



EXECUTIVE SUMMARY IMPACT OF COVID-19 POLICY IMPLICATIONS

2020 RUG REPORT

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PREFACE

This is a time for science and solidarity, as United Nations Secretary-General António Guterres has said, highlighting the importance of trust in science and of working together to respond to the global COVID-19 pandemic.

The same holds true for our responses to the world drug problem. To be effective, balanced solutions to drug demand and supply must be rooted in evidence and shared responsibility. This is more important than ever, as illicit drug challenges become increasingly complex, and the COVID-19 crisis and economic downturn threaten to worsen their impacts, on the poor, marginalized and vulnerable most of all. Some 35.6 million people suffer from drug use disorders globally. While more people use drugs in developed countries than in developing countries, and wealthier segments of society have a higher prevalence of drug use, people who are socially and economically disadvantaged are more likely to develop drug use disorders.

Only one out of eight people who need drug-related treatment receive it. While one out of three drug users is a woman, only one out of five people in treatment is a woman. People in prison settings, minorities, immigrants and displaced people also face barriers to treatment due to discrimination and stigma. Of the 11 million people who inject drugs, half of them are living with hepatitis C, and 1.4 million with HIV.

Around 269 million people used drugs in 2018, up 30 per cent from 2009, with adolescents and young adults accounting for the largest share of users. More people are using drugs, and there are more drugs, and more types of drugs, than ever.

Seizures of amphetamines quadrupled between 2009 and 2018. Even as precursor control improves globally, traffickers and manufacturers are using designer chemicals, devised to circumvent international controls, to synthesize amphetamine, methamphetamine and ecstasy. Production of heroin and cocaine remain among the highest levels recorded in modern times.

The growth in global drug supply and demand poses challenges to law enforcement, compounds health risks and complicates efforts to prevent and treat drug use disorders.

At the same time, more than 80% of the world's population, mostly living in low- and middle-income

countries, are deprived of access to controlled drugs for pain relief and other essential medical uses.

Governments have repeatedly pledged to work together to address the many challenges posed by the world drug problem, as part of commitments to achieve the Sustainable Development Goals, and most recently in the 2019 Ministerial Declaration adopted by the Commission on Narcotic Drugs (CND). But data indicates that development assistance to address drug control has actually fallen over time.

Balanced, comprehensive and effective responses to drugs depend on governments to live up to their promises, and provide support to leave no one behind. Health-centred, rights-based and gender-responsive approaches to drug use and related diseases deliver better public health outcomes. We need to do more to share this learning and support implementation, most of all in developing countries, including by strengthening cooperation with civil society and

The international community has an agreed legal framework and the commitments outlined in the 2019 CND Ministerial Declaration. The United Nations Office on Drugs and Crime (UNODC) provides integrated support to build national capacities and strengthen international cooperation to turn pledges into effective action on the ground.

youth organizations.

The theme for this year's International Day against Drug Abuse and Illicit Trafficking, "Better Knowledge for Better Care", highlights the importance of scientific evidence to strengthen responses to the world drug problem and support the people who need us. It also speaks to the ultimate goal of drug control, namely the health and welfare of humankind. Through learning and understanding we find compassion and seek solutions in solidarity.

It is in this spirit that I present the UNODC *World Drug Report 2020*, and I urge governments and all stakeholders to make the best use of this resource.

Shada Waly

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CONTENTS

BOOKLET 1 EXECUTIVE SUMMARY, IMPACT OF COVID-19, POLICY IMPLICATIONS	
PREFACE	1
EXPLANATORY NOTES	5
EXECUTIVE SUMMARY	7
EFFECTS OF COVID-19 ON DRUG MARKETS	
EXPANSION AND COMPLEXITY	
Increased complexity	11
Policy changes and changing trends	13
Disadvantaged face harm from legal and illicit drug markets	
Drug use	17
Supply chains	
RESPONSE TO THE DRUG PROBLEM STILL INADEQUATE	20
COVID-19 AND THE DRUG SUPPLY CHAIN: FROM PRODUCTION AND TRAFFICKING TO USE Measures implemented to prevent the spread of COVID-19 are having	
a mixed impact on the drug supply chain	
IMPACT OF COVID-19	
Drug production Drug trafficking	
Drug use	
Addressing the global drug problem requires drug policy implemented in tandem with broader agendas for sustainable development, security and human rights	
POLICY IMPLICATIONS	29
Mainstream evidence-based prevention of drug use and treatment of drug use disorders and the delivery of services aimed at reducing the associated harm in community settings are required	30
The disparity in the access to and availability of controlled substances for pain management and palliative care needs to be addressed	
Alternative development initiatives need to avoid generalizations if they are to enhance farmers' livelihoods and reductions in illicit crop cultivation areas	32
The distinctive needs of women have to be addressed if the particular vulnerability of those in contact with the criminal justice system for drug-related offences is to be reduced	32
The cannabis market needs to be monitored closely	
Enhanced understanding of international cooperation is necessary to address the transpational nature of the drug problem.	34

EXECUTIVE SUMMARY, IMPACT OF COVID-19, POLICY IMPLICATIONS

	arch is needed to improve understanding of the complexities of drug markets, o the impact of COVID-19
ANNEX	3
GLOSSARY	57
REGIONAL GF	ROUPINGS59
BOOKLET 2	DRUG USE AND HEALTH CONSEQUENCES
BOOKLET 3	DRUG SUPPLY
BOOKLET 4	CROSS-CUTTING ISSUES: EVOLVING TRENDS AND NEW CHALLENGES
BOOKLET 5	SOCIOECONOMIC CHARACTERISTICS AND DRUG USE DISORDERS
BOOKLET 6	OTHER DRUG POLICY ISSUES

EXPLANATORY NOTES

The designations employed and the presentation of the material in the *World Drug Report* do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area, or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Countries and areas are referred to by the names that were in official use at the time the relevant data were collected.

Since there is some scientific and legal ambiguity about the distinctions between "drug use", "drug misuse" and "drug abuse", the neutral term "drug use" is used in the *World Drug Report*. The term "misuse" is used only to denote the non-medical use of prescription drugs.

All uses of the word "drug" and the term "drug use" in the *World Drug Report* refer to substances controlled under the international drug control conventions, and their non-medical use.

All analysis contained in the *World Drug Report* is based on the official data submitted by Member States to the UNODC through the annual report questionnaire unless indicated otherwise.

The data on population used in the World Drug Report are taken from: World Population Prospects: The 2019 Revision (United Nations, Department of Economic and Social Affairs, Population Division).

References to dollars (\$) are to United States dollars, unless otherwise stated.

References to tons are to metric tons, unless otherwise stated.

The following abbreviations have been used in the present booklet:

AIDS acquired immunodeficiency syndrome

alpha-PVP alpha-pyrrolidinovalerophenone

APAA alpha-phenylacetoacetamide

APAAN alpha-phenylacetoacetonitrile

ATS amphetamine-type stimulant

CBD cannabidiol

COVID-19 coronavirus disease

DALYs disability-adjusted life years

EMCDDA European Monitoring Centre for Drugs and Drug Addiction

HIV human immunodeficiency virus

INCB International Narcotics Control Board

MAPA methyl alpha-phenylacetoacetate

NPS new psychoactive substances

P-2-P 1-phenyl-2-propanone

THC Δ-9 – tetrahydrocannabinol

UNAIDS Joint United Nations Programme on HIV/AIDS

UNODC United Nations Office on Drugs and Crime

WHO World Health Organization



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