Global drug trends and sustainable development

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Göteborg, 15 November 2017
Global trends in estimated number of drug users and people with drug user disorders, 2006-2015


Source: UNODC, responses to annual report questionnaire.
Note: Estimates are for adults (aged 15-64) who used drugs in the past year.
Primary drug of concern among people in drug treatment, by region, 2015

Source: UNODC, responses to annual report questionnaire.
12 million people inject drugs

Source: Responses to the annual report questionnaire; progress reports of UNAIDS on the global AIDS response (various years); the former Reference Group to the United Nations on HIV and Injecting Drug Use; published peer-reviewed articles and government reports.

Notes: Unlabelled symbols are regional estimates. Subregions are denoted as follows: Europe — Western and Central (WC) and Eastern and South-Eastern (ESE); Asia — Central Asia and Transcaucasia (CAT), East and South-East (ESE), South-West (SW), Near and Middle-East (NME) and South (S); and the Americas — North America (N) and Latin America and the Caribbean (LAC). For Oceania, estimates are based on data from Australia and New Zealand only.

Part (a): Percentage of population aged 15-64 years who inject drugs.
Part (b): Number of PWID (outer circle) and number of PWID living with HIV (inner circle).
Hepatitis C accounts for a great harm.

Burden of disease from hepatitis C and HIV from injecting drug use, 2013

- 12 million people inject drugs
- 1.6 million people who inject drugs are living with HIV
- 6.1 million are living with hepatitis C
- 1.3 million are living with both hepatitis C and HIV

Source: Degenhardt and others, “Estimating the burden of disease attributable to injecting drug use as a risk factor for HIV, hepatitis C, and hepatitis B.

Notes: DALYs comprise “healthy” years of life lost as a result of both premature death and years lived with disability.
### Number of deaths and “healthy” years of life lost (DALYs) attributable to drug use, 2015

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of deaths (thousands) attributable to drug use, 2015</th>
<th>“Healthy” years of life lost (DALYs) (millions) attributable to drug use, 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS—tuberculosis</td>
<td>-25.7</td>
<td>-27.1</td>
</tr>
<tr>
<td>HIV/AIDS resulting in other diseases</td>
<td>-3.6</td>
<td>-5.6</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>-12.0</td>
<td>-12.3</td>
</tr>
<tr>
<td>Liver cancer resulting from hepatitis C</td>
<td>39.0</td>
<td>27.5</td>
</tr>
<tr>
<td>Cirrhosis and other chronic liver diseases resulting from hepatitis C</td>
<td>19.0</td>
<td>12.1</td>
</tr>
<tr>
<td>Opioid use disorders</td>
<td>29.6</td>
<td>23.3</td>
</tr>
<tr>
<td>Cocaine use disorders</td>
<td>49.7</td>
<td>37.0</td>
</tr>
<tr>
<td>Amphetamine use disorders</td>
<td>67.5</td>
<td>40.1</td>
</tr>
<tr>
<td>Cannabis use disorders</td>
<td></td>
<td>5.3</td>
</tr>
<tr>
<td>Other drug use disorders</td>
<td>23.0</td>
<td>21.8</td>
</tr>
<tr>
<td>Self-harm</td>
<td>2.6</td>
<td>0.1</td>
</tr>
</tbody>
</table>


Notes: Error bars represent uncertainty intervals. Numbers given in charts are percentage changes from 2005.
Tuberculosis and drug use

High-risk factors for acquiring and progressing to active tuberculosis (TB) among people who use drugs:

- 8% in people who inject drugs vs 0.2% in the general population

Frequent co-morbidity in drug users:

More barriers to access prevention and treatment for TB
A minimum of 190,000 drug related deaths
Mostly overdoses, mostly opioid-related

Regional variation in drug-related deaths, 2015

Heroin and synthetic opioids

The opioid market is becoming more diversified

Misuse of pharmaceutical drugs

Prescription forgery, diversion, illicit manufacture, counterfeit medicines

Research opioids on the market (NPS)

Number of samples submitted to and analysed by laboratories, by type of drug identified, United States

Source: United States Drug Enforcement Administration, National Forensic Laboratory Information System reports.
Cultivation and production
coca/cocaine, poppies/opium/heroin

Total area under opium poppy and coca bush cultivation

Global potential opium production and cocaine (100 % pure) manufacture

Sources: UNODC coca and opium surveys in various countries; responses to the annual report questionnaire; and United States, Department of State, International Narcotics Control Strategy Report, various years.
Opiates trafficking: new Caucasus branch

Main opiate trafficking flows, 2011-2015

Sources: UNODC elaboration, based on responses to annual report questionnaire and individual drug seizure database.

Notes: The trafficking flows are determined on the basis of country of origin/departure, transit and destination of seized drugs as reported by Member States in the annual report questionnaire and individual drug seizure database; as such, they are to be considered as broadly indicative of existing trafficking routes while several secondary flows may not be reflected. Flow arrows represent the direction of trafficking: origins of the arrows indicate either the area of manufacture or the one of last provenance, and points of arrows indicate either the area of consumption or the one of next destination of trafficking. 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. A dispute exists between the Governments of Argentina and the United Kingdom of Great Britain and Northern Ireland concerning sovereignty over the Falkland Islands (Malvinas).
Cocaine trafficking: expanding eastwards

Main cocaine trafficking flows, 2011-2015

Source: UNODC elaboration, based on responses to annual report questionnaire and individual drug seizure database.

Notes: The trafficking flows are determined on the basis of country of origin/destination, transit and destination of seized drugs as reported by Member States in the annual report questionnaire and individual drug seizure database. As such, they are to be considered as broadly indicative of existing trafficking routes while several secondary flows may not be reflected. Flow arrows represent the direction of trafficking; origins of the arrows indicate either the area of manufacture or the one of last provenance, and points of arrows indicate either the area of consumption or the one of next destination of trafficking.

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Cocaine market: expansion in North America and possibly in Europe

Quantities of cocaine seized in North America and annual prevalence of cocaine use in the United States and Canada

Quantities of cocaine seized in Europe and annual prevalence of cocaine use in the European Union

Benzylecgonine (cocaine metabolite) found in wastewater per 1,000 inhabitants in Europe (based on data from 80 European cities)

Sources: UNODC calculations based on responses to the UNODC annual report questionnaire; and EMCDDA, Statistical bulletin 2016 and previous years. 

Source: Calculations based on Sewage Analysis CORE Group Europe (SCORE).

Note: The wastewater analysis took place in 26 countries over the period 2011-2016. All city results have been weighted by the population served by the respective drug treatment plants. The analysis in each city was based on the amounts of benzylecgonine identified in wastewater over a seven-day period, which allowed for the calculation of a daily average of benzylecgonine per 1,000 inhabitants living in the area served by the respective wastewater treatment plant. For details of the calculation methods, see the online methodology section of the present report.
Legalization of recreational cannabis, US

Jurisdictions in the United States allowing recreational use, medical use of cannabis and with no access to cannabis, May 2017

Source: Based on information from the National Conference of State Legislatures (NCSL) as of 12 May 2017.

Notes: The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.
Legalization of recreational cannabis, US

Cannabis use patterns, risk perception, availability, medical cannabis

By 2007, 12 states had measures allowing medical cannabis use.

Sources: Key Substance Use and Mental Health Indicators in the United States: Results from the 2015 National Survey on Drug Use and Health, and earlier surveys and adapted from Compton and others, “Marijuana use and use disorders in adults in the USA, 2002-14: analysis of annual cross sectional surveys”, Lancet Psychiatry 2016; 3: 954-64.

Note: Compton and others analysed the trends in cannabis use from 2002-2014.
Amphetamine-type stimulants: expanding market

- Amphetamine and methamphetamine: a considerable share of burden of disease (rank second only after opioids)
- Users of amphetamines increased - 37 million globally
- Methamphetamine seizures up, East and South-East Asia overtaking North America
- Amphetamine: trafficking spreading beyond traditional regions
- “Ecstasy” seizures stable but greater variety of products on the market

Methamphetamine: interregional trafficking flows
Expanding market: new psychoactive substances

No. of different NPS reported each year

Proportion of NPS reported by effect

Source: UNODC, early warning advisory on new psychoactive substances. Based on the analysis of 717 NPS.

Note: The analysis of the pharmacological effects comprises NPS registered up to December 2016. Plant-based substances were excluded from the analysis as they usually contain a large number of different substances some of which may not have been known and whose effects and interactions are not fully understood.
NPS: persistence of synthetic cannabinoids and appearance of synthetic opioids

**Synthetic cannabinoids seizures worldwide**

![Graph showing synthetic cannabinoids seizures](image)


Note: Contains seizures in the form of herbal material, as well as powder and liquids.

**Annual number of synthetic opioids (NPS) reported to UNODC, 2012-2016**

![Bar chart showing annual number of synthetic opioids](image)

Source: UNODC early warning advisory on new psychoactive substances. Includes only synthetic opioids reported as NPS (i.e., with no current approved medical use). Data for 2016 are preliminary.
Drugs and organized crime

Changing business models for drug trafficking and organized crime

European Union

Branching out to seize new crime opportunities

Continued importance of drugs

Structural transformations

Technological changes

Source: UNODC, adapted from Europol, SOCTA 2017.
Drugs on the darknet

Drug trafficking over the darknet still small but fast growing

Source: Kristy Kruthof and others, Internet-facilitated Drugs Trade: An Analysis of the Size, Scope and the Role of the Netherlands.

Annual drug users obtaining drugs over the darknet in the past 12 months

Number of transactions and their market share on the darknet

Note: Based on annual information from more than 60,000 past-year drug users. In 2014, the question was asked specifically in relation to the Silk Road, the then dominant darknet market, as the survey was conducted just after the Silk Road’s closure; from 2015, the question was asked in relation to all darknet markets.
Drugs and illicit financial flows

Drugs: 1/5-1/3 of the income of transnational organized crime

60-70% of global drug proceeds may be laundered

A third of drug proceeds may result in illicit financial flows

Impact of drug proceeds and illicit financial flow may be small in the majority of countries …

... but may be substantial for some drug producing developing countries

Drug proceeds damage economies in the long term

= illicit financial flows related to drugs
Corruption facilitates illicit drug markets, which fuel corruption.

Corruption exist all along the drug supply chain.

High-level vs low-level corruption.

Corruption and violence.
Drugs and terrorism, insurgency

**Entities placed under the consolidated UN Security Council Sanctions list**

**Insurgent groups and other non-State armed groups**

The Taliban involvement in the illicit drug (opiates) trade in Afghanistan is well documented

Also evidence of the involvement of the FARC in Colombia in the coca/cocaine illicit trade, before the Peace Agreement of 2016

But evidence implicating other groups is comparatively thin

Income from drugs is key for some groups

Only one revenue stream of many for most terrorist groups
The world drug problem and sustainable development

Drug use
Drug supply

Response to the drug problem
National indicators show that the health impact increases with development levels ... 

... but subnational indicators show that lower socioeconomic status goes hand in hand with drug use disorders

Impact of income on drug use depends on the type of drug
Higher socioeconomic groups have a greater propensity to initiate drug use. But lower socioeconomic groups pay a higher price as they are more likely to become drug dependent.
Marginalization and drug use are interrelated issues that can create a vicious cycle. UNODC highlights the following steps to break this cycle:

**Risks factors**
- Unemployment
- Low level of education
- Homelessness
- Migration
- Violence
- Sex work
- Incarceration

**Social exclusion**

**Drug use disorders**

**Additional risks**
- HIV/AIDS, hepatitis C and other diseases
- High-risk behaviour

**Stigmatization**

**Policy**
- Drug prevention programmes mainstreamed into education, social welfare and health systems
- Treatment, care, rehabilitation and reintegration
- “Drug-sensitive” development policies; development-oriented drug policies
- Non-stigmatizing, human rights-based and gender-sensitive drug policies

Breaking the vicious cycle of marginalization and drug use disorders.
Even though one out of three drug users is a woman, only one out of five drug users in treatment is a woman.

Women: a minority among drug users
- own drug use patterns
- own vulnerabilities and needs

Violence
Stigma
Drug use in the family
Access to treatment
Continuum of care
Drugs and development

two streams of interventions mutually reinforcing but not blind to each other

General development initiatives can counter or compound the world drug problem

*Thailand*

*Andean countries (1960s-70s)*

-> Need to be sensitive to vulnerabilities

Drug supply reduction interventions can foster or hinder economic development

*Afghanistan: 2000/2001*

*Afghanistan: 2005 opium ban (Nangarhar)*

-> Need to be targeted but mainstreamed
Environmental impact of the drug supply chain

Coca cultivation and deforestation in perspective

Coca cultivation replacing forest
Violence: not a foregone conclusion of drug trafficking

**Fig. 19**
Average homicide rates in relation to the location of countries on the illicit drug supply chain, 2009-2013

<table>
<thead>
<tr>
<th>Country on the main Afghan opiate routes?</th>
<th>Country on the main cocaine routes?</th>
<th>Country with illicit crop cultivation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>10</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>12</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>14</td>
<td>6</td>
<td>10</td>
</tr>
</tbody>
</table>

Average homicide rate (victims per 100,000 population)
Violence: not a foregone conclusion of drug trafficking

What determines violence levels
Violence-targeting strategies
Long-term versus short-term

Related parameters
Rule of law
Corruption

FIG. 21 | Homicide rates and the amount of cocaine in transit in selected
cocaine transit countries in Latin America, 2010
Development-sensitive drug policies
Drug-sensitive development policies

Source: UNODC.
Some conclusions, policy implications

Development and countering the world drug problem to work in symbiosis

Drug policies
  • sensitive to gender, environmentally friendly, based on scientific evidence
  • overcome the stigmatization of drug users
  • ensure no one is left behind

Drug use and its health consequences to be prevented and treated in prison

Heroin – still requires the attention of the international community
Thank you for listening