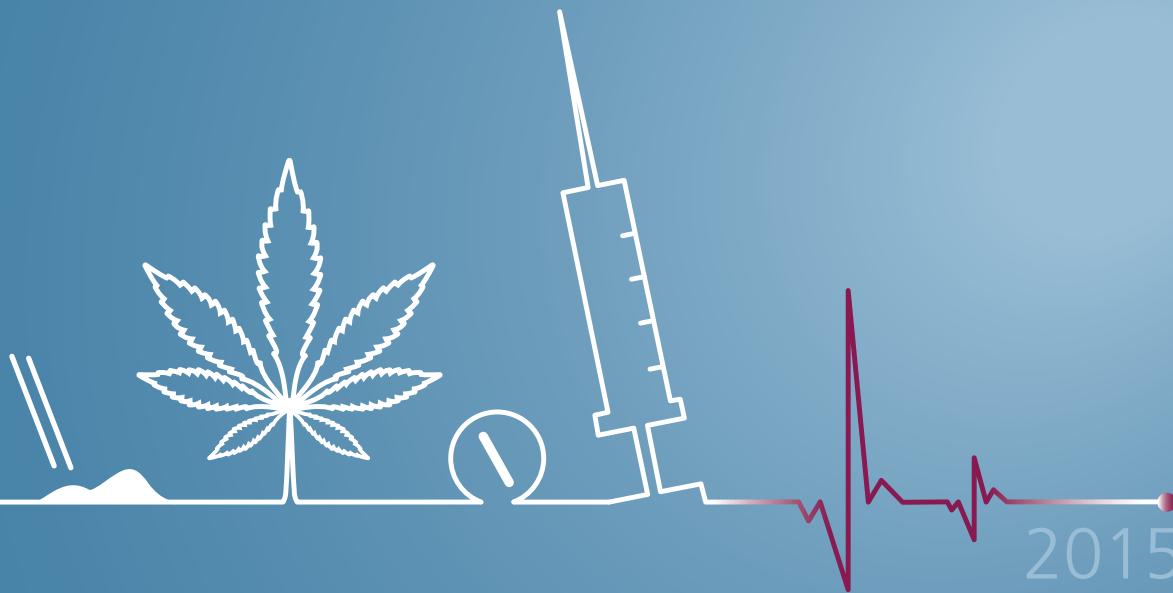




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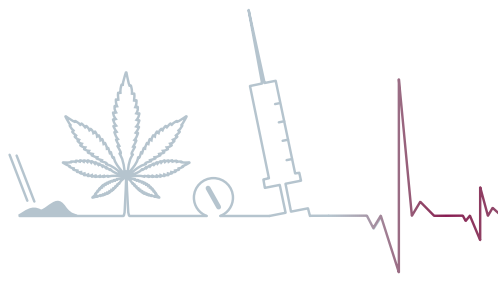
United Nations Office on Drugs and Crime



World Drug Report

2015

EXECUTIVE SUMMARY



The *World Drug Report* presents a comprehensive annual overview of the latest developments in the world's illicit drug markets by focusing on the production of, trafficking in and consumption of the main illicit drug types and their related health consequences. Chapter 1 of the *World Drug Report 2015* provides a global overview of the supply of and demand for opiates, cocaine, cannabis, amphetamine-type stimulants (ATS) and new psychoactive substances (NPS), as well as their impact on health, and reviews the scientific evidence on approaches to drug use prevention and addresses general principles for effective responses to treatment for drug use. Chapter 2 focuses on how alternative development, within the broader context of the development agenda, aims to break the vicious cycle of illicit crop cultivation by providing farmers with alternative livelihoods.

According to the most recent data available, there has been little change in the overall global situation regarding the production, use and health consequences of illicit drugs. The health consequences of illicit drug use continue to be a matter of global concern, as the vast majority of problem drug users continue to have no access to treatment. Furthermore, the increase in global opium poppy cultivation and opium production to record levels has yet to have major repercussions on the global market for opiates. This raises concerns about the size of the challenge to law enforcement posed by increasingly sophisticated and versatile organized criminal groups.

Drug use and its health consequences

It is estimated that a total of 246 million people, or 1 out of 20 people between the ages of 15 and 64 years, used an

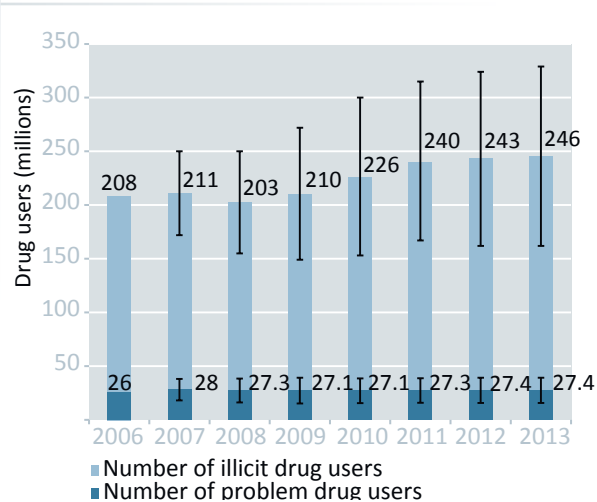
illicit drug in 2013. That represents an increase of 3 million over the previous year but, because of the increase in the global population, illicit drug use has in fact remained stable.

The magnitude of the world drug problem becomes more apparent when considering that more than 1 out of 10 drug users is a problem drug user, suffering from drug use disorders or drug dependence. In other words, some 27 million people, or almost the entire population of a country the size of Malaysia, are problem drug users. Almost half (12.19 million) of those problem drug users inject drugs, and an estimated 1.65 million of those who inject drugs were living with HIV in 2013.

This places a heavy burden on public health systems in terms of the prevention, treatment and care of drug use disorders and their health consequences. Only one out of every six problem drug users in the world has access to treatment, as many countries have a large shortfall in the provision of services. The annual number of drug-related deaths (estimated at 187,100 in 2013) has remained relatively unchanged. An unacceptable number of drug users continue to lose their lives prematurely, often as a result of overdose, even though overdose-related deaths are preventable.

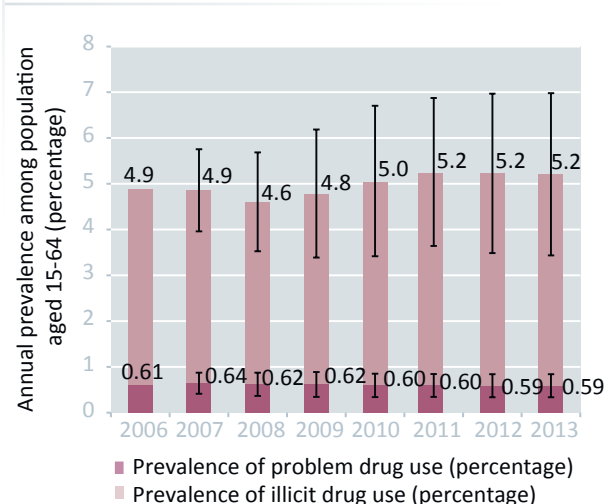
Notwithstanding national and regional variations in trends in drug use, the limited data available indicate that the use of opiates (heroin and opium) has remained stable at the global level. Mainly as a result of trends in the Americas and Europe, cocaine use has declined overall, while the use of cannabis and the non-medical use of pharmaceutical opioids have continued to rise. Trends in ATS use vary

Global trends in the estimated number of drug users, 2006-2013

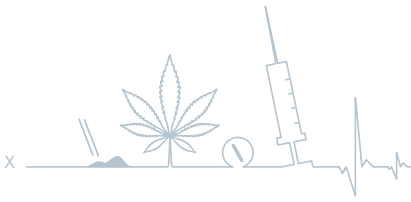


Source: UNODC, responses to annual report questionnaire.
Note: Estimated percentage of adults (aged 15-64) who have used drugs in the past year.

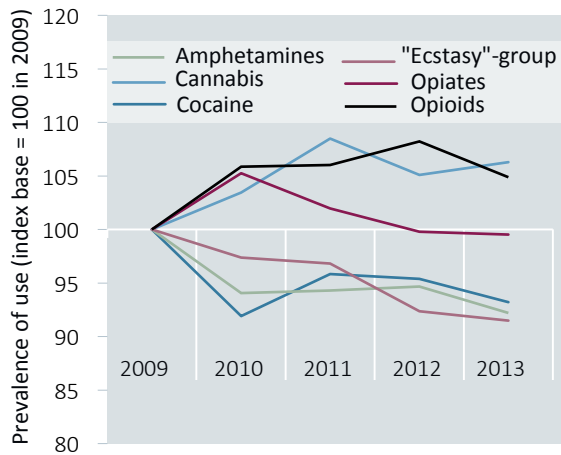
Global trends in the estimated prevalence of drug use, 2006-2013



Source: UNODC, responses to annual report questionnaire.
Note: Estimates are for adults (aged 15-64), based on past-year use.



Global trends in the prevalence of use of various drugs, 2009-2013



Source: UNODC, responses to annual report questionnaire.
 Note: Based on the estimated percentage of adults (aged 15-64) who have used the substance in the past year.

from region to region, and some subregions such as South-East Asia have reported an increase in methamphetamine use.

There are also indications that the number of people requiring treatment for cannabis use is increasing in most regions. The evidence suggests that more drug users are suffering from cannabis use disorders, and there is growing evidence that cannabis may be becoming more harmful. This is reflected in the high proportion of persons entering treatment for the first time for cannabis use disorders in Europe, North America and Oceania. According

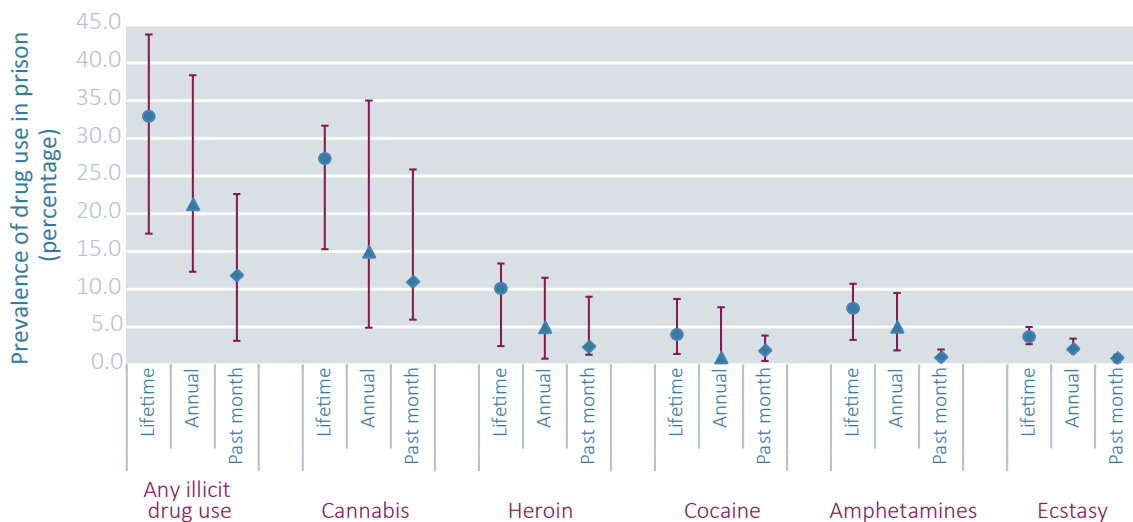
to the limited information available, cannabis ranks first among the drug types for which people in Africa enter treatment for drug use.

Cannabis is by far the most frequently used drug in prisons. Though data on the subject are limited, there are indications that one third of prisoners have used a drug at least once while incarcerated. Lifetime and recent (past-month) use of heroin in prisons is much higher than that of cocaine, amphetamines or "ecstasy". Prison is a high-risk, controlled environment where drug use, including injecting drug use, often takes place in particularly unsafe conditions. This may explain why the prison environment can be characterized by high levels of infectious diseases, particularly HIV but also hepatitis C and tuberculosis, and by limited access to prevention and treatment, which increases the risk of contracting blood-borne viruses.

The number of people requiring treatment for ATS use is also increasing globally. This is probably attributable to the sheer weight of numbers, as the prevalence of ATS use is relatively high in Asia, where there is high demand for treatment but the expertise in treating ATS use disorders is not at the same level of sophistication as the expertise in treating opiate use disorders.

NPS are marketed as alternatives to internationally controlled drugs and are purported to produce effects similar to those of their "traditional" counterparts. They have the potential to pose serious risks to public health and safety. Information and research on the potential harm caused by NPS are limited, but the proliferation of the estimated 500 NPS, including mephedrone, poses a health threat to drug users and has increased demand for treatment for drug use.

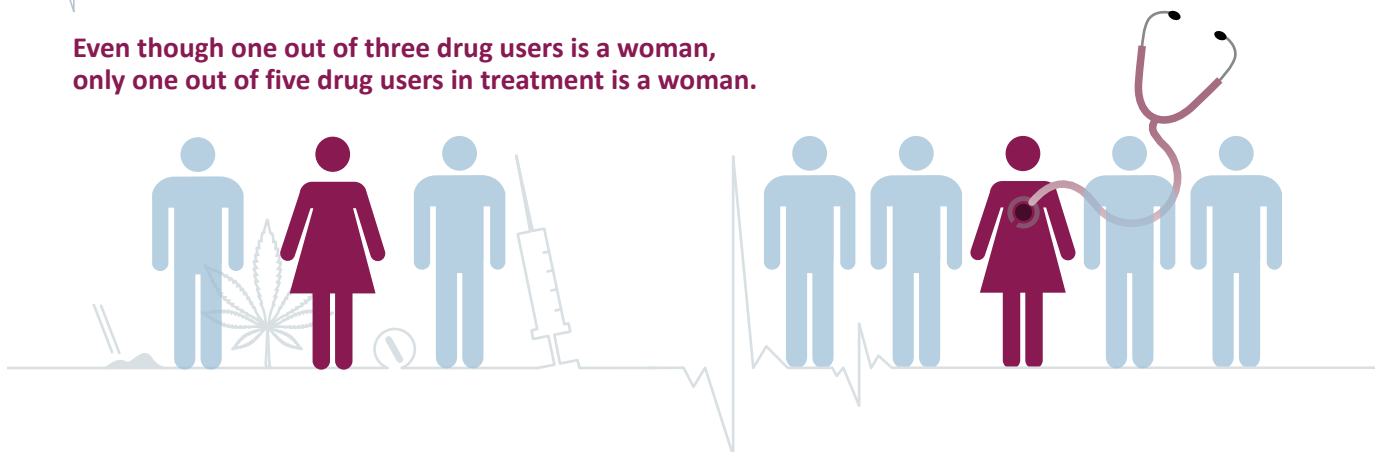
Lifetime, annual and past-month prevalence of drug use in prisons (based on 62 studies from 43 countries over the period 2000-2013)



Sources: UNODC, responses to annual report questionnaire; and C. Carpentier, L. Royuela and L. Montanari, "The global epidemiology of drug use in prison" (2015).

Note: Symbols represent median prevalence with vertical lines depicting inter-quartile range. Data on lifetime, annual and past-month use are not consistent across studies (this explains why the annual prevalence of cocaine use has a median value lower than the past-month use).

Even though one out of three drug users is a woman, only one out of five drug users in treatment is a woman.



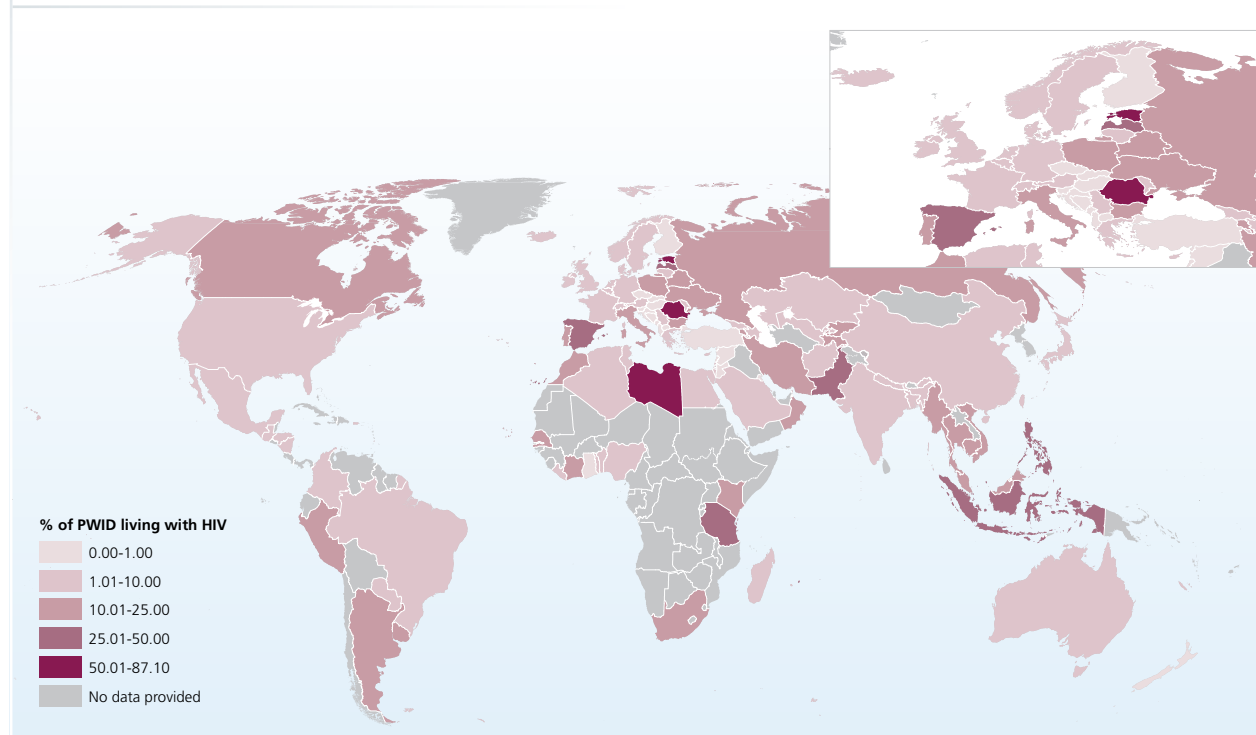
Cocaine remains the primary drug of concern in Latin America and the Caribbean, whereas the use of opiates remains the most problematic form of drug use globally. This can be attributed to the relationship between the use of opiates and injecting drug use, HIV, AIDS and overdose deaths and to the fact that the use of opiates accounts for the majority of treatment admissions for drug use in Asia and Europe.

Public perceptions about the rehabilitation of drug-dependent persons tend to oversimplify the magnitude of drug dependence. There is no quick and simple remedy for drug dependence. It is a chronic health condition and, as with other chronic conditions, the affected persons remain vulnerable for a lifetime and require long-term and continued treatment. There is a growing body of research

showing that many interventions aimed at preventing the initiation of drug use (or the potential transition to drug use disorders) can be effective if they address the different personal and environmental vulnerabilities of children and young people — factors that are largely beyond a person's control.

A number of social and structural barriers clearly continue to hinder the access of women to treatment for drug use: globally, only one out of five drug users in treatment is a woman even though one out of three drug users is a woman. A large body of evidence has shown that social and biological factors relating to initiation of substance use, continued substance use and the development of problems related to substance use vary considerably between men and women. Men are three times more likely

Prevalence of HIV among people who inject drugs, 2013 or latest year available



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. 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).

than women to use cannabis, cocaine and amphetamines, whereas women are more likely than men to misuse prescription opioids and tranquilizers. As the likelihood that initiation of the misuse of tranquilizers and prescription opioids may lead to regular or current use is relatively high compared with other drugs, this remains an area of particular concern for women. Available data on HIV prevalence among people who inject drugs show that, in many countries, women who inject drugs are more vulnerable to HIV infection than their male counterparts and that the prevalence of HIV is higher among women who inject drugs than among their male counterparts.

Some progress has been made towards achieving the target set in the 2011 Political Declaration on HIV and AIDS of reducing by 50 per cent HIV transmission among people who inject drugs by 2015.¹ Although the number of newly diagnosed cases of HIV among people who inject drugs declined by roughly 10 per cent, from an estimated 110,000 in 2010 to 98,000 in 2013, this target is unlikely to be met.

The transmission of infectious diseases such as HIV and hepatitis C and the occurrence of drug overdoses are only some of the risk factors that lead to the level of mortality among people who inject drugs being nearly 15 times higher than would normally be expected among people of comparable age and gender in the general population.

Not all drug overdoses are fatal; different studies have estimated that only 1 out of 20-25 overdose cases is fatal.

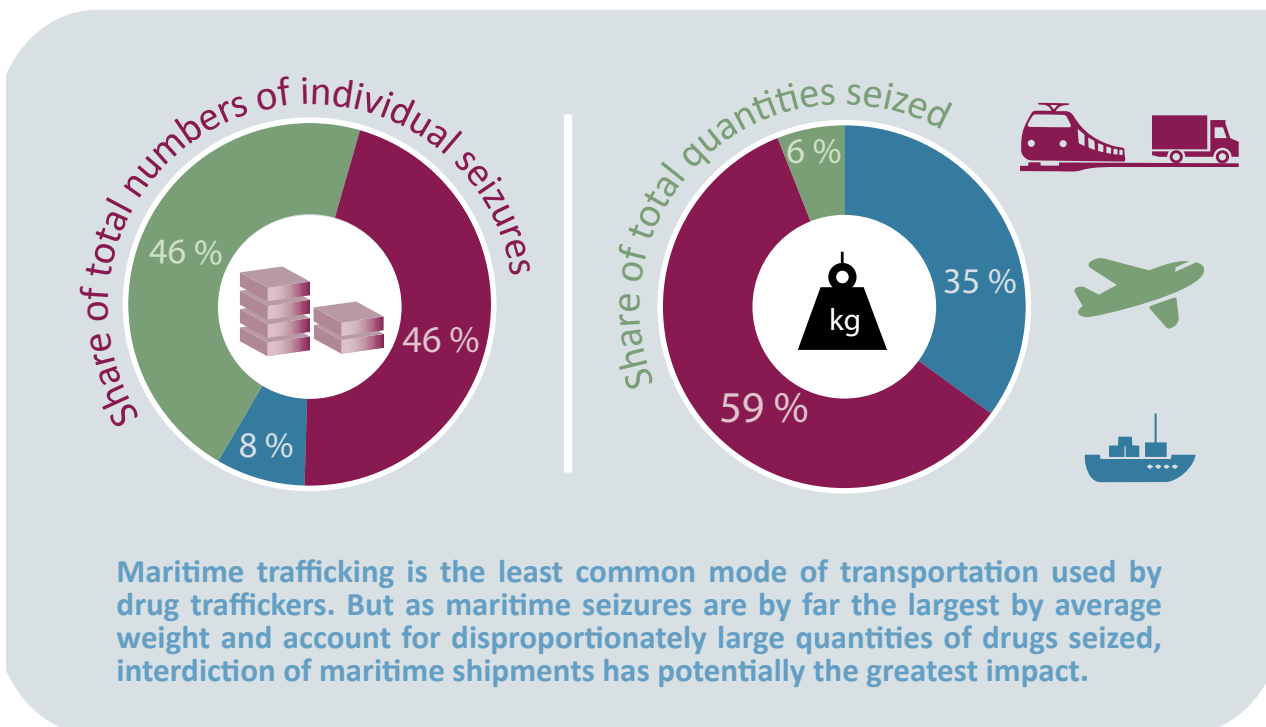
Non-fatal overdoses are underreported and are a common experience among drug users; however, the cumulative risk of death increases with each successive overdose.

DRUG SUPPLY AND MARKETS

The production of cannabis resin continues to be confined to a few countries in North Africa, the Middle East and South-West Asia, whereas cannabis herb is produced in most of the countries in the world. South America continues to account for practically all global cultivation of coca bush, and South-West Asia (Afghanistan) and South-East Asia (mainly the Lao People's Democratic Republic and Myanmar) continue to account for the vast majority of illicit opium poppy cultivation. Although the manufacture of ATS is difficult to assess, there are reports of ATS manufacture in all regions worldwide.

There may have been no major change in the regions in which illicit crop cultivation and drug manufacture take place, but the illicit drug markets and the routes along which drugs are smuggled continue to be in a state of flux. The "dark net", the anonymous online marketplace used for the illegal sale of a wide range of products, including drugs, is a prime example of the constantly changing situation, and it has profound implications for both law enforcement and drug trafficking.

A more classic example of this dynamic aspect is the continued shift in the routes used for smuggling opiates and



¹ Political Declaration on HIV and AIDS: Intensifying Our Efforts to Eliminate HIV and AIDS (General Assembly resolution 65/277, annex).

the fact that Afghan heroin may be reaching new markets. The growing importance of Africa as a transit area for Afghan heroin bound for Europe and other regions has been reflected in increasing seizures of heroin reported in recent years in some African countries, particularly in East Africa. Recent seizures also suggest that it may have become more common for large shipments of Afghan heroin to be smuggled across the Indian Ocean into East and Southern Africa. Moreover, Africa continues to be used as a trans-shipment area for smuggling cocaine across the Atlantic into Europe, and Eastern Europe is emerging as a transit area and as a destination. The quantities being smuggled are small but this may be an indication that the cocaine market is moving eastwards.

West Africa appears to have become an established source of the methamphetamine smuggled into East and South-East Asia via Southern Africa or Europe, with new trafficking routes linking previously unconnected regional methamphetamine markets. The established market for methamphetamine in East and South-East Asia continues to grow, while there are also indications of increasing methamphetamine use in parts of North America and Europe.

As opiates originating in Myanmar may be unable to meet the demand in South-East Asia, the so-called “southern route” could be increasing in importance as a conduit for smuggling Afghan heroin southwards from Afghanistan through Pakistan or the Islamic Republic of Iran. Trafficking networks using the Balkan route to smuggle Afghan heroin into Europe may be experimenting with a new route, leading through the Caucasus, and there are indications of heroin being trafficked from Iraq rather than from the Islamic Republic of Iran.

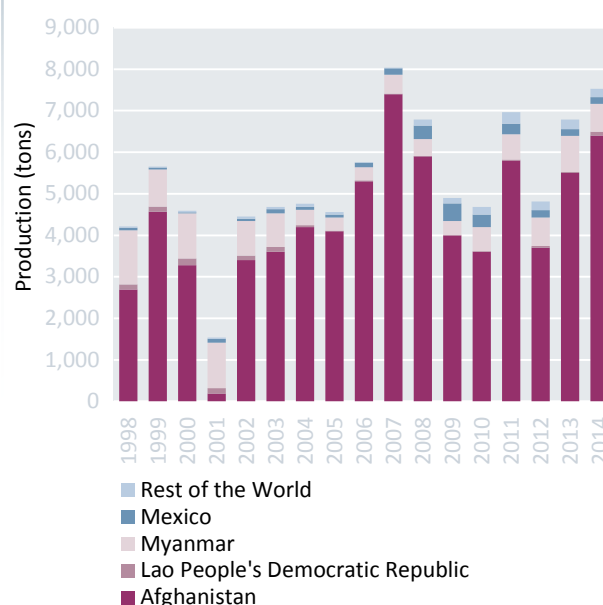
Not only are drug trafficking routes undergoing change, but there is also evidence that organized criminal groups, which in the past may have limited their trafficking activities to one drug type, are diversifying. For example, groups that previously focused on heroin trafficking appear to be increasingly engaging in trafficking in cannabis resin and methamphetamine.

To a certain extent, there has also been a shift in the focus of the trafficking routes themselves. There is increasing evidence that routes traditionally used for smuggling one type of drug are now being used for smuggling other drug types. While there appears to be an evolution in the countries reported to be used as transit hubs for certain drugs, such as African countries being used as transit areas for heroin and cocaine, certain African countries are also increasingly being used as transit areas for different types of drugs.

Opiates

According to the limited information available, global prevalence of the use of opioids (0.7 per cent of the world’s adult population, or 32.4 million users) and the use of

Global potential opium production, 1998-2014



Source: Period 1997-2002: UNODC; since 2003: national illicit crop monitoring system supported by UNODC.

opiates (0.4 per cent, or 16.5 million users worldwide) has remained stable, whereas global opium poppy cultivation in 2014 reached the highest level since the late 1930s. This was mainly attributable to the fact that opium poppy cultivation reached historically high levels in the main country in which opium poppy is cultivated, Afghanistan, where potential production of opium also continued to increase. Global opium production reached 7,554 tons in 2014, also the second highest level since the late 1930s, though global seizures of opium, heroin and illicit morphine decreased by 6.4 per cent from 2012 to 2013.

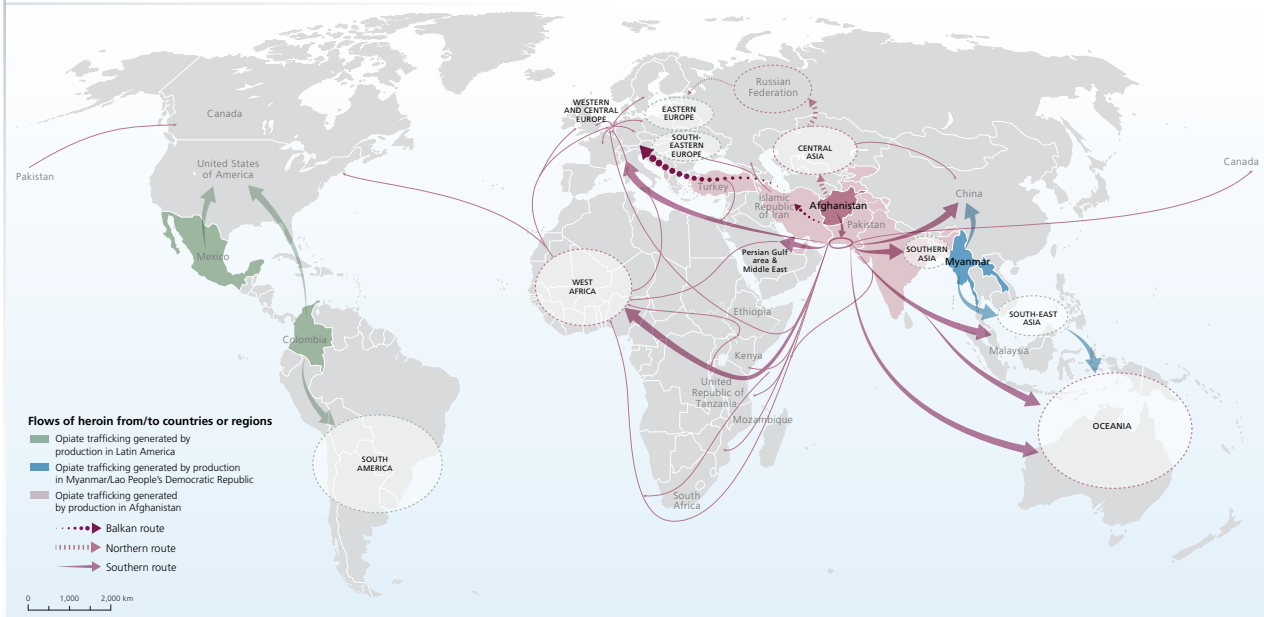
The increase in estimated opium and heroin production has not yet been reflected in an increase in heroin supply in most regions. The destination of the additional quantities of heroin is unclear, but there are signs of increases in the availability of heroin and in heroin-related indicators such as mortality and medical emergencies in some countries.

The prevalence of opioid use remains high in North America (3.8 per cent) in relation to the global average. In the United States of America, there are indications of a partial shift in the use of opioids towards heroin use, attributable in part to changes in the formulation of OxyContin, one of the main prescription opioids that are misused, as well as an increase in the availability of heroin and a decrease in its price in some parts of the country. With the number of heroin-related deaths increasing considerably (from 5,925 in 2012 to 8,257 in 2013), reaching the highest level in a decade, the number of drug-related deaths continues to rise in the United States.

There are signs of change in the supply of heroin in different regions. In North America, although 90 per cent of



Main global trafficking flows of opiates



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

Notes: The trafficking routes represented on this map should be considered broadly indicative and based on data analyses rather than definitive route outlines. Such analyses are based on data related to official drug seizures along the trafficking route as well as official country reports and responses to annual report questionnaires. Routes may deviate to other countries that lie along the routes and there are numerous secondary flows that may not be reflected.

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the heroin in Canada originates in Afghanistan, the United States continues to be supplied by heroin manufactured in Central and South America. However, analysis of seizures indicates that while Afghan heroin currently accounts for relatively little of the heroin seized in the United States, this may be changing. In Oceania, there have been fluctuations in the Australian market between the supply of Afghan heroin and heroin originating in the Lao People's Democratic Republic or Myanmar, but it seems that in 2013 the latter was predominant. This underlines the fact that the reach of organized criminal networks continues to be global and that organized criminal groups are becoming increasingly sophisticated and versatile.

In Europe, the heroin market is also marked by variations, albeit at the subregional level. There are indications of a stable or downward trend in the use of heroin in Western and Central Europe, while heroin seizures have recently increased in Eastern and South-Eastern Europe, where the absence of new data prevents the assessment of recent trends in the prevalence of drug use.

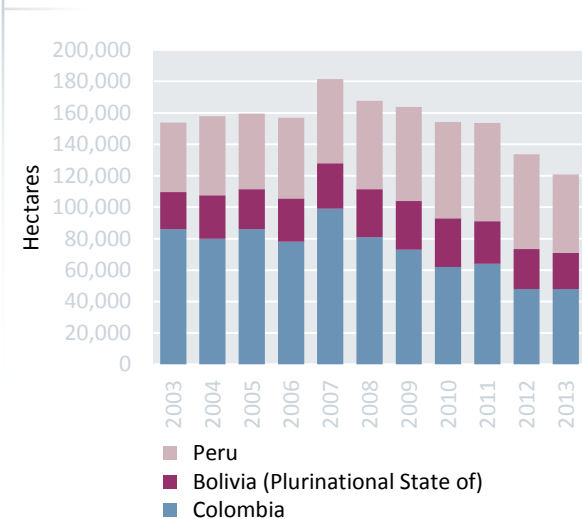
In the absence of any recent reliable data on the extent of the use of opioids in most parts of Asia, it is difficult to determine a trend, but the use of opioids is generally considered to be stable. Asia remains the world's largest market for opiates, accounting for an estimated two thirds of all users of opiates, and the total number of registered heroin users in China is increasing. Data on Africa remain limited, but it is likely that the increasing importance of

the region as a transit area for Afghan heroin bound for markets in other regions has had an impact on the use of opiates in Africa.

Cocaine

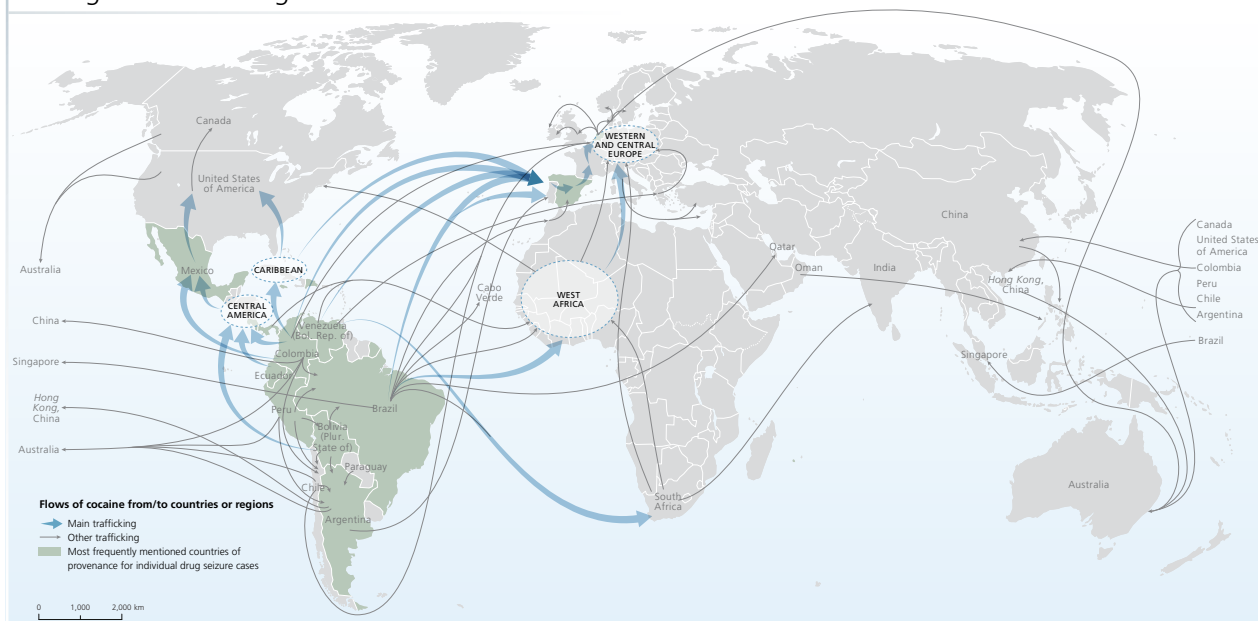
Not only did coca bush cultivation continue to decline in 2013, reaching the lowest level since the mid-1980s, when estimates first became available, but the annual prevalence

Coca bush cultivation, 2003-2013



Source: UNODC, responses to annual report questionnaire and other official sources.

Main global trafficking flows of cocaine



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

Notes: The trafficking routes represented on this map should be considered broadly indicative and based on data analyses rather than definitive route outlines. Such analyses are based on data related to official drug seizures along the trafficking routes as well as official country reports and responses to annual report questionnaires. Routes may deviate to other countries that lie along the routes and there are numerous secondary flows that may not be reflected.

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of cocaine use (0.4 per cent of the adult population) also continued to decline in Western and Central Europe and North America. In those subregions, which, along with South America, have the world's largest cocaine markets, the prevalence of cocaine use is highest. Supply reduction measures may have contributed to the decline in coca bush cultivation in the coca-producing countries, leading to a reduction in the availability of cocaine and the shrinking of some of the principal cocaine markets.

In addition to the human cost of cocaine manufacture and trafficking, illicit coca bush cultivation and the transformation of coca into cocaine continue to cause serious environmental damage even though coca bush cultivation has decreased. In Colombia alone, roughly 290,000 hectares of forest were lost as a direct result of coca crop cultivation between 2001 and 2013, while the slash-and-burn method used to clear new plots has led to increased erosion. Further environmental damage has been caused by the herbicides and fertilizers used in coca bush cultivation and the chemicals employed in the transformation of coca into cocaine.

Cannabis

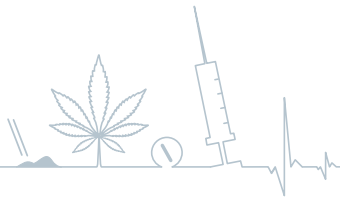
Cannabis use is increasing and continues to be high in West and Central Africa, Western and Central Europe and Oceania, as well as in North America, where the most recent data available indicate an increase in the prevalence of cannabis use in the United States. Europe is still one of

the world's largest markets for cannabis resin, but its use is concentrated in a few countries. The use of cannabis herb is more evenly spread across European countries, and the market in Western and Central Europe is shifting from cannabis resin to cannabis herb.

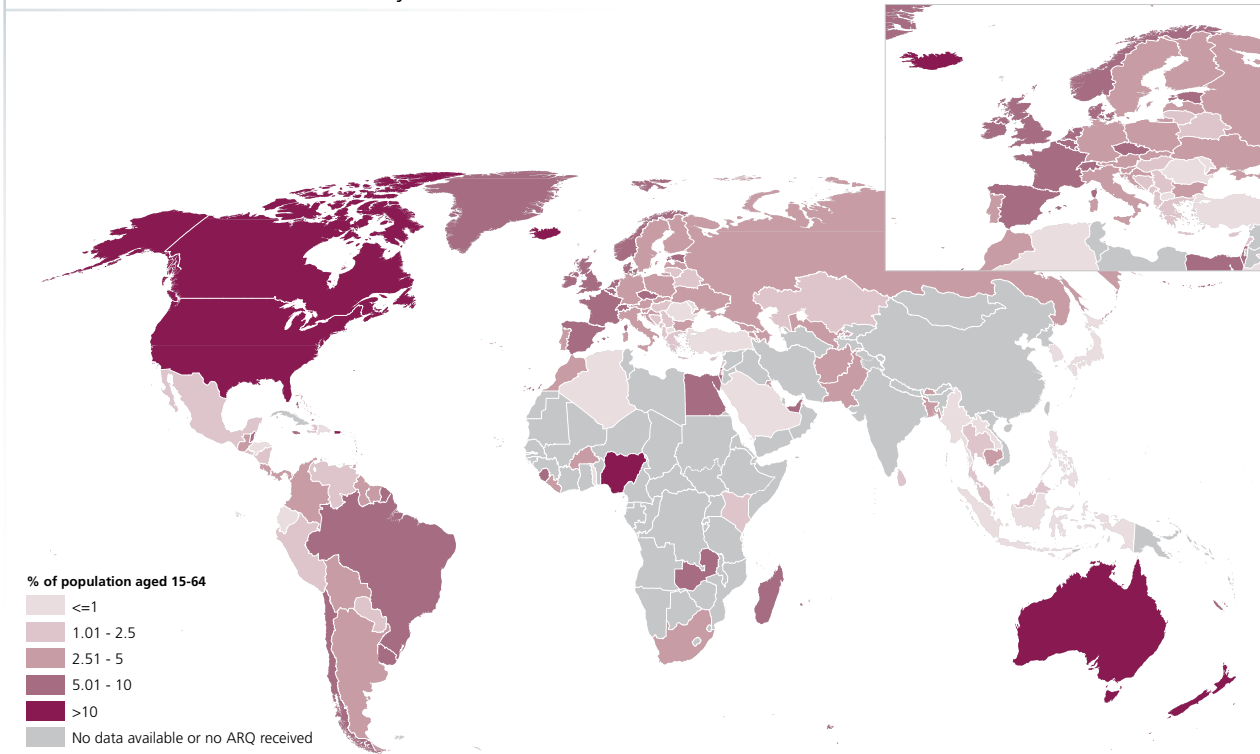
Advances in cannabis plant cultivation techniques and the use of genetically selected strains have led to an increase in the number of cannabis harvests, as well as in the yield and potency of cannabis. The potency of cannabis, commonly measured in terms of the concentration of THC (Δ^9 -tetrahydrocannabinol, the main psychoactive ingredient in cannabis), has been increasing in many markets over the past decade, leading to growing concern about the potential of cannabis to cause serious health problems. Despite the fact that increasing professionalism and sophistication have enhanced the capacity of cannabis plant growers to avoid detection by law enforcement authorities, data for 2013 show an increase in the quantities of cannabis herb and cannabis resin seized worldwide.

Synthetic drugs: amphetamine-type stimulants and new psychoactive substances

The global market for synthetic drugs continues to be dominated by methamphetamine. The increasingly diversified market for methamphetamine is expanding in East and South-East Asia, where it accounts for a large share

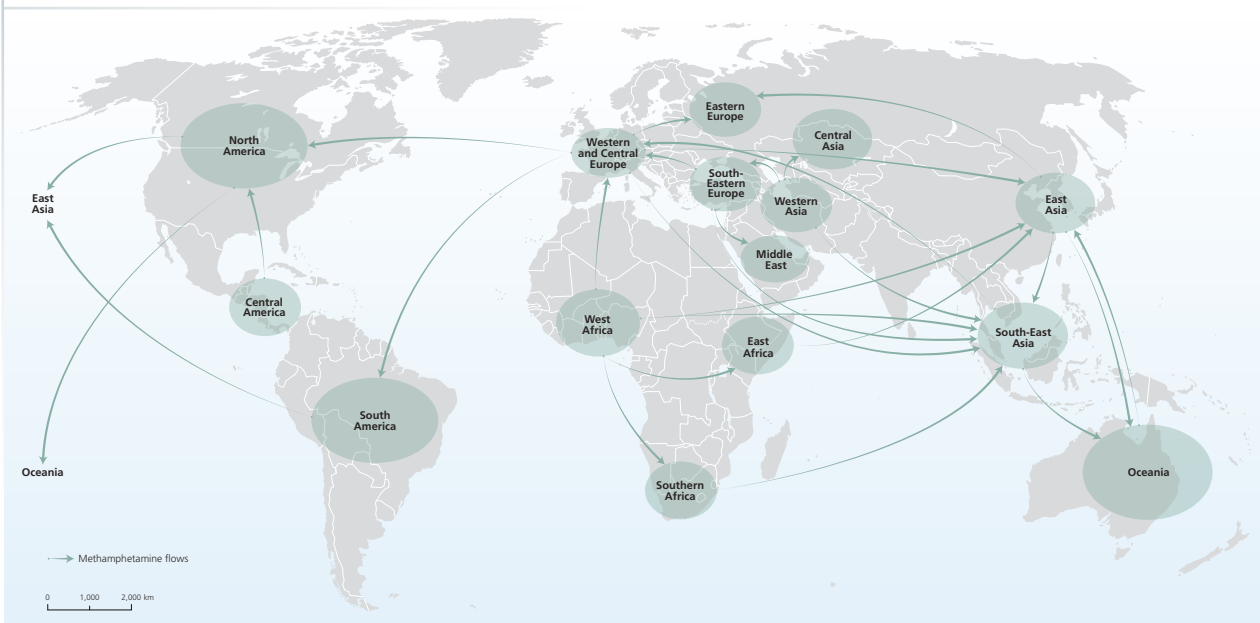


Use of cannabis, 2013 or latest year available



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. 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).

Methamphetamine flows as perceived by recipient countries, 2011-2013

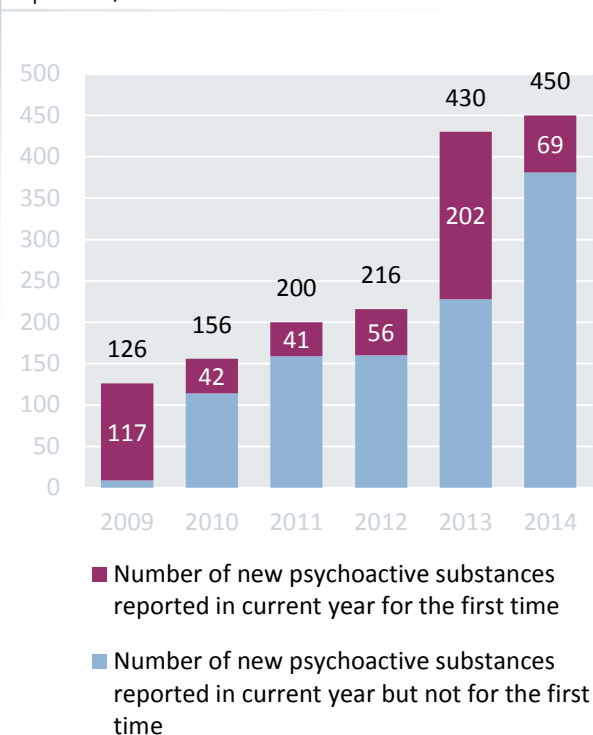


Source: UNODC, responses to annual report questionnaire, 2011-2013.

Note: The origins of the flow arrows do not necessarily indicate the source/manufacture of methamphetamine. These arrows represent the flows as perceived by recipient countries. Flow arrows represent the direction of methamphetamine trafficking and are not an indication of the quantity trafficked.

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Number of new psychoactive substances reported, 2009-2014



Source: UNODC, early warning advisory on NPS, 2009-2014.

Note: This graph represents only the number of different NPS reported during the respective reporting year. Not all NPS reported in one year were necessarily reported in the following year(s).

of the people receiving treatment for drug use in a number of countries, and use of crystalline methamphetamine is increasing in parts of North America and Europe. Surging seizures since 2009 also point to a rapid expansion in the global ATS market, with the total quantity of seized ATS almost doubling to reach over 144 tons in 2011 and 2012, the highest level since the United Nations Office on Drugs and Crime (UNODC) began systematic monitoring, and remaining at a comparatively high level in 2013.

According to seizure data, the global “ecstasy” market is smaller than the global market for amphetamine and methamphetamine and remains confined to a few regions. East and South-East Asia and Oceania may be emerging as a driver of the global market for “ecstasy”, while the market seems to be on the decline in the Americas, where “ecstasy” seizures dropped by 81 per cent between 2009 and 2012. The largest “ecstasy” markets continue to be East and South-East Asia and Oceania, although seizures of “ecstasy” declined there in 2013.

The “ecstasy” market has been on the decline in several European countries for some time, with mephedrone and other NPS perhaps serving as a substitute. The use of mephedrone and synthetic cannabinoids may have declined in some markets in recent years, but a growing number of countries have reported a wider range of emerg-

ing NPS, as well as worrying developments such as the injecting use of NPS. There continue to be limited data on recent developments in injecting drug use and polydrug use involving NPS; these particular forms of drug use could pose a serious challenge for providers of treatment for drug use and health-care providers.

The sheer number, diversity and transient nature of NPS currently on the market partly explain why there are still only limited data available on the prevalence of use of many NPS. Those difficulties also explain why both the regulation of NPS and the capacity to address health problems related to NPS continue to be challenging. Different countries report that NPS continue to proliferate in the marketplace, in terms of both quantity and diversity. By December 2014, a total of 541 NPS had been reported by 95 countries and territories to the UNODC early warning advisory. Synthetic cannabinoids continued to account for the majority of NPS reported in 2014 (39 per cent); they were followed by phenethylamines (18 per cent) and synthetic cathinones (15 per cent). The growing number of NPS available worldwide indicates that the market for synthetic drugs is becoming even more diversified.

ALTERNATIVE DEVELOPMENT

Illicit crop cultivation: breaking the vicious cycle

Illicit crop cultivation is driven by situation-specific combinations of vulnerability and opportunity factors. As survival and subsistence are real considerations for many households that engage in illicit crop cultivation, they are frequently risk-averse and take into account a variety of factors when making decisions on such cultivation.

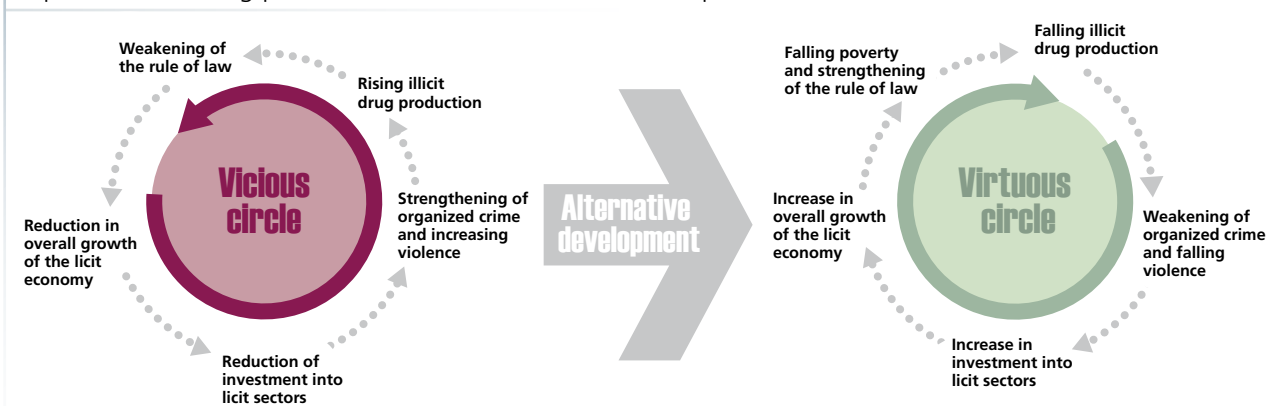
One of those factors is the specific nature of the illicit crops — agronomic aspects, durability of the product, price, ease of sale, etc. All major illicit crops are particularly attractive because they produce quick returns from non-perishable products. Illicit crop cultivation can thus provide farmers with the necessary short-term economic means to survive, but it does not allow the area to develop its licit economy and institutional environment.

Other factors include geographical and environmental factors, such as climate, the availability of water and arable land, and proximity to market; household-specific socio-economic factors, such as level of income, existing employment opportunities, access to credit and size of landholding; developmental facilities such as access to roads, the power grid and educational and health services; and sociopolitical and institutional factors, such as security, government control and rule of law. Illicit crop cultivation tends to take place in marginalized, isolated areas characterized by limited government control, unclear land rights, lack of infrastructure, poverty and violence, which are areas where few international development agencies tend to operate.

Alternative development is an approach aimed at reducing



Impact of illicit drug production and of alternative development interventions



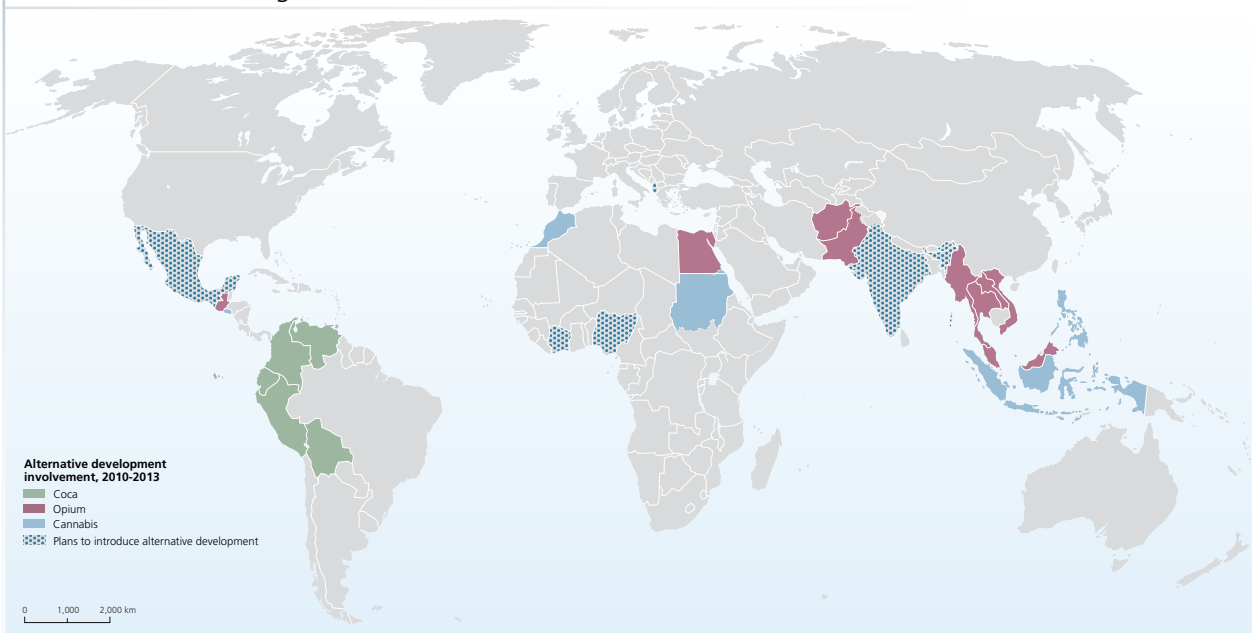
the vulnerabilities that lead to involvement in illicit crop cultivation and ultimately eliminating such cultivation. Alternative development can break the vicious cycle of rising illicit drug production, weakening rule of law, decreasing growth of the licit economy, decreasing investment in licit sectors, strengthening organized crime and increasing violence by effectively promoting factors fostering a sustainable licit economy. In the long run, this can attract investment and help to develop the necessary infrastructure, thereby changing and sustaining the livelihood of rural communities.

Alternative development is not generally an objective in itself but rather a means to an end: it is aimed at contrib-

uting to an enabling environment for long-term rural development without illicit crop cultivation. Alternative development acts as a catalyst, boosting development in areas with particular challenges related to the illicit drug economy.

The General Assembly at its twentieth special session, held in 1998, defined alternative development as a process to prevent and eliminate illicit crop cultivation “through specifically designed rural development measures in the context of sustained national growth and sustainable development efforts in countries taking action against drugs, recognizing the particular sociocultural characteristics of the target communities and groups”.² This defini-

Member States implementing domestic alternative development projects (as reported to the United Nations Office on Drugs and Crime), 2010-2013



Sources: UNODC annual report questionnaire and UNODC alternative development projects.

Note: Only countries providing sufficient information on the implementation of alternative development projects are included. 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.

2 Action Plan on International Cooperation on the Eradication of Illicit Drug Crops and on Alternative Development (General Assembly resolution S-20/4 E).

tion is used at the international level. Different definitions reflecting new strategies and approaches of alternative development have been developed by a wide variety of implementing countries, donors and practitioners.

National strategies or plans employ a balanced approach, complementing alternative development not only with other supply reduction strategies (particularly law enforcement and interdiction), but also with demand reduction strategies (prevention, treatment and rehabilitation). Another commonly integrated strategy — sometimes appearing as a cross-cutting theme or a separate policy — is the promotion of good governance or the strengthening of state institutions or the rule of law.

Where is alternative development implemented?

The bulk of alternative development is implemented in all the main coca- and opium-producing countries, as well as in some cannabis-producing countries and some minor opium-producing countries, which are located in South America, Central America, the Caribbean, Asia and Africa. A number of countries in Asia, Central America, Africa and Europe have also reported plans to implement alternative development activities (see map above).

Elements of alternative development

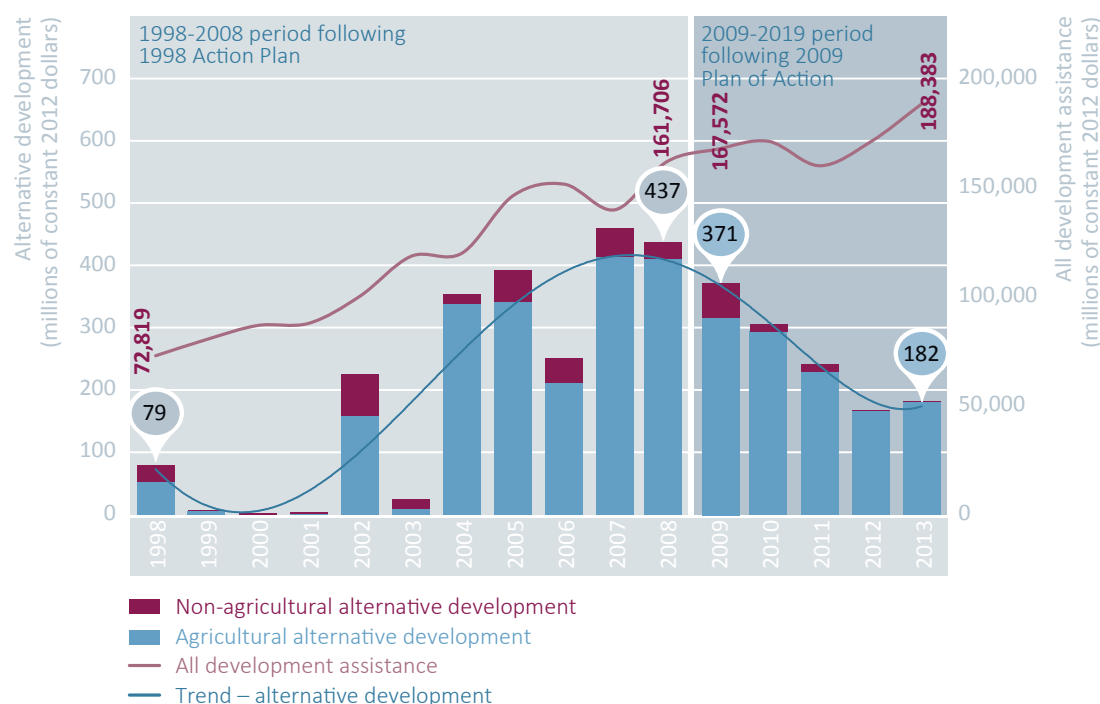
Alternative development is promulgated at the international level, but the evolution of alternative development

is driven at the country or even the local level. As the factors that push farmers towards illicit crop cultivation can differ greatly from one country or area to another, the strategic elements of alternative development must be tailored to the particular circumstances on the ground at the local level. No two alternative development projects or interventions are exactly alike, even if they are in the same area, but there are commonalities.

These general strategic elements are often similar and there are commonalities in the overall framework and approach, but the importance of their roles may vary from project to project and some may not feature at all. Success is very situation-specific and there is no manual or blueprint for alternative development. With the adoption of the United Nations Guiding Principles on Alternative Development,³ there is now a set of general guidelines outlining good practices in planning and implementing alternative development. The major components that feature, to a greater or lesser extent, in most alternative development projects are as follows:

- Income-generating alternatives are at the core of alternative development, as economic necessity tends to play an important role in a farmer's decision on whether to engage in illicit crop cultivation. Income-generating alternatives need to be viable and sustainable in order to decrease dependence on illicit crop cultivation.

Trends in global commitments to providing development assistance and alternative development made by donor countries of the Organization for Economic Cooperation and Development, 1998-2013



Source: OECD, International Development Statistics online database (data extracted on 19 December 2014), annex.



- The marketing of products of alternative development is an important component of any project. To enhance marketing options and reduce some of the vulnerabilities related to illicit crop cultivation, alternative development programmes often try to involve the private sector. This approach has enabled products of alternative development to have access to markets not only at the local and national levels, but also at the international level.
- Long-term political and financial support is essential to the success of alternative development. Time is needed not only to address the economic drivers behind illicit crop cultivation, but also to build trust with local communities and to develop long-term investment. Direct participation by farmers and communities plays a key role in the design and planning of alternative development activities, especially in areas where no public institutions can fulfil such a role.
- Land tenure and the sustainable management and use of land are crucial to the long-term success of alternative development, as lack of access to land can be one of the drivers of illicit crop cultivation. As they require several years to produce yields, most alternative cash crops require the long-term engagement of farmers; without access to land, however, farmers are reluctant to cultivate long-term cash crops.
- Environmental protection plays an increasingly important role. Alternative development has both a component of “do no harm”, trying to minimize the environmental impact of alternative development interventions, and a proactive component, in which programmes directly or indirectly contribute to the protection of the environment and biodiversity and the mitigation of climate change.

What is successful alternative development?

Measuring the coverage, quality and effectiveness of alternative development interventions and services with regard to addressing the drug problem is challenging. The long-term nature of alternative development interventions is a factor in the complexity of measuring their success. Experience has shown that the success of alternative development in terms of the sustainable reduction of illicit crop cultivation can only be determined after several years of intervention. Attempts to gauge success over shorter periods have been found to be counterproductive, particularly when the resulting information is used for immediate action. The fact that projects take place at the local level but their impact is often evaluated at the national level can also affect perceptions of whether an alternative development programme has been successful or not.

In assessing alternative development programmes, indicators related to human development, socioeconomic conditions, rural development and the alleviation of poverty, as well as institutional and environmental indicators, have

been applied, in order to ensure that the outcomes are in line with national and international development objectives, including the Millennium Development Goals. Furthermore, efforts have been undertaken to consolidate a set of indicators that can be used to monitor the impact of alternative development.

In some cases, long-term commitment to alternative development has resulted in a sustainable reduction in illicit crop cultivation in the country or area concerned. More than 40 years of experience with alternative development have shown that it works when there is a long-term vision, adequate funding and the political support to integrate it into a broader development and governance agenda. Sustainable results in reducing illicit crop cultivation in different communities throughout the world have been obtained when the socioeconomic development of communities and the livelihood of rural households have improved.

Political commitment

Despite the considerable attention given to alternative development at the international level, the political support has not translated into continued funding from donor countries. Alternative development has featured prominently in documents prepared for the Commission on Narcotic Drugs and the special sessions of the General Assembly on the world drug problem; however, funding for alternative development has decreased considerably in the past few years. The twentieth special session of the General Assembly, held in 1998, triggered renewed impetus in funding alternative development in the spirit of “shared responsibility”, but overall gross disbursements of alternative development funds from member countries of the Organization for Economic Cooperation and Development (OECD) have declined by 71 per cent since the adoption of the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem.⁴ In 2013, those disbursements accounted for just 0.1 per cent of global development assistance.

Over the past four decades, alternative development has been largely funded by external donors, including OECD member countries in North America, Europe and Oceania and non-member countries such as China, Iran (Islamic Republic of), Saudi Arabia and Thailand. But in recent years, South American countries such as Bolivia (Plurinational State of), Colombia and Peru and Asian countries such as Thailand have been increasingly using domestic funding to support alternative development activities.

In the process of connecting “local to global” that is currently taking place, best practices and lessons learned from local experiences within national strategies are

⁴ See *Official Records of the Economic and Social Council, 2009, Supplement No. 8 (E/2009/28)*, chap. I, sect. C.

exchanged. This reinforces efforts by UNODC, the Commission on Narcotic Drugs and other entities to foster more South-South cooperation (a broad framework for collaboration among countries of the South), pursuant to the United Nations Guiding Principles on Alternative Development.

The way forward

Alternative development has contributed to economic development (mostly in rural areas) in order to target the underlying factors and root causes of illicit drug economies. The new sustainable development goals (the post-2015 development agenda) may bring a new vision and provide alternative development with a new theoretical framework, in addition to socioeconomic development — its “traditional” pillar.

The new development agenda, emerging from the report of the Open Working Group of the General Assembly on Sustainable Development Goals,⁵ points to the crucial role of environmental protection and recognizes that secure and equitable rights to land and natural resources are central to the achievement of sustainable development. These and other elements such as the rule of law and “effective, accountable and inclusive institutions”, as described in goal 16 in the report, are, in part, already addressed by alternative development.

Different national experiences have shown that there may be opportunities for the alternative development approach to be applied to counter illegal activities other than illicit crop cultivation. Alternative development could be used to support communities affected by, for example, drug trafficking, illegal mining or wildlife and forest crime. With these broader applications, the concept of alternative development could be extended well beyond the existing “preventive alternative development” strategy that targets areas at risk of being used for illicit crop production.

5 A/68/970 and Corr.1.