation in the region needs to move beyond maritime activities to also include anti-narcotics operations targeting trafficking by land and air.

An additional vulnerability is in container ports that are difficult to control and therefore represent a major challenge. West African seizure data already indicate that trafficking of heroin in containers is common in the continent. If enforcement is strengthened against dhows moving across the Indian Ocean, it is likely that traffickers will turn to alternative methods, including the use of container ships in Eastern and Southern Africa. There is limited information on routes, methods and shipment sizes after major shipments arrive from South-West Asia. This lack of information, underlined by an absence of mid-range and large seizures on land and at

airports, inhibits an effective law enforcement response, as key transit points may not be adequately monitored. Without more detailed information, small heroin seizures made at border crossings may in fact distort the wider picture, if large heroin consignments are being trafficked across and out of the region unnoticed or with impunity.

The more advanced development of cocaine trafficking through West Africa and the Sahel region shows how big the threat of seemingly distant drug supplies can become. There is a need to support African Member States to monitor and mitigate the risk. This would mean integrating high-risk African countries into regional and multilateral mechanisms relevant to the Afghan opiate trade, building on initial steps in 2013 and 2014. It would also be beneficial to support these countries with developing bilateral relationships and arrangements for cooperation with countries around Afghanistan and countries that receive Afghan heroin via Africa. Domestically, there may also be a strong justification for developing the research and analysis capacity of a few countries, to address drug trafficking, including in Afghan opiates.

# Annexes

## **Annex 1: Methodology**

The study provides a snapshot analysis of the illicit opiate distribution system to various destinations worldwide via the southern route. The information used to map trafficking routes was derived mainly from information from drug seizure cases. While seizures may be an indirect indicator of drug flows and availability, they are first and foremost a direct indicator of drug law enforcement activity, thus reflecting their priorities and resources.

The sources of data used include the UNODC Annual Report Questionnaires (ARQ), national drug reports, UNODC World Drug Reports, the UNODC Database on estimates and long-term trend analysis (DELTA) database, the Individual Seizures Database (IDS) and the UNODC Drug Monitoring Platform (DMP). Only official seizure data have been used, with the exception of cases where there was a paucity of official information, in which case media-reported seizures data have also been considered. This is indicated in all cases. It is important to note that the seizure data available through the DMP and IDS databases were often, in terms of aggregated quantity, lower than the overall reported seizure total (the specific size of seizures data used for analysis is indicated in each chapter), since they did not include all seizures made in a given country. Moreover, the timeframe for the individual drug seizures that were analysed in the report was 2010-2013, except in cases where data was not available. Aggregated seizure data utilized a timeframe of 2004-2013, except in cases where data was not available.

A major limitation with regard to accessible data was the lack of seizure data available for some countries and regions; such was the case for several countries in Africa and the Islamic Republic of Iran. Not all cases had the sufficient level of detail needed for analysis. With the aim to obtain background information on seizures and routes and to identify the types and sources of available data, the researchers exchanged information with headquarters officials of the law enforcement agencies and public health departments of a number of countries and territories including Afghanistan, Belgium, France, Greece, Germany, Ghana, Italy, Kenya, the Netherlands, Nigeria, Slovenia, Spain, Tanzania and the United Kingdom. Data was also exchanged with the World Customs Organization, Europol, INTERPOL, the United States Drug Enforcement Administration and the United Kingdom National Crime Agency, among others. For those seizure cases with insufficient information, the data were not considered and were removed from the overall analysis. These cases included when there was no information relating to the country of origin or departure of the consignment, or relating to the mode of trafficking.

## **Annex 2: Regional groupings**

This report uses a number of regional and subregional designations. These are not official designations. They are defined as follows:

**East Africa:** Burundi, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Madagascar, Mauritius, Rwanda, Seychelles, Somalia, Uganda and United Republic of Tanzania.

North Africa: Algeria, Egypt, Libya, Morocco, South Sudan, Sudan and Tunisia.

West and Central Africa: Benin, Burkina Faso, Cameroon, Cabo Verde, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Niger, Nigeria, Sao Tome and Principe, Senegal, Sierra Leone and Togo

**Southern Africa:** Angola, Botswana, Democratic Republic of the Congo, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe.

North America: Canada, Mexico and United States of America.

**South America:** Argentina, Bolivia (Plurinational State of), Brazil, Chile, Colombia, Ecuador, Guyana, Paraguay, Peru, Suriname, Uruquay and Venezuela (the Bolivarian Republic of).

**Central Asia and Transcaucasia:** Armenia, Azerbaijan, Georgia, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan.

Middle East and Gulf/ South-West Asia: Afghanistan, Bahrain, Islamic Republic of Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Oman, Pakistan, Qatar, Saudi Arabia, State of Palestine, Syrian Arab Republic, United Arab Emirates and Yemen. The Near and Middle East refers to a subregion that includes Bahrain, Israel, Iraq, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, State of Palestine, the Syrian Arab Republic, the United Arab Emirates and Yemen.

**South Asia:** Bangladesh, Bhutan, India, Maldives, Nepal and Sri Lanka.

**East and South-East Asia:** Brunei Darussalam, Cambodia, China, Democratic People's Republic of Korea, Indonesia, Japan, Lao People's Democratic Republic, Malaysia, Mongolia, Myanmar, Philippines, Republic of Korea, Singapore, Thailand, Timor-Leste and Viet Nam.

**South-Eastern Europe:** Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Kosovo<sup>365</sup>, Montenegro, Romania, Serbia, the former Yugoslav Republic of Macedonia and Greece.

**Western and Central Europe:** Andorra, Austria, Belgium, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Monaco, the Netherlands, Norway, Poland, Portugal, San Marino, Slovakia, Slovenia, Spain, Sweden, Switzerland and the United Kingdom of Great Britain and Northern Ireland.

**Oceania:** Australia, Fiji, Kiribati, Marshall Islands, Micronesia (Federated States of ), Nauru, New Zealand, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu, Vanuatu and small island territories.

<sup>&</sup>lt;sup>365</sup> All references to Kosovo in the presence publication should be understood to be in compliance with United Nations Security Council Resolution 1244 (1999).

