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<td>ANF</td>
<td>Anti Narcotics Force</td>
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<td>ARQ</td>
<td>Annual Report Questionnaires</td>
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<td>APGML</td>
<td>Asia/Pacific Group on Money Laundering</td>
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<td>CARICC</td>
<td>Central Asia Regional Information and Coordination Centre</td>
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<td>CNS</td>
<td>Control of Narcotics Substances</td>
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<td>ECO</td>
<td>Economic Cooperation Organization</td>
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<td>FATA</td>
<td>Federally Administered Tribal Areas</td>
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<td>FATF</td>
<td>Financial Action Task Force</td>
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<td>FBR</td>
<td>Federal Board of Revenue</td>
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<td>FC</td>
<td>Frontier Corps</td>
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<td>GCC</td>
<td>Gulf Cooperation Council</td>
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<td>HH</td>
<td>Hydroxylamine Hydrochloride</td>
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<td>IDU</td>
<td>Injecting Drug User</td>
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<td>INCB</td>
<td>International Narcotics Control Board</td>
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<td>KPK</td>
<td>Khyber Pakhtunkhwa</td>
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<td>MATRC</td>
<td>Model Addiction Treatment and Rehabilitation Centres</td>
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<td>MOI</td>
<td>Ministry of Interior</td>
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<td>MNC</td>
<td>Ministry of Narcotics Control</td>
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<td>MSA</td>
<td>Maritime Security Agency</td>
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<td>NACP</td>
<td>National AIDS Control Programme</td>
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<td>NGO</td>
<td>Non-Governmental Organisation</td>
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<td>NOC</td>
<td>No Objection Certificates</td>
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<td>TI</td>
<td>Triangular Initiative</td>
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<td>SAARC</td>
<td>South Asian Association for Regional Cooperation</td>
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<td>UNODC</td>
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Executive Summary

Pakistan’s geographic location next to Afghanistan places the country in a vulnerable position with respect to the illicit trafficking of opiates and precursors. Afghanistan is now the source for more than 90 percent of the world’s opium and a significant cannabis producer – much of it harvested in provinces bordering Pakistan and consequently, large quantities of opium, heroin and cannabis are trafficked via Pakistan onwards for Iran, the Middle East, Africa, East Asia and Western markets. Pakistan is also a major transit country for precursors entering Afghanistan. The United Nations Office on Drugs and Crime (UNODC) estimates that the annual revenue generated by Afghan opiate trafficking to and through Pakistan exceeds $1 billion. ¹ This does not include the revenue from illicit trading in associated precursors which may be of a similar value.

Pakistan’s importance as a key trafficking route is illustrated by the large number of seizures made by its law enforcement agencies. Extrapolation of flows, demand in destination countries and seizures indicate that in 2009, approximately 160 tons of heroin entered Pakistan, of which less than 2 percent was seized. Between 2006 and 2010, Pakistani authorities seized an average of 19,000 kg of opium per annum, making it the second most important country of interception in the world after Iran. ² Cannabis seizures increased from 134,622 kg in 2008 to 186,875 kg in 2010. Notable seizures of precursors include 14.8 tons in Karachi in 2008, 5 tons in Quetta in 2009 and 15.6 tons in Karachi in March 2010.

Pakistan inhabits a region that is heavily oriented towards the threat of opiate production and trafficking, but use – and possible production – of synthetic drugs in Pakistan is an increasing and emerging problem. There has been a significant increase in synthetic drug production and trafficking in the region neighbouring Afghanistan (especially in I.R of Iran) over the past few years and indications that Pakistan is both a transit and destination country for these emerging drugs. There have been seizures of synthetic drugs and their precursors in other countries that seem to have originated from or been destined for Pakistan.

Pakistan cultivates a small amount of poppy (around 362 ha. in 2011). Till 2010, problematic areas in terms of poppy cultivation are largely concentrated in the Federally Administered Tribal Areas (FATA). In 2010, poppy cultivation was reported for the first time in the district of Shahdadkot in Sindh on the border with Balochistan. In 2011, the Government of Pakistan initiated a major poppy eradication campaign and reduced the total cultivation to only 362 ha., down from 1718 ha. in 2010. While little is known about cannabis cultivation in Pakistan but significant amounts are believed to be cultivated in the country.

The available information on drug use in Pakistan is quite dated. The Problem Drug Use in Pakistan Survey was conducted in 2006 by the UNODC and the Government of Pakistan. It is suspected that the actual rates of drug use are much higher than currently estimated, given the high levels of drug trafficking through the region, the presence of emerging drugs in the market and the inability of past surveys and assessments to reach hidden populations (such as women). UNODC estimates that 132 tons of opium is consumed annually in Pakistan. Pakistan accounts for 4.5% percent of the global opiate consumer market and one-twentieth of total global heroin consumption (with 5 percent of the world’s heroin users)³. Volumes of non-medical pharmaceutical, synthetic drugs and cannabis

¹ Addiction, Crime and Insurgency – The Transnational Threat of Afghan Opium, 2009, UNODC. Street value in Western markets is much higher.
² The Global Afghan Opium Trade, A Threat Assessment, 2011, UNODC
³ Ibid.
consumption are unknown, but considered to be high in the case of cannabis. UNODC is currently working with the Government of Pakistan to execute a population-based survey which aims at collecting baseline information on a number of socio-demographic indicators at the national and provincial level with an emphasis on health, including level and patterns of drug use practices in the general population.

Although current rates of HIV/AIDS in Pakistan are low, the 100 percent increase in injecting drug use between 2000 and 2006 suggests that there is currently a concentrated, but localized, HIV epidemic among injecting drug users in Pakistan. Coupled with widespread risk behaviours, this could lead to an HIV epidemic in the wider population.⁴

UNODC estimates that organized crime groups make about US$ 700 Million through drug trafficking and an additional US$ 500 Million from domestic drug users⁵. However, many of the arrests have focused on low-level traffickers or individuals with minor quantities in their possession, rather than investigating and interdicting high-value targets. Nonetheless, it is of note that the ANF conviction rate is at 87.4 percent in drug-related cases and assets worth US$ 57.37⁶ million have been frozen to date.

Patterns of drug production, trafficking, use and related crime change as a result of social, economic as well as regional and international developments. Ongoing research in drug and related crime trends is necessary in order to ensure that policy making and interdiction stays ahead of the curve. This report briefly analyzes and presents drugs and related crime trends in Pakistan. It places Pakistan within the wider context of regional and international developments by focusing on the dynamics and developing situation of Afghan opiates and cannabis as well emerging trends such as synthetic drugs and cocaine.

The report is structured into sections on production, trafficking, use and drug-related crime. Government data and statistics have been utilized – mostly from 2008 and 2009 but also in some cases, from 2010. Where relevant, information gaps and weaknesses have been highlighted for policy interventions in the future.

Pakistan has had considerable successes in its counter-narcotics efforts. Law enforcement and border management agencies continue to improve their detection capabilities, reflected in the significant volumes of large drug seizures including of previously undetected precursor chemicals and drug-related arrests. The Government of Pakistan has been moving rapidly on the policy side and both the Anti Narcotics Policy 2010 and Drug Control Master Plan 2010-14 were approved by Cabinet in 2010 and are now in the implementation stages.

For Pakistan to improve its efforts against its drug-related challenges, the strategy must involve the effective application of the rule of law within Pakistan but needs to be combined with addressing the regional and global dimensions of organized crime. Countering the production, trafficking and use of illicit drugs effectively requires the implementation of the below strategies, which are already to a large extent part of the Government of Pakistan’s Anti Narcotics Policy 2010 and Drug Control Master Plan 2010-14.

1. **Expanding the evidence base.** There are gaps in knowledge of drug use, types, quality and number of illegal movements and their origin and destination. An expanded evidence base will assist practitioners in developing appropriate strategies. Current efforts by the Government to conduct a survey to estimate drug use patterns would be beneficial from

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⁴ Problem Drug Use in Pakistan: Results from the 2006 National Assessment, 2006, Government of Pakistan / UNODC.
⁵ The Global Afghan Opium Trade, A Threat Assessment, 2011, UNODC
⁶ ANF Yearly Digest, 2010
2. **Mainstreaming drug prevention and treatment.** At present, drug treatment is somewhat separated from the mainstream health system. Disseminating drug abuse knowledge into health-worker training would help to extend its coverage, improving the efficiency of the current network of treatment and rehabilitation providers.

3. **Inter-agency cooperation.** The MNC is the policy level institution dealing with narcotics control in Pakistan and the ANF is the principal enforcement agency. However there are a wide range of other Government departments at the federal and provincial levels that are tasked with drug enforcement. A robust coordination mechanism is needed to integrate these varied agencies. One such recent initiative is the creation of an Inter-Agency Task Force on Narcotics Control.

4. **Building law enforcement training programmes.** Training academies need enhanced management approaches and modernized curriculum to meet new challenges. While the traditional orientation is towards Afghan opiates, law enforcement agencies need to be familiarized with new and emerging challenges such as precursor chemical trafficking and importation/transhipment/production of synthetics and their precursors.

5. **Developing human capacity in the criminal justice sector.** Elements of the criminal justice system, such as the prosecution service and the prison system require improvement to better deal with drug-related cases.

6. **Enhancing interdiction capacities.** The operational capacities of Pakistan’s law enforcement and border management agencies require improvement as they often work with limited means. Simple on-the-spot drug testing kits and enhanced transportation capacity would assist interdiction efforts.

7. **Strengthening regional and international cooperation.** As a primary transit country for Afghan opiates, regional cooperation is necessary, particularly between Afghanistan, Iran and Pakistan. Effective border management requires both working on the internal coordination of border protection agencies and linking those agencies with their counterparts on the other side of the border. This includes cooperation between regional and national law enforcement agencies in sharing real time information on drug trafficking.
Introduction

Key points

- Pakistan’s counter-narcotics work is guided by the Anti Narcotics Policy 2010 and Drug Control Master Plan
- The legislative framework is provided by the Control of Narcotics Substances Act 1997 as well as various regional and international convention and protocols ratified by the Government of Pakistan.
- The main Government actors include, among other, the Ministry of Narcotics Control, the Anti Narcotics Force, the Federal Board of Revenue, the Maritime Security Agency, the Ministry of Health and the Ministry of Education.
- Pakistan is strongly engaged with various regional and international bodies and mechanisms that promote drug-related cooperation

Pakistan borders Iran and Afghanistan in the west, India in the east, China in the north and the Arabian Sea in the south. Pakistan’s security challenges are to a large extent related to those of the region and drugs and precursors trafficking are facilitated by porous borders.

Pakistan’s engagement in the region

In recognition that transnational threats require cooperative international responses, a number of regional bodies have been developed to set policy, share experiences and foster inter-state action against shared challenges. Pakistan is an active member of many bodies and continues its policy of cooperation with the regional and international community for drugs related intelligence sharing, controlled delivery operations and mutual legal assistance.

Rainbow Strategy: The Rainbow Strategy is a regional response to the threat posed by the supply, trafficking and consumption of Afghan opiates conceived in the framework of the Paris Pact, a UNODC-initiated partnership of more than 50 States and organizations designed to reduce the supply, demand and trafficking of Afghan opiates. It acknowledges that a national problem demands a regional solution, and therefore engages both Afghanistan and neighbouring countries. The Rainbow Strategy comprises of seven action outlines, which addresses key issues, allowing for constructive engagement with prime actors in the region, facilitating local ownership, and supplementing interventions from national governments and other Paris Pact partners. The approach is pragmatic and realistic, accepting that a long-term engagement is required in order to build confidence and trust.

- Triangular Initiative: The UNODC brokered Triangular Initiative (TI) launched in June 2007, is designed to strengthen drug control through information exchange and joint intelligence-led operations between Afghanistan, Iran and Pakistan. The Triangular Initiative is part of the Rainbow Strategy, conceived in the framework of the Paris Pact, a UNODC-initiated

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7 Pakistan borders Iran (approximately 910 kilometres) and Afghanistan (approximately 2,430 kilometres), India (approximately 2,910 kilometres), China (approximately 520 kilometres) and the Arabian Sea (approximately 1,050 kilometres).
partnership of more than 50 States and organizations designed to reduce the supply, demand and trafficking of Afghan opiates.

- CARICC: The Central Asia Regional Information and Coordination Centre (CARICC), established under the Rainbow Strategy, aims to facilitate information exchange and analysis, and to assist in the coordination of operational activities of the various law enforcement agencies in the region – police, drug control agencies, customs, border guards and security services. It will provide assistance in organizing and executing joint international operations and investigations, including controlled deliveries. Pakistan has an observer status in CARICC.

The Bali Process brings participants together to work on practical measures to help combat people smuggling, trafficking in persons and related transnational crime in the Asia-Pacific region and beyond. Pakistan is a Bali Process member and its officials have participated in the numerous working groups and senior officials’ meetings.

The Asia/Pacific Group on Money Laundering (APGML) is an international organization consisting of 40 members (including Pakistan) and a number of international and regional observers including UNODC. The APGML is closely affiliated with the Financial Action Task Force (FATF) based in the OECD Headquarters at Paris, France. All APGML members commit to effectively implement the FATF’s international standards for anti-money laundering and combating financing of terrorism. Pakistan underwent a Phase II APGML mutual evaluation in 2009.

The South Asian Association for Regional Cooperation (SAARC) is a regional organization which aims to accelerate the process of economic and social development in Member States. Under SAARC,

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<tr>
<th>UNODC Country Programme 2010-14</th>
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<td>UNODC’s Country Programme 2010-14 was prepared in close partnership with the Government of Pakistan. Together, the Government of Pakistan and UNODC developed mutually agreed outcomes that: complement national programmes; assist Pakistan to achieve its international commitments to drug and crime control; and engage UNODC mandate areas.</td>
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<tr>
<td>The Vision of the Country Programme for Pakistan is a safer community, free from the threats posed by organised crime and drug use and confident in the integrity of the criminal justice system to provide access to justice. To support this Vision, UNODC’s support in Pakistan is focused on three interdependent areas of work:</td>
</tr>
<tr>
<td>(i) Illicit trafficking and border management,</td>
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<td>(ii) Criminal justice,</td>
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<td>(iii) Drug demand reduction and HIV/AIDS.</td>
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Triangular Initiative

UNODC brokered the Triangular Initiative (TI) between Afghanistan, Iran and Pakistan in June 2007 to counter the trafficking of Afghan opiates along common borders. The TI is part of the Rainbow Strategy, conceived in the framework of the Paris Pact Initiative, a UNODC-initiated partnership of more than 50 countries and organizations designed to reduce the supply, demand and trafficking of Afghan heroin.

The TI umbrella of cooperation operationally engages Afghanistan, Iran, and Pakistan in finding field-oriented solutions to the transnational threat posed by the trafficking of Afghan opiates and the diversion and smuggling of associated precursors. It consists of several counternarcotics and border control operational plans targeting internationally agreed priority areas.

The TI has facilitated trust and confidence building between the policy-level and technical-level officials from the three countries, through which state parties focus action-oriented cooperation mechanisms.
Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan, Sri Lanka and Afghanistan cooperate on agriculture and rural development; health and population activities; women, youth and children; environment and forestry; science, technology and meteorology; human resources development; and transport. Recently, high level working groups have also been established to strengthen cooperation in the areas of information and communications technology, biotechnology, intellectual property rights, tourism, and energy. The SAARC Convention on Mutual Assistance in Criminal Matters, including drugs and terrorism, was also signed in 2008. The recent MoU signed between the Indian and Pakistani drug enforcement agencies to increase cooperation to control drug trafficking is a positive development.

The Economic Cooperation Organization (ECO) is an intergovernmental regional organization established in 1985 by Iran, Pakistan and Turkey for the purpose of promoting economic, technical and cultural cooperation among the Member States. Current members are Afghanistan, Azerbaijan, Iran, Kazakhstan, Kyrgyzstan, Pakistan, Tajikistan, Turkey, Turkmenistan and Uzbekistan.
Production

Key points

- In 2011, Pakistan cultivated a very small amount of poppy (362 ha.). Prevention of expansion has been a priority for law enforcement.
- In 2010, problematic areas in terms of poppy cultivation are largely concentrated in the FATA. Over the past few years the Khyber Agency in the FATA, on the border with Nangarhar province in Afghanistan, has harvested the bulk of opium cultivated.
- In 2010, poppy cultivation was reported for the first time in the district of Shahdadkot in Sindh on the border with Balochistan.
- Little cannabis production is reported but significant amounts are believed to be cultivated.

Opium

While poppy cultivation in Pakistan is only a fraction to that of Afghanistan’s, it exists. Afghanistan’s history of record poppy crops in recent years have contributed to an over-supply of opium in the region that has almost certainly contributed to the low levels of poppy cultivated in Pakistan.\(^8\)

The commitment of the Government of Pakistan to measures for eliminating opium poppy cultivation, together with alternative development projects funded by the international community, led to a decrease in poppy cultivation from approximately 9,441 ha. in 1992 to a ‘poppy free status’ with cultivation of some 213 ha. in 2000/2001.\(^9\)

However, following the Taliban’s prohibition of poppy cultivation in Afghanistan in 2001 there was a re-emergence of poppy cultivation, probably as a result of high opium prices. In 2003 poppy cultivation was reported at 6,703 ha., which included opium production in Balochistan (reported for the first time), KPK and FATA. Most of the poppy cultivated in Balochistan has been eradicated every year since then.

Poppy harvested remained at low levels since 2006. Eradication had been notably low till 2010 (56 ha. in 2008, 105 ha. in 2009 and 68 ha. in 2010). the 1906 ha. cultivated in Pakistan in 2008, 94 percent (1850 ha.) was harvested. Although total reported cultivation in 2010 dropped to 1779 ha., again 94 percent (1,674 ha.) was harvested. In 2011 the Government of Pakistan embarked on a

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\(^9\) ‘Poppy-free’ refers to cultivation of less than 1000 ha.
major poppy eradication campaign and managed limit poppy harvest to 362 ha. Table 1 gives the cultivation, eradication and harvest statistics from 2002 to 2011.

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<tr>
<th>Year</th>
<th>Reported Cultivation</th>
<th>Eradicated</th>
<th>Harvested</th>
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<tr>
<td>2002</td>
<td>1123</td>
<td>332</td>
<td>791</td>
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<tr>
<td>2003</td>
<td>6703</td>
<td>4182</td>
<td>2521</td>
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<td>2004</td>
<td>6697</td>
<td>5202</td>
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<td>2005</td>
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<td>707</td>
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<td>2008</td>
<td>1906</td>
<td>56</td>
<td>1850</td>
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<td>2009</td>
<td>1779</td>
<td>105</td>
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<tr>
<td>2010</td>
<td>1789</td>
<td>68</td>
<td>1721</td>
</tr>
<tr>
<td>2011</td>
<td>1415</td>
<td>1053</td>
<td>362</td>
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Problematic areas in terms of poppy cultivation are largely concentrated in the FATA. Till 2010, the Khyber Agency (on the border with Nangarhar province in Afghanistan) in the FATA harvested bulk of the opium cultivated (1538 ha. out of 1721 ha. in 2010 with no eradication). In KPK, poppy cultivation was concentrated in the Kala Dhaka area and in Swat (no eradication). Due to the deployment of thousands of Frontier Corps forces to Mohmand, Bajaur, and Swat, as well as to North and South Waziristan, the entirety of the KPK and FATA cultivation (1709 ha.) was harvested in 2010.

In 2010, 96 percent of the cultivation was harvested, i.e. 1721 ha. of 1789 ha. A considerable improvement has been achieved in 2011, when 1053 of the 1415 ha cultivated were eradicated. Sustained efforts to curtail poppy cultivation need to be maintained in the coming years.

The area cultivated in Pakistan (after eradication) during 2011 was negligible (less than 0.1%) compared to the area cultivated in Afghanistan (see Figure 1), which demonstrates the long-standing Government of Pakistan campaign against increased poppy cultivation has been mostly sustained.

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10 Provided by ANF, Islamabad, August 2010
**Heroin**

Without precursor chemicals there can be no heroin processing. The chemicals used in heroin processing range from unrestricted, common chemicals to internationally monitored substances. Acetic anhydride remains the highest-priority target for precursor interdiction against heroin production. UNODC estimates that 380 – 570 tons is of acetic anhydride required each year for the production of Afghan heroin. A significant proportion of this production occurs in Afghanistan, the majority in provinces bordering Pakistan. None of the required chemicals are currently manufactured in Afghanistan. Instead, they are diverted from licit trade and trafficked into the illicit market.

Pakistan discontinued the manufacture of acetic anhydride in 1995. UNODC information from Afghanistan suggests that some of the opium production in eastern Afghanistan is exiting into Pakistan for processing.12

The UNODC was informed that the ANF successfully destroyed nine mobile laboratories in the Malgai area of Balochistan in June 2006. Interviews with local law enforcement officials suggest that no further facilities were present in Pakistan, and that while it is immediately unclear where heroin production might have moved, the development signalled that vigilance needs to be maintained. This is particularly true because facilities are known to be increasingly mobile and clustered in south Afghanistan (particularly Helmand and Nimroz), close to the border with Balochistan.13

A primary concern for Pakistan is the diversion of precursors for heroin production. Pakistan has ceased licit domestic manufacturing of acetic anhydride, but retains a legitimate demand for the chemical in a number of industries, particularly textiles, pharmaceuticals and paints. While the focus of interdiction effort tends to be on unlicensed imports, Pakistani law enforcement officials have been concerned about possible diversion of licensed imports. UNODC is starting to work with industry to improve precursor control and limit diversion through effective dissemination of foundational awareness and training programmes.

**Cannabis**

Control over cannabis production and its eradication has been a lower priority within drug control authorities and hence information is limited. No official statistics on cannabis cultivation, production and eradication are available, but considerable amounts are believed to be cultivated in the country.

According to the UNODC’s first-ever Afghanistan Cannabis Survey 2010 there is large-scale cannabis cultivation in exactly half (17 out of 34) of Afghanistan’s provinces. Moreover, similar to poppy plantation, patterns of production have shifted towards the Southern provinces in recent years and the area now represents more than two-thirds of total cannabis cultivation.14 This has profound implications for trafficking via Balochistan. (See Figure)

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12 Precursors Trafficking and Diversion in Pakistan, March 2010, UNODC.
13 Enhancing Border Management: An Assessment of Balochistan’s Frontiers, November 2010, UNODC.
14 The Southern provinces include Helmand, Kandahar, Uruzgan, Zabul and Day Kundi (ibid and various WDRs).
Synthetic drugs

Unlike the cultivation of the coca leaf or opium poppy, synthetic production is not limited to certain geographic locations - laboratories can clandestinely operate anywhere and be relocated as risk increases. One unique characteristic is directly related to how they are produced – from precursor chemicals, which are to synthetics what opium is to heroin. If a traditional precursor becomes unavailable, replacements can be easily found. New synthetic stimulants not yet under international controls can also be brought quickly to market.

The manufacture of synthetic drugs in Pakistan are to a large extent unknown due to incomplete statistics, but the surrounding region has experienced a significant increase in synthetic drug manufacture and trafficking over the past 10 years. There are now significant consumption and production bases in some neighbouring countries, most notably China, India and Iran. Additionally, there have also been seizures of synthetic drugs and their precursors in other countries that seem to have originated from or been destined for Pakistan.

Given the apparent proliferation of labs in Sri Lanka, India and Iran, it is highly likely that Pakistan will be targeted soon or is already hosting a small production capability for synthetic drugs. These will probably rely on pseudoephedrine, rather than more complex or less easily available recipes. There is one registered producer of pseudoephedrine, in Lahore.

15 Precursor Trafficking and Diversion in Pakistan, February 2010, UNODC.
Trafficking

Key points

- A significant proportion of Afghanistan’s opium production occurs in provinces bordering Pakistan and as a consequence Pakistan is a key trafficking route – for opiates leaving Afghanistan and precursors entering Afghanistan.
- Pakistani agencies have interdicted significant quantities of Afghan opiates as well as cannabis over the past few years, roughly keeping pace with the increase in production in Afghanistan.
- Smuggled synthetic drug precursors from Pakistan have been seized as far away as Canada.

Opium and Heroin

Afghanistan remains, by far, the world’s largest opium producer and UNODC estimates that Pakistan is now the destination and transit country for approximately 40 percent of the opiates produced in Afghanistan. Afghan opiate trafficking through and to Pakistan has kept pace with the dramatic increase in production in Afghanistan since 2005. According to UNODC’s estimates, 5800 tons of opium were produced in Afghanistan in 2011, with the provinces of Helmand and Kandahar (bordering Pakistan) accounting for nearly three-quarters of the total area under poppy cultivation (see Figure 1). While the harvest of opium declined to 3600 tons in 2010, this was largely related to an outbreak of a disease of the poppy plant, with a significant likelihood of re-expansion. In 2011, opium production of 5800 tons has been estimated.

Pakistan’s importance as a key trafficking route is illustrated by the large number of seizures made by its law enforcement agencies. Extrapolation of flows, demand in destination countries and seizures indicate that between 2002 and 2008, approximately 160 tons of morphine and heroin entered Pakistan per year, of which less than 2 percent were seized (see Figure 3). Between 1996 and 2007, Pakistani authorities captured an average of 19,000 kg of opium per annum, making it the second most important country of interception in the world after Iran. In 2009, Pakistan and Iran seized a combined 18 tons of morphine.

Anti Narcotics Force makes Pakistan’s biggest Heroin Seizure

In April, 2011 the ANF seized 376 kg of heroin in a two staged operation.

Based on intelligence acquired through international cooperation and effective patrolling a suspicious trading company was identified.

After holding a consignment of the company for 12 hours, a container destined for Benin was inspected and found to contain 108 kg of heroin packed in match boxes. Backtracking led to a raid at the warehouse where another 266 kg of heroin, packed in rice bags was recovered.

The operation resulted in the biggest seizure of heroin in Pakistan and led to the arrest of 5 drug traffickers including the leader.

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16 Afghanistan Opium Survey, 2009, UNODC.
17 The Global Opium Trade – A Threat Assessment, 2011, UNODC
most of it close to the Afghan border. This represents 95 percent of global morphine seizures that year.

![Figure 3: Opiate seizures in Pakistan: 2000 – 2010 (kg)](image)

Heroin seizures have generally remained stable since 2006. In recent years there has been a consistent increase in opium seizures – most of which have taken place in Balochistan. Morphine seizures were significant between 2003 and 2006 after which they started dropping steeply. It is important to keep in mind that seizure figures do not necessarily indicate changes in production/smuggling levels as they may be attributed to variation in law enforcement activity (see figures 4 and 5).

![Figure 4: Heroin seizures in Pakistan 2002-2009 (kg)](image)
There are two main possibilities for opiates to enter from Afghanistan – FATA or Balochistan (see Figure 5). Apart from contiguity to drug-intensive areas, many physical and human characteristics converge to increase vulnerability to drug trafficking of these areas. First and foremost, Pakistan shares over 2,500 km of border with Afghanistan and approximately 900 km with Iran. This is in addition to the 1062 km long coastal belt. From the perspective of law enforcement, the terrain is rugged, arid and intertemperate. The border areas are remote and supply of electricity, food and water to check-posts is usually difficult. Another feature is the porousness of the borders; several tribes co-habit the border areas between Pakistan, Iran and Afghanistan and cross-country movements are frequent.

Generally, most drug seizures occur in the vicinity of entry and exit points, where law enforcement agencies are strongest – including around ports – rather than within the country. Limited smaller seizures within Pakistan occur almost entirely along major trade and transport corridors – although this could simply reflect the limited reach of law enforcement agencies. International airports are also a conduit for trafficking and 306 kg of heroin was seized at airports in 2010. Apart from concealing narcotics on their person or in their luggage, traffickers are also resorting to sending drugs in letters and parcels to minimize the risks of getting caught, although the quantities involved tend to be much smaller. However, within Balochistan, drugs are mainly trafficked on smaller, unmonitored routes between the border and the Makran coast. It is important to note that there have been no significant seizures in FATA in recent years.

Table 3 illustrates the prominence of Balochistan (72 percent) and KPK (22 percent) in the distribution of opium seizures below. Proximity of Balochistan to the opium producing provinces of Afghanistan, and also to Iran are the major factors leading to the higher number of seizures in Balochistan.

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Table 2: Distribution of opium seizures reported in Pakistan by location 2002-2009

<table>
<thead>
<tr>
<th>City</th>
<th>Region</th>
<th>Percentage of total opium seized in Pakistan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quetta</td>
<td>Balochistan</td>
<td>28.98</td>
</tr>
<tr>
<td>Kohat</td>
<td>KPK</td>
<td>13.25</td>
</tr>
<tr>
<td>Pishin</td>
<td>Balochistan</td>
<td>13.06</td>
</tr>
<tr>
<td>Kharian</td>
<td>Balochistan</td>
<td>8.57</td>
</tr>
<tr>
<td>Turbat</td>
<td>Balochistan</td>
<td>4.55</td>
</tr>
<tr>
<td>Makran</td>
<td>Balochistan</td>
<td>4.47</td>
</tr>
<tr>
<td>Nok Kundi</td>
<td>Balochistan</td>
<td>4.38</td>
</tr>
<tr>
<td>Panjgur</td>
<td>Balochistan</td>
<td>3.53</td>
</tr>
<tr>
<td>Sargentha</td>
<td>Punjab</td>
<td>2.46</td>
</tr>
<tr>
<td>Chagai</td>
<td>Balochistan</td>
<td>2.26</td>
</tr>
<tr>
<td>Chaman</td>
<td>Balochistan</td>
<td>1.93</td>
</tr>
<tr>
<td>Peshawar</td>
<td>KPK</td>
<td>1.79</td>
</tr>
<tr>
<td>Dalbandin</td>
<td>Balochistan</td>
<td>1.68</td>
</tr>
<tr>
<td>Gwadar</td>
<td>Balochistan</td>
<td>1.62</td>
</tr>
<tr>
<td>Faisalabad</td>
<td>Punjab</td>
<td>1.37</td>
</tr>
<tr>
<td>Karachi</td>
<td>Sindh</td>
<td>1.11</td>
</tr>
<tr>
<td>Attock</td>
<td>Punjab</td>
<td>1.01</td>
</tr>
</tbody>
</table>

Detailed and precise information on drug trafficking routes is largely unavailable, and the representation of routes in Figure 6 is intended to provide a broad indication of general flows (based on seizure data), and not definitive information about routes.

Figure 6: Afghan opiate trafficking through Pakistan
Federally Administered Tribal Areas (FATA)
The FATA borders Afghanistan to the west, the KPK and Punjab to the east and Balochistan to the south.\textsuperscript{19} The ANF reports that drugs trafficked through the KPK are smuggled in much smaller quantities and some of them are destined for foreign markets.\textsuperscript{20}

Opiates trafficked through FATA can move in three main directions:
1. Towards China via Gilgit-Baltistan, by road
2. To Punjab through the KPK, or
3. Towards Karachi via KPK.\textsuperscript{21}

It is worth noting that seizures in Gilgit-Baltistan have been small in recent years. In 2009 only 1.25 kg of heroin and no opium was seized.\textsuperscript{22} Trafficking has occurred on passenger buses, in trucks and private vehicles. The flows relevant to the Chinese border are those coming through KPK, both directly onto the road network and through the north-western areas of Gilgit-Baltistan, such as from Chitral.\textsuperscript{23}

The section of the KPK between Torkham and Islamabad is also a prominent seizure area, with traffickers likely capitalising on the established trade network and infrastructure connecting the border with Islamabad. Negligible opiate seizures have been reported in FATA over the last several years.

In Punjab, most of the seizures took place along major transport corridors as well as prominent cities including Faisalabad, Sheikhupura and Multan. Heroin seizures have taken place at Wagah, on the border with India.

Balochistan
Balochistan remains a key entry and transit point for drugs produced in southern Afghanistan. Considering logistical arrangements and known drug routes, it is highly likely that more than half of all heroin and morphine trafficking (around 90 tons per annum) occurs at Balochistan’s border with Afghanistan. In fact, between 2004 and 2007, 72 percent of total opium seizures in Pakistan were located in Balochistan. In addition, approximately 35 tons pass through Balochistan into Iran.\textsuperscript{24}

Opiates trafficked through Balochistan mainly gather in the cities of Quetta and Dalbandin where a large proportion of opiate seizures occur in and near those settlements before splitting off onto other routes, including:

1. To eastern Iran, by road or rail (for use in Iran, trafficked to Europe via Turkey and trafficked to Africa and Middle East for local consumption and further trafficking to different destinations)
2. To the Makran Coast and Karachi towards Pakistan’s ports for shipment to Africa, Middle East and South-East Asia, or
3. To Pakistan’s main cities for domestic consumption. See Figure 7.

\textsuperscript{19} FATA comprises seven agencies and six frontier regions. The seven agencies are Bajaur, Kurram, Orakzai, Mohmand, Khyber, North Waziristan and South Waziristan. The six frontier regions are Kohat, Peshawar, Bannu, Lakki, Dera Ismail Khan and Tank. The latter are transition areas between FATA and the adjoining settled districts of the KPK. They are jointly administered by KPK and FATA; according to the 1998 census, they had a combined population of 235,000. Some tribal pockets are kept under the provincial administration as well.
\textsuperscript{20} Drug Situation in Pakistan and Counter Narcotics Achievements, Ministry of Narcotics Control/Anti Narcotics Force, 2009.
\textsuperscript{21} Addiction, Crime and Insurgency – The Transnational Threat of Afghan Opium, 2009, UNODC.
\textsuperscript{22} The ANF is the only agency that has executed any seizures.
\textsuperscript{23} Enhancing Border Management: Assessment of the Pakistan-China Frontier, November 2009, UNODC.
\textsuperscript{24} World Drug Report, 2010, UNODC.
A location-wise analysis of seizures indicates that trafficking is highly concentrated in the north-west of Balochistan. Between 2002 and 2008, major seizures have been reported in the areas of Chaghai, Dalbandin and Taftan, in proximity of the Afghan border (see figures 3 and 4 above). Large seizures have also been reported at Chaman, Gulistan, Pishin and Quetta. Kharan is another major point of interception. Further to the south, the areas of Gwadar, Panijur and Turbat are significant. Of note, the loci of major opium and heroin seizures largely coincide, indicating the use of similar routes and/or transport of multiple drugs within the same consignment.

Trafficking into Iran is reportedly concentrated around the area of Mashkhel, as supported by the large number of seizures in Kharan district. While seizures have also been recorded around Taftan, accounts indicate that the construction of large border walls in the area by Iranian authorities has reduced viability of this route. It is noteworthy that the terrain gradually shifts from mountainous to flat and sandy south of Taftan. This increases the range of specific routes available to traffickers.

From Mashkhel, some consignments depart for the Makran coast. There are a large number of unofficial jetties on the Makran coast, which increase the possibilities of points of exit available to traffickers. Large seizures have been undertaken in Kharan, Panjgoor and Turbat. From the coast, the greatest volumes are trafficked to Oman or Dubai.

Another route, which handles lesser volume originated from the Afghanistan border passing through Gulistan and generally routed for domestic consumption via the network of main and secondary roads originating from Balochistan. Experts suggest that trafficking in the region feeds drugs markets in Sindh, south Punjab and Balochistan itself. Important cities identified include Karachi, Hyderabad, Dera Ghazi Khan and Quetta.
In conjunction with seizures, price data can serve to provide a more comprehensive indicator of the magnitude of trafficking. Placing this within a regional context is critical for a complete picture. Generally heroin prices have been gradually increasing between 2006 and 2010. However, between 2008 and 2009, prices of heroin fell sharply from US$ 3,032 to US$ 2,767 per kg. 2008-09 was a period when exchange rates were quite volatile in Pakistan; prices generally take some time to adjust. Once the exchange rate stabilized, the gradual increase in prices has been quite steady. In addition, heroin wholesale prices closely reflect those of Afghanistan’s (see Figure 9). The usefulness of price data is lowered by the fact that heroin purity levels are unknown.

Figure 8: Average Heroin prices in Pakistan (Sind) 2006-2010 (US$/kg)\textsuperscript{25}

Figure 9 illustrates prices of heroin in various cities across Pakistan. Owing to the large sea port and large volume of air traffic, prices in Karachi are the highest. Prices are lowest at Dalbandin, owing to its proximity to the poppy producing region of Afghanistan. Prices tend to increase as the distance from entry points increases. Traffickers earn premiums based on the distance from the point of entry into Pakistan as well as to the points of exit.

Figure 9: City wise prices (wholesale) of Heroin in US$/kg (A grade) in Pakistan – January 2011\textsuperscript{26}

\textsuperscript{25} Anti Narcotics Force, Ministry of Narcotics Control, Pakistan.

\textsuperscript{26} Anti Narcotics Force, Ministry of Narcotics Control, Pakistan. Caution : Purity level is unknown.
Precursors

Illicit morphine and heroin production require large quantities of precursor chemicals such as acetic anhydride, a substance which is essential in the refinement of morphine into heroin. All acetic anhydride used for heroin production has to be smuggled into Afghanistan as no known production facilities of the substance exist in the country, nor is there any reported legitimate use of the chemical. UNODC estimates that 380 – 570 tons of acetic anhydride may be required each year for the production of Afghan heroin.

A significant proportion of Afghanistan’s heroin production occurs in provinces bordering Pakistan (particularly important have been Helmand and Nimroz, which adjoin Pakistan’s Balochistan province). There has historically been little pressure on the supply routes of heroin precursors; until 2008, there had not been sizeable seizures of acetic anhydride in any of the countries surrounding Afghanistan.

Starting from 2008, Pakistan has made several, relatively large heroin precursor interdictions. Based on this seizure data (see Table 4) and the fact that Pakistan’s geographic proximity to world’s largest precursor producer countries, Pakistan appears to be a major source of precursors entering Afghanistan.

### Table 3: Heroin precursor seizures by all agencies (as reported by ANF)

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Seizure description</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 March 2008</td>
<td>Quetta, Balochistan</td>
<td>1,224 L of acetic anhydride</td>
</tr>
<tr>
<td>23 March 2008</td>
<td>Karachi, Sindh</td>
<td>14,000 kg of acetic anhydride</td>
</tr>
<tr>
<td>29 August 2008</td>
<td>Karachi, Sindh</td>
<td>46.5 L of acetic anhydride</td>
</tr>
<tr>
<td>16 January 2009</td>
<td>Karachi, Sindh</td>
<td>5,000 kg of acetyl chloride</td>
</tr>
<tr>
<td>27 May 2009</td>
<td>Karachi, Sindh</td>
<td>137 kg of acetic anhydride</td>
</tr>
<tr>
<td>29 July 2009</td>
<td>Chagi, Balochistan</td>
<td>4,989 kg of acetic anhydride and 3,600 L of ammonia</td>
</tr>
<tr>
<td>March 2010</td>
<td>Karachi, Sindh</td>
<td>15,600 kg of acetic anhydride</td>
</tr>
<tr>
<td>August 2010</td>
<td>Abbotabad, KPK</td>
<td>378 L of acetic anhydride</td>
</tr>
<tr>
<td>March 2011</td>
<td>Peshawar, KPK</td>
<td>30.8 L of acetic anyhydride</td>
</tr>
</tbody>
</table>

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27. World Drug Report, 2010, UNODC.
28. Precursor Trafficking and Diversion in Pakistan, Feb 2010, UNODC.
Within Afghanistan, confirmed seizures of acetic anhydride in 2008 were only around 1 percent of the probable volume entering the country. However, some other chemical seizures likely included acetic anhydride and were not registered as such.

**Figure 11: Acetic anhydride trafficking trajectories**

Based on information collected in Afghanistan and Pakistan, Figure 10 depicts acetic anhydride trafficking routes through Pakistan. The numbers next to each route are elaborated below:

1. **Large consignments coming from Karachi.** Sporadic seizures and law enforcement assessments suggest that mislabeling is the most common method of smuggling acetic anhydride through Karachi. A particular challenge is that smugglers can take advantage of the Pakistan-Afghanistan Transit Trade Agreement to avoid regular cargo inspections. From Karachi, there are three onward routes:
   a. **Through Balochistan.** Trucks can travel through Chaman or enter Afghanistan through unofficial crossings.
   b. **Through KPK and the Khyber Agency.** The Torkham crossing receives the lion’s share of official Pakistan-Afghanistan trade. However, from the perspective of southern Afghan drug processors, receiving precursor chemicals through Torkham adds to complications, since they must then transit the chemicals through eastern and central Afghanistan back down to southern laboratories.
   c. **Through the FATA and into south-eastern Afghanistan.** Afghanistan’s Paktya province has experienced a few sizeable seizures in recent years.

2. **From Iran through Balochistan into southern Afghanistan.** A significant proportion of opiates transiting Balochistan enter into Iran and these well-worn smuggling paths appear to be used in reverse to traffic precursor chemicals.

3. **Irregular landings on Balochistan’s coast.** Pakistani law enforcement and Balochistan locals point out that irregular and unmonitored landing of various boats are not unusual on Balochistan’s coast.
4. From the Khunjerab Pass (China) into eastern Afghanistan. The Chinese land border currently accounts for a small proportion of bilateral trade, although it is likely to grow and traffic regulation is difficult. There have been acetic anhydride seizures in China’s western province of Urumchi, destined for Afghanistan. Locals in Pakistan’s Gilgit-Baltistan area refer vaguely to “chemicals” being traded, although these are apparently unregistered by Customs. From the Khunjerab Pass, goods can travel difficult but well-worn paths across northern Pakistan, or join trade flows into Torkham.

5. Smuggled from India to join central flows. Although the Indian border is heavily militarised and by all accounts smuggling of all types has generally declined, Pakistani law enforcement believes that there are still some acetic anhydride trafficking ventures that enter overland from India.\(^{29}\)

The price of acetic anhydride in Afghanistan has risen rapidly in recent years, and is now a more costly input than opium – making it a major cost factor in the production of heroin.\(^{30}\) Stricter controls in source countries appear to have contributed most to the rising price of acetic anhydride by raising the risk of diversion. Importantly, the high price of acetic anhydride means that now even small shipments are financially viable. This is likely to impact precursor trafficking logistics by increasing the sale of smaller volumes and the subsequent use of minor routes through the Afghan-Pakistan border, making interdiction more difficult.

**Synthetic drugs**

Figure 1 highlights that region surrounding Pakistan has experienced an increase in synthetics activity. This ranges from the huge and established demand and production in China, through to the early development of consumption markets in Afghanistan. Reports from Iran have also

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\(^{29}\) Enhancing Border Management: Assessment of the Pakistan-China Frontier, Islamabad: UNODC, November 2009.

\(^{30}\) Precursor Trafficking and Diversion in Pakistan, Feb 2010, UNODC.
pointed to large amounts of synthetic drugs entering the country. To the east of Pakistan, India is one of the world’s largest exporters of methamphetamine precursors (ephedrine and pseudoephedrine), and the size of its chemical and pharmaceutical industry makes the country a target for international drug syndicates involved in the manufacture of synthetic drugs.

In Pakistan there has been a substantial increase in the demand for ephedrine and pseudoephedrine (See table below). As legitimate needs increase, there is a greater risk of diversion. 

<table>
<thead>
<tr>
<th>Table 4: Legitimate requirement of Ephedrine and Pseudo Ephedrine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Country</strong></td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td>Afghanistan</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Iran</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Pakistan</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

During the last 2 years, there have been numerous significant ephedrine seizures in Pakistan, which highlights the presence and emergence of trafficking of synthetics and precursors in Pakistan.

**Figure 13: Ephedrine Seizures in Pakistan in 2010**

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31 Precursors Diversion and Trafficking in Pakistan, Assessment by UNODC Country Office Pakistan, 2011
32 Anti Narcotics Force, Yearbook 2011
Given these trends in Pakistan and its neighbourhood, it is striking that there is little official information from Pakistan on methamphetamine. There have been cases elsewhere that have apparently included transhipment of pseudoephedrine through Pakistan. Beyond this, UNODC is not aware of any other official information on methamphetamine consumption, production, trafficking or precursor inputs.

**Cocaine**

There is little known about cocaine use in Pakistan but it is believed it must be limited due to its high price. Table 5 details the seizures by the ANF in 2008 and 2009. The seizure of 226 kg Cocaine in 2010 is unprecedented and highlights the need for Law Enforcement authorities to remain cognizant of the threat of cocaine as an abused drug in Pakistan.

<table>
<thead>
<tr>
<th></th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seizures/Cases</td>
<td>4</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Defendants/Persons</td>
<td>12</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td>Arrested</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cocaine (in kg)</td>
<td>7.3</td>
<td>0.571</td>
<td>226</td>
</tr>
</tbody>
</table>

**Cannabis**

In the regions of Central Asia, Middle East and South Asia, most cannabis resin seizures are reported from Afghanistan, Iran and Pakistan. Reports from Iran and Pakistan indicate that most of the cannabis resin (hashish) seized there originates from Afghanistan. The large cannabis resin seizure in Kandahar in 2008 was exceptional within Afghanistan but also in comparison to its neighbours. A similarly large seizure did not occur in Afghanistan in 2009. Data from Pakistan shows a generally upward trend of cannabis resin seizures since 2005, with a sharp increase in 2009 at 204,610 kg (from 134,622 kg in 2008). Seizures in Iran have declined recently. See Figure 12.

![Figure 14: Seizures of cannabis resin (hashish) in Afghanistan, Iran and Pakistan 2002-2009](image)

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The general annual trend in Figure 13 shows that prices for cannabis had moved up during 2007-2008 (US$ 60/kg and US$ 56/kg respectively) in comparison to 2006 (US$ 49), and decreased in 2009 (US$ 50/kg). The same trend was reflected by wholesale prices for hashish on the Peshawar market in Pakistan.\textsuperscript{34}

\textbf{Figure 15: Average annual prices of cannabis products in Pakistan and Afghanistan 2006-2009 (US$/kg)}

\begin{figure}[h]
\centering
\includegraphics[width=0.5\textwidth]{figure15.png}
\caption{Average annual prices of cannabis products in Pakistan and Afghanistan 2006-2009 (US$/kg)}
\end{figure}

\textsuperscript{34} Afghanistan Cannabis Survey, 2010, UNODC.
Drug Use

Key points

- The data on drug use in Pakistan is quite dated, and is likely to under-represent the scale of the problem. The survey conducted in 2006, conducted by the Government of Pakistan in partnership with UNODC estimated a prevalence of 0.7% i.e. 628,000 heroin users, of which 125,000 were categorized as Injecting Drug Users (IDUs).
- UNODC estimates that at least 80 tons of opium are consumed annually in Pakistan. Pakistan accounts for 6 percent of the global opiate consumer market and one-twentieth of total global heroin consumption (with 5 percent of the world’s heroin users).
- UNODC is currently working with the Government of Pakistan to execute a population-based survey which aims at collecting baseline information on a number of socio-demographic indicators at the national and provincial level with an emphasis on health, including level and patterns of drug use practices in the general population.
- Volumes of non-medical pharmaceutical, synthetic drugs and cannabis consumption are unknown.

The evidence base

Social and demographic changes in Pakistan are occurring alongside regional and domestic security developments that affect drug supply, and are likely impacting drug use patterns in Pakistan. There are significant data limitations and methodological concerns with regard to current drug use estimates for Pakistan. It is suspected that the actual rates of drug use are much higher than is currently estimated. The last national survey took place in 1993, which estimated 3.01 million drug addicts in Pakistan and assumed a 7 percent annual increase. Based on these Government figures, the number of drug users in 2000 would be between two to three million. Since then there has been no national survey. However, the joint Government of Pakistan and UNODC 2000 National Assessment estimated 500,000 heroin users with an opioid use prevalence of 0.8 percent of the adult population.

The latest assessment of drug use in Pakistan took place in 2006 and estimates the number of chronic opiate users at 628,000 and heroin users at 484,000. Prevalence was revised downwards to 0.7 percent of the adult population. These results indicate that heroin use has decreased between 2000 and 2006. However, this may be a dubious finding given that heroin trafficking has increased in this period. Interestingly, prevalence rates in Iran are estimated at 1.5-3.2 percent of the adult population – a much higher level than in Pakistan, when more heroin transits Pakistan.

Existing estimates are not likely to reflect the current drug use levels in Pakistan. None of the surveys/assessments carried out to date in Pakistan were peer-reviewed and their limitations are acknowledged.

UNODC is currently working with the Government of Pakistan to execute a population-based survey which aims at collecting baseline information on a number of socio-demographic indicators at the

35 Drug Abuse in Pakistan: Results from the 2000 National Assessment, 2000, Government of Pakistan / UNODC.
36 Problem Drug Use in Pakistan: Results from the 2006 National Assessment, 2006, Government of Pakistan / UNODC.
37 World Drug Report 2009, UNODC.
national and provincial level with an emphasis on health, including level and patterns of drug use practices in the general population. Results from the survey, shall be helpful in informing the policy debate, on drug abuse in Pakistan.

**Drug use trends**

Nonetheless, despite these limitations, there are some interesting findings on provincial variations from the 2006 National Assessment. The prevalence rates for opiate use range from 0.4 percent in the provinces of Punjab and Sindh to 0.7 percent in KPK and 1.1 percent in Balochistan. The latter two provinces share a direct border with Afghanistan. The proportion of drug users who inject has increased from 15 percent in 2000 to 29 percent in 2006. See Table 6 for a breakdown of opiate abuse by province.

<table>
<thead>
<tr>
<th>Province</th>
<th>Prevalence (% of Population)</th>
<th>95% CI</th>
<th>Numbers</th>
<th>IDU Prevalence</th>
<th>IDU numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>KPK</td>
<td>0.7</td>
<td>0.5 – 0.9</td>
<td>90,000</td>
<td>0.06</td>
<td>8,000</td>
</tr>
<tr>
<td>Punjab</td>
<td>0.4</td>
<td>0.2 – 0.6</td>
<td>200,000</td>
<td>0.2</td>
<td>100,000</td>
</tr>
<tr>
<td>Sindh</td>
<td>0.4</td>
<td>0.2 – 0.6</td>
<td>87,000</td>
<td>0.2</td>
<td>44,000</td>
</tr>
<tr>
<td>Balochistan</td>
<td>1</td>
<td>0.8 – 1.2</td>
<td>45,000</td>
<td>0.1</td>
<td>4,500</td>
</tr>
<tr>
<td>Overall Pakistan</td>
<td>0.7</td>
<td>0.4 – 1</td>
<td>628,000</td>
<td>0.14</td>
<td>125,000</td>
</tr>
</tbody>
</table>

UNODC estimates that at least 130 tons of opium are consumed annually in Pakistan. Pakistan accounts for 6 percent of the global opiate consumer market and one-twentieth of total global heroin consumption (with 5 percent of the world’s heroin users). Volumes of non-medical pharmaceutical, synthetic drugs and cannabis consumption are unknown.

According to the 2006 National Assessment Report, the majority of opiate users (77 percent) were using heroin while the remainder were using opium and other opiates. Most of the opiate users were multiple users, i.e., they were using more than one substance at any given time or during a day. Many drug users reported facing serious health and social problems. Around 8 percent reported having HIV infection, 18 percent reported having Tuberculosis and 11 percent reported Hepatitis C infection.

The 2006 National Assessment identifies hashish is the most commonly used substance and the ‘drug of choice’ given its low price and easy availability. The report makes no estimate of its prevalence.

WHO/UNAIDS estimate that there are 46,000-210,000 adult HIV-positive cases in Pakistan. A 100 percent increase in injecting drug use was observed between 2000 and 2006. Evidence from other

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38 Problem Drug Use in Pakistan: Results from the 2006 National Assessment, 2006, UNODC
HIV outbreaks suggests that there is currently a concentrated but localised HIV epidemic among injecting drug users (IDUs) in Pakistan. Coupled with widespread risk behaviours, this could lead to an HIV epidemic among the wider population. To illustrate, one study in Karachi revealed an increase in HIV prevalence among IDUs from 1 percent in 2004 to 26 percent in March 2005, while a more recent study found that HIV prevalence among IDUs has reached 24 percent in Quetta (along the border of Afghanistan). The increase in the numbers of IDUs has complicated drug treatment and requires trained service providers.

Table 7: Prevalence of HIV among high risk groups

<table>
<thead>
<tr>
<th>High Risk Group</th>
<th>HIV Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injecting Drug Users</td>
<td>21%</td>
</tr>
<tr>
<td>Hijra Sex Workers</td>
<td>6.4%</td>
</tr>
<tr>
<td>Male Sex Workers</td>
<td>0.9%</td>
</tr>
<tr>
<td>Female Sex Workers</td>
<td>&lt;0.1%</td>
</tr>
</tbody>
</table>

While keeping in mind the data limitations of the 2006 National Assessment, the report points to a substantial increase in the use of cannabis, sedatives and tranquillisers since 2000. The use of inhalants has also been observed to be increasing among adolescents. A study among street children conducted in 2004 indicated that among 400 street children interviewed, around 90 percent had used inhalants. 60 percent of these had been regularly using inhalants for over 2 years. There is an increasing use of benzodiazepines and up to a quarter of the respondents of the 2006 National Assessment reported using benzodiazepines indicated injection as their preferred mode of use.

The 2006 National Assessment identifies an emerging shift from traditional plant-based drugs to synthetic drugs (for example, ecstasy). Though increasing, use of this new wave of drugs is not yet widespread and is largely restricted to young people from more prosperous families. However, easy availability and falling prices could result in usage spilling over to the general population in the future.

The threat of ATS to Pakistan and neighbouring states can be directly attributed to their attractiveness to users. They appeal to the needs of today’s societies and have become part of what is perceived to be a modern lifestyle, both recreationally and occupationally. Their use is believed to enhance sexual performance and their use is often initiated by mouth in ‘convenient’ and discrete pill form that avoids the dangers of injections or social stigma of smoking. They are often sold in single tablet units, which are often erroneously perceived as being less harmful than in other forms.

The results of the 2006 Assessment Report indicate an increasing use of benzodiazepines, which are licit substances obtained over the counter through pharmacies and other channels. It is important to regularise the sale of psychotropic substances through a prescriptions system with appropriate checks and safeguards to detect and prevent misuse of the prescriptions. The most preferred method for use of benzodiazepines was orally (75 percent), however up to one quarter reported injecting benzodiazepines. In the province of Punjab, a significantly higher proportion of drug users (up to 45 percent) reported injecting benzodiazepines. This trend of injecting benzodiazepines is worrisome. Apart from measures to regularize the sale of psychotropic substances, there is a need

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39 The prevalence of HIV among the general public is less than 1%.
42 Study on Solvent Abuse Among Street Children in Pakistan, 2004, UNODC.
43 In Punjab, 45 percent of the respondents were injecting benzodiazepines.
44 World Drug Report 2010, UNODC.
45 Nationally, the three main substances that the drug users injected were opioids – excluding heroin (56 %), heroin (49 %), and benzodiazepines (36 %). Problem Drug Use in Pakistan: Results from the 2006 National Assessment, 2006, UNODC.
to train local law enforcement officials to identify these substances and to increase public awareness, especially targeting urban youth through educational programmes on the health and social consequences of using synthetic drugs.

It is difficult to determine the true nature and extent of drug use among women in Pakistan and data is limited. The 2006 National Assessment indicated that whilst drug substance use by women is not likely to be found at the same levels as among the male population for most drug types, it clearly exists. There is increasing anecdotal information about recreational substance use by young middle class women. Although injecting drug use has been identified as primarily a male activity in Pakistan, there is evidence suggesting that female IDUs also exist and that injecting drug use among women is on the rise. Female commercial sex is widespread in all major towns and substance use, including intravenous drug use, is common among female sex workers (FSWs) which puts them at the risk for drug-related HIV. Additionally, regular sex partners of drug users are at risk.

There are approximately 85,000 people incarcerated in Pakistan’s 97 prisons.\textsuperscript{46} According to 2009 prison statistics, there are approximately 11,137 prisoners convicted for drug-related offences. Of these, 3,630 are drug addicts whereas 7,507 are drug traffickers.\textsuperscript{47} It is suspected that the number of addicts in prisons is significantly higher than these official statistics as drug use in prisons is reportedly widespread, the result of readily available drugs and the prison environment. Further, the combination of injecting drug use and unprotected sexual activity in the prison population provides a potential fast track to an HIV epidemic as prisoners are released and return to society.

\begin{footnotesize}
\begin{enumerate}
\item Prison facilities are over-stretched as they were originally designed for prison population of only 35,000 and availability of educational, vocational training and recreational services is severely restricted. For a comprehensive study of the prisons system in Pakistan, see Pakistan: Assessment of the Prison System, January 2010, UNODC.
\item Central Jail Staff Training Institute, 2010.
\end{enumerate}
\end{footnotesize}
Drug-related crime

Key points

- UNODC estimates that Organized Crime Networks make about US$ 700 Million from drug trafficking and about US$ 500 Million from domestic drug users.
- The high revenues generated by the criminal industry facilitating drug trafficking necessitates the laundering of significant amounts of money, particularly by those operating within larger criminal networks.
- The ANF conviction rate at 87.4 percent of cases in which judgment has been reached. Both the number of drug-related cases registered and the number of convictions has gone up since 2002.
- The great majority of narcotics cases that go to trial are uncomplicated drug possession cases involving low-level couriers and straightforward evidence. The problematic cases tend to involve more influential, wealthier defendants who often tend to overturn court decisions on appeals.

The drugs economy

UNODC estimates that the annual revenue generated by Afghan opiate trafficking to and through Pakistan exceeds $1 billion. This does not include the revenue from illicit trading in associated precursors – which is important because these are probably quite high as increased international controls and cooperation have led to a high price level of acetic anhydride (US$350/l – US$400/l).

Cannabis reaps a high return - the gross income per hectare of cannabis (US$ 3,900) is higher than from opium (US$ 3,600). Cannabis does not need much labour cost: in Afghanistan it is three times cheaper to cultivate a hectare of cannabis than a hectare of opium. As a result the net income of a hectare of cannabis is US$ 3,341 compared to US$ 2,005 per hectare of opium. In the aggregate, however, because opium cultivation far exceeds cannabis cultivation, in 2009 the value of cannabis resin production in Afghanistan was estimated at between US$ 39-94 million, about 10-20 percent of the farm-gate value of opium production.

The high revenues generated by the criminal industry facilitating drug trafficking necessitates the laundering of significant amounts of money, particularly by those operating within larger criminal networks. The transfer of money to others within the criminal network is also a necessary component of operations, comprising both the use of informal value transfer systems and established companies. The drugs economy is an area that warrants further study.

Criminal justice capacities

There appears to be a consensus that both highly structured and loosely structured organizations are involved in transnational organized crime. UNODC argues that while networks of market-driven individuals have always existed in transnational trafficking, it is now a matter of a group of illicit

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48 The Global Afghan Opiate Trade, A Threat Assessment, UNODC, 2011
49 World Drug Report 2010, UNODC.
50 Afghanistan Cannabis Survey, 2010, UNODC.
activities in which some individuals and groups are presently involved – strategies aimed at the top, while important, will not stop the illicit activities if the market dynamics remain unaddressed and the incentives remain to attract new people to service the market.\textsuperscript{51}

There have been several incidents of gun battles between law enforcement personnel and drug traffickers. For example, in July 2006, five Frontier Crops soldiers were killed during an encounter with smugglers in the Chaghai region on the border with Afghanistan. It is not uncommon for the law enforcement agencies to seize arms and ammunition alongside with drugs. The Iranian authorities have also reported killing of several law enforcement personnel in drug-related violence along the border with Pakistan.\textsuperscript{52}

In order to assist the criminal justice system respond appropriately to drug-related crime, the Government of Pakistan set up six dedicated narcotics courts (two at Karachi, one each at Lahore, Rawalpindi/Islamabad, Peshawar and Quetta) as defined in the CNS Act 1997. These were created in order to speed-up the judicial process and free-up the prosecuting agency manpower. All agencies are required to use the CNS Act to prosecute narcotics cases. The cases registered under the CNS Act by the ANF and other law enforcement agencies are to be conducted in these Special Courts while applying the Criminal Procedure Code 1898.\textsuperscript{53} See Table 8 for a brief summary of the performance of the narcotics courts.

<table>
<thead>
<tr>
<th>Special Court</th>
<th>Cases at the beginning of the year</th>
<th>New cases</th>
<th>Cases disposed</th>
<th>Cases pending at year end</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karachi-I</td>
<td>229</td>
<td>66</td>
<td>430</td>
<td>135</td>
</tr>
<tr>
<td>Karachi-II</td>
<td>920</td>
<td>328</td>
<td>320</td>
<td>868</td>
</tr>
<tr>
<td>Lahore</td>
<td>497</td>
<td>388</td>
<td>615</td>
<td>270</td>
</tr>
<tr>
<td>Rawalpindi</td>
<td>106</td>
<td>357</td>
<td>392</td>
<td>71</td>
</tr>
<tr>
<td>Peshawar</td>
<td>117</td>
<td>126</td>
<td>132</td>
<td>111</td>
</tr>
<tr>
<td>Quetta</td>
<td>58</td>
<td>12</td>
<td>45</td>
<td>25</td>
</tr>
</tbody>
</table>

According to the CNS Act 1997, acquisition of assets through drug proceeds is a crime. The ANF traces, freezes, forfeits, and confiscates all illegitimate assets of the drug traffickers. The accused can be awarded 5-14 years of imprisonment besides the forfeiture of their assets. So far assets worth US$57.37 million have been frozen. Table 9 sets out the achievements of ANF in this regard during 2008-2009.

<table>
<thead>
<tr>
<th>Description</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of cases</td>
<td>258</td>
<td>265</td>
<td>253</td>
</tr>
<tr>
<td>Total number of cases pending trial</td>
<td>162</td>
<td>166</td>
<td>147</td>
</tr>
<tr>
<td>Total number of cases in appeal</td>
<td>62</td>
<td>66</td>
<td>70</td>
</tr>
<tr>
<td>Total number of cases under investigation</td>
<td>34</td>
<td>33</td>
<td>36</td>
</tr>
<tr>
<td>Value of frozen assets (Million Rs)</td>
<td>98.4</td>
<td>12.2</td>
<td>77.9</td>
</tr>
<tr>
<td>Value of assets forfeited</td>
<td>-</td>
<td>12,000</td>
<td>31</td>
</tr>
</tbody>
</table>

\textsuperscript{53} Besides these Special Courts, powers have also been conferred on most of the District and Sessions Judges of Pakistan under the CNS Act to try narcotics cases.
Both the number of cases registered and the number of convictions has gone up since 2002. However, despite the success of the new narcotics courts, the prosecutions of most criminal cases in Pakistan are still protracted. Judges grant long continuances, defendants file delaying interlocutory appeals and witnesses are reluctant to testify. The great majority of narcotics cases that go to trial are uncomplicated drug possession cases involving low-level couriers and straightforward evidence. The problematic cases tend to involve more influential, wealthier defendants who often tend to overturn court decisions on appeals.

The ANF has been effective in dealing with reversals of convictions by hiring its own special prosecutors, who have had positive results despite limited resources, and by including additional attorneys as part of its expansion. The number of cases and prosecutions of drug traffickers by the ANF have increased, especially through the ANF Special Investigation Cell (SIC), by utilizing conspiracy legal concepts (i.e. prosecuting an individual for conspiracy even when not in direct possession of drugs). These measures have had a positive impact leaving the ANF conviction rate at 87.9 percent of cases in which judgment has been reached. See Table 10.

Table 10: ANF’s prosecution review

<table>
<thead>
<tr>
<th>Description</th>
<th>No. of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases registered since 1995</td>
<td>8972</td>
</tr>
<tr>
<td>Convicted cases</td>
<td>6103 (87.9%)</td>
</tr>
<tr>
<td>Acquitted cases</td>
<td>844</td>
</tr>
<tr>
<td>Dormant cases</td>
<td>652</td>
</tr>
<tr>
<td>Closed cases</td>
<td>305</td>
</tr>
<tr>
<td>Under-trial cases</td>
<td>1068</td>
</tr>
</tbody>
</table>
Conclusion

Pakistan is uniquely placed due to its geographical proximity to Afghanistan and more specifically, to Afghanistan’s major poppy and cannabis growing provinces. In addition, Pakistan borders China, Iran and India, which are significant synthetic drug production and consumption bases. This has profound implications for drug use in the country – the exact nature of which remains to be determined. Just the opiate trafficking to and through Pakistan generates an estimated over $1 billion, this excludes the trafficking of associated precursors, cannabis and synthetic drugs. The recent seizure of cocaine in October 2010 in Karachi with an estimated value of $40 million illustrates the scale of the problem.

Pakistan suffers to some extent from the fact that the processes of globalization has outpaced the mechanisms for global governance, and this deficiency has produced just the sort of void in which transnational organized crime can thrive. People and goods can move cheaper than ever before, the flows are too intense to easily distinguish the licit from the illicit, and these problems cannot be solved by any country in isolation.55

For Pakistan to expand on its successes against its drug-related challenges, the strategy must involve the effective application of the rule of law within Pakistan but needs to be combined with addressing the regional dimensions of organized crime. Countering the production, trafficking and use of illicit drugs effectively requires the implementation of the below strategies, which are already to a large extent part of the Government of Pakistan’s Anti Narcotics Policy 2010 and Drug Control Master Plan 2010-14.

These efforts must be actively supported and expanded to continue strengthening a strategic national and regional response that is based on a growing understanding of the patterns and dynamics of the drug situation in Pakistan and the region and targeted, sequenced and cost-effective mix of interventions.

1. **Expanding the evidence base.** There are gaps in knowledge of drug use, types, quality and number of illegal movements and their origin and destination is. An expanded evidence base will assist practitioners in developing appropriate strategies. For instance, a national drug use survey or an in-depth analysis of the drugs economy would be beneficial for policymakers.

2. **Mainstreaming drug prevention and treatment.** At present, drug treatment is somewhat separated from the mainstream health system. Disseminating drug abuse knowledge into health-worker training would help to extend its coverage, improving the efficiency of the current network of treatment and rehabilitation providers.

3. **Inter-agency cooperation.** The MNC is the policy level institution dealing with narcotics control in Pakistan and the ANF is the principal enforcement agency. However there are a wide range of other Government departments at the federal and provincial level that are tasked with drug enforcement. A robust coordination mechanism is needed to integrate these varied agencies. One such recent initiative is the creation of an Inter-Agency Task Force on Narcotics Control.

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4. **Building law enforcement training programmes.** Training academies need enhanced management approaches and modernized curriculum to meet new challenges. While the traditional orientation is towards Afghan opiates, law enforcement agencies need to be familiarized with new and emerging challenges such as precursor chemical trafficking and importation/transhipment/production of synthetics and their precursors.

5. **Developing human capacity in the criminal justice sector.** Elements of the criminal justice system, such as the prosecution service and the prison system require improvement to better deal with drug-related cases as well as inmates.

6. **Enhancing interdiction capacities.** The operational capacities of Pakistan’s law enforcement and border management agencies require enhancement as they often work with limited equipment. For instance, on-the-spot drug testing kits and mobility would be a boost for interdiction efforts.

7. **Strengthening regional and international cooperation.** As a primary transit country for Afghan opiates, regional cooperation is necessary, particularly between Afghanistan, Iran and Pakistan. Effective border management requires both working on the internal coordination of border protection agencies and in linking those agencies with their counterparts on the other side of the border. This includes cooperation between regional and national law enforcement agencies in sharing real time information on drug trafficking.