

World Drug Report 2018

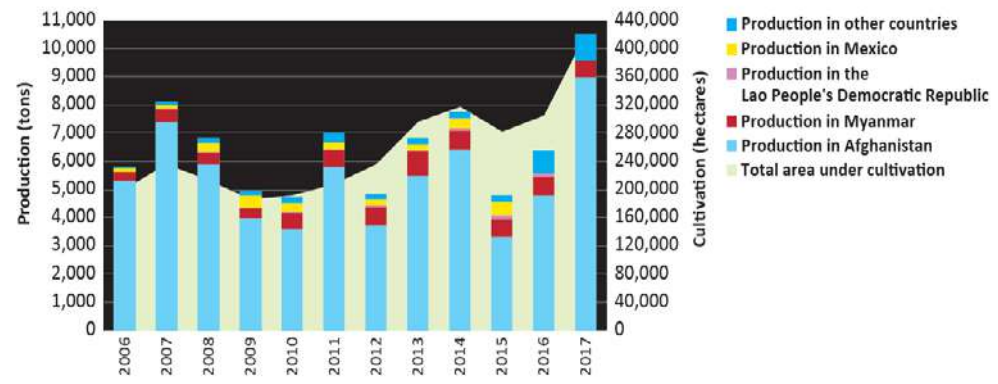
Pre-briefing to the Member States

Vienna, 20 June 2018



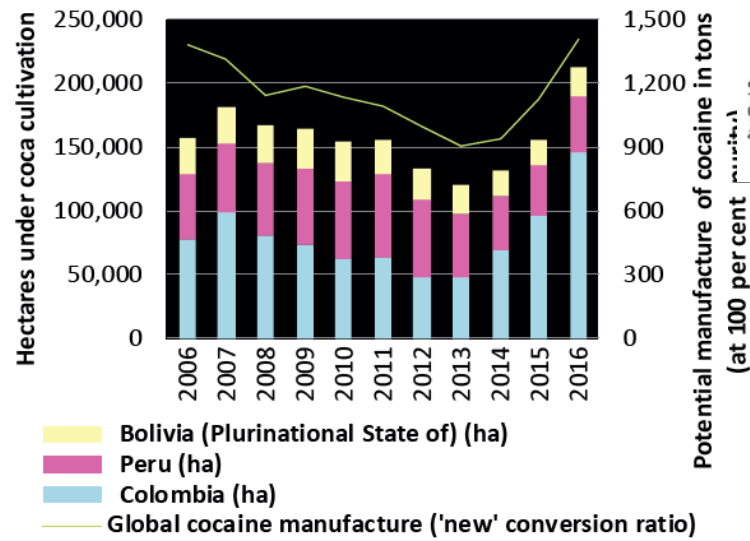
Latest trends

Opium poppy cultivation and production of opium, 2006-2017^a



Sources: UNODC, calculations are based on UNODC illicit crop monitoring surveys and the responses to the annual report questionnaire.
^a Data for 2017 are still preliminary.

Global coca bush cultivation and cocaine manufacture, 2006-2016

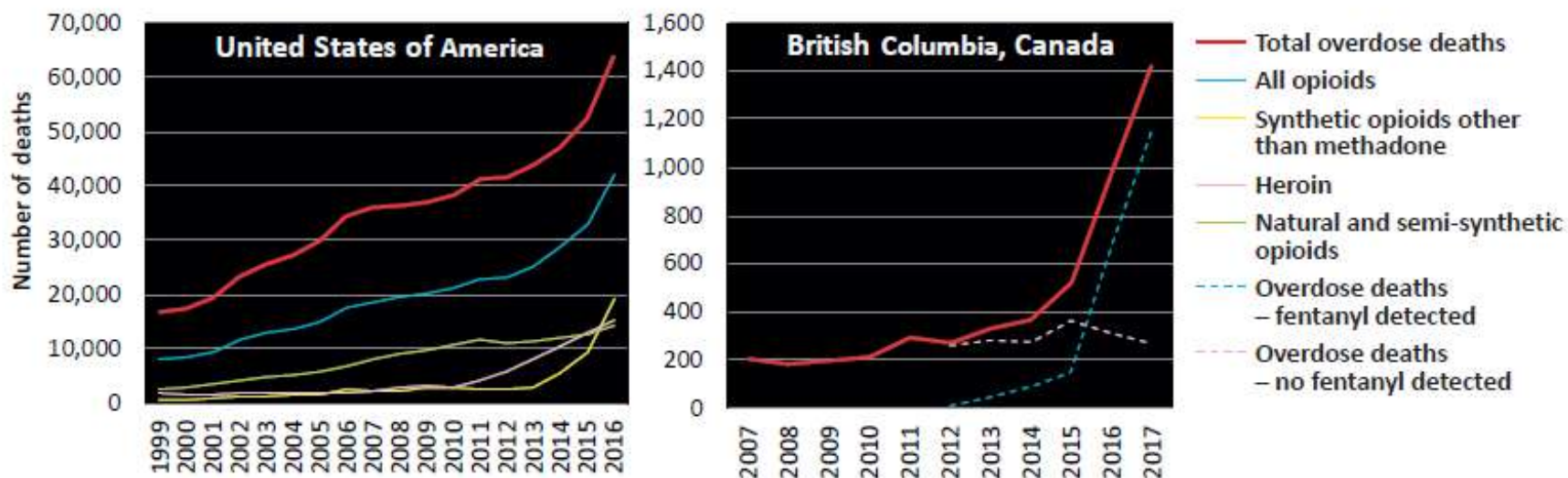


Sources: UNODC, coca cultivation surveys in Bolivia (Plurinational State of), Colombia and Peru, 2014 and previous years.



Latest trends

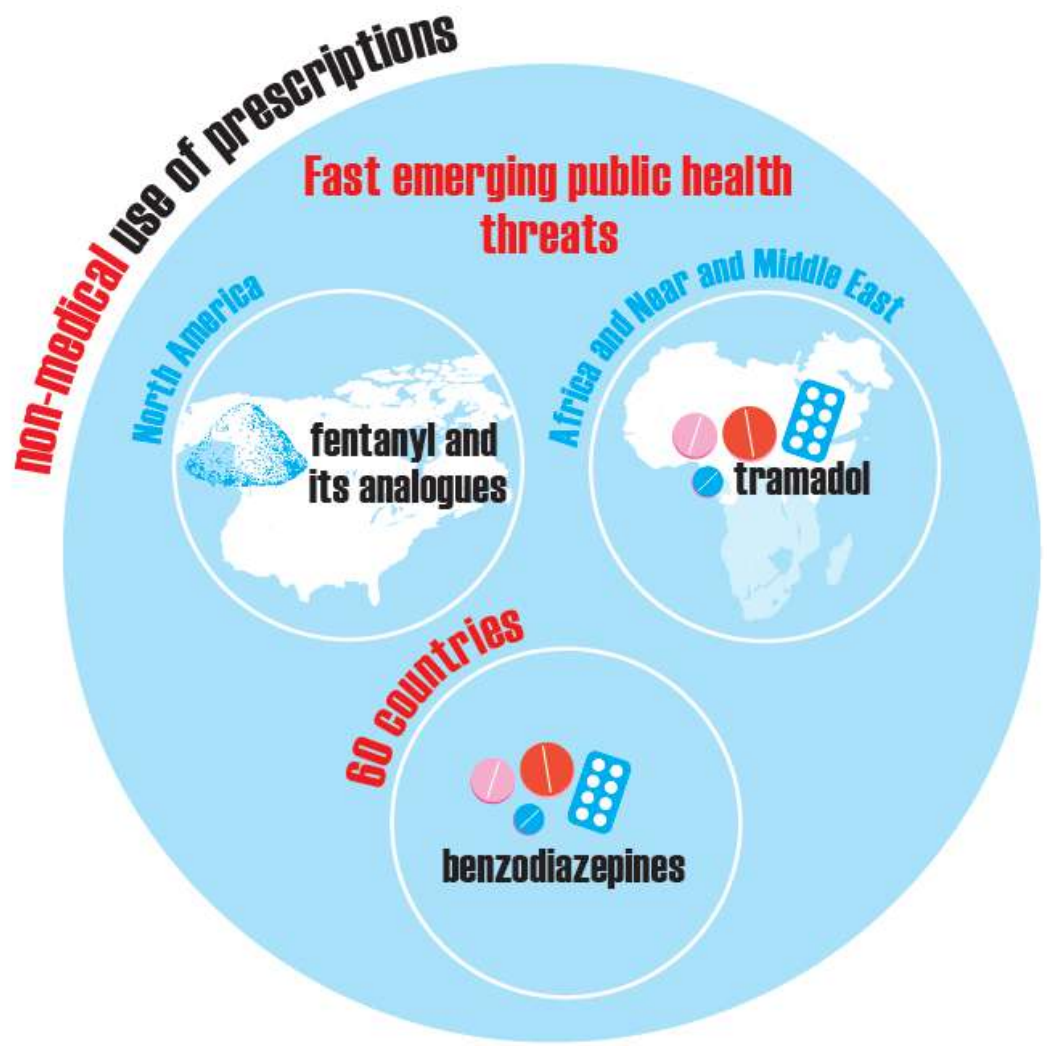
FIG. 8 | Overdose deaths from selected drugs in the United States and British Columbia, Canada



Source: For United States, see Holly Hedegaard, Margaret Warner and Arialdi M. Miniño, “Drug overdose deaths in the United States, 1999–2016”, NCHS Data Brief, No. 294 (December 2017). For British Columbia, Canada, see British Columbia Coroners’ Service, “Illicit drug overdose deaths in B.C., January 1, 2008–February 28, 2018” (Burnaby, British Columbia, Office of the Chief Coroner, 5 April 2018); and British Columbia Coroners’ Service, “Fentanyl-detected illicit drug overdose deaths. January 1, 2012–December 31, 2017” (Burnaby, British Columbia, Office of the Chief Coroner, 31 January 2018).



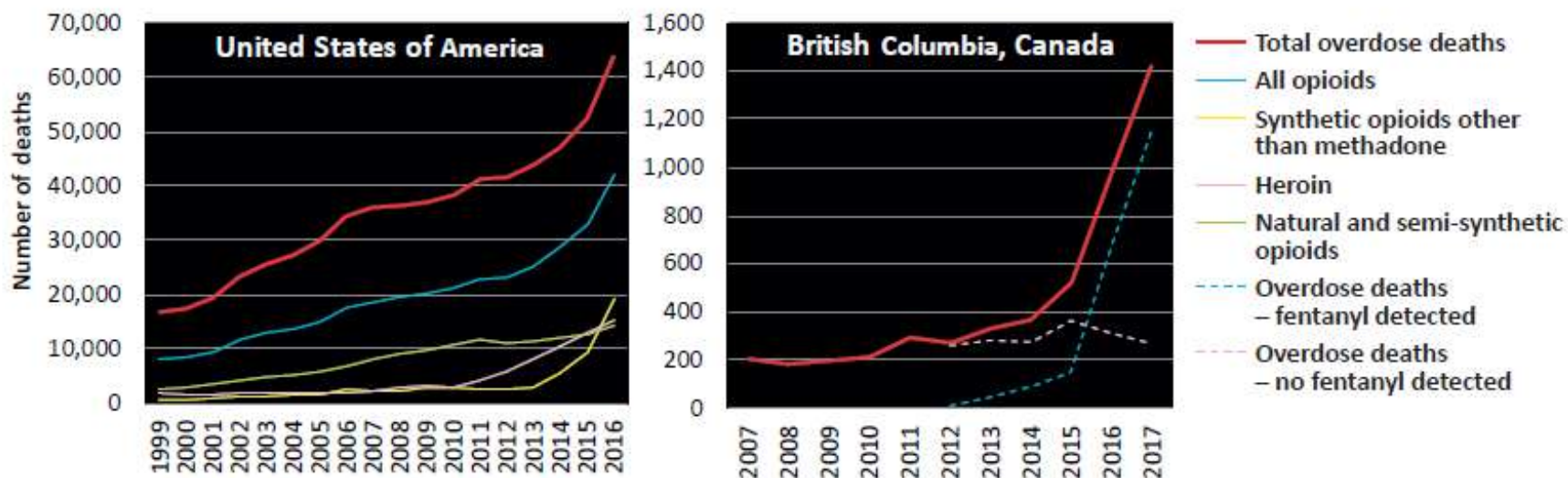
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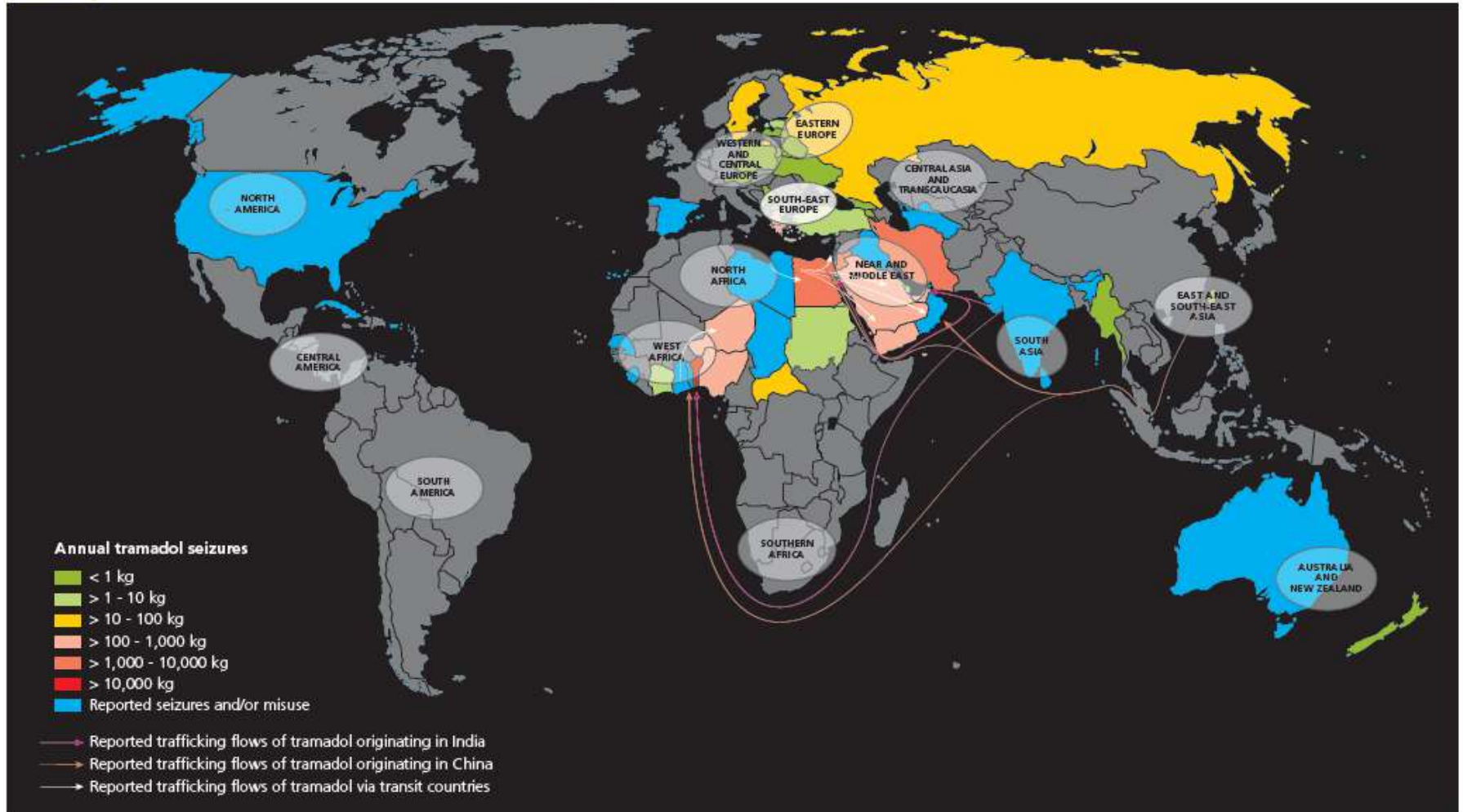
UNODC

United Nations Office on Drugs and Crime



Tramadol

MAP 2 | Reported tramadol seizures (and/or misuse) and major tramadol trafficking/diversion flows, 2012–2016



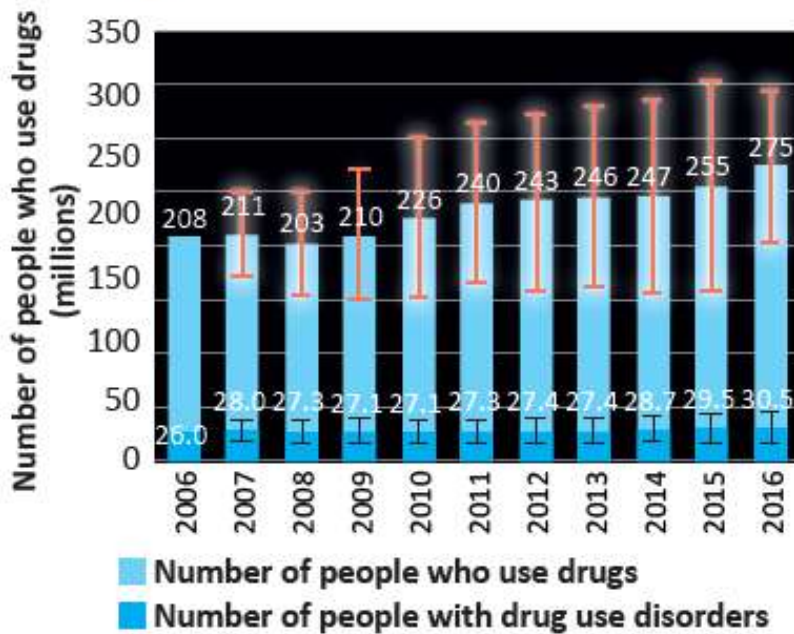
Source: UNODC, annual report questionnaire data, *Report of the International Narcotics Control Board for 2016* (and previous years); report of Heads of National Law Enforcement Agencies for 2016 (and previous years); *WHO Expert Committee on Drug Dependence: Thirty-sixth Report*, WHO Technical Report Series, No. 902 (Geneva, World Health Organization, 2002); United States Department of State, Bureau for International Narcotics and Law Enforcement Affairs, *International Narcotics Control Strategy Report* (2017) (and previous years).

Notes: 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 Republic of Sudan and the Republic of 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).



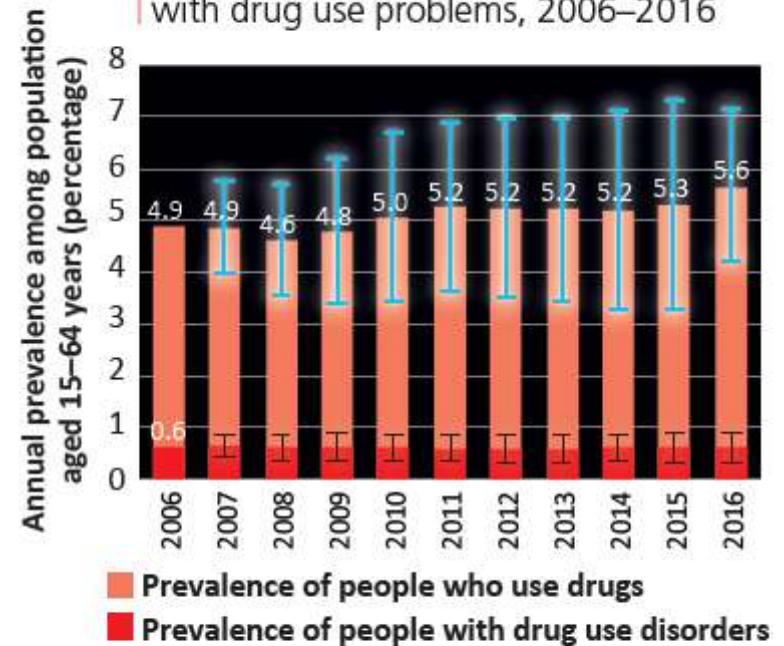
Trends in global drug use

FIG. 1 Global trends in estimated number of people who use drugs, 2006–2016



Source: UNODC, responses to the annual report questionnaire.
Note: Estimates are for adults (aged 15–64 years) who used drugs in the past year.

FIG. 2 Global trends in the estimated annual prevalence of drug use and people with drug use problems, 2006–2016

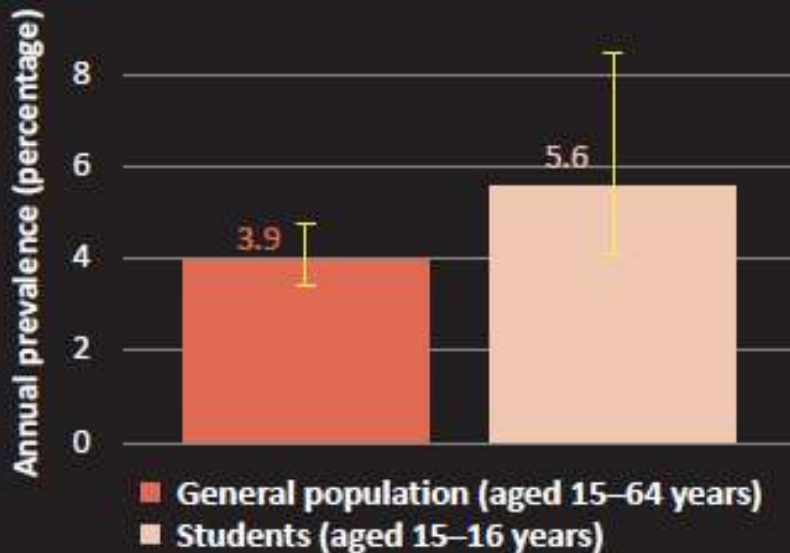


Source: UNODC, responses to the annual report questionnaire.
Note: Estimated percentage of adults (aged 15–64 years) who used drugs in the past year.

First Global estimate of cannabis use among students

15-16

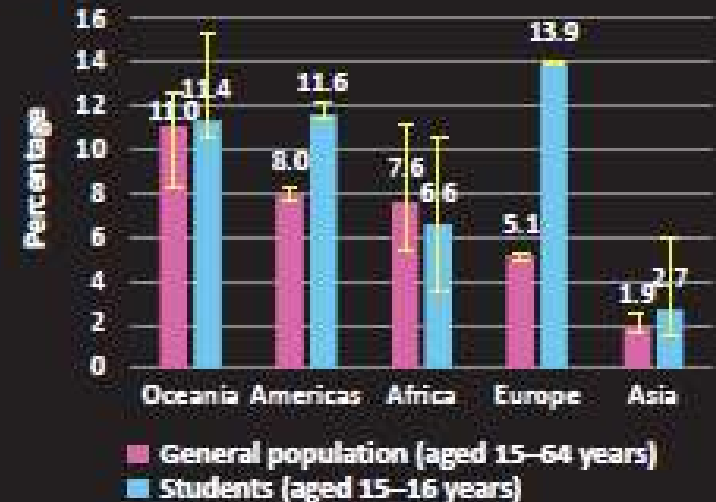
Global annual prevalence of cannabis use among the general population, aged 15–64 years and among students aged 15–16 years, 2016



Sources: UNODC, annual report questionnaire data and other government reports.

Note: the estimate of cannabis use in the last year in young people aged 15–16 years is based on school surveys in most countries, thus the use of the term 'students'.

Annual prevalence of cannabis use among the general population aged 15–64 years and among students aged 15–16 years, 2016

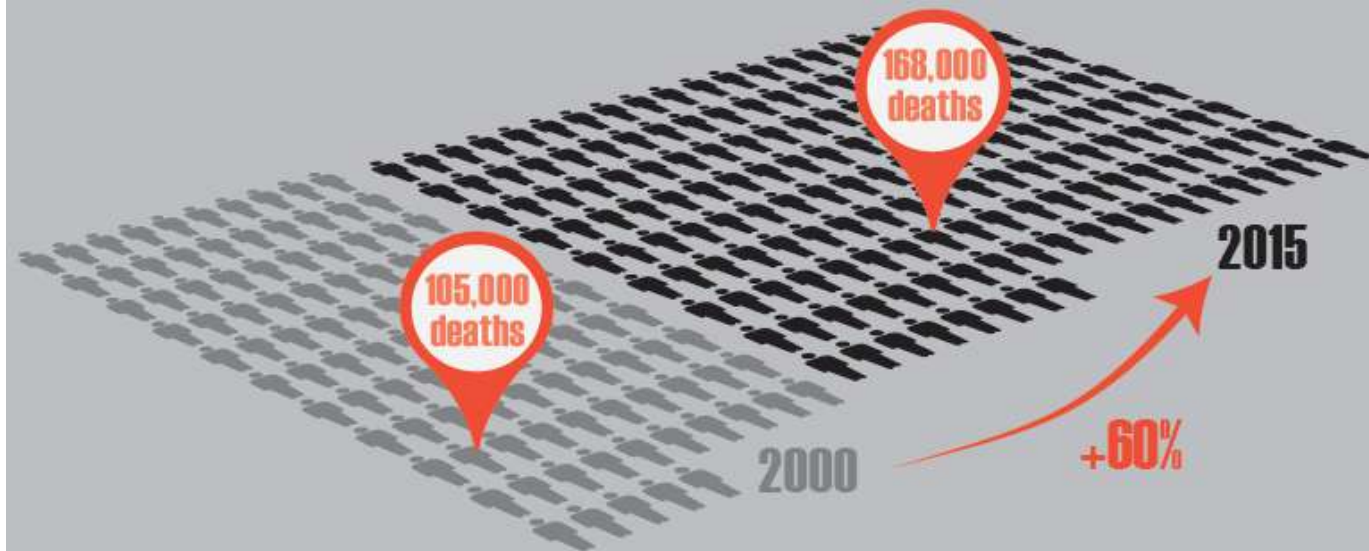


Sources: UNODC, annual report questionnaire data and government reports.

Note: the estimate of past-year cannabis use in young people aged 15–16 years is based on school surveys in most countries, hence the use of the term 'students'.

Trends and patterns in drug related deaths

Global deaths directly caused by the use of drugs **have been increasing**

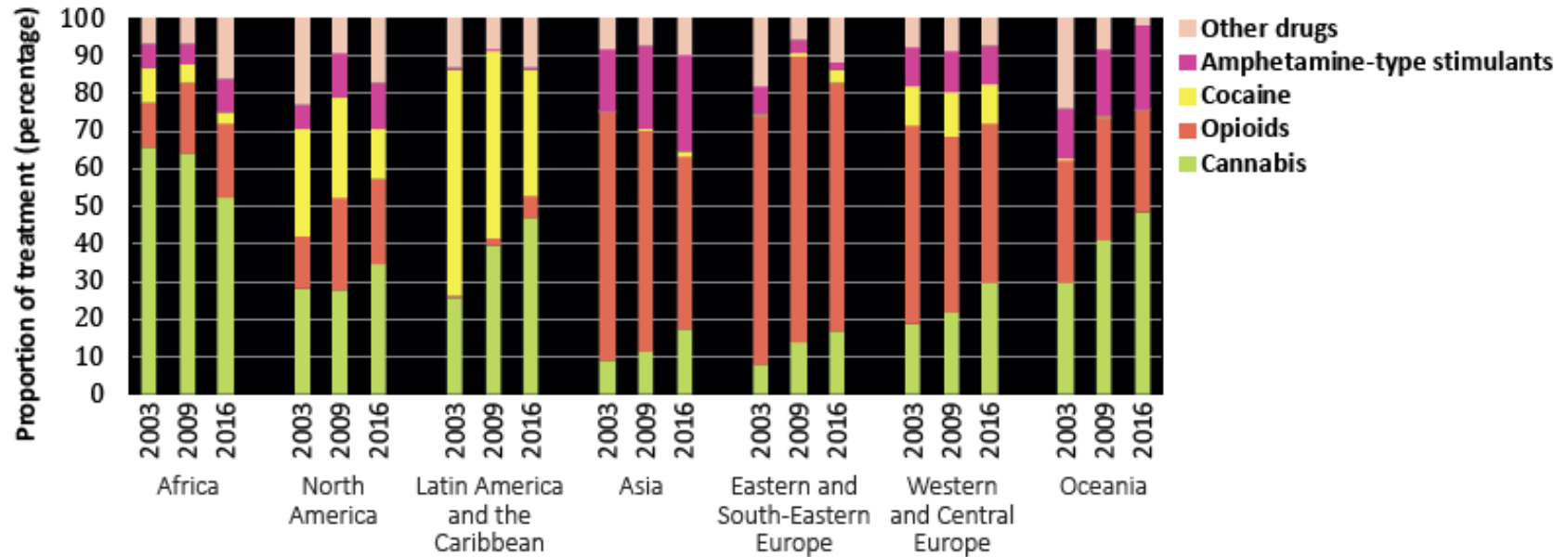


Source: UNODC analysis based on WHO, Disease burden and mortality estimates, Global Health Estimates 2015: deaths by cause, age, sex, by country and by region, 2000–2015.



Trends in treatment

FIG. 3 Trends in the proportion of primary drug of use in drug treatment admissions, by region, 2003, 2009 and 2016

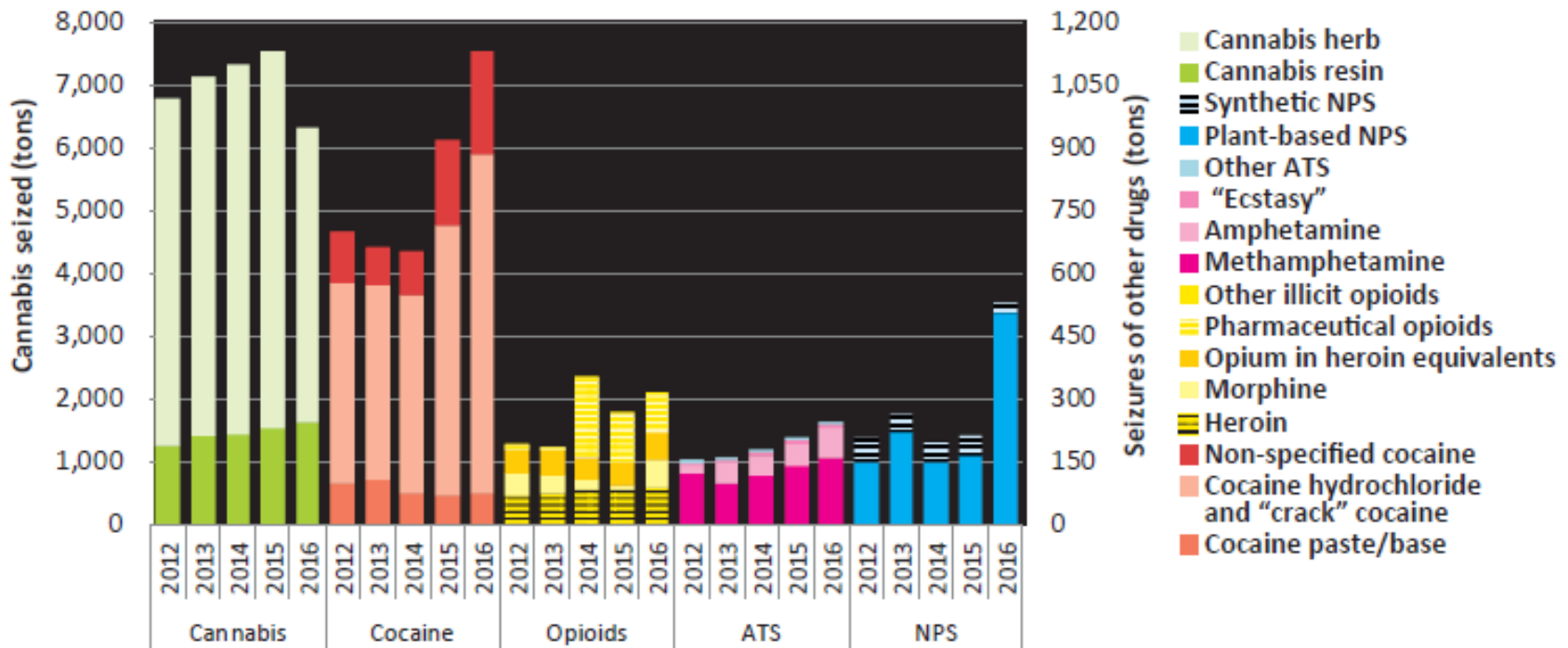


Source: UNODC, responses to the annual report questionnaire.



Seizures

FIG. 13 | Global quantities of selected drugs seized, 2012–2016



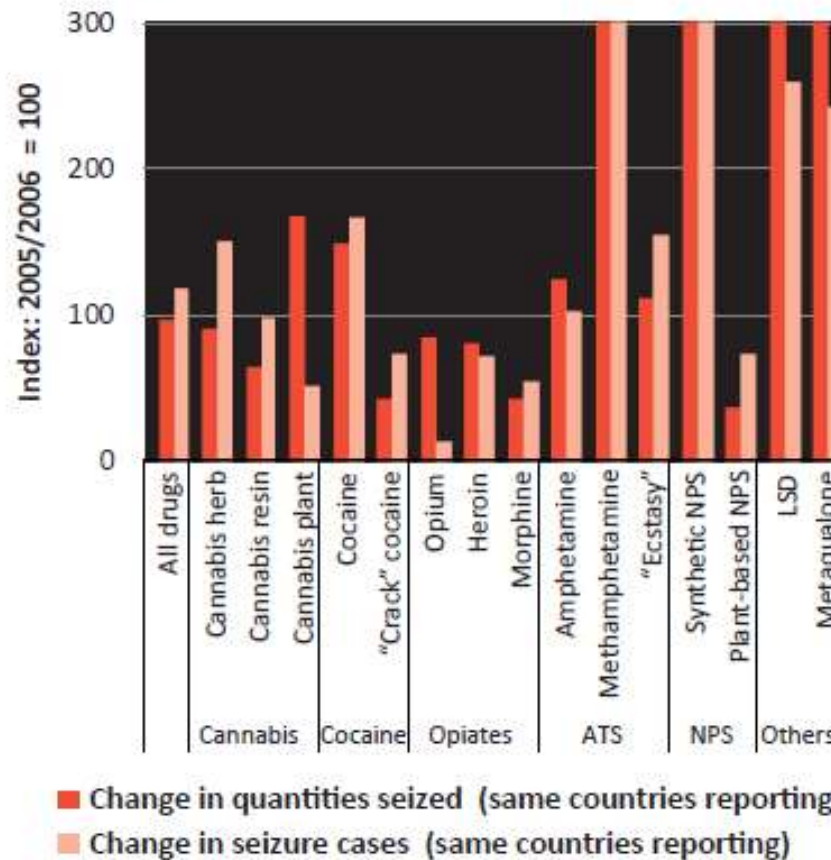
Source: UNODC, responses to the annual report questionnaire.

Note: A rate of 10:1 was used to transform seizures of opium into seizures expressed in heroin equivalents.



Seizures

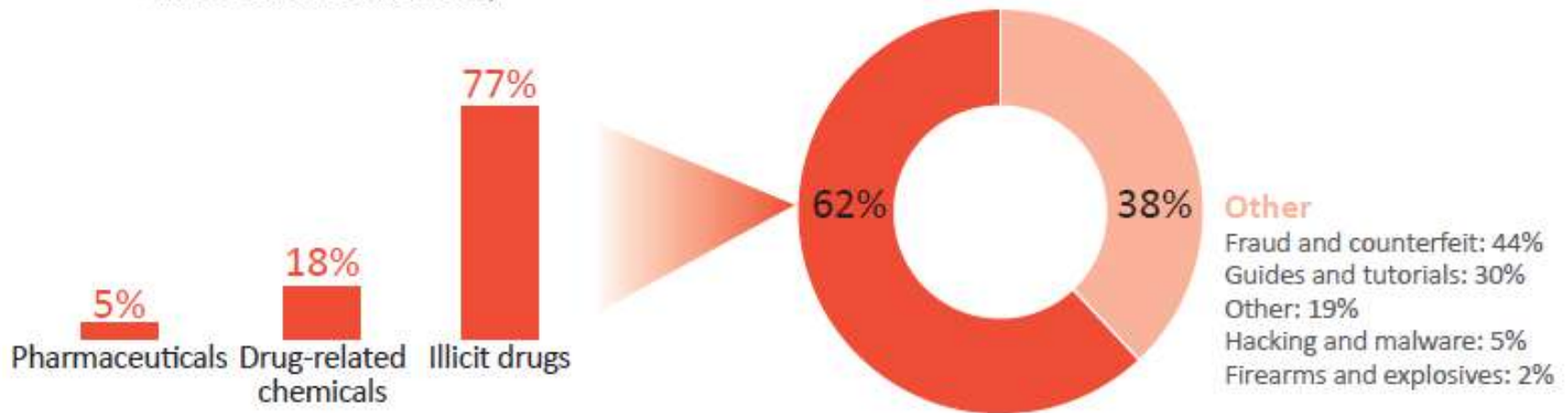
FIG. 15 Changes in quantities of drugs seized and number of drug seizure cases from 2005–06 to 2015–16



Source: UNODC, responses to the annual report questionnaire
 Note: Calculation based on data from 71 countries (index: 2005–2006 = 100).

Darknet

FIG. 18 | Importance of drugs and drug-related chemicals for the darknet (based on listings on the main darknet markets)



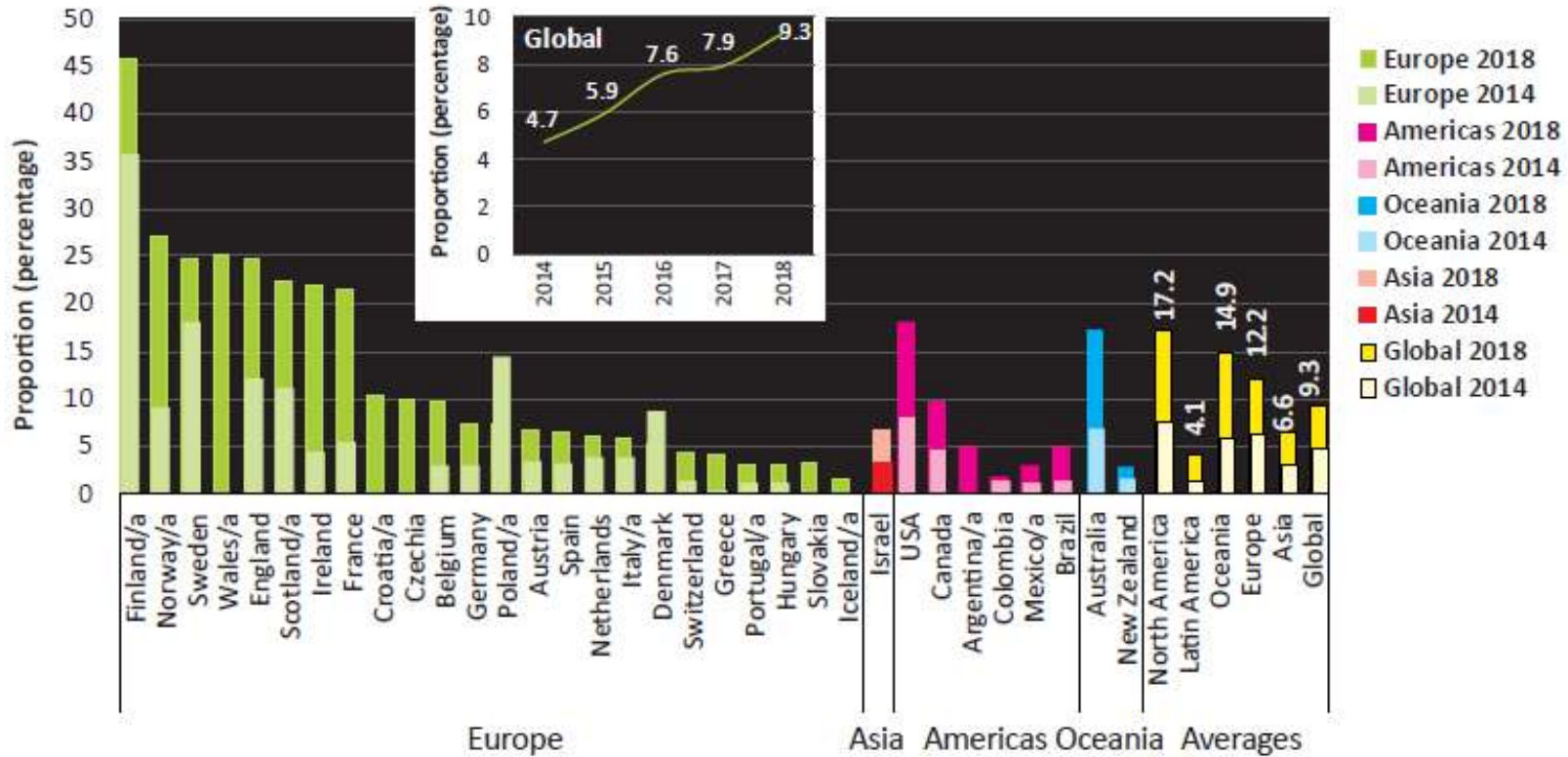
Source: EMCDDA and Europol, *Drugs and the darknet*, November 2017, p. 15.

Note: Based on active listings data from AlphaBay, Dream Market, Hansa, TradeRoute and Valhalla darknet marketplaces, spanning from the launch of each marketplace to 21 August 2017 (or market closure).



Darknet

FIG. 19 Proportion of Internet users reporting to an online survey who used drugs in the past year and who purchased drugs via the darknet, 2014 and 2018 (annual prevalence)



Source: Global Drug Survey. Available at https://www.globaldrugsurvey.com/wp-content/themes/globaldrugsurvey/results/GDS2017_key-findings-report_final.pdf.

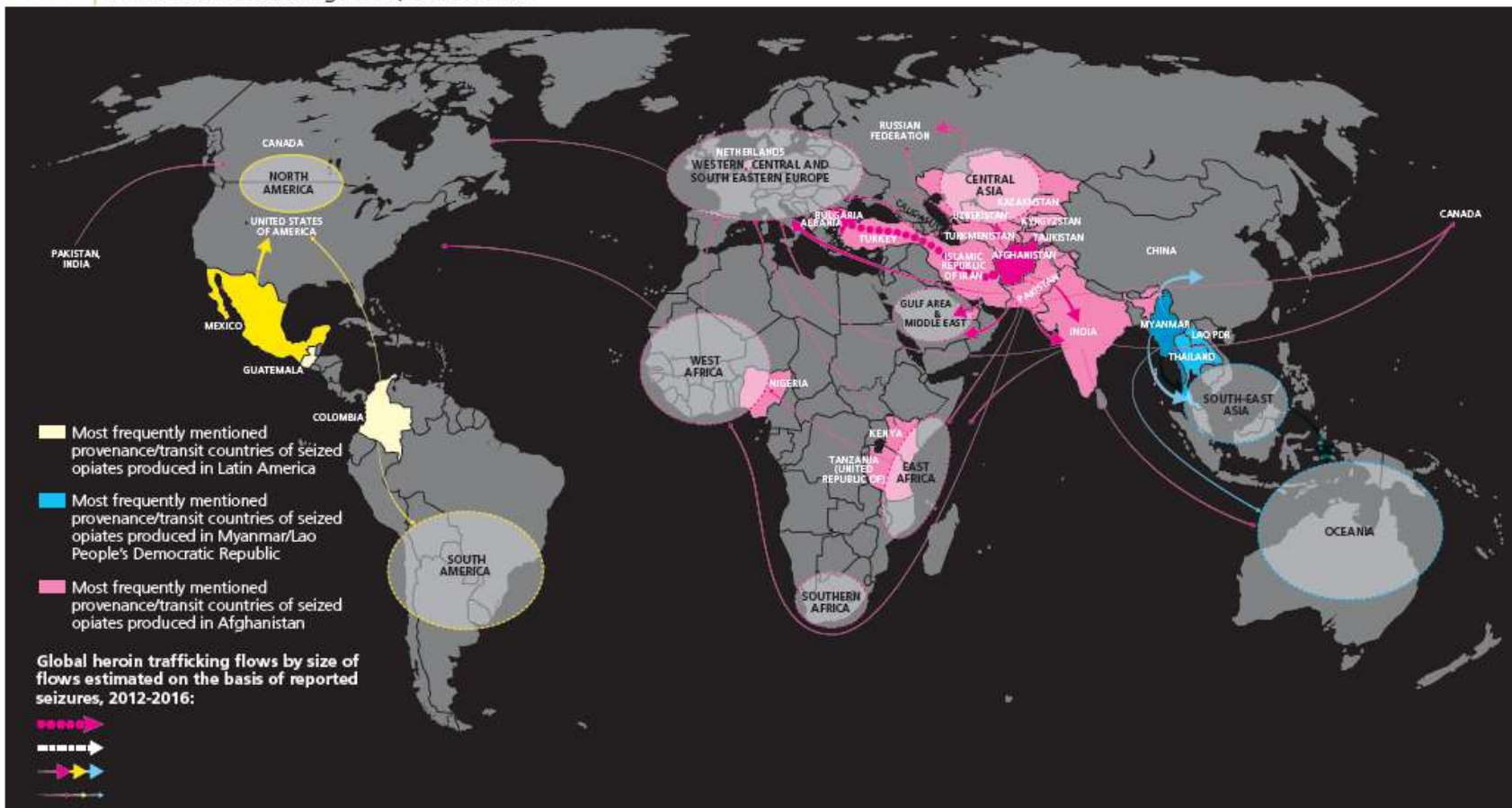
Note: The proportions shown here are based on convenience samples of people who volunteered to participate in these surveys. The total number of persons answering darknet market-related questions was 53,5572 in 2018, all of whom also reported their past-year drug use.

^a For the following countries no data for 2014 or 2018 were available, so data from the closest year were used instead: Finland (2016 and 2018); Norway (2016 and 2017); Wales (2017); Scotland (2015 and 2018); Croatia (2017); Greece (2017); Poland (2015 and 2018); Italy (2015 and 2018); Portugal (2014 and 2017); Iceland (2017); Argentina (2017); Mexico (2014 and 2017).



Heroin trafficking flows

MAP 1 | Main heroin trafficking flows, 2012–2016



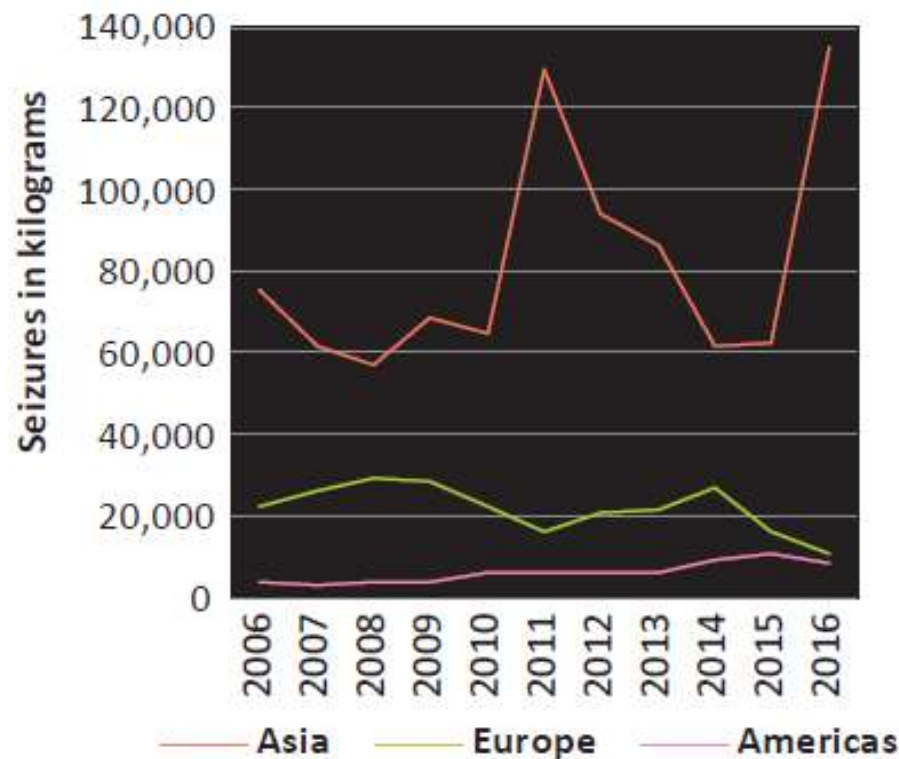
Sources: UNODC, responses to the annual report questionnaire and individual drug seizure database.

Notes: The size of the trafficking flow lines is based on the amount of heroin seized in a subregion and the number of mentions of countries from where the heroin has departed (including reports of "origin" and "transit") to a specific subregion over the period 2012–2016. A darker shade indicates that the country represents more than 50 per cent of heroin production in the region. The trafficking flows are determined on the basis of country of origin/departure, transit and destination of seized drugs as reported by Member States in the annual report questionnaire and individual drug seizure database: as such, they need to be considered as broadly indicative of existing trafficking routes while several secondary flows may not be reflected. Flow arrows represent the direction of trafficking: origins of the arrows indicate either the area of manufacture or the one of last provenance, end points of arrows indicate either the area of consumption or the one of next destination of trafficking.

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Heroin and morphine seizures

FIG. 5 Quantities of heroin and morphine seized, in kilograms, for selected regions: 2006–2016



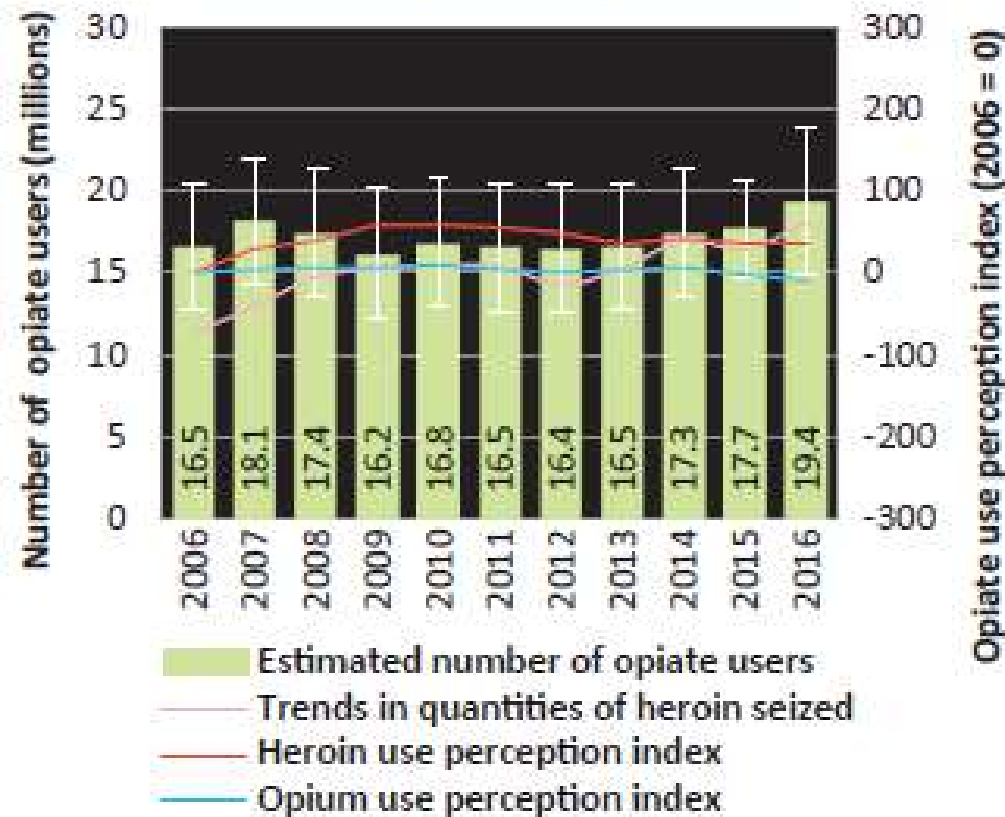
Source: UNODC, responses to the annual report questionnaire; and other government sources.



FIG. 7

Estimated number of opiate users, trends in quantities of heroin seized and heroin and opium use perception indexes (2006=100)

Opiate use trends

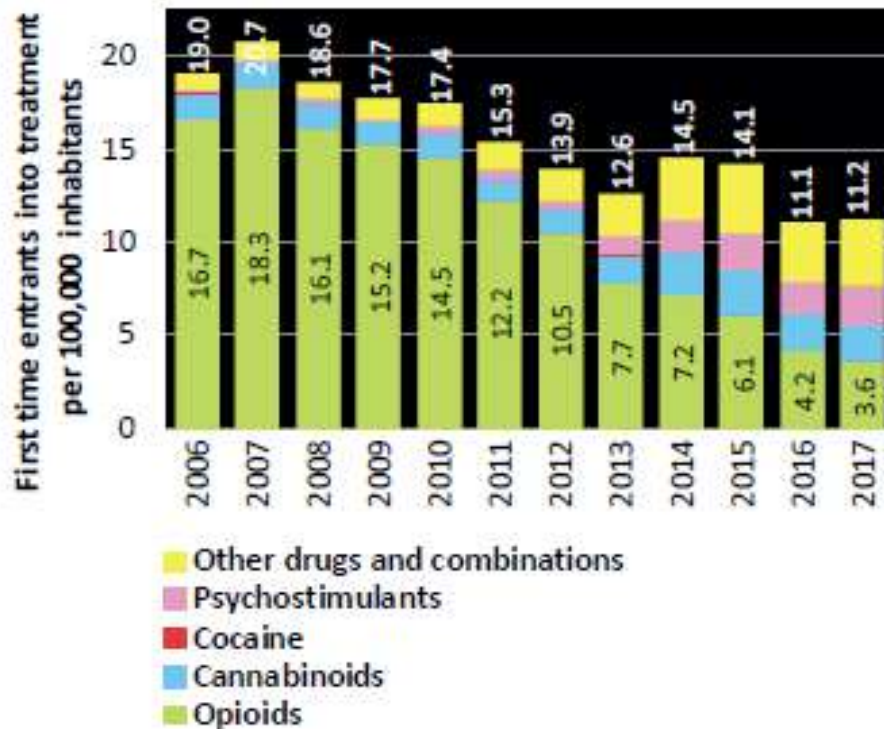


Source: UNODC, elaboration based on annual report questionnaire data.



Opiate use trends in Eastern Europe

FIG. 9 First time entrants into drug-related treatment per 100,000 inhabitants in the Russian Federation, by drug type, 2006–2017*



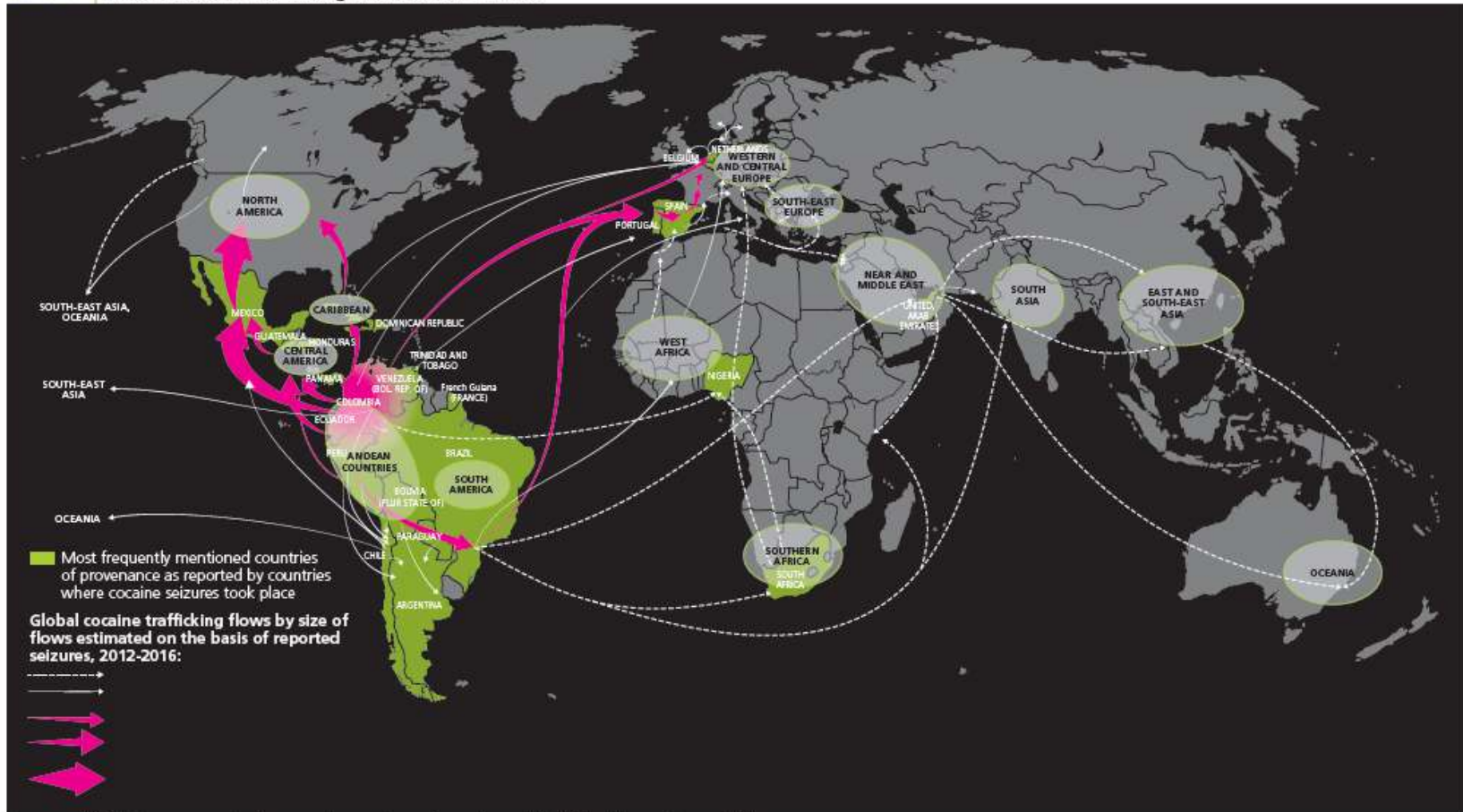
Source: "Basic Functioning Indicators of the Narcological Service of the Russian Federation". Set of statistical handbooks for 2008–2017, released by NRC on Addictions – branch of V.Serbsky NMRCPN.

*Data for 2017 are still preliminary.



Cocaine trafficking

MAP 1 | Main cocaine trafficking flows, 2012–2016



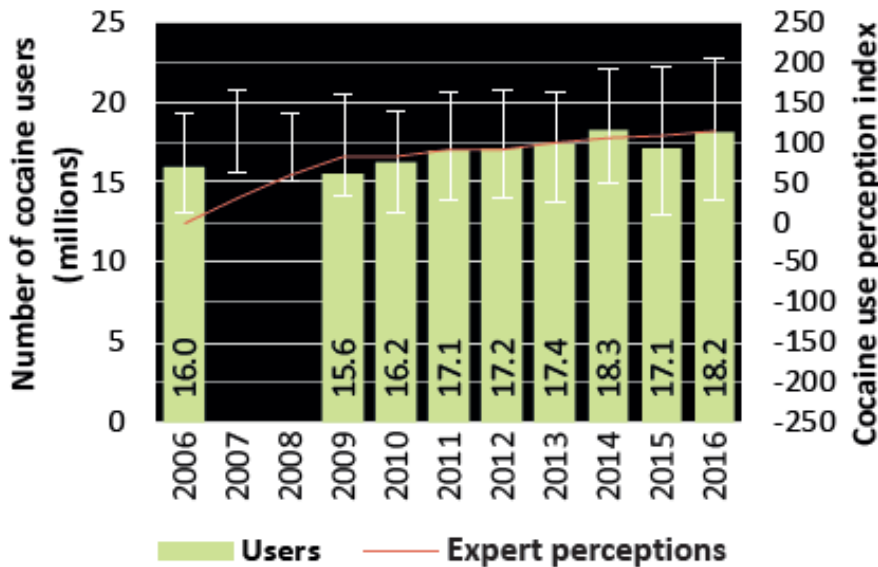
Sources: UNODC, responses to the annual report questionnaire and individual drug seizure database.

Notes: The size of the trafficking flow lines is based on the amount of cocaine seized in a subregion and the number of mentions of countries from where the cocaine has departed (including reports of "origin" and "transit") to a specific subregion over the period 2012–2016. The trafficking flows are determined on the basis of country of origin/departure, transit and destination of seized drugs as reported by Member States in the annual report questionnaire and individual drug seizure database: as such, they need to be considered as broadly indicative of existing trafficking routes while several secondary flows may not be reflected. Flow arrows represent the direction of trafficking: origins of the arrows indicate either the area of manufacture or the one of last provenance, end points of arrows indicate either the area of consumption or the one of next destination of trafficking.

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FIG. 4 Trends in the number of annual cocaine users and cocaine use perception index, 2006–2016

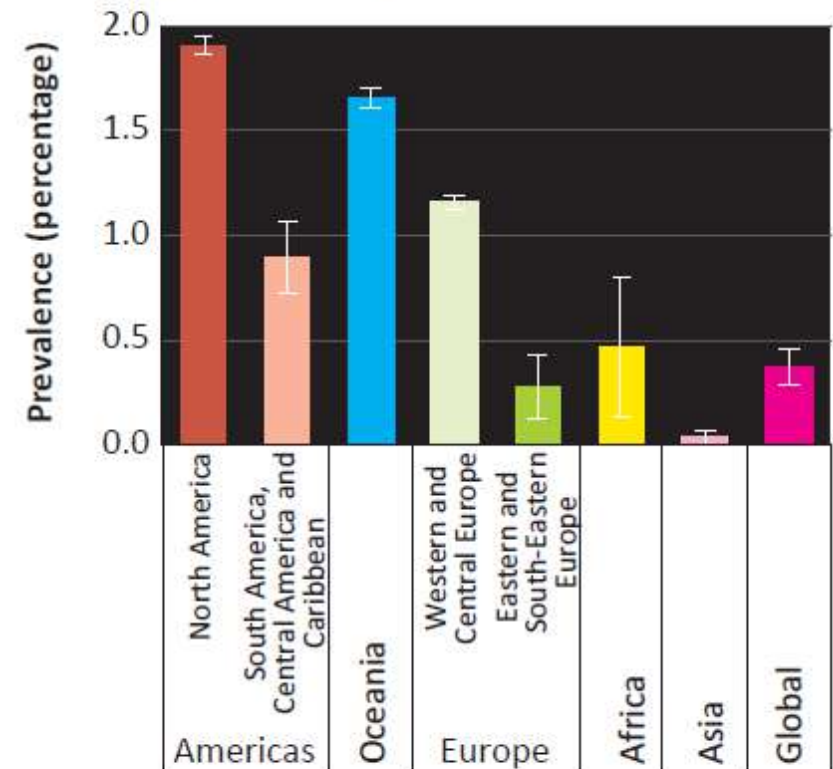


Source: UNODC estimates based on annual report questionnaire data.

Note: For calculation methods and details, see the online methodology section of the present report.

Cocaine use

FIG. 3 Estimated annual prevalence rates of cocaine use among the population aged 15–64 years, 2016



Source: UNODC estimates based on annual reports questionnaire data and other government reports.

Cannabis herb seizures

FIG. 4 Quantities of cannabis seized, by region, 2006-2016

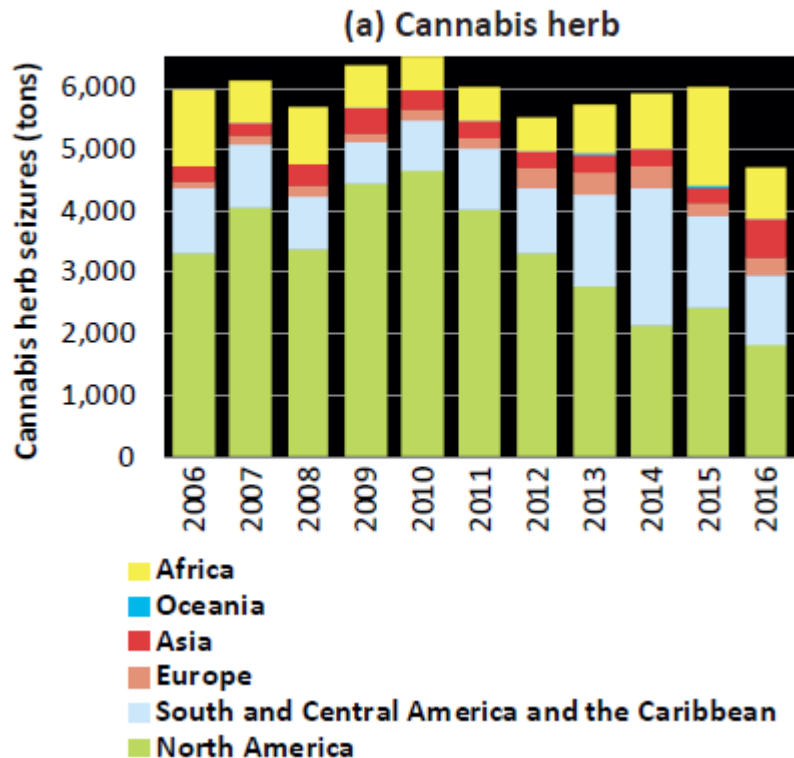
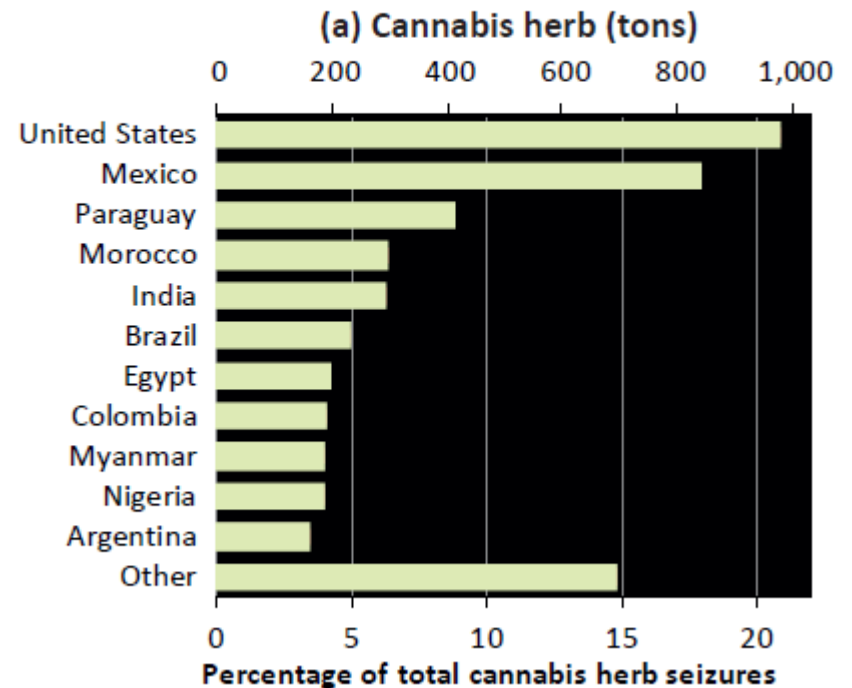
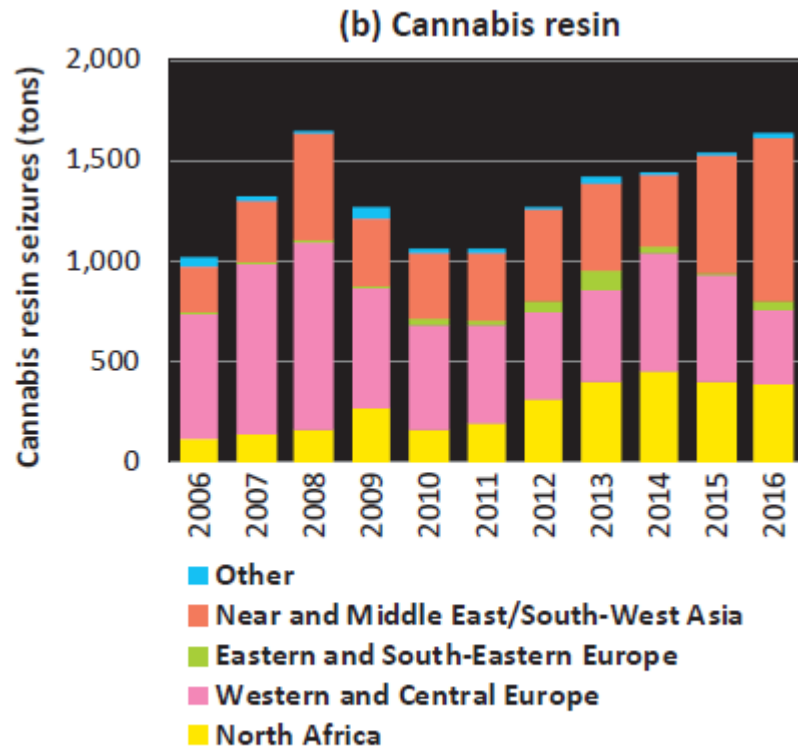


FIG. 5 Quantities of cannabis seized, by country, 2016



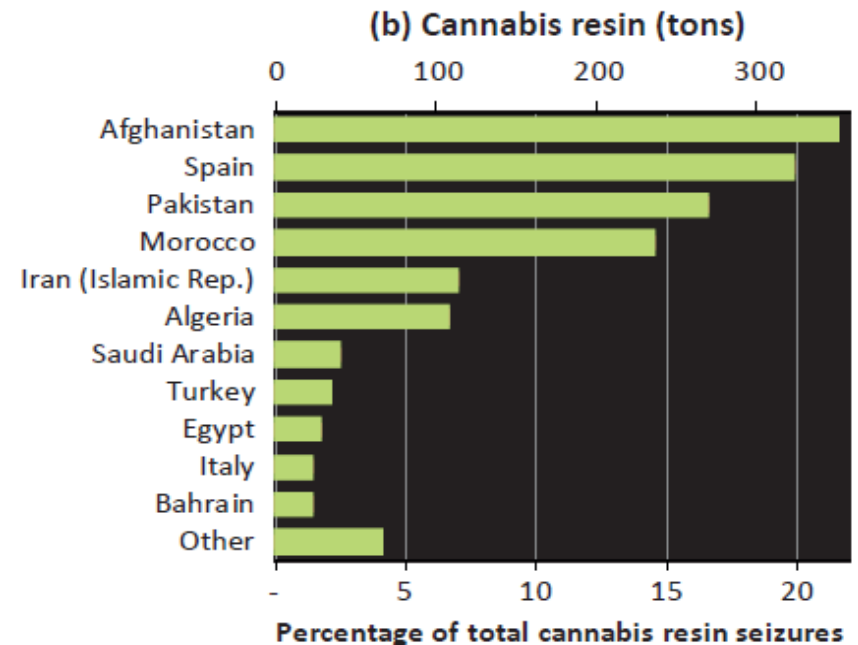
Cannabis resin seizures

FIG. 4 | Quantities of cannabis seized, by region, 2006-2016



Source: UNODC, responses to the annual report questionnaire.

FIG. 5 | Quantities of cannabis seized,

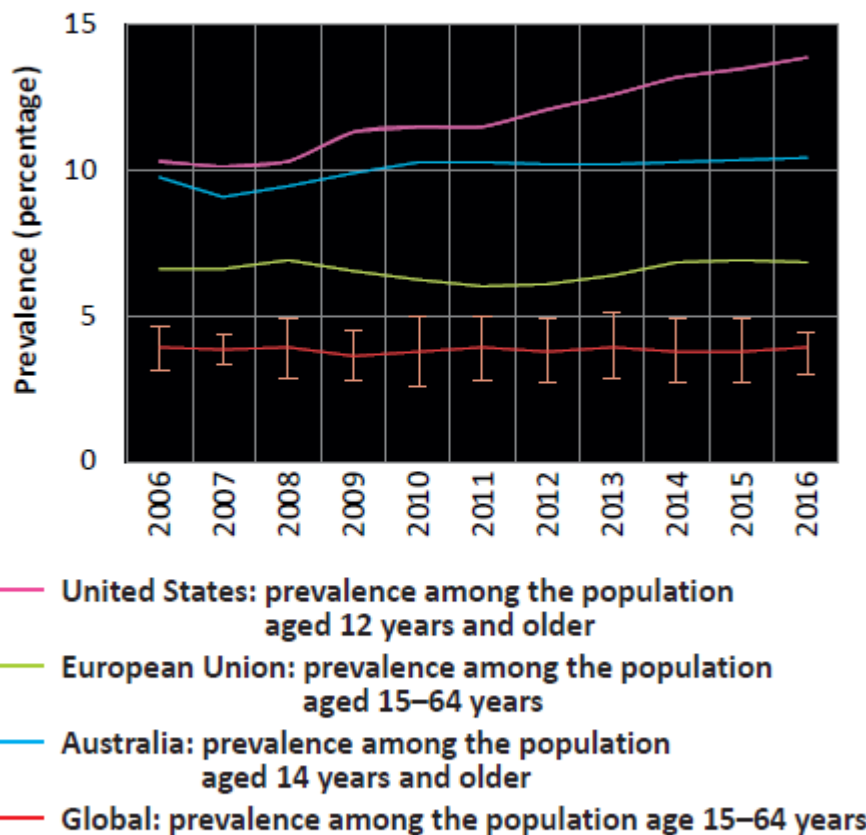


Source: UNODC, responses to the annual report questionnaire.



Cannabis use in different regions

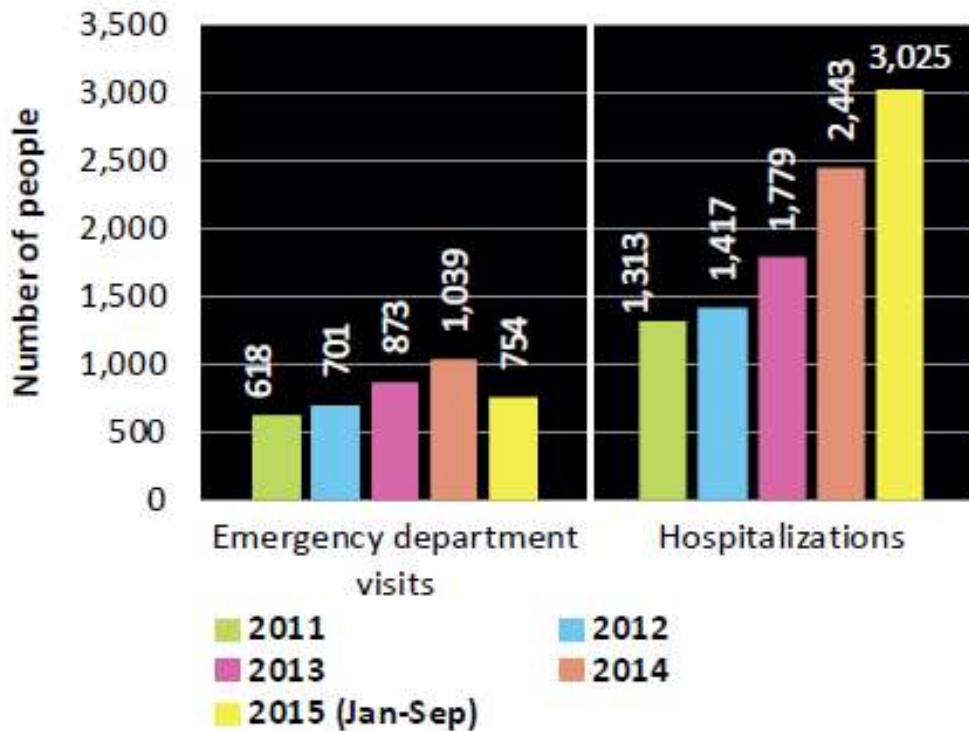
FIG. 9 Annual cannabis use in the United States, the European Union, Australia and at the global level, 2006–2016



Source: UNODC, responses to the annual report questionnaire, SAMHSA, EMCDDA and the Australian Institute of Health and Welfare.

Cannabis use and its health consequences in Colorado

FIG. 12 Health-care utilization related to cannabis use in Colorado

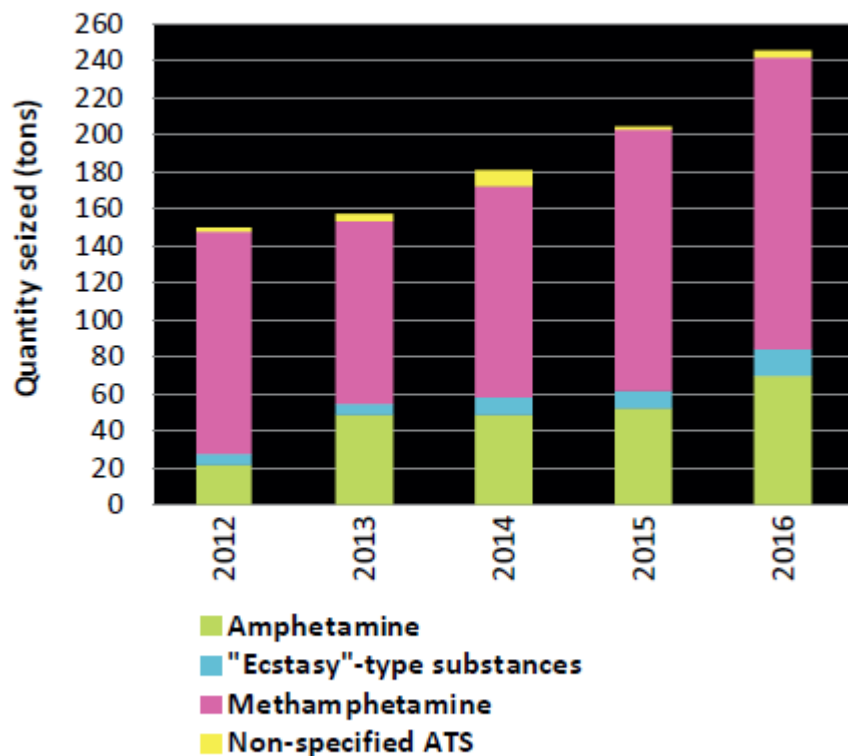


Source: Colorado Department of Public Health and Environment, (Denver, United States, 2017).

Note: The 2015 data on emergency department visits and hospitalizations that are publicly available are for the period January–September only.



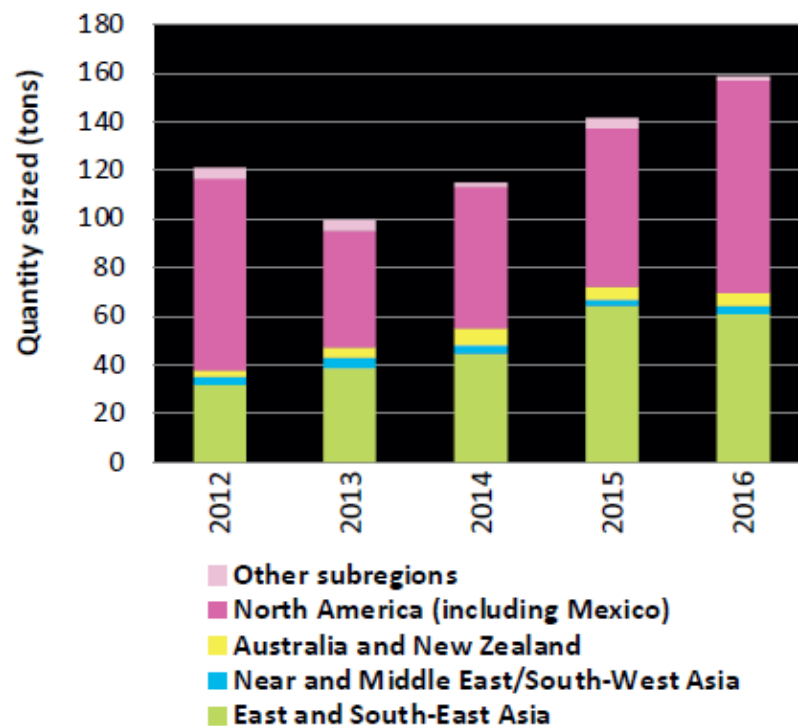
FIG. 1 Quantities of amphetamine-type stimulants seized worldwide, by type, 2012–2016



Source: UNODC, responses to the annual report questionnaire, 2012–2016.

ATS seizures

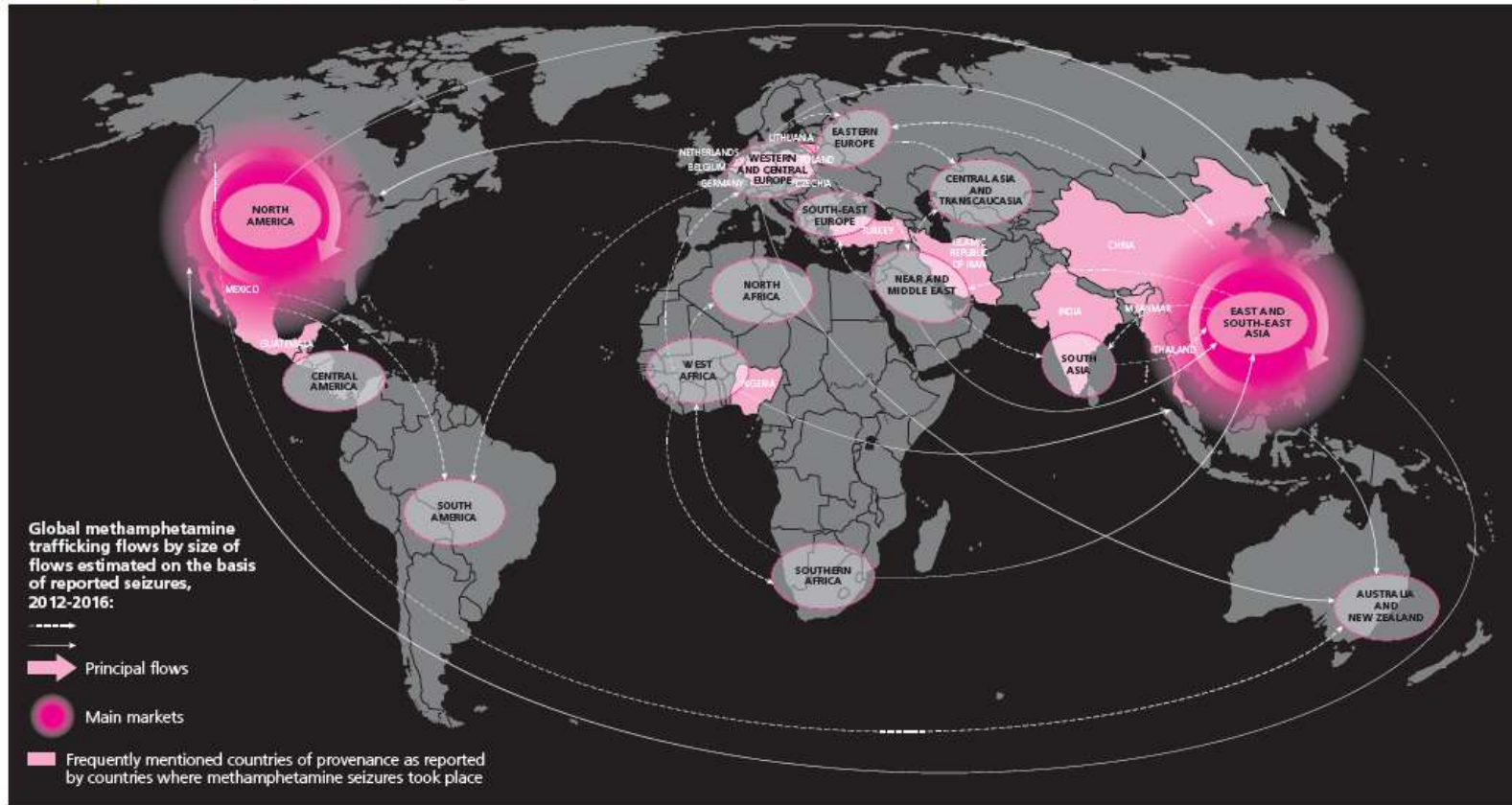
FIG. 2 Quantities of methamphetamine seized worldwide, by subregion, 2012–2016



Source: UNODC, responses to the annual report questionnaire, 2011–2016.

Methamphetamine trafficking

MAP 1 | Main methamphetamine trafficking flows, 2012–2016



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

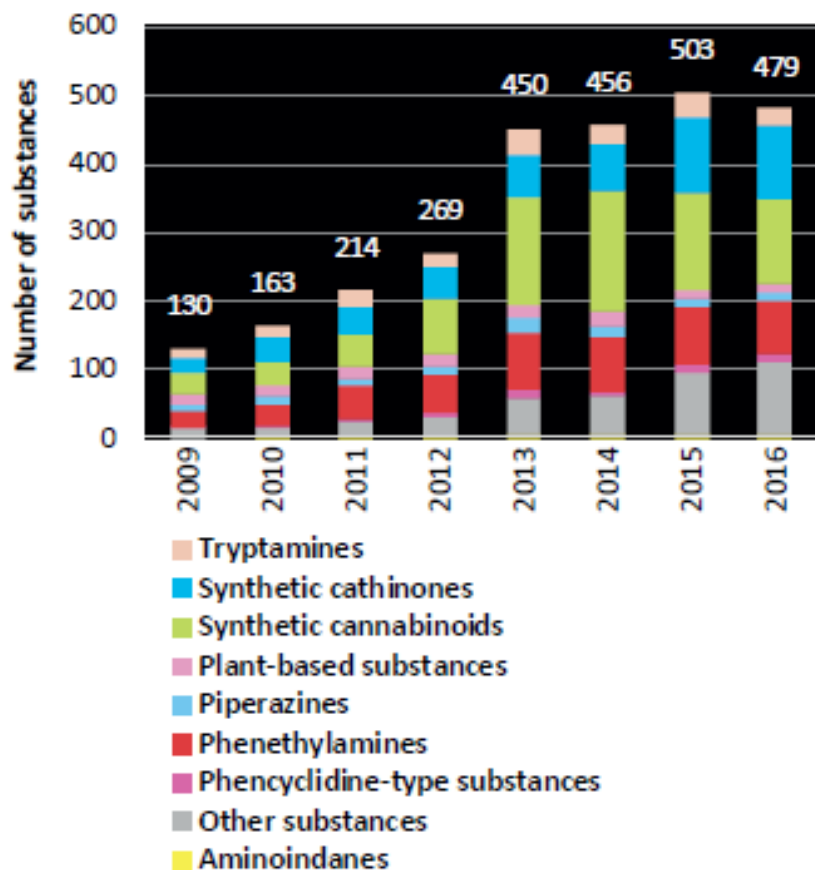
Notes: The size of the trafficking flow lines is based on the amount of methamphetamine seized in a subregion and the number of mentions of countries from where the methamphetamine has departed (including reports of "origin" and "transit") to a specific subregion over the period 2012–2016. The trafficking flows are determined on the basis of country of origin/departure, transit and destination of seized drugs as reported by Member States in the annual report questionnaire and individual drug seizure database: as such, they need to be considered as broadly indicative of existing trafficking routes while several secondary flows may not be reflected. Flow arrows represent the direction of trafficking: origins of the arrows indicate either the area of manufacture or the one of last provenance, end points of arrows indicate either the area of consumption or the one of next destination of trafficking.

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FIG. 4 | Number of new psychoactive substances reported annually, 2009–2016

New Psychoactive Substances



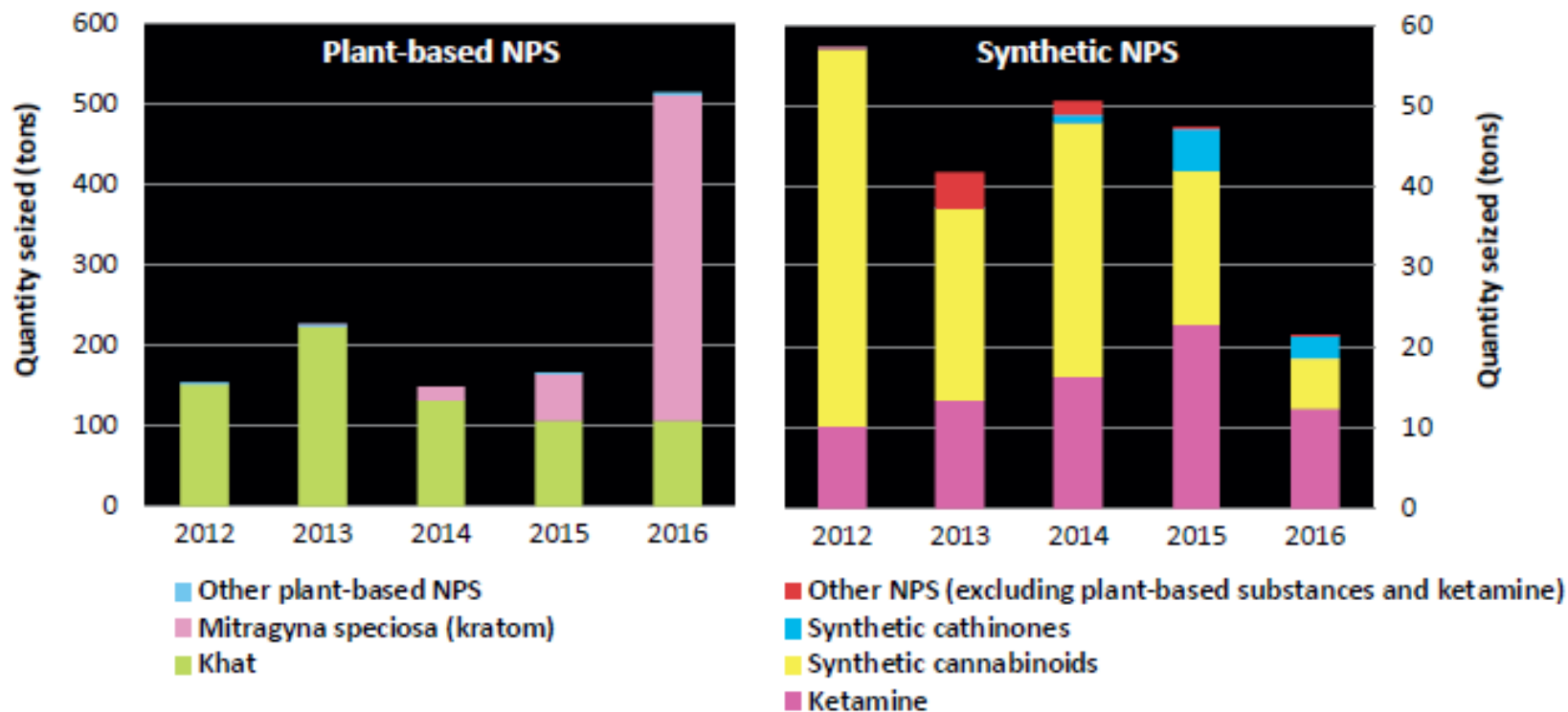
The market for NPS is in a constant state of flux



Source: UNODC, early warning advisory on new psychoactive substances.

Seizures of New Psychoactive Substances

FIG. 6 | Annual quantities of new psychoactive substances seized globally, 2012 to 2016

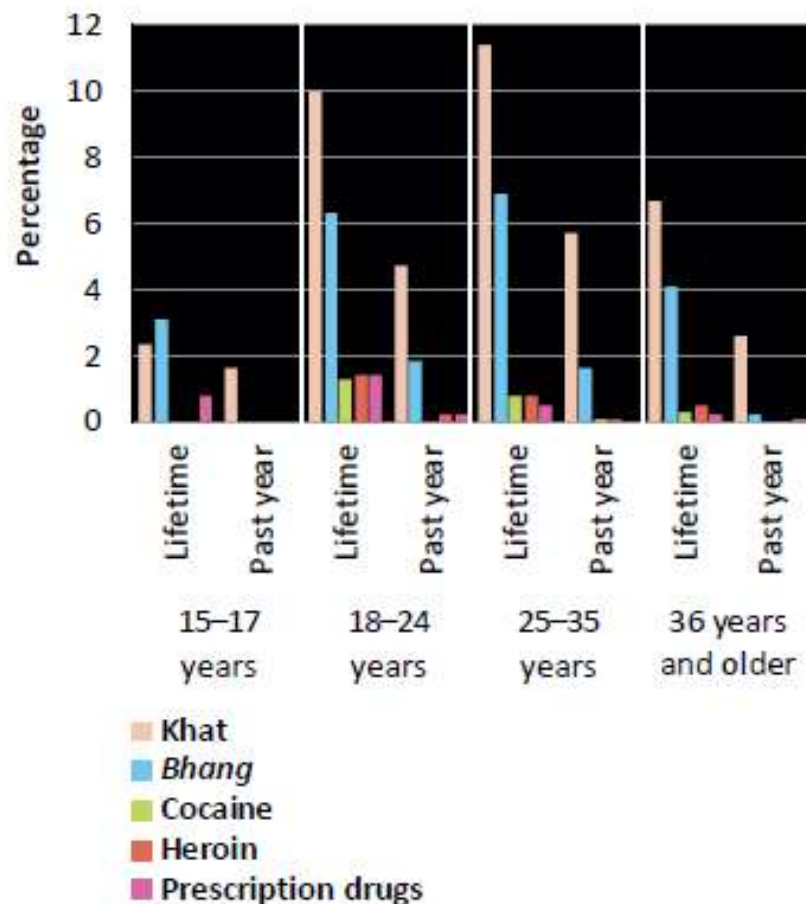


Source: UNODC, responses to the annual report questionnaire, 2012–2016.

Note: Figures include ketamine and plant-based NPS.



FIG. 5 Prevalence of drug use in Kenya, by age group and drug type, 2012

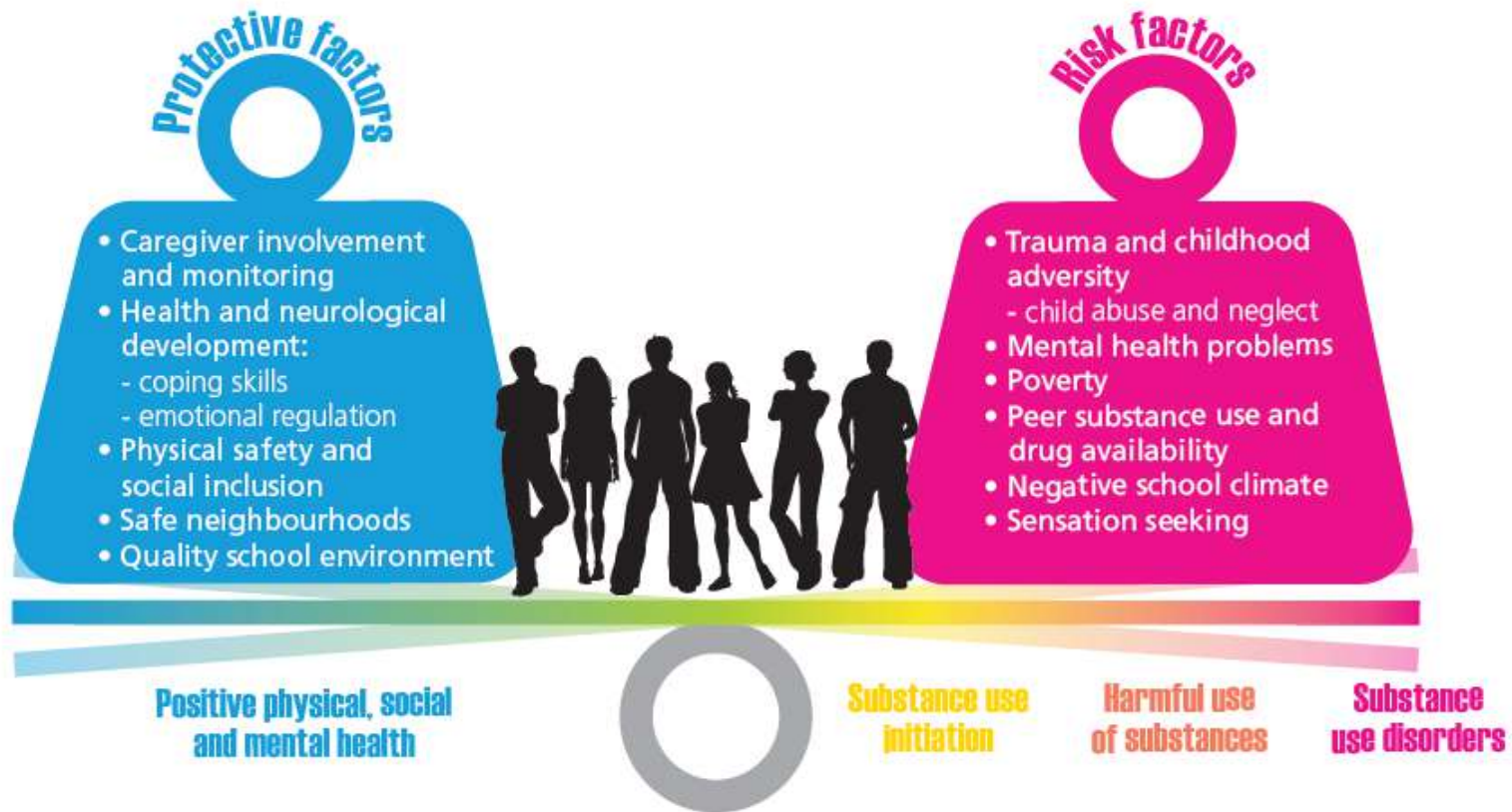


Drug use and age

Source: Kenya, National Authority for the Campaign Against Alcohol and Drug Abuse, *Rapid Situation Assessment of the Status of Drug and Substance Abuse in Kenya* (Nairobi, 2012).



Protective factors and risk factors for substance use





Factors determining pathways to substance use

FIG. 8 | Factors that determine different pathways to substance use and substances use disorders

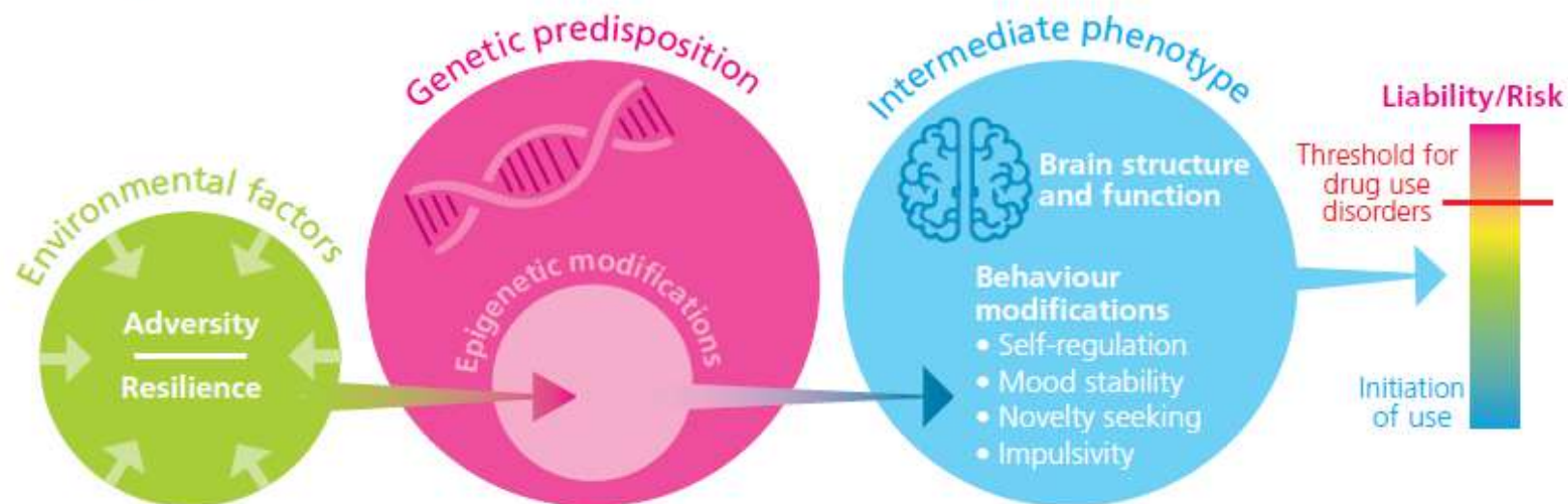


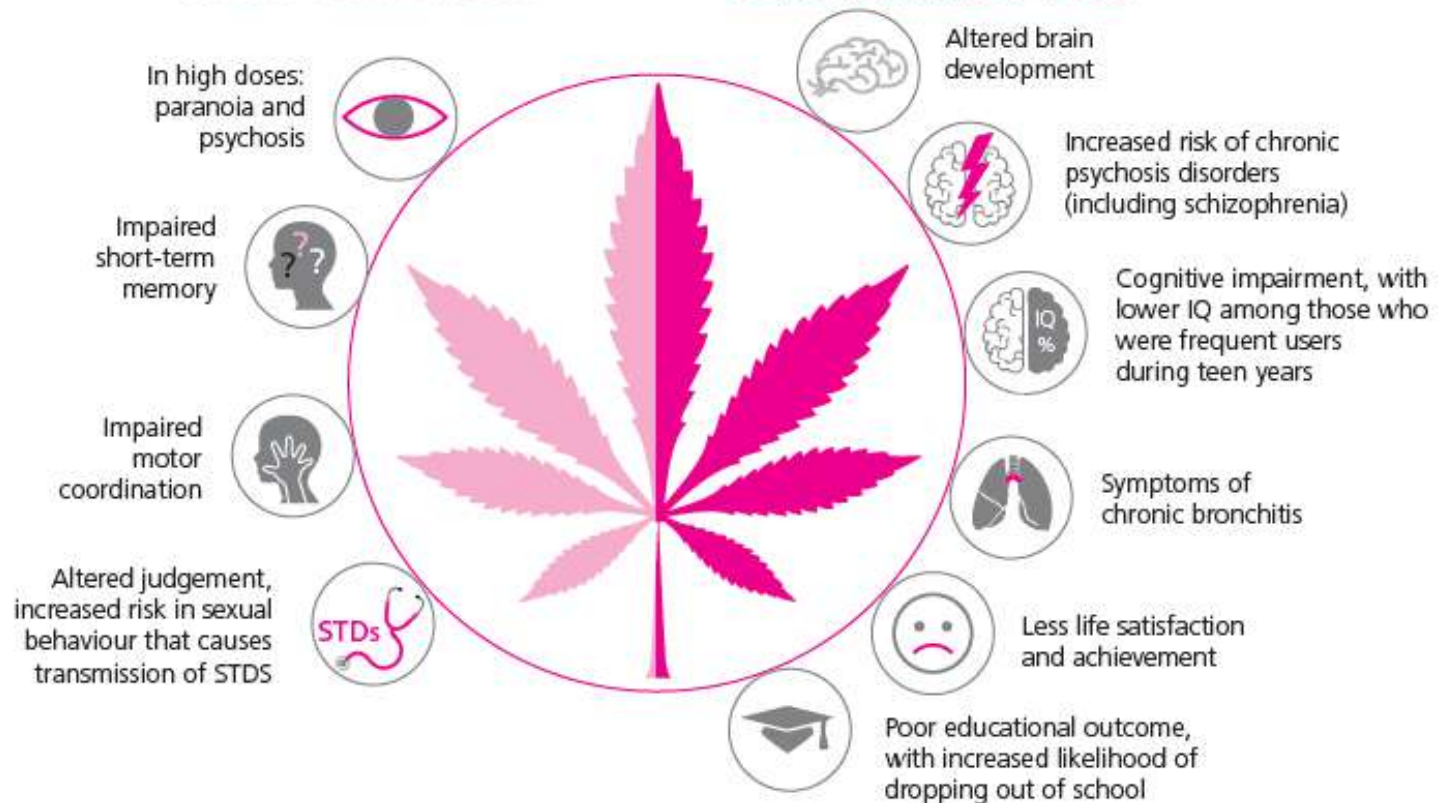
Figure 8 shows the two main categories of factors conferring risk for substance use: genes and the environment. Genetic variants are like switches: they are either turned on or off, but their expression is influenced by experience (i.e., epigenetic modifications). Environmental factors are more like dials that are turned up or down, also depending on experience. Risk or adversity factors include child maltreatment, poverty, poorly equipped schools, dysfunctional families, discrimination and witnessing violence. Resiliency or protective factors include high-quality education, housing, health care, social attachments and parenting. The combination of switches and dials crosses a liability threshold that, when predominantly negative, primes the brain for substance use. The functional relationship between factors is not linear, nor is it static; it fluctuates throughout a lifespan. Some environmental influences confer resiliency and may attenuate the effects of genetic predispositions. Thus, psychosocial interventions and practices are of the utmost importance in determining final outcomes.

Cannabis use – consequences

THE NEGATIVE HEALTH EFFECTS OF CANNABIS

SHORT-TERM EFFECTS

LONG-TERM/HEAVY USE



Source: Nora D. Volkow and others, "Adverse health effects of marijuana use", *New England Journal of Medicine*, 370(23) (2014), pp. 2219–2227.

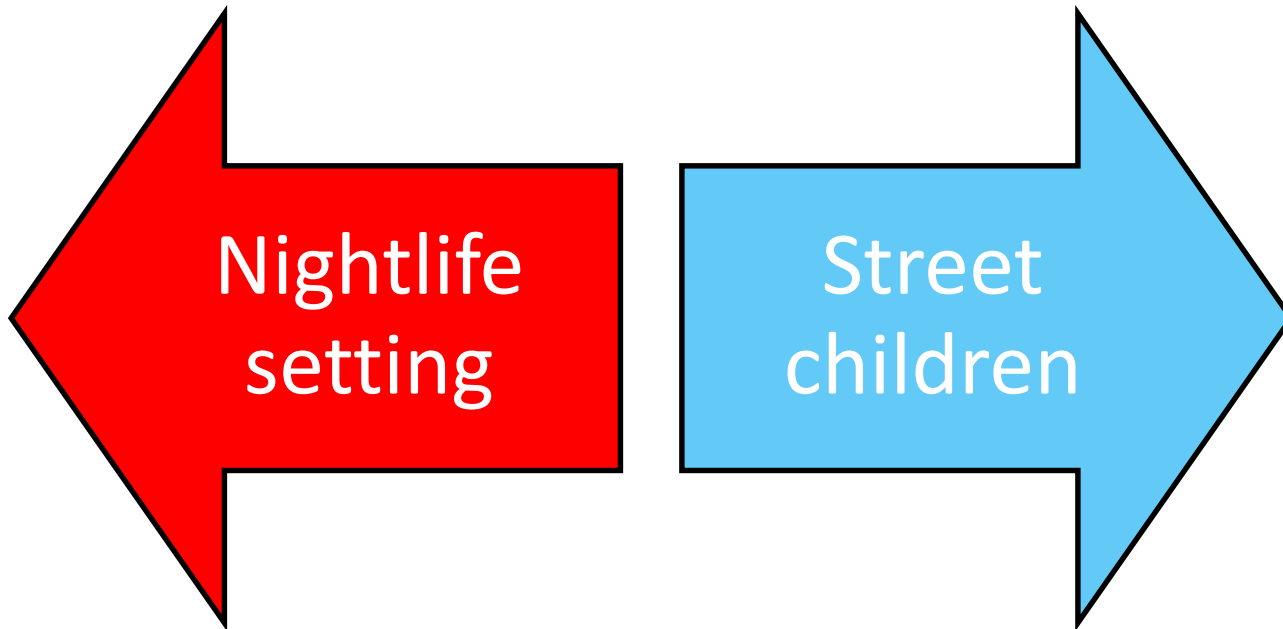


UNODC

United Nations Office on Drugs and Crime



Spectrum of drug use in young people





UNODC

United Nations Office on Drugs and Crime



Young people and the supply chain

Illicit crop cultivation and drug manufacture

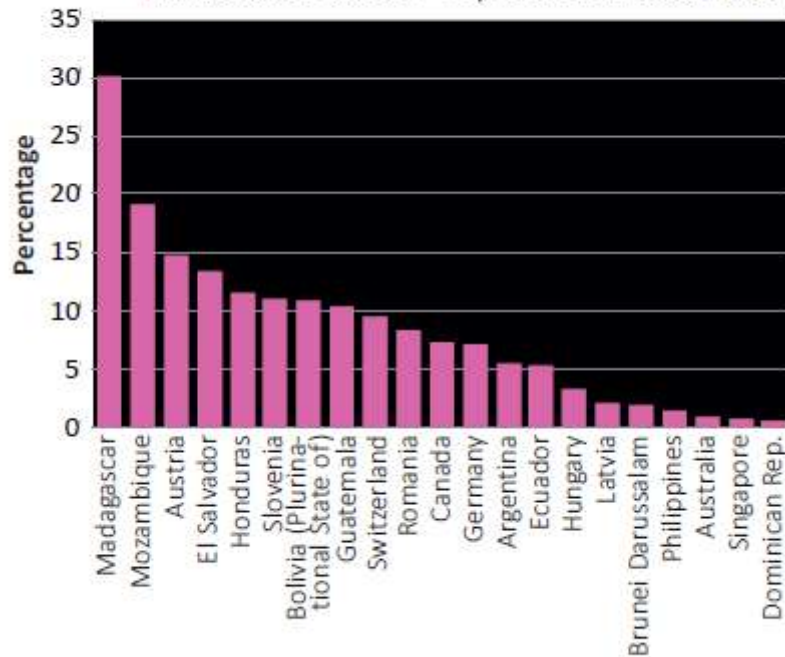
Young people in the drug trafficking chain

Information on the involvement of young people in the drug supply chain is limited and, in most instances, is restricted to media reports. Consequently, media sources, in addition to other reports, have been used to highlight issues on young people in place of evidence purely from research.



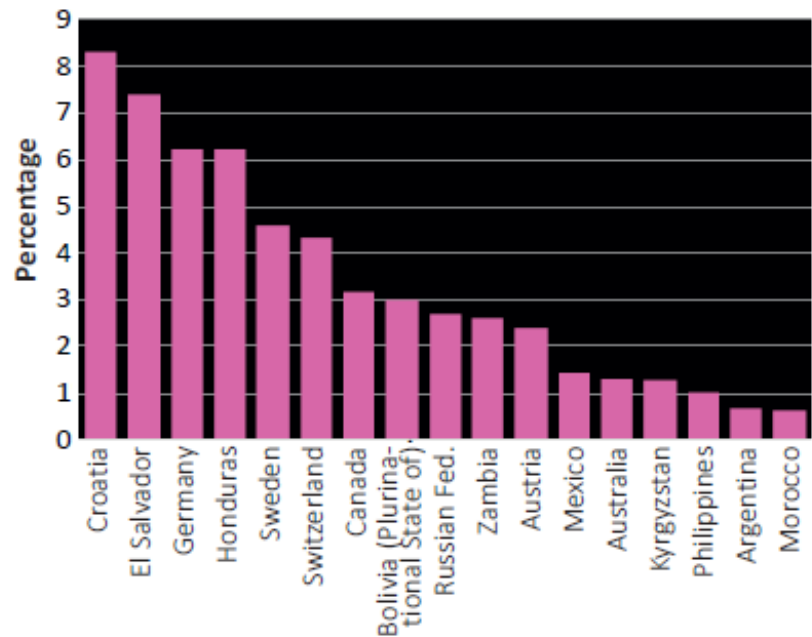
Proportion arrested under age 18

FIG. 10 Proportion of people arrested or cautioned for drug possession in 2015 who were under 18, selected countries



Source: UNODC, responses to the annual report questionnaire.

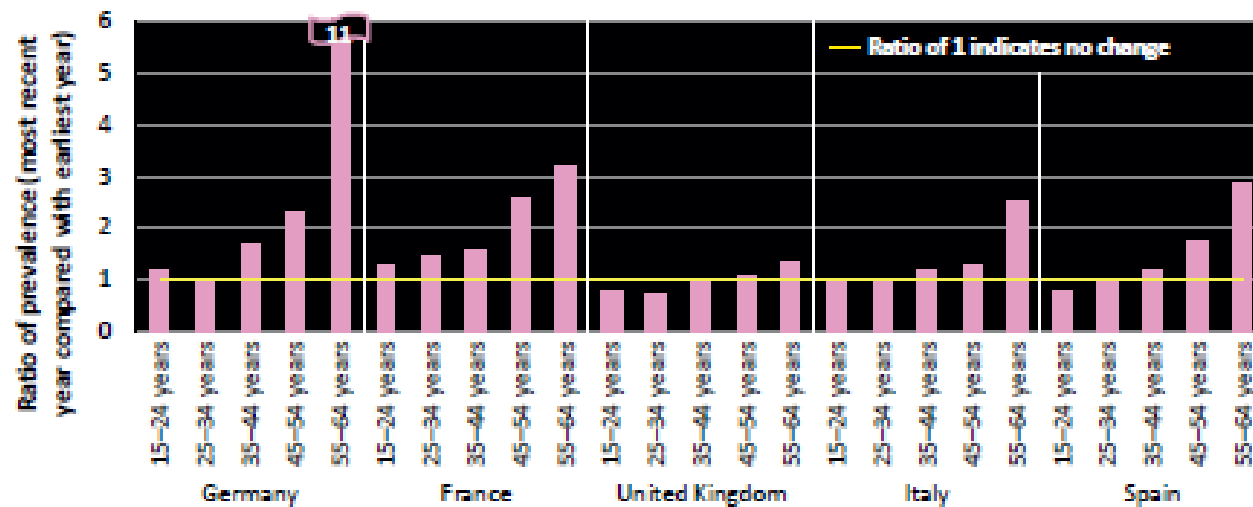
FIG. 11 Proportion of people arrested or cautioned for serious drug offences in 2015 who were under 18, selected countries



Source: UNODC, responses to the annual report questionnaire.

Drugs and older people

FIG. 13 Annual prevalence of cannabis use and changes in selected countries in Western Europe, by age group, selected years

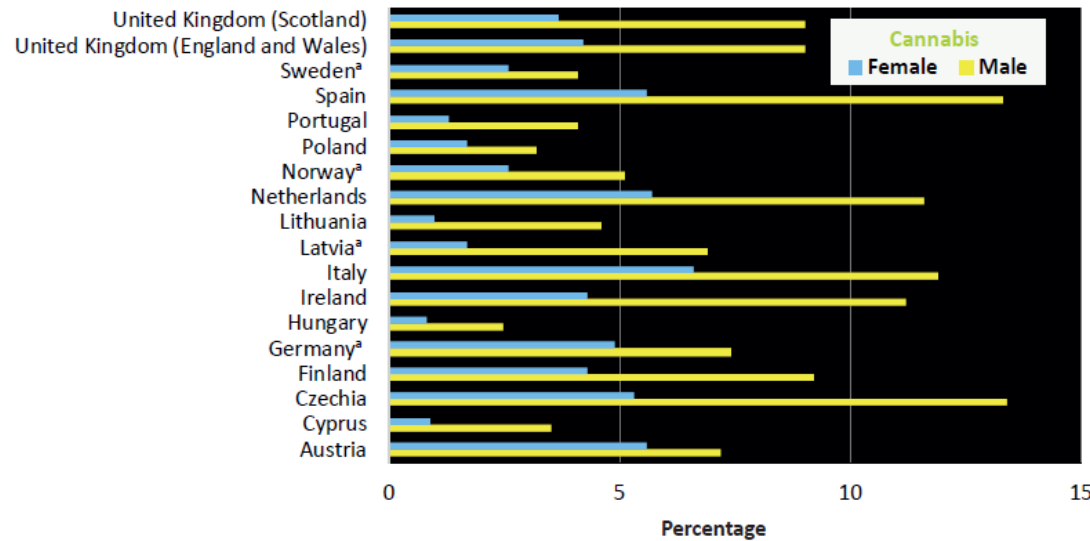
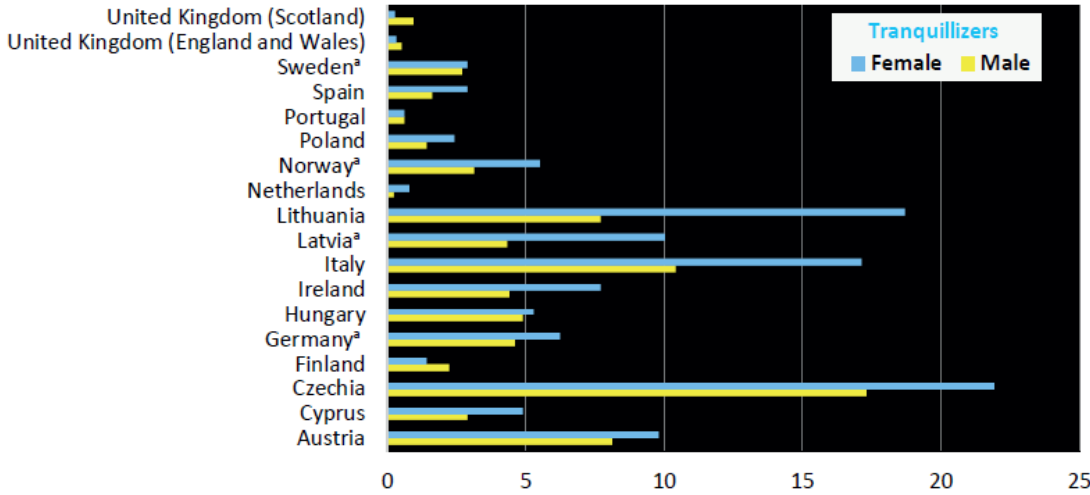


Source: EMCDDA, Statistical Bulletin 2017.



Drug use prevalence – by gender

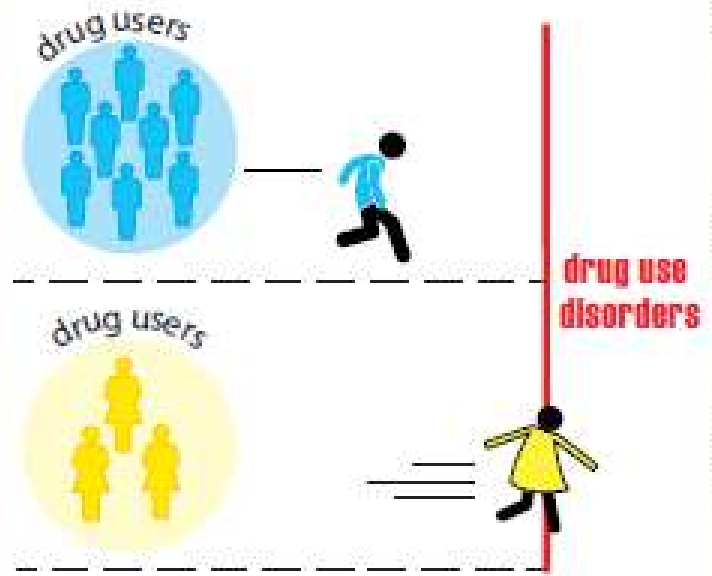
FIG. 4 Annual prevalence of cannabis use and non-medical use of tranquilizers among those aged 15–64, selected countries in Europe, 2016 or latest year from 2011





“telescoping”

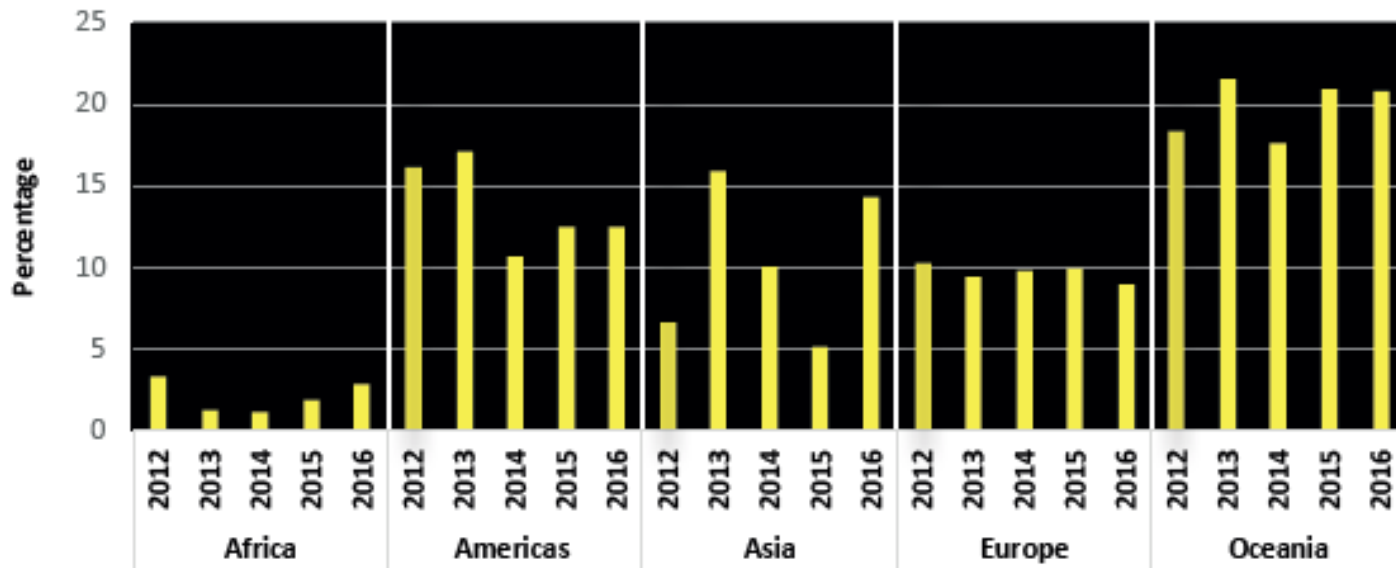
More men than women initiate drug use
but after initiation **women move faster**
than men towards drug use disorders





Drug related arrests and women

FIG. 10 | Proportion of women among those brought in contact with the criminal justice system who are suspected of drug trafficking offences (2012–2016), by region, for any illicit drug



Source: UNODC, responses to the the annual report questionnaire.

Note: Data from 88 countries.



A higher proportion of women than men are in prison for drug-related offences



Source: Based on Roy Walmsley, "World prison population list", 11th ed. (Institute for Criminal Policy Research, 2016) and Roy Walmsley, "World female imprisonment list", 4th ed. (Institute for Criminal Policy Research, 2017).
Share of prisoners for drug offences based on 50 Member States (UNODC, Special data collections on persons held in prisons (2010-2014), United Nations Surveys on Crime Trends and the Operations of Criminal Justice Systems (UN-CTS).



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