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Calculating business: With seeds provided by the UNODC Wa project, the village of Son Ke in the Southern Wa region of Myanmar has gone beyond self sufficiency and can now sell its surplus crops.

Photo: Xavier Bouan



UNITED NATIONS
Office on Drugs and Crime
Regional Centre for East Asia and the Pacific

Indonesia: Women Advocate Family Resilience Against Drug Abuse and HIV/AIDS

KOWANI, a federation of national voluntary women's organizations based in Jakarta, Indonesia, hosted an international conference called "The Role of Family Resilience in the Context of Drug Abuse and HIV/AIDS," in December 2002.



Over 300 people attended the conference including the President of Indonesia, Mrs Megawati Soekarnoputri as well as officials from ASEAN embassies, representatives of donor agencies and numerous Indonesian NGO's involved in combating drug abuse and HIV/AIDS.

KOWANI was formed in the early 20th century, and in 2000 five national women organisations together formed a "Network Against Drug Abuse" which has since carried out community-level activities such as training for drug information workers, development of drug IEC

activities for KOWANI members, parent teacher associations, neighbourhood and community groups and religious teaching groups. The growing concern about the spread of HIV/AIDS prompted the group to change its name to "Network Against Drug Abuse and HIV/AIDS."

Need for new thinking: How to reverse the trend of increasing HIV prevalence from injecting drug use

During her opening speech to the conference President Megawati highlighted one of the paradoxes about the fight against HIV/AIDS in the context of drug abuse:

"Efforts in this fight have taken many forms, such as seminars and workshops, to increase people's awareness of the issues. Still, while we expect infection rates to decrease, the facts show just the opposite, there are increasing trends towards drug abuse not only in the big cities but also in remote areas."

This paradox was the main motivation behind the organization of the conference as KOWANI members noted that Indonesia is no longer just a transit area but that drugs are now marketed in Indonesia and even school children are being targeted. The members also confirmed that drug abuse was very much part of social change as lifestyles become more individualistic and family life is disrupted. One of the principal aims of the conference therefore, was to highlight the need to develop family based strategies against drug abuse and HIV/AIDS.

President of KOWANI, Mrs Ine Soekaryo, highlighted in her address that to prevent drug use and HIV/AIDS there is a need for developing life skills and parenting skills as early as possible, so parents will be role models for children, guiding them to say no.

In her speech President Megawati emphasized that it was not enough to place the blame for increasing drug abuse and infection of HIV/AIDS on social changes but stated that, "This conference has the responsibility to find answers and to make strategic recommendations to fight against drug abuse and HIV/AIDS.

We Have Already Agreed...

The resolution on HIV/AIDS of the 44th Commission on Narcotic Drugs approved by consensus by all UN member states recognizes the need for access to drug treatment, sterile injecting equipment and condoms. It also encourages states "to consider potential impact on spread of HIV, when developing, implementing and evalu-

ating policies and programmes for the reduction of drug demand and supply.

The UN system position paper on HIV prevention among drug users, jointly approved by all UN bodies in 2001 after extensive debate, recommends that the response package to the dual epidemic should be focused on:

- Primary prevention of drug abuse (i.e. life skills education and drug education)
- Drug dependency treatment (including substitution treatment where appropriate and rehabilitation)
- Outreach services, HIV/AIDS education, access to clean needles and syringes, and condoms
- Legal and social services
- Voluntary HIV testing/ counseling, psychosocial support of those HIV infected.

This is an urgent and important priority for you. New ways must be sought to fight against these two problems. If lifestyle changes need to be made, and are thought to be the most effective method of combating these problems then these changes need to be clear, simple and easily comprehensible for the public.”

President Megawati also highlighted the fact that much was already known about the connections between drug abuse and HIV/AIDS commenting that “It is widely known that the infection is not only caused by sexual behaviour but also comes from drug abuse. Although information and advice about the negative effects of drug abuse are widely available, they are often ignored.”

This sentiment was very much endorsed by the KOWANI members attending the conference and participants agreed that a key factor in reducing substance abuse and thereby infection rates was providing education and support for children and young people. A workshop about giving parents the necessary skills to educate their children about drug abuse was held and as a result the concept became part of the pledge signed at the end of the conference. This pledge stated

that “We, the participants of the National Gathering of Indonesian Women (...) express our firm will to mobilize our potential, improve our life skill and our parenting skill to save the lives and the future of our children so that they are enabled to say “no” to drugs and are aware of the risk of HIV/AIDS.”

Other workshops along this theme included the prevention of HIV/AIDS through enhancing family resilience at all levels of the community and also a workshop about the use and development of information and educational materials at



the grassroots level and the important role that this can play.

At the end of the conference, the attendants formed a five point pledge summarizing their commitment to fighting drug abuse and HIV/AIDS. The pledge included vows to promote family resilience as a way to combat these problems, lobbying all parts of the government to ensure stringent law enforcement, and to begin the fight against these problems by starting with those organizations closest to them. Also included was a commitment to strengthen regional and national cooperation.

As a result of the conference, KOWANI is now in the process of discussing ways to develop the parenting skills programme at a provincial level. KOWANI also intends to continue its Peer Group Education Programme which encourages discussion among young people about drug abuse and HIV/AIDS. As a more long term goal, and in line with its pledge to encourage international cooperation, KOWANI is hoping to establish an ASEAN or East Asia and Pacific Women’s Gathering to exchange experiences and know-how about drug abuse and HIV/AIDS.

Stigma Must Be the First To Go

Underscoring that drugs and HIV/AIDS are everybody’s business – these are not features of the “underworld” but rather form part of today’s society – UNODC Regional Representative Sandro Calvani sent a message not only to participants of the KOWANI conference but to a larger Asian audience. In some Asian countries, the amphetamine-type stimulant (ATS) epidemic of drug use has gone in four years from zero to more than 3 million users.

Researchers report that in many parts of Asia, Indonesia included, more than two thirds of new HIV infections are due to injecting drug use (IDU). Communities who react in the worst possible way – *do not hear, do not talk, do not see* – are often more responsible for the scourge than the affected people themselves. Lifeskills education for young people is a response to the dual epidemic which has proven effective

in other countries. Lifeskills education can do what force cannot: Break barriers made of silence, ignorance, and ideologies without scientific evidence that stand in the way for pragmatic interventions. When youth know what will steal or destroy their adult life, they will avoid risky behavior. Asia has a narrow window of opportunity to stop the dual epidemic. Maybe less than two years. Beyond that time the epidemics will be almost unstoppable and will cause a number of deaths larger than all wars in Asia put together.

It is possible to circumvent the trend: Thailand has gone from 143 000 new HIV positive per year in the early nineties to 25 000 today. A concerted campaign to address stigmatization of and discrimination against people living with HIV/AIDS as well as high risk groups is a necessary condition for successful HIV/AIDS prevention. Research has found that every country successful in controlling the epidemic first removed the stigma.

Stigma and discrimination are HIV’s best friends. They are created by and thrive on fear. Because of stigma and discrimination, people are afraid of being tested. They may refrain from using a condom because they are afraid that their partner will think they are suggesting it preciously because they are HIV positive. Discrimination and stigma harms us all.

HIV/AIDS does not contain itself to marginalised groups such as sex workers or drug users. Work in India and other countries has shown that effective HIV prevention programmes target both marginalized and general populations.

HIV positive people are most often fully contributing members of society and among the most powerful and effective voices in HIV prevention. The enemy to beat is the virus, not the person, the drug user. Only policies focused on the virus will work. All others are part of the problem.

– Melanie Adams, UNODC Bangkok.

Based on excerpts of speeches of President Megawati Soekarnoputri and UNODC Regional Representative Sandro Calvani.

Beyond Anecdotes: Community-Based Assessment of Drug Abuse in Highland Vietnam



Black Thai peerworkers participating in the assessment.

The northwest mountainous region of Vietnam that borders Laos and China is an ideal environment for the cultivation of opium poppy. Blanketed with a network of overland trails, some following traditional ‘opium caravan’ routes, it is also an ideal environment for trafficking – in everything from toilet seats to heroin.

In fact, for generations the inhabitants of this frontier region had been encouraged by successive governments to do just that. Opium poppy became a staple cash crop for many households. Subsisting on a single crop of upland rice and maize, opium delivered cash income which helped a household bridge the inevitable spring period of food shortage.

However, recent successful government campaigns aimed at eradicating the cultivation of opium poppies are feared

to have induced a shift from traditional opium smoking among ethnic minorities in this area to the introduction of heroin, which may be smoked, inhaled, and more problematically, injected.

Current developments in the etiology of drug use in Northwestern Vietnam have bred concern among Vietnamese authorities and international non-governmental organizations that the region is primed for an explosion of HIV infection. National statistics show a year-on-year increase in reported cases of HIV



for 2002 of over 26%. Over 60% of all HIV positive cases in Vietnam are linked to intravenous drug use (IDU). With an absent supply of domestically-produced opium, local demand is increasingly being met by trafficking of opium and heroin from Lao PDR. Inevitably, this influx of drugs is also bringing with it an influx in 'new' drug-use behaviours.

Numerous countries have experienced exponential eruptions of HIV infection related to intravenous drug use. Many rural provinces in Vietnam are already showing signs of this occurring. For example, in northern Quang Ninh province 90% of all IDUs tested for HIV in 2002 were positive. In another northern province, Thanh Hoa, it was 48%. The epidemic is apparently expanding, and migrating from its traditional urban hot spots of Hanoi, Ho Chi Minh City and Hai Phong.

At the same time, leading authorities have noted that with appropriate interventions such catastrophic rates of infection are eminently preventable.

To head off such a disaster in the border highlands of northwestern Vietnam, the Vietnamese government Committee for Ethnic Minorities (CEM) formed a partnership with UNODC. The two offices formulated a project to evaluate the drug use environments in these areas, as well as to assess the prevalence of risk behavior, with a goal of devising effective and culturally appropriate interven-

tions both to reduce the overall demand for drug use in these remote border areas, and to reduce drug-related harm as a result of this demand.

With knowledge of the drug use and risk-related environments in these areas based almost exclusively on either anecdotes or cultural myths, what was first required was an assessment of the situation.

The assessment plan necessitated two phases. The first was to consist of a week-long workshop and training period for all personnel taking part in the project. This included 'professional' researchers, as well as voluntary local peers. The local peer workers consisted primarily of ethnic minorities who had specific knowledge of the drug use situation in their home communities either because they were local government cadre or because they were in fact current or recovering drug users themselves. In some cases these two categories would overlap. In total 72 men and women were recruited to be local project participants, representing seven different highland ethnic groups, and an age range from 18-68.

During the course of the workshop peer workers participated in community building exercises, received training in basic interview skills, and learned how to protect the confidentiality of informants they would later interview. They also assisted in designing the interview forms used in their assessment activities.

It was decided that the professional researchers would gather information in three separate and distinct ways in each location. First, they were to organize meetings with local peer workers to distribute and collect interview forms. Second, each researcher was to personally plan and execute interviews with province, district, and commune officials regarding the drug use environment. Finally, each researcher was to conduct ethnographies of their assigned district and communes. This necessitated the ability to talk freely with local residents, students, shopkeepers, and farmers. It required the freedom to walk unimpeded through the streets of the communes to note the availability of clean needles, injecting equipment, and condoms, to observe the prevalence of discarded needles as evidence of heroin use, and to determine likely meeting spots for procuring and injecting heroin.

The local peer workers were tasked with conducting interviews among their fellow commune residents. Each was given a set of interview forms for use with drug users and a set of forms for use with non-drug using citizens. At weekly meetings, the peer workers were to report any difficulties with the project, turn in their completed interview forms, and receive payment for each interview they had done.

The assessment is on-going. However with its large-scale participation – in both design and implementation – of local

“When darkness falls between six and six-thirty in the evening, residents return to their houses to prepare dinner, watch soccer matches on television, and dig in under multiple blankets to ward off the icy night time temperatures. Traffic along Highway 6 slows to a trickle of motorbikes and pedestrians. Most of the shops are closed by this time, with the exception of a few restaurants which stay open late to cater to long haul truckers who have parked their vehicles for a break. These restaurants serve a few basic dishes, but their main business is in dispensing *ruou*, a locally-made rice-based moonshine. *Ruou* is plentiful and cheap. It is also an indispensable element of daily life. Although no townspeople mentioned the role played by truckers in the drug trade, it is clearly these same drivers, sitting here sipping their rice wine, who transport the majority of narcotics from the Laotian border down the length of Highway 6 into Hanoi and its environs” (Project Field Notes, 2002).



“The educational level of most peer workers was quite low. Few had finished high school, however all could read and write well enough to administer the survey forms. Furthermore, each of them was fluent in their own ethnic language and in Vietnamese. It cannot be said that any in the group were wealthy, even by Hanoi standards. In this agricultural region most families rely on subsistence farming and use cash to purchase only a few necessities such as cooking oil, motorbike fuel and the ubiquitous Saigon brand menthol cigarettes that come cheap at 2,000 dong a pack. The fact that small denomination bank notes are repeatedly circulated in this region is evidenced by the generally beaten, tattered, and taped appearance of one thousand, five thousand, and ten thousand dong notes (Project Field Notes, 2002)”

ethnic minority drug users, as well as its conduction in remote and acknowledged border drug trafficking areas, this activity remains one of the first of its kind.

Preliminary results are trickling in, and they do not appear encouraging. Drug use continues to grow and behaviour continues to change, especially among school-aged youth, and around urban settlements. While opium smoking remains the dominant form of drug use behaviour, among those who do inject, sharing of equipment appears to be high and almost universal. Evidence from the training workshop shows that knowledge among most highland ethnic minority participants of HIV remains largely non-existent.

The absence of pharmacies and other pharmaceutical vendors in these highland areas, and the unwillingness of those that are there to sell syringes and needles, only contributes to the creation of local drug-related harm. Drug use prevention efforts are uncoordinated, and lack any foci on audience-targeting. Propaganda fails to be



promoted in local dialects, or in forms amenable to those who are illiterate. Treatment efforts and facilities are often inadequate and under-funded. Health-care and education are rudimentary, if available at all.

There are some positive signs, however.

The number of IDUs remains low, as does the known number of HIV cases. Targeting intervention and outreach efforts at such a low number of known cases poses great potential for success. Cooperation with local authorities remains high and committed. Recognising the harm potential, they are active in supporting these intervention efforts.

But there remains much to do, and time is running out. The three highways in the region are about to be upgraded. Previously isolated hamlets are being connected to the transport network. New border-crossings are being opened, and large export zones are being created with an eye to expanding the scope and volume of cross-border trade.

Unfortunately, with this planned increase in the movement of goods and people will also come an increase in drug-related risk and harm. One can only hope now that we are here, that we are also in time.

– Jason Eligh, UNODC Hanoi.



More than half of the peerworkers are drug users.

The Road to Opium Elimination in the Wa Special Region

In 2002 Myanmar, the world's second largest opium producing country, cultivated over 820 tons of raw opium with the potential to supply more than 80 tons of heroin to the world market. With increased eradication efforts and alternative development activities in the opium growing areas, production in Myanmar has declined more than 25% in 2002 compared to the year before.

The Wa Special Region accounts for over 20% of the total opium production in Myanmar. In support of the National 15 Year Narcotic Elimination Plan, the Wa government agreed to eradicate opium cultivation in their region by the year 2005. This target has posed a major challenge to the local authorities and the central government since a large number of villagers are still dependent on opium cultivation for their living. Opium cultivation can be seen in the backyards of many houses and on remote mountain sides, raw opium is still traded openly in the local markets. However, the villagers have been told by the local authorities that they have to find alternative livelihoods and terminate their opium cultivation and trading by the year 2005.



Back yard opium poppy cultivation

Since 1998, UNODC has implemented a comprehensive community-based alternative development project in the Wa Special Region to reduce and eventually eliminate the production and consumption of opium.* As part of the activities of the subregional project on Alternative Development Cooperation in East Asia, UNODC Regional Centre organized a field trip from 22 February – 2 March 2003 to visit alternative development projects on both sides of the China-Myanmar border as well as the UNODC Wa project.

The visit aimed to improve the knowledge and capacity of policy makers, project managers and other personnel in the region through sharing practical experience and good practices for alternative development. A total of 27 participants from China, Lao PDR, Myanmar, Thailand, Vietnam and Australia joined the field trip.

– *Sanong Chinnanon, UNODC Bangkok*

* See page 8 for an article from this project.



Farmers sell raw opium to the retailer



Opium is weighed against old British India Rupee coins. Each coin is worth 22 RMB



1. Ey Hka, about 40 years old, lost four of ten children to malaria after relocating from the northern Wa to the southern Wa region.
2. Opium does well in mountainous landscapes - and minimizes the risk for the farmer.
3. A small coffin for a big tragedy: children succumbing to malaria in the southern Wa region.
4. Only roof materials were provided when the villagers had to rebuild their village in a new location.
5. Village headman Aik Sey in front of the new school.



When Making a Difference

If you ever visited the village of Son Ke, you would soon discover the deep concern people have for their own survival, a basic and immediate concern which makes community tasks such as record-keeping seem trivial. Ey Hka therefore hesitates to say she is about 40 years of age, she cannot remember when her birthday is. However, a shade of reflective bitterness covers her face when she explains that malaria and tuberculosis have almost halved her family in the last 2 years.

It was May 2000 when her village was forcibly relocated from the impenetrable northern Wa region to the southern fertile lands. This is part of Wa policy to curb opium cultivation. The Wa ethnic group is one of 135 minorities in the Union of Myanmar. After years of fighting, they struck a deal with the central government in 1989, exchanging arms for peace and self-administration. The region they control is part of the notorious golden triangle, where the borders of Myanmar, Thailand and Laos converge. It also accounts for 22 percent of Myanmar's opium cultivation and is increasingly becoming a major source of synthetic drugs. For a long time international outrage has deemed the Wa the biggest drug army in the world.

But whilst their involvement in the drug industry remains undisputable, other

aspects are often misunderstood. The United Wa State Army (UWSA) was formed in 1989 shortly after the fall of the Communist Party of Burma. Headhunters until 1973, the Wa today control an area that shares a long history with opium. Domestic and international pressure, however, have yielded some results. While nationwide opium cultivation has been slashed by 50 percent since 1997, the Wa have pledged to phase out drug production by 2005.

Regretfully, decades of isolation and underdevelopment have resulted in a lack of basic public administration knowledge, making the implementation of the drug-free policy difficult. The north-eastern lands of Myanmar are in fact so mountainous that almost no crop other than opium can be farmed. The forced reloca-

tion scheme is a reaction to this.

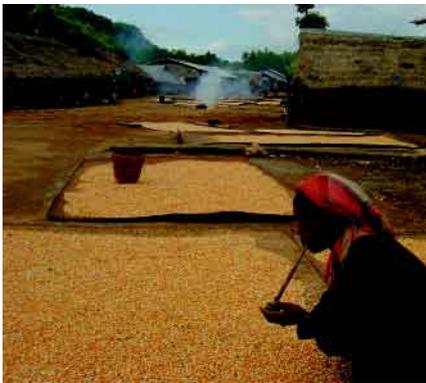
Ey Hka remembers being given one-months notice, supposedly to sell her cattle and organize her family's departure. Adjacent villagers, taking advantage of her situation, bought her cattle at just one third of its true value. She was told she could bring along all she could carry. "We had to walk for one day through the forest, I could carry nothing but my children", she says. Eventually they reached a road where a truck was waiting to drive the villagers 300 km south.

Southern Wa authorities provided the villagers with no help nor compensation, only roof materials were provided. Ey Hka's ailing husband passed away soon after their arrival. Four of her ten children met the same fate because of malaria. Higher temperatures and stagnating waters fuel malaria, a disease Ey Hka had never heard of before. Like the vast majority of people in her village, she had no choice but to revert to the only way she knew to make a living, opium. She was forced to seek work as a labourer for neighbouring poppy farmers for just US\$0.6 per day.

It was purely coincidental that the village's relocation took place within the



is More Than a Slogan



2,000 km² area targeted by the UN Office on Drugs and Crime (UNODC). When we first visited this village, the population was gathered around a totem. Village men were carving a coffin out of a log. Yet another child had died of malaria.

Today, October 2002, the scene is very different. One can hear children's songs from afar. The village headman, Aik Sey, stands in front of a bamboo-school and invites us to sit and drink tea. He confesses that the first two years were tremendously tough. Out of the initial 92 households, only 60 remain today. In 2001, 44 people died, reducing the population by over 10 percent. Besides malaria, malnutrition was the most seri-

ous mortality factor. Less than half of the villagers could count on having one bowl of rice a day.

This was the scenario when, in March 2002, UNODC started its humanitarian assistance to the Son Ke village. In accordance with best practices, UNODC lent support in the fields of agriculture, health, education and infrastructure. The first grassroots intervention included the provision of a mobile health team, water and environmental sanitation, coupled with clothes and rice distribution. To promote nutrition and food security, an improved variety of seeds were distributed and basic farming techniques taught. Electrification was provided to operate a water pump and eventually a school was built. To facilitate the absorption of such new principles and methods, UNODC permanently dispatched one of its local staff to act as community development facilitator. This is a characteristic of UNODC's working modality when it comes to sustainable community development.

Aik Sey is overwhelmed by the change his village has gone through. Malaria and the overall mortality rate have plummeted, only one malaria case has been recorded since April 2002. He walks us

through the village, showing backyards cultivated with licit crops. Not only have they achieved food sufficiency; even some surplus has been grown. The village is planning to invest the additional income to purchase a tractor and mechanize production.

Meanwhile, the achievements made by the Son Ke village prompted another commendable result. In July 2002 Son Ke, along with the valley where it lies, was declared an opium-free zone, establishing a model for development and showing adjacent communities a viable way forward.

Despite its limited scope, one of the merits of the UNODC pilot project begun in 1998 has been to expose the Wa to internationally accepted standards and values. In an impervious region where no other international organization is active, UNODC is attempting to counter the drug problem while promoting changes in leaders' mentality and improving people's living conditions.

Ey Hka proudly points at her children, they are attending the school today. She knows that this is the only gateway to a better life.

—Giovanni Gallo, UNODC Yangon

Law Enforcement Against Trafficking in Humans: What's Stopping Us?

Trafficking in human beings is a crime type like no other. The concept is relatively new, a creation that brings together a range of old (and some new) criminal activities under one roof. This in itself can cause confusion, but is perhaps necessary if we are to engage this problem as a single and identifiable criminal offence.

Be in no doubt – human trafficking is a serious, violent and insidious crime. It's victims are often what are called the 'unpeople' of this world – a massive but mostly voiceless 'underclass' of people. They are largely invisible, forgotten and, in almost every catastrophe and war of the last half century, treated as disposable. Many times we are asked why so little has been done by 'the authorities' against human trafficking; a very reasonable question to be asked of civil society. Is it perhaps the case that the 'underclass' identity of the victims is our first answer?

In the work of the UN Office on Drugs and Crime (UNODC) Regional Centre for East Asia and the Pacific, and the UN Interagency Project on Trafficking Women and Children in the Mekong (UNIAP), we have tried to observe and understand what it is about human trafficking, as apart from other crime types, that inhibits law enforcement responses. Why are there daily headlines about human trafficking cases gone wrong? From analysis of the key law and enforcement issues raised in each of the countries in the Mekong Sub-region, ten leading (but not exhaustive) barriers to effective human trafficking enforcement in this region emerge.

1. Who's on First?

The single-most significant obstacle to

effective enforcement of any criminal law, and trafficking in human beings is no exception, is lack of a single multi-sector strategy in which law enforcement is invited to play a meaningful role and judged on progress towards achieving the strategy objectives. Enforcement should most properly be considered a tool, and is quite an ineffective one if not properly mobilised and directed.

2. Galbraith was right!

JK Galbraith wrote that one of the greatest pieces of economic wisdom is to know what you do not know. On one interpretation of this, he cautions us to find out that which we do not know, and to be aware that we act very often from a position of imperfect knowledge. We must be conscious of what we don't know about an illicit market that is really an iceberg – only the tip is visible.

Remember that the trade in humans is a covert market and while microeconomic principles do apply, to a point, it is dangerous for us to presume that we know the economics of the trade by simply speaking loosely of 'supply and demand'. There is far more to it. Better understanding the economics of the trade may help us to find answers to questions such as: Why that price? What's in it for them? What role do governments have? How do we beat these traffickers? This should be a major focus

for our work – to know better what we don't know.

3. Help first, punish second.

Human trafficking is first and foremost a human rights violation, and a crime against a person. Law enforcement responses to cases of trafficking must recognise that when detected, most trafficking victims are likely to appear to be illegal migrants. But this doesn't mean they should be punished and further victimised at the hands of the State.

We and our police should be focused on helping victims of crime. But with trafficking, we have been more focused on criminal justice outcomes than human outcomes. So let us change our focus, to one of helping people first, and punishing someone second. A greater good can be done. And there is very good evidence to suggest that we actually achieve better criminal justice outcomes if we first achieve humane outcomes.

4. Wrong? What's wrong about it?

Human trafficking and murder are clearly dissimilar. Not the least of the dissimilarities is that murder is mostly a concept recognised as an 'extreme wrong' in almost all societies. It is not the case that trafficking is so recognised. A tolerance exists in many places, and in many cultures, that all people are not equal and that those unfortunate enough to be the less-than-equal can be treated as sub-human.

This is a trait particular in criminal 'philosophies' more generally, but clearly is a trait that has wider application in society when we speak of trafficking in human beings. To so many, of such little conscience, little if anything is wrong in

“Human trafficking is first and foremost a human

selling a human being. That is truly an obstacle when trying to clear up a crime type that is normatively not universally accepted as wrong.

5. Conflation, confabulation and misconception.

Anyone who has been to a 'trafficking' conference will know what this is about. People are concerned with conflating trafficking with other 'issues', and the core of the criminal offence called trafficking is neglected. So many anti-trafficking experts talk about 'trafficking' with such little understanding of the term that they fail to distinguish it even from such a distinct issue as people smuggling.

Conflating these phenomena is a mark of ignorance, not knowledge, and focusing on organised people smuggling serves to ensure that human trafficking is not dealt with effectively. And, as another example, there is a continuing inability to understand the harm that is being wrought by conflating prostitution with trafficking. There is an awful lot of conflation, confabulation and misconception about trafficking, and if we as professionals in the field have it wrong, then where does that leave the victims? There is precious little academic rigour applied to the study of trafficking, and ironing out intentions, definitions, inclusions, and exceptions is an important part of formalising such a discourse.

6. Our 'in-house' digital divide.

Nancy Kline wrote that withholding information is an act of intellectual imperialism, and not bothering to seek accurate information is an act of intellectual recklessness. The situation with trafficking in human beings is both of these and more. There are few crime types where so many of its constituent parts are witnessed; with so many people active in many different ways touching in their work and personal lives on incidents of, and fallout from, trafficking. But a collective inability to aggregate what is known about trafficking, to gain a more complete understanding of the phenomenon, and to act collectively on

it, is tantamount to negligence. We know about the problem. We must bring this knowledge together.

7. The law? What law?

Although many States have not yet ratified the UN's Trafficking Protocol and therefore mostly have no law on trafficking yet, it now exists as an international legal precept. But what does that mean when often it only exists as a concept at this more esoteric level? What meaning does 'the law' have for those outside it or those seemingly 'below' it? There is a serious question about the use of law in countering a crime when the victims do not or are not adequately represented in this 'law', or when the victims to whom the law 'offers' its protection, are not even aware of the 'offer'.

Access to law, in terms that have meaning for potential victims of trafficking and their families, is critical and barely ever addressed by even those countries that do have a trafficking law on the books. It is not nearly enough to just create a concept like trafficking. It is not enough then to simply write this into law. We have not done enough to bring law from the books to the people and give it some real-world meaning.

8. But aren't we making it worse?

It is not logically deniable. Tightening migration controls causes trafficking in human beings. Supply, demand, poverty, inequality, and more, are all contributors. Many of these phenomena are so big, truly features of the macro-environment, we have little control over them, at least in the short term. But something closer to our operating environment, a phenomenon over which individual States have complete control – public migration policy – is a leading cause of the frustration of labour demand that channels people past the eyes of traffickers looking to make a quick buck or a huge profit from bringing labour to market. We need to wake up to this reality and work to rationalise labour migration if we are serious about removing this major tension that keeps traffickers in business.

9. Buy in, and get back to the community

In many jurisdictions, policing is an arm of government; it is often not a community-based practice and often has little relevance to the populace except insofar as the government wielding the enforcement tool wields it in a participatory way. There is very good evidence that police in most States do not see trafficking as being on their agenda – and admittedly some in the anti-trafficking community have reinforced this view by declaring it to be only a social development issue and not engaging police on the subject. Police do have a role. But police need to be directed to perform it. And this takes the political will to have trafficking put high on the policing agenda, seriously and not only in name, and have police build links into communities for which they can afford protection. 'To serve and protect' should not be a hollow maxim.

10. Time for a new toolkit.

Law enforcement is an arm of government that relies on direction from government. It also relies on being provided the tools of its trade. And for trafficking there are some very specific reasons to re-tool. It is very much the case in many jurisdictions that enforcers are forced to operate with at least one hand tied behind their back when their tools, such as executive powers, do not take into account the desired outcomes of trafficking cases. It is time to think about the nature of trafficking, the nature of policing, and bring the two together with intelligent strategies that include the legislative and other tools to do the job well.

These 10 leading issues are discussed in more detail in "What's Stopping Us?" – a forthcoming joint publication of the UN Interagency Project on Trafficking Women and Children and the UN Office on Drugs and Crime, Regional Centre for East Asia and the Pacific.

–Brian Iselein, UNODC Bangkok

rights violation, and a crime against a person”

TAKING THINGS A STEP FURTHER: **Mekong Subregion** Continues **Building its Response** **to Human Trafficking**

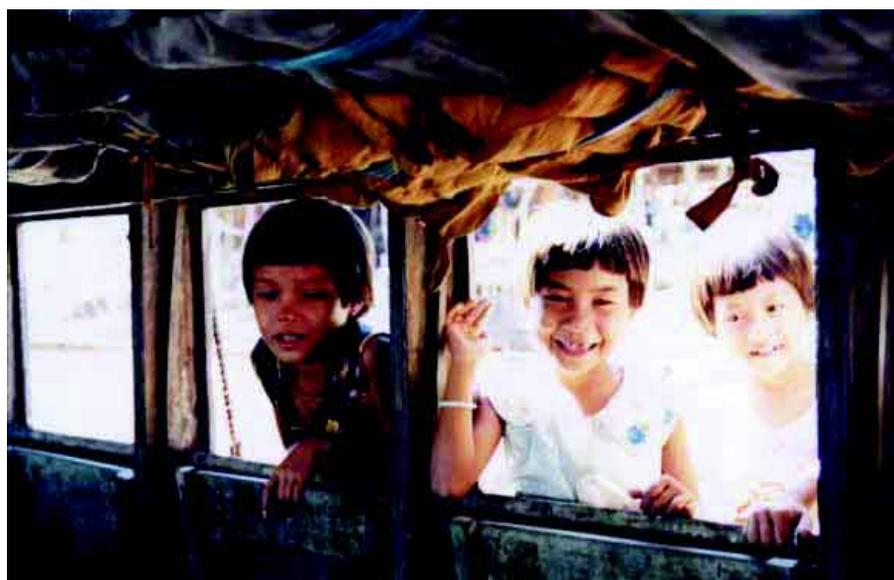


On 28-29 November, the Mekong Region Law Centre convened in Bangkok the 2nd Mekong Sub-region Conference on Labour Migration: The Case of Trafficking in Women and Children.

The conference was attended by more than 200 people, including official delegates from each of the six Mekong countries; China, Thailand, Vietnam, Cambodia, Myanmar and Lao PDR, as well as members of civil society, non-government organisations and academic institutions. This meeting was a follow-up after 5 years from the 1st such Mekong Subregion Conference in 1997 from which much of the regional effort against trafficking was launched.

The convener, the Mekong Region Law Centre (MRLC), is a non-profit association of the legal communities of Cambodia, Lao PDR, Thailand and Vietnam, established to promote the rule of law, encourage sustainable socio-economic development and facilitate the process of legal development within the countries of the region. Illegal labour movements are one of the six focal programmes of the MRLC.

The conference was opened by Dr Saisuree Chutikul, Thailand's member of the Committee on the Rights of the Child, Chair of Thailand's National Sub-Committee on Combating Trafficking in Women and Children, and a leading figure in Thailand's effort against trafficking in human beings. Dr Saisuree urged all participants to be frank in discussions and to come away from the conference with a clear understanding of the nature of the obstacles to effec-



tively countering human trafficking, and having considered strategies for overcoming these obstacles.

The conference included the presentation by each official delegation of a country report, advising of the current situation of trafficking within that jurisdiction, as well as reporting on developments in anti-trafficking measures since the 1997 conference.

The conference, after an initial plenary session was arranged into three breakout groups: law enforcement; victim protection; and rehabilitation and repatriation. A key outcome for the legal and law enforcement sector arose from the law enforcement group chaired by the delegation from the Lao PDR. Participants agreed unanimously to establish a Regional Working Group on Law and Enforcement Cooperation against Human Trafficking. Further, participants agreed that all countries would work towards the establishment of a Mekong Sub-region MOU on Law and Enforcement to Combat Human Trafficking, elaboration of which was placed on the

intended agenda of the Regional Working Group.

A regional paper on law enforcement, built on lessons learnt and problems identified in all six jurisdictions was presented by the Regional Centre of the UN Office on Drugs and Crime. The issues identified in this paper were adopted by the conference as providing the start-up agenda of the planned Regional Working Group.*

The tone, as is so often the case in conferences on this troubling subject, was positive and deliberate. Participants walked away with a renewed vigour to take active steps to enhance the regional and national law and enforcement performances on human trafficking.

For more information on the activities of the MRLC please see: www.mekonglawcenter.org

—Brian Iselin, UNODC Bangkok

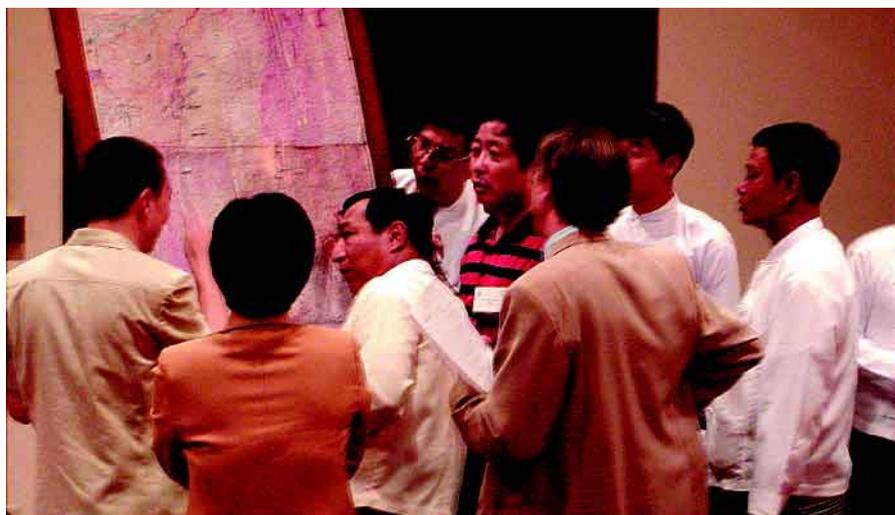
The paper is available at www.unodc.un.or.th/factsheet/Barriers.pdf. A summary of the key issues in the paper appears on page 10.

New Trends in Precursor Trafficking in the Region

Until recently, methamphetamine laboratories in Myanmar obtained the main starting material, ephedrine, from China. Seizures of large quantities of ephedrine were often made along both sides of the Myanmar-China border. This pattern began to change in 1998 when Myanmar authorities began to make frequent seizures of Indian ephedrine along the Myanmar-India border and along the route to Mandalay. Indeed in the last five years, Myanmar authorities seized 8.7 tons of Indian ephedrine, significantly more than the 5.2 tons of Chinese ephedrine seized.

This change prompted officials from Myanmar, India and China to meet for two days in Yangon on 20-21 January 2003. Arranged through the UNODC sub-regional precursor control project for East Asia in collaboration with the UNODC precursor project for Southwest Asia, the meeting's objective was to identify possible actions to stem the flow of precursors into Myanmar.

Several significant developments were revealed during the meeting. During the last five years India has experienced a corresponding increase in ephedrine seizures at the Indo-Myanmar border, totaling 2.4 tons.* Myanmar reported two seizures in 2002 of another methamphetamine precursor, phenylacetic acid. In addition, two shipments of crystalline methamphetamine or ice have been seized in Myanmar for the first time. Further seizures of methamphetamine tablets on the



Discussing precursor trafficking routes

Myanmar side of the border with India with a different shape and size and carrying different markings from previous seizures, have given rise to the suspicion that clandestine laboratories may now exist on the Indian side.

There was significant exchange of information at the meeting, including precursor trafficking routes and trends. Problems were openly discussed and resolved. Among other things, the meeting concluded that:

- UNODC should provide communication equipment to link Myanmar and Indian officials at the border;
- UNODC should facilitate Myanmar-India border cooperation in the same manner as it currently facilitates Myanmar-China border cooperation;
- India should consider imposing under

the Customs Law, restrictions on ephedrine, pseudoephedrine and phenylacetic acid within the existing 100 km band of "notified area" along the Indo-Myanmar border, as is currently the case for acetic anhydride;

- China should consider seizing equipment destined for Myanmar if there is evidence they are intended for use in the manufacture of illicit drugs.

—Wong Hoy Yuen, UNODC Bangkok

* In addition, more than two tons ephedrine were seized in Chennai and Gurgaon a few days before the meeting. The precursor was reportedly diverted from a pharmaceutical company and believed to be destined for Myanmar.

ONCB Postcards

The rise of drug abuse in Thailand is well documented and recent figures show the problem is still increasing, especially among young people. The Office of the Narcotics Control Board (ONCB) in Thailand has printed a set of four postcards to highlight its "Say No to Drugs" campaign. The postcards feature traditional and modern images of Thailand and have captions which highlight the importance of each individual's contribution to the greater cause. The postcards have been



distributed to all of the ONCB's counterparts in Thailand and abroad. The postcards can be obtained free by calling the ONCB on (02) 247-0901-19.

Mentoring Works

Mentoring is increasingly recognised as an effective method of building drug resistance among youth in the West, as this article from Canada shows. It should be no different in the East: we all look up to someone. A mentoring scheme requires an investment in time rather than money. Can the East Asia and Pacific region afford it?

Mentoring works! Particularly when it comes to addictions. In fact, the greatest effect of the mentoring relationship is the increased resistance to drug and alcohol use. In a landmark study of Big Sisters Big Brothers (BSBB) of America in 1998, "littles" were 46 per cent less likely to initiate drug use than their peers. Little sisters coming from minorities were 70 per cent less likely. Overall, mentees were 27 per cent less likely to begin alcohol use while they were in the program. Once again, little sisters from a minority background were about 50 per cent less likely to start using alcohol. The study also showed that school attendance improved dramatically. Little brothers and little sisters missed half as many days and fewer classes than other at-risk peers. Their grades also improved slightly. This is promising for addictions prevention too – youth who do well at school (have fewer discipline problems, attend regularly and succeed academically) are less likely to participate in risk behaviours like alcohol and drug abuse.

There are two basic approaches to mentoring in the youth development literature: one is asset-based (on enhancing existing strengths), and the other is problem-focused (on reducing particular risk behaviours). The Big Sisters Big Brothers program begun in Boston in 1904 exemplifies the first, the Across Ages program, started by Temple University in Philadelphia in 1991, the second. The only goal of the strength-based mentors in programs like BSBB is to build a relationship of trust and care with a youth (between 8 and 18 years of age). Often the focus of the relationship is pure fun. The ideal mentor won't try to help or fix or teach or be a substitute parent. The mentor can be an adult of any age. As mentioned earlier, the positive effect of this kind of mentoring on school performance and addic-

tions prevention is impressive.

A problem-focused program like Across Ages actually focuses on changing attitudes and preventing multiple or single risk behaviours in youth. Not all program participants are matched to mentors and those who are, are matched to older adults over 55 years of age. The Across Ages program has several components: a school-based life skills curriculum, monthly community service, parental involvement and in some cases, a one-on-one mentoring relationship with an adult. There have been several studies of Across Ages, with positive results for school performance and changed attitudes in many areas across all groups. But the findings have been mixed in terms of addictions prevention, even for mentored youth.

However, a 1997-1998 study of 400 Springfield, Massachusetts students in the Across Ages program suggests significant potential for addictions prevention. Measures taken post-test showed alcohol use

was lower among curriculum and mentor groups by the end of the program. Further measures were conducted six months post-test with some startling results. While there was no difference in marijuana use at the end of the program between control, mentor and curriculum-only groups (the last actually showed a slight increase in use), six months later the mentor group reported a significantly lower level of marijuana use when compared with the control group.

Researchers continue to discuss whether asset-based or problem-focused programs work best for addictions prevention with youth. However, the evidence seems to favour the non-prescriptive approach of programs like Big Sisters Big Brothers - no adult agendas and relationships for the pure joy of it!

– Audrey J. Whitson, AADAC Writer-Editor

This article was originally printed in Developments, newsletter of the Alberta Alcohol and Drug Abuse Commission (AADAC), Volume 22 Issue 5, October-November 2002. AADAC's role is to promote people's independence and well being through increasing use of social, emotional, spiritual and physical resources, and to provide cost-effective, holistic alternatives to hospital-based and medical services. Information about AADAC and their newsletter can be found on www.aadac.com.

Asian Youth on Drug

During August 2002 the first Asian Youth Congress on Drug Abuse Prevention was held in Bali, Indonesia. Over 190 participants attended the congress from as far afield as Singapore, America and Thailand. The conference was organized by Yayasan Cinta Anak Bangsa (YCAB) of Indonesia, an NGO which has at its heart drug prevention schemes coordinated by young people in order to respond to the needs of its peer group.

The principle aim of the congress was to provide a forum for the participants to express their ideas about drug abuse and prevention. The participants were also given the opportunity to develop action plans for their own communities.

It was a feature of the four day event that representatives of different countries were encouraged to express their attitudes about drugs in an attempt to clarify reasons why youth are attracted to drugs and in turn what young people perceive to be the most effective ways of preventing drug abuse. To

Nithan Caravan Trains Scouts Through Puppet Theatre

In collaboration with the UNODC Regional Centre in Bangkok the Nithan Caravan Puppet Troupe of the Duang Prateep Foundation conducted training workshops on interactive puppet theatre at the 20th World Scout Jamboree, in Thailand from 28 December 2002 – 7 January 2003.

The workshops used puppet theatre and dramatic techniques to foster youth lifeskills, to raise awareness on drug abuse and HIV/AIDS and illustrate strategies for developing alternatives to drug use including, developing interest in healthy activities, developing mechanisms to deal with peer and community pressure and developing self-confidence and empowerment.

The World Scout Jamboree gathered over 20,000 boys and girls from all over the world. The interactive puppet theatre workshop was one of the activities in the Jamboree's Global Development Village which provided the scouts with a variety of workshops concerning environment, health, human rights and peace. Each of the interactive puppet theatre workshops accommodated about 40 scouts and lasted 2½ hours. The workshop was run twice a day for 7 days during the Jamboree.

At the beginning of the workshop, the scouts watched an interactive puppet show performed by the Nithan Caravan troupe. The theme of the story was drug



and HIV/AIDS awareness. The troupe members explained various types of dangerous drugs, their effects and the problem of HIV/AIDS. The scouts were enthusiastic in discussing the subjects with the troupe and each other. The troupe members then demonstrated puppetry and dramatic techniques, movement, speech

and character to the scouts.

Forming small groups, the scouts discussed drugs, HIV/AIDS and other social problems. They were encouraged to think about a short story related to these themes and to convey the story through a puppet show on their own. Finally, the most exciting part of the workshop came; each group presented a puppet performance on the stage to their peers. All of them had fun. At the end of each performance, the scouts shared ideas and discussed messages derived from the performances.

The workshop ended in a joyful atmosphere. Serious matters had been discussed in a friendly and non-threatening way. Having learned about puppet theatre, the scouts will be able to use these techniques as a tool to communicate their ideas to others in the future. Moreover, the workshop has helped the scouts gain skills in working in groups, learning from other people, and building self-confidence to express themselves on the stage.

– *Jamnan Panpatama, UNODC Bangkok*

Abuse Prevention

this end, brainstorming sessions and workshops were held. Participants were also given training on prevention methods and other issues relevant to youth groups combating drug abuse.

At a time when drug abuse throughout the region continues to grow such insights are invaluable. At the end of the congress, new methods of prevention had emerged as well as a Youth Pledge. The Pledge contained a commitment to continue and strengthen the fight against drug abuse, to promote a sympathetic approach to drug users and to be proactive in

creating drug abuse prevention schemes and activities.

It was not all hard work however, as there were dancing, singing and musical performances from participants from India, Bhutan, Bangladesh and Thailand. At the same time the congress marked the



beginning of greater youth involvement in drug prevention issues, as a participant remarked "I enjoyed it because I gained knowledge that I can bring back to my country and to my friends."

– *Melanie Adams, UNODC Bangkok*

Close Encounters, Border Liaisons

The UNODC project 'Development of cross border law enforcement cooperation in East Asia' focuses on front line officials in high risk areas. The following is an encounter with the Myanmar National Project Coordinator.



“I am Police Colonel Tin Maung Htay, Director (Drug Elimination Department), Office of the Central Committee for Drug Abuse Control, Yangon, Myanmar. Since 1999, I am also the National Project Coordinator and backstop for the smooth implementation of the project Development of Cross Border Law Enforcement Cooperation in East Asia. This project benefits the 6 countries that have signed the Memorandum of Understanding (MOU) with UNODC, namely Cambodia, China, Lao PDR, Myanmar, Thailand and Vietnam. The project provides technical assistance, communication equipment, computers, training and vehicles. The government provides land, buildings, furniture and human resources for the establishment of border liaison offices (BLOs) and their operational cost.

Within the framework of the project, two border liaison offices were established at the borders between China and Myanmar in early 2000 and two more are in progress between Thailand and Myanmar. Even though I am stationed in Yangon, I telecommunicate regularly with my border liaison officers to follow up on the situation and also monitor the progress by visiting the offices 3-4 times a year. I have sometimes participated in regular meetings of the BLOs between the two countries.

Until now 11 meetings have been held, hosted in turn by each country. I am happy to see that the counterparts now exchange information and share intelligence information frankly and with trust, contributing

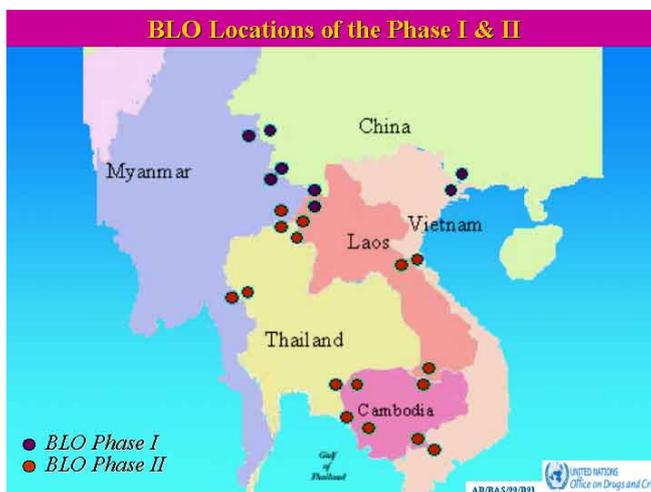


towards successful law enforcement cooperation. This would not have been possible 4 years ago. Another contribution made by the project is provision of communication equipment. This is critical in relaying intelligence information quickly, which enables the other party to take immediate follow-up action leading to seizures of illicit drugs and apprehen-

sion of traffickers.

Since 1999, there have been 10 cases of offenders being handed over to the Chinese authorities from Myanmar. One of these cases led to the seizure of more than 3 tons of heroin, 18 accomplices were also apprehended. Moreover, through the computers and computer-based training provided by the project, front line staff are now equipped with knowledge about modern techniques of border control such as risk identification, search techniques and behavioural observation. By attending and participating in workshops and seminars I have gained more knowledge and at the same time shared my own experience.”

—*Songsatit Kittikhunwathana,*
UNODC Bangkok



Concern Increasing at Lack of Drug Treatment Facilities in Cambodia

As incidences of drug abuse increase rapidly in the urban areas of Cambodia, government officials, NGO workers, local media and many citizens are alarmed at the total lack of drug abuse counselling, treatment and rehabilitation facilities in the country. The issue has also caused concern at the highest levels as Deputy Prime Minister and Chairman of the National Authority for Combating Drugs (NACD), Sar Kheng, expressed concern that there are currently no drug treatment and rehabilitation centres in place.

An example of the problem is the situation of Hok Sok Heng, a teenager living with his parents in central Phnom Penh. After being introduced to methamphetamines by his 'friends,' Hok has

been addicted to the drug for over a year. Hok's parents asked police in June to arrest him after he threatened his family, destroyed belongings and stole their money to buy drugs.

The police commissioner for Phnom Penh recently expressed to media that the police did not know what measures should be taken to deal with drug abusers. "Currently we do not have places to detain drug addicts. But other countries provide facilities for the addicts until they cease using drugs. We want them to help create similar centers in Cambodia", the police commissioner stated.

With the help of the NACD and various NGOs, the ODC Liaison Office in Cambodia has been developing a drug abuse counselling, treatment and rehabilitation project proposal. The objec-

tive of the proposal is to take best practices from countries in the region and use them to develop the capacity of NGOs together with specialized government entities, in order to assist drug users through the development of mechanisms that will allow individuals to successfully reintegrate into family, community and mainstream Cambodian society.

The project is initially planned for three and a half years at a cost of approximately USD 1.2 million. Investment in treatment will, experts believe, result in savings in the social, health, judicial and law enforcement fields, as well as reducing HIV/AIDS transmission, drug-related crime and domestic violence.

—Graham Shaw, UNODC Phnom Penh

Linking Up: Drug Information Online

The Australian Drug Information Network website is useful for anyone seeking information about drugs and their effects. The website aims to collect "quality Internet-based alcohol and drug information provided by prominent organisations in Australia and internationally." The site is designed for parents, students and academics alike and focuses on providing practical information about drugs. For professionals searching for information there is a professional search function that delivers up to date information from recent speeches to academic journals.

Also featured are a vast number of links to both Australian and international databases as well as a contact list for upcoming conferences and seminars. For younger audiences there are quizzes so that they can assess their own knowledge about various drugs and the risks of abuse. Separating myths from realities, the answers to the questions are written by health professionals in easy to understand language. This user friendly website is located at www.adin.com.au

—Melanie Adams, UNODC Bangkok.



“Who’s Living in My Body?”

– An Inside Look at Methamphetamine Treatment in Thailand



On yaba for three years, he wants to go home and abandon the treatment. He is 14 and afraid. The doctor explains to us that this boy has sudden reactions such as jumping away and falling on the floor, even when surrounded by his most secure environment; his visiting mother and close friends. It is as if “someone else is living in his body.”

Located at a peaceful site with ponds and gardens outside the city center of Bangkok, the Thanyarak Hospital is dedicated to drug treatment and can host almost 800 patients. In connection with the new amphetamine-type stimulants (ATS) data and information project implemented by the UNODC Regional Centre, project staff recently visited Thanyarak to get a first hand impression of ATS treatment in Thailand.

The hospital recently changed its name to the Thanyarak Institute for Drug Abuse (TIDA) to reflect the fact that it is the focal point for drug treatment research, statistics and training for health-care professionals in Thailand. Coordinated by the Department of Medical Services and the Ministry of Public Health, TIDA supervises five other drug treatment dedicated hospitals; TIDA will eventually function as the institution through which a central registry for drug admissions nationwide will be established. With 34 years of experience, TIDA represents the leading institution for drug treatment in Southeast Asia.

Thanyarak started treating mainly opium and heroin addicts in the 1970s. Today, however, 72 percent of patients are methamphetamine addicts. Thirty percent of these are between the ages of 15 and 19.

We met patients in Phase 2 of the treatment cycle, where they are sent after pre-admission and having been diagnosed with “ATS psychosis”. They were



all between 15 and 17 years old. These kids can receive visits from their families and friends every Thursday. They all wore the same uniform and seemed shy, they hardly looked up when they were asked questions. A patient welcomed us with glasses of fresh water; he is 17. Dr. Smith, our guide around the hospital, explained that work and service are an integral part of treatment at TIDA – the so-called “Fast Model” that lasts 4 months – and that it is part of this young man’s community service to welcome visitors with cold drinks.

Dr Smith interviewed the young patient jokingly while the boy stood with the tray in his hands and softly said that he wanted to stay at Thanyarak for another 3 months so that he could escape this year of school and switch to a new one next year. It was obvious that his real motive was not laziness but rather the opportunity to start a new school year somewhere where he can have new friends – and thus stay away from drugs.

Peer pressure is the primary reason for methamphetamine addiction among youth in Thailand according to Dr. Smith.

The Frits van Griensven’s study, conducted in Chiang Rai in 2001, showed that 40% of males and 18% of females in a school survey used the drug in the last three months. Statistical evidence reports that taking yaba has become common practice in most schools nationwide; this is why Dr Smith gently but firmly answers his young patient that changing schools is not the solution.

In another school, he will find other friends using the drug and the same dilemma of being included or not in the group will occur. Is fear of being left out the reason why so many Thai youth take yaba? Do they take it to be socially accepted? Dr Smith believes that the reason why ATS has spread so quickly among Thai youth is because it is cheap and readily available for those who want to fit in socially. Even injecting it? “No”, smiles Dr. Smith, “children are afraid of the needle...”

Studies by research institutes in Thailand such as Thai Farmers’ and ABAC-KSC Internet Poll Research Center show that the methamphetamine problem is equally spread between workers and school kids. Thanyarak statistics show that since adults are less inclined to seek treatment, the hospital is biased towards young users. Dr. Smith also explained that ‘chasing the dragon’ – inhaling ATS fumes – is the preferred method for youth to take yaba because it delivers the substance directly to the brain. Adults tend to orally ingest the tablets and seek remedies at primary care for specific symptoms such as depression and anxiety thus preventing more serious consequences.

Kids, on the other hand, are unable to manage the first symptoms of yaba’s side effects. After more than a year of taking several tablets a day, they start hearing voices and becoming catatonic, these are

Mongolia: Government Plan on Combating Narcotic Drugs

With the objective of overhauling and improving the country's overall drug control capacity, Mongolia is currently implementing its National Programme on Combating Drugs. The programme is in the middle of its implementation period which lasts from 2000 to 2005.

The objectives are to create an enabling legal environment for preventing drug crimes, to study root causes and conditions and formulate preventive policies based on findings, to promote coordinated efforts of law enforcement and judicial bodies, and raise awareness among the entire population, particularly young people and children, on the adverse effects of drug use.

Implementation of this plan is described as a joint venture between several government ministries, NGOs and media. The focal point for this process is the National Council, with branches in all provinces and Ulan Bataar, which submits annual progress reports to the Government.

Selected interesting and promising activities that form part of this programme are:

- Creating a national database on drug abuse and establishment of information network among relevant organizations.
- Resolving issues of adherence to UN and other international treaties (Mongolia is not party to the 1988 UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Sub-



Community outreach for drug users in Mongolia. Photo courtesy of the National AIDS Foundation (NAF)

stances).

- Introduction of drug awareness material into the school curriculum.
- Conduct school surveys.
- Formulation of policies on treatment, rehabilitation and prevention improving on existing methods.
- Law enforcement training for customs and police officials.

The Programme engages the Government, Ministries of Justice, Education, Health and Social Welfare, the General Customs Office, General Police Department, General Intelligence Office, and local authorities with specific tasks. NGOs, media and even families and individuals are given responsibilities primarily with regard to raising awareness and speaking out on the dangers of drugs,



Pamphlet on the dangers of contaminated needles produced by the Mongolian NGO National AIDS Foundation (NAF).

creating a solid foundation for furthering preventive work and promoting a healthy lifestyle.

– *Lise M. Bendiksen, UNODC Bangkok.*

Based on an unofficial translation of excerpts of the Mongolian National Programme on Combating Drugs.

among the first signs of psychosis. Worried parents bring them to Thanyarak where, with the help of appropriate medication, they can start functioning normally again, most of the time. Indeed, as Dr Smith explained, 2 to 5 percent of those diagnosed with “ATS psychosis” do not recover

and remain in psychiatric care.

“We do not know what it is: too many yabas? For too long? A latent inclination to schizophrenia? We do not know. But sometimes there is nothing we can do, the brain damage is permanent.”

Thanyarak charges its patients for

treatment but a government subsidy is expected to make treatment available to everyone; given the rampant yaba epidemic in this country, this is a very significant step forward.

– *Sonia Bezziccheri, UNODC Bangkok*

Shaping Leadership on HIV/AIDS

The Asia Pacific Leadership Forum on HIV/AIDS and Development (APLF) was launched in August 2002 to minimize the impact of HIV/AIDS in the region through increasing political leadership for effective action against the epidemic. The APLF is spearheaded by a working group, consisting of representatives from the UN Sub regional Theme Group on HIV/AIDS, donor agencies and countries from the region and outside (EC, USAID), regional partners and civil society.

In its first six months, the APLF developed a list of potential members of its Reference Group, which will consist of six or seven high-profile people from throughout the region. Mr. Tony Bates has been hired as the APLF adviser and has already taken up his post. Funding has been secured or indicated for 3/4 of the work programme for 2002-2005. An institution has been selected through a tendering process to implement initial activities of APLF starting early 2003.

Among the first priorities will be holding a shared learning course, development of an advocacy toolkit and a mechanism for electronic information exchange.

While establishing managerial necessities such as these, the APLF also made progress in terms of the subject matter of its existence. It facilitated sessions on HIV/AIDS at the General Assembly of the Asian Forum of Parliamentarians on Population and Development, where senator Juan Flavio from the Philippines was invited to speak about his experiences of introducing affirmative HIV/AIDS legislation. APLF also established a presence and spoke at other key regional meetings, and plans an event at the 59th session of ESCAP in April 2003. APLF is also meeting with cosponsors and potential key regional partners to begin identifying opportunities for collaboration.

- Lise M. Bendixsen, UNODC Bangkok.

WORTH NOTING

The online version of the Asian Development Bank's Manual on Countering Money Laundering and Financing of Terrorism is now available. Containing detailed information of conventions, principles, model laws and guidelines, the manual is available at the website of the Asia Pacific Group on Money Laundering: www.apgml.org/content/manual/jsp. ■

The Alcohol Education and Rehabilitation Foundation of Australia recently announced a range of initiatives to counter indigenous substance abuse. There have been ongoing calls for efforts to tackle this problem to be stepped up and for greater investment in programs and services targeting the causes and symptoms of drug use in these communities. ■

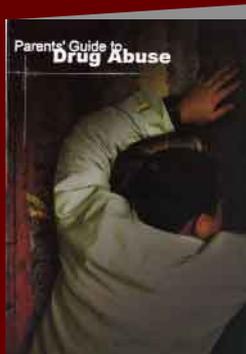
A "Drug-free Students" forum was recently held at a secondary school in Brunei, involving a range of government agencies. The forum included a question and answer session, and covered issues such as health problems related to drug use, rehabilitation, and statistics of drug use in the country. As a deterrent, common punishments given to drug abusers were demonstrated by prison officials. ■

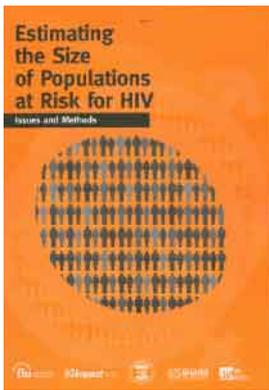
In Thailand, most road accidents over the New Year holiday involved underage and drug-intoxicated drivers. Noting a change from last year when alcohol was the main substance involved, Prime Minister Thaksin called for better data collection and analysis to prevent a repetition during the Songkran holiday in April. From December 27 to January 1 there were 514 deaths on Thai roads and almost 30,000 injuries. ■

According to the National Authority for Combating Drugs (NACD) in Cambodia, the street price for an ATS tablet has gone down by 80 percent, from US\$5 to US\$1, making it more affordable for teenagers, even for those still in school. ■

Raising awareness in Hong Kong

The Hong Kong Narcotics Division and the Action Committee Against Drugs have produced a series of brochures and posters on themes related to drug abuse, hoping that the anti-drugs message will be reinforced by parents, teachers, student counselors etc. A "Parent's Guide" gives parents tips on discussing drug use with their children. The guide covers topics such as common substances of abuse in Hong Kong, relevant legislation, detailed advice on steering children away from drugs, telltale signs of drug abuse and numbers to hotlines and treatment facilities. A 'Guide to Drug Abuse Problems' goes into more detail on many of the same issues. It also gives detailed descriptions of each drug, including what it looks like and the effects desired by the user. Leaflets and posters on ketamine, ice, ecstasy and cannabis have also been produced as part of the awareness campaign.

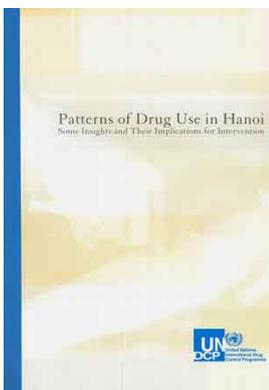




ESTIMATING THE SIZE OF POPULATIONS AT RISK FOR HIV: ISSUES AND METHODS

This 50-page publication by Family Health International, UNAIDS and UNDCP covers various issues related to size estimation methods as a tool to improve HIV prevention and care. Focus is on methodology: data sources, estimation and more. While the publication comes out of a workshop held in April 2002, the presentation is similar to a textbook.

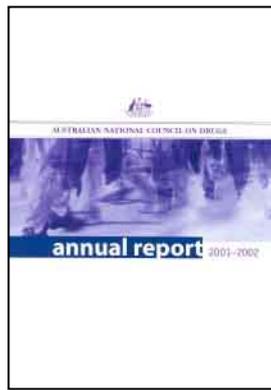
Publisher: Family Health International (Bangkok), tel: (662) 587 4750, fax: (662) 587 4758, email sunee@fhibkk.org. The publication is available on their website: www.fhi.org.



PATTERNS OF DRUG USE IN HANOI. SOME INSIGHTS AND THEIR IMPLICATIONS FOR INTERVENTION

This publication is the result of research among drug users in Hanoi, to acquire information about current drug use patterns. Focusing on two groups; heroin injectors and young heroin smokers, it tries to go beyond statistics and find out why people start and continue to use drugs and how this affect their lives. The information fills a gap in knowledge that is extremely valuable and is often lacking.

Publisher: UNODC Vietnam, tel: (844) 942 1495, fax: (844) 822 0854, email: undcpvietnam@un.org.vn, website: www.undcp.org.vn



ANNUAL REPORT 2001-2002 AUSTRALIAN NATIONAL COUNCIL ON DRUGS

This is the annual report from the Australian Council formed in 1998 as a component of the national "Tough on Drugs" strategy. It includes the workplan, research and project work, international activities and more, in addition to regular entries in an annual report.

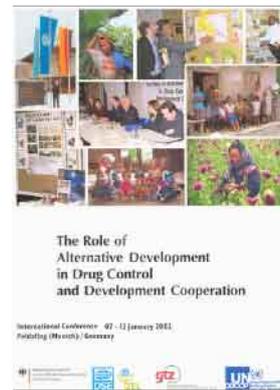
Publisher: ANCD Secretariat (Australia), tel: (02) 6279 1650, fax: (02) 6279 1610, email: ancd@ancd.org.au. The publication is available on their website: www.ancd.org.au.



POLICING IN CHINA 2001

Published by the Ministry of Public Security in China, this book gives a broad overview of the work of the police in China in 2001. The drug law enforcement section covers various anti-drug campaigns, and includes police seizures, preventive education campaigns targeting youth and high-risk groups, and developments in rehabilitation such as registration of drug users and regulation of rehabilitation centers. The book has text in both Chinese and English.

Publisher: Ministry of Public Security, PR China.



THE ROLE OF ALTERNATIVE DEVELOPMENT IN DRUG CONTROL AND DEVELOPMENT COOPERATION

This publication reports on the "Feldafing Conference" held in Feldafing, Germany in January 2002, an international meeting on the issue of alternative development (AD), the strategy developed to curb illicit cultivation of drugs such as opium and coca. It compiles several presentations under topics such as AD and conflict management, economic dimensions and social aspects of AD, and also includes some NGO perspectives as well as reports from the workshops about the Asia and Andean regions held during the conference.

Publisher: Deutsche Stiftung für internationale Entwicklung (DSE-ZEL) in Feldafing (Germany), website: www.dse.de/dse-e.htm. More information about the conference, including papers and adopted documents is online at www.alternative-development.net.



UN DOCUMENTATION ON CORRUPTION

The Global Programme against Corruption, a separate programme under the UN Office on Drugs and Crime, was established to assist countries to curb and prevent corruption. The Programme issues a publication series aimed to share experiences and stimulate discussion among policy makers, law enforcers and others. The series includes scientific papers, technical guides such as tool kits, publications on field level activities such as pilot studies, anti-corruption policy manuals and conference publications.

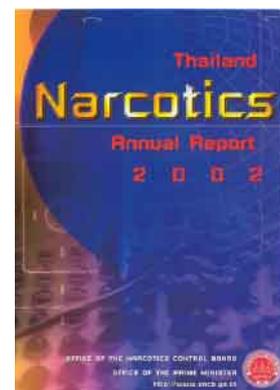
Publisher: UNODC Vienna (Austria), tel: 43 1 26060 0, fax: 43 1 26060 5866, email: unodc@unodc.org. The publications are available online at: www.unodc.org/odccp/corruption.html.

BULLETIN ON LAW AND POLICY REFORM

The Bulletin is a summary of law-related projects in the Asia-Pacific region conducted by ADB and other donors, academic institutions and the private sector. It includes projects in areas such as economic law reform, energy and minerals, environment and natural resources, private sector development, government reform, socio-economic and health sector, and strengthening legal capacity.



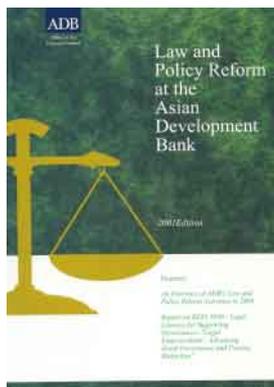
Publisher: Office of the General Counsel, Asian Development Bank, Manila (Philippines), tel: (632) 632 4444, fax: (632) 636 2501, email: oagbayani@adb.org. It is available at www.adb.org/Documents/Periodicals/Law_Bulletin.



THAILAND NARCOTICS ANNUAL REPORT 2002

The annual report of the Office of the Narcotics Control Board (ONCB) of Thailand provides an overview of the current drug situation in Thailand and relevant legislation, various ongoing programmes in the national drug control strategy, and the future policy framework in 2003.

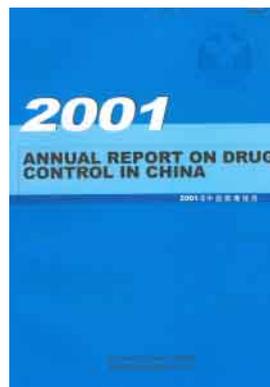
Publisher: ONCB (Bangkok), tel: (662) 247 0901-9, fax: (662) 245 9413, website: www.oncb.go.th.



LAW AND POLICY REFORM AT THE ASIAN DEVELOPMENT BANK

The 2001 edition of this publication features an overview of ADB's activities related to law and policy reform. It documents a project on legal empowerment to advance good governance and poverty reduction, and discusses the results of various activities and the experiences with different strategies.

Publisher: Office of the General Counsel, Asian Development Bank, Manila (Philippines), tel: (632) 632 4444, fax: (632) 636 2501. The publication is available on their website: www.adb.org/documents/others/law_adb.

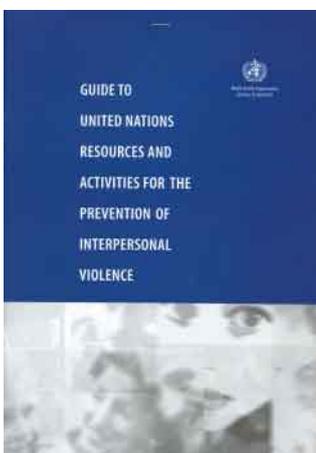


2001 ANNUAL REPORT ON DRUG CONTROL IN CHINA

The annual report on drug control in China updates the drug situation in the country, where the flow of heroin, ice and MDMA tablets are of particular concern. It also covers developments in national and regional drug control policy and prevention efforts, and provides statistics on seizures for the last 10 years.

Publisher: Chinese National Narcotics Control Commission (NNCC), Beijing (China), fax: 86 10 6512 6577.

SECURING THE RIGHT TO FREEDOM WITHOUT FEAR: A GUIDE TO UNITED NATIONS RESOURCES AND ACTIVITIES FOR THE PREVENTION OF INTERPERSONAL VIOLENCE BY WHO

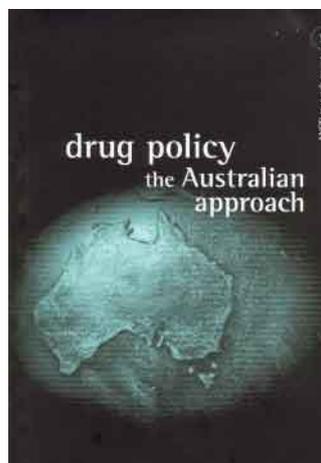


Reflecting the deep and complex roots of personal violence and the need for collaboration across sectors to address them, this publication by the World Health Organization provides a clear and concise overview of the resources and activities of the many UN agencies working to address violence. Contact persons for each agency are listed, and a separate section lists related publications, web pages, and databases of the UN system.

Publisher: World Health Organization, Geneva (Switzerland). Contact Marketing and Dissemination, tel: 41 22 791 2476, fax: 41 22 791 4857, email: bookorders@who.int.

DRUG POLICY: THE AUSTRALIAN APPROACH

"A diversity of voices, the good sense of bureaucracy, independence, frank and fearless advice, checks and balances, leading the community" – such are the themes identifying the Australian approach to drug policy making, according to a new research paper from the Australian National Council on Drugs. It focuses on characterizing the conceptual and philosophical shifts that have taken place in policy and programs, through the testimonies of those involved in the policy community.



Publisher: This ANCD Research Paper No 5 is published by the Australian National Council on Drugs in

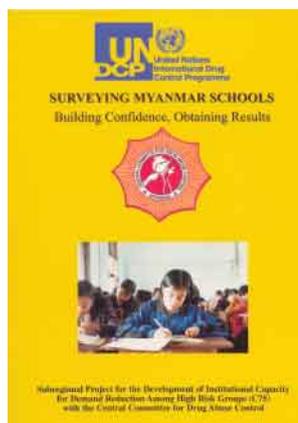
Canberra (Australia), tel: (02) 6279 1650, fax: (02) 6279 1610, email: ancd@ancd.org.au, internet: www.ancd.org.au.

NEW SURVEYS ON DRUG ABUSE AMONG HIGH-RISK GROUPS IN THE MEKONG REGION:

- Surveying Myanmar Schools: Building Confidence, Obtaining Results.
- Drug Abuse among Youth in Vientiane: School Survey.
- Drug Use by the Youth of Vietnam: In School and Out.
- Drug Use at the "Margins" of Vietnam.
- Thai Schools Free of Drugs: Model Approaches.

The subregional project on Development of Institutional Capacity for Demand Reduction Among High Risk Groups has recently published five reports on drug use among high-risk groups in several countries in the region. The project, which is now finalised, aimed to help participating countries better identify and assess the risks for drug abuse in their populations and to develop model interventions. The series includes three surveys on schoolchildren in Lao PDR, Myanmar, and Vietnam, one on marginalized groups such as commercial sex workers and street children in Vietnam, and one from Thailand on developing models for intervention.

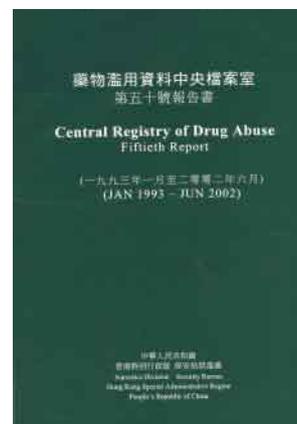
Publisher: UNODC Regional Centre in Bangkok, tel: (662) 288 2091, fax: (662) 281 2129, email: rcdcp@unodc.un.or.th, internet: www.unodc.un.or.th.



FIFTIETH REPORT OF THE CENTRAL REGISTRY OF DRUG ABUSE IN HONG KONG SAR

The report contains detailed information on the new cases of drug abuse in Hong Kong SAR in 2002. Findings include a slight decrease in first-time reported cases, half of reported cases represent youth between 18-20 years old. Overall heroin continues to be the most frequently reported drug of abuse. Among drug users under 21 the most commonly used drug was ketamine (67%) followed by ecstasy (36%) in 2002. Among new cases of people under 21, 35% used more than one type of drug.

Publisher: Central Registry of Drug Abuse, Statistics Unit, Security Bureau, Government Secretariat, Hong Kong SAR (China) tel: 852 2867 1079, fax: 852 2537 2575, email: sb_stat@sb.gov.hk.



OPIUM CULTIVATION AND ERADICATION REPORT FOR THAILAND 2001-2002

While opium cultivation in Thailand has been almost completely eradicated compared to the bloom of earlier decades, some cultivation still remains.

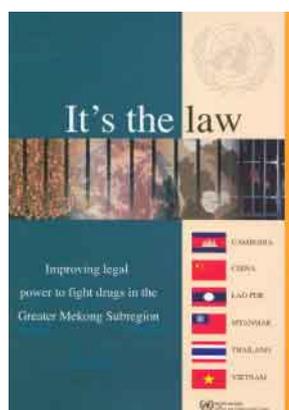
This year's opium survey by the Office of Narcotics Control (ONCB) reports a vastly higher cultivation/yield ratio than last year (important factors could be weather conditions and agricultural improvements such as fertilizers and irrigation).



Combining ground and aerial survey data, the survey found that cultivation in hectares increased only 14% (to 1,257 ha) in the 2001-02 season compared with the season before. However, the yield increased with 132% (to 32 tonnes). Thailand remains a minor opium producer, but each ton of opium should remind us of the need to relieve the many families involved from having to depend on this trade for their livelihood.

Publisher: ONCB, Bangkok, tel: 02 245 9355, fax: 02 245 9354.

IT'S THE LAW: IMPROVING LEGAL POWER TO FIGHT DRUGS IN THE GREATER MEKONG SUBREGION



The UNODC Regional Centre in Bangkok has recently wrapped up its implementation of a project on strengthening the judicial and prosecutorial drug control capacity in East Asia. This publication gives an insight to the three main types of activities; training of judges and prosecutors, establishment of a mechanism for mutual legal assistance (MLA) and assistance in law development. The booklet also contains practical advice such as a checklist for MLA legislation and a guide on handling MLA requests.

Publisher: UNODC Regional Centre, Bangkok, tel: 662 288 2091, fax: 662 281 2129, email: rcdcp@unodc.un.or.th. It is available online at <http://www.unodc.un.or.th>.

List of documents recently published by the UN Office on Drugs and Crime Regional Centre in Bangkok:

22/2002 Initial Assessment of CBT / E-learning in Brazil (Emerging Findings Report) AD/RAS/97/C51

23/2002 Eastern Horizons No.12, December 2002

1/2003 Marketing : the Bottleneck of Opium Eradication? Experiences from East Asia in Marketing Alternative Development Products

The above documents can be obtained through the website of UNODC Regional Centre for East Asia and the Pacific (<http://www.unodc.un.or.th>)

BANGKOK STAFF NEWS



Mr. John Doyle (USA) joined the Regional Centre as the Project Coordinator for the Regional Co-operative Mechanism to Monitor and Execute the ACCORD

Plan of Action. His primary responsibilities will include facilitating the work of the ACCORD task forces to improve regional operational coordination and the creation of a computerized database network to monitor progress and increase information sharing amongst ASEAN Members and China. John has previously worked with USAID in East Timor, UNDP in Laos and Catholic Relief Services (CRS) in Vietnam. He has a M.A. in International Affairs from Ohio University.



Mr. Takahiro Terasaki (Japan) joined the Regional Centre as Project Expert for the Improving Amphetamine-Type Stimulants (ATS) Data and Information System project. His primary

responsibilities include establishing data collection and exchange systems as well as a regional clearinghouse for information relating to ATS. Takahiro comes from the Japanese Ministry of Health, Labour and Welfare, with over twenty years of experience in the field of drug control.

Mr Gerassimos Fourlanos (Greece) completed his assignment as coordinator for the project on strengthening judicial and prosecutorial drug control capacity in East Asia. The project ran for just over three years, and made significant achievements towards improving the legal aspect of drug control in the region. Gerassimos has moved to take up a new position with the EU in Skopje, Macedonia, and will be greatly missed by colleagues at the Regional Centre.

Amazing Life Without Drugs



Photo : Khin Maung Lay (The Picture Man)

လူပတ္တဝါ
မူးယစ်ကင်းမဲ့

ဒီမှာ..... ဒီမှာ.....

စိတ်ကြွဆေးကို အထင်မသေးနဲ့

မင်းဦးနောက်ကို ဖျက်လိမ့်မယ်

မူးယစ်ဆေးကို အထင်မသေးနဲ့

မင်းရဲ့ဘဝဖျက်လိမ့်မယ်

ဘိန်းဖြူ ထိုးရင်းနဲ့

HIV/AIDS ကူးတတ်တယ်



Joining Forces in Myanmar

A year ago some concerned citizens recognised the need to better address the problem of drug abuse in Myanmar. Ever since, two groupings have been proactive in supporting a series of youth oriented initiatives to raise awareness about the dangers of drug abuse. First, some popular stars teamed up to create "Stars against Drugs." Secondly, eight non-governmental organisations formed the "Rainbow" group. Today, these two entities are the pillars of Myanmar's civil society initiative in the fight against drugs.

Recognising that drug abuse, synthetic drug abuse in particular, is slowly but steadily spreading among teenagers residing in the urban areas, the UNODC-supported civil society movement decided to undertake a series of preventive measures. One of them is a comprehensive awareness-raising campaign, known as "Amazing Life without Drugs."

Currently 10 billboards, 4,500 tin-plates and 13,000 posters featuring young national celebrities carrying the message "Amazing life without drugs" are displayed across the country.

Extract from Spot News No 8, June 2002, published by UNODC Myanmar Country Office.

