



Evaluation Report on Drug Control



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Organization of American States (OAS)
Secretariat for Multidimensional Security (SMS)
Inter-American Drug Abuse Control Commission (CICAD)

Multilateral Evaluation Mechanism (MEM)

Suriname

EVALUATION REPORT ON DRUG CONTROL 2014

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PREFACE

The Multilateral Evaluation Mechanism (MEM) is a diagnostic tool, designed by all member states of the Organization of American States (OAS), to periodically carry out comprehensive, multilateral evaluations on the implementation level of the Plan of Action of the Hemispheric Drug Strategy of member states of the Inter-American Drug Abuse Control Commission (CICAD). As part of the Secretariat of Multidimensional Security (SMS), CICAD is the OAS specialized agency responsible for the implementation of this Mechanism, pursuant to a mandate from the Second Summit of the Americas held in Santiago, Chile in 1998.

The MEM is not only an evaluation instrument, but has also become a valuable source of information on the progress achieved by the individual and collective efforts of the governments of OAS member states, thus strengthening hemispheric cooperation, promoting dialogue among governmental authorities of member states and precisely channeling assistance to areas requiring greater attention by optimizing resources. The MEM process in itself is assessed by the Intergovernmental Working Group (IWG) comprised of delegations from all member states, which meets before the onset of each evaluation round to review and strengthen all operational aspects of the mechanism.

The national evaluation reports for the Sixth Round collect the results of the level of implementation of the 27 recommendations, emanating from the Plan of Action 2011-2015 of the Hemispheric Drug Strategy 2010, and were drafted by experts in the different areas, assigned by each member state. Experts do not work on their own country's report, guaranteeing the transparent, objective and multilateral nature of the MEM. Each chapter is based on countries' responses to a survey covering the main thematic areas of the Hemispheric Drug Strategy: institutional strengthening, demand reduction, supply reduction¹, control measures and international cooperation, as well as additional and updated information, provided by the government-appointed coordinating entities.

This report covers the country evaluation for the MEM Sixth Evaluation Round, which covers the 2013 to mid-2014 period. All MEM reports are available through the following webpage: http://www.cicad.oas.org.

¹ In accordance with the CICAD Commissioner's agreement at their fiftieth regular session (November 2011), the supply reduction chapter refers exclusively to the topic of illicit crops. For this reason, the CICAD Commissioners decided, at their fifty-fourth regular session (December 2013), that the recommendations in this chapter (11 to 15) would only be applied to those countries that have significant illicit crops.





INSTITUTIONAL STRENGTHENING

RECOMMENDATION 1

ESTABLISH AND/OR STRENGTHEN NATIONAL DRUG AUTHORITIES, PLACING THEM AT A HIGH POLITICAL LEVEL, WITH THE MISSION TO COORDINATE THE EFFECTIVE PLANNING AND IMPLEMENTATION OF NATIONAL DRUG POLICIES.

Evaluation: Complete

Suriname's national drug authority is the National Anti-drug Council which functions in the Bureau of National Security. The national authority has a legal basis and a budget. The National Anti-drug Council coordinates the areas of demand reduction, supply reduction, alternative, integral and sustainable development programs, control measures, international cooperation and program evaluation. The country has a coordination mechanism to carry out the effective planning and implementation of national drug policies.



INSTITUTIONAL STRENGTHENING

RECOMMENDATION 2

DESIGN, IMPLEMENT, STRENGTHEN AND UPDATE NATIONAL EVIDENCE-BASED STRATEGIES AND POLICIES ON DRUGS.

Evaluation: Complete

Suriname has a National Drug Master Plan 2011-2015, which includes the areas of demand reduction, supply reduction, control measures, international cooperation and institutional strengthening. Relevant actors were involved in designing, drafting and implementing the National Drug Master Plan. There is a monitoring and evaluation framework. The country updates its drug policies, plans and programs based on the results of its evaluations and outcomes.



INSTITUTIONAL STRENGTHENING

RECOMMENDATION 3

ESTABLISH AND/OR STRENGTHEN NATIONAL OBSERVATORIES ON DRUGS OR SIMILAR TECHNICAL OFFICES TO DEVELOP NATIONAL DRUG INFORMATION SYSTEMS AND FOSTER SCIENTIFIC RESEARCH ON THIS SUBJECT.

Evaluation: Partially complete

Suriname has carried out one priority drug demand reduction study. There is priority information available for some areas of drug supply reduction. The country has carried out and publicly released a study on the economic and social cost of drugs. Drug demand and supply reduction information is disseminated to all relevant parties.

Suriname does not have a national observatory on drugs or a similar technical office. The country does not have the priority drug demand reduction studies within the past 5 years for secondary school students and patient registers of treatment centers. Also, the country does not have information on priority drug supply reduction for the number of seizures of controlled chemical substances (precursors), the quantities of seized controlled chemical substances (precursors), the number of seizures of pharmaceutical products, quantities of seized pharmaceutical products, number of laboratories producing illicit plant-based drugs and number of laboratories producing illicit drugs of synthetic origin.



DEMAND REDUCTION

RECOMMENDATION 4

DEVELOP AND IMPLEMENT COMPREHENSIVE DEMAND REDUCTION POLICIES, PLANS AND/OR PROGRAMS.

Evaluation: Partially complete

Suriname has comprehensive demand reduction programs in the areas of prevention, early intervention, treatment and rehabilitation, social reinsertion, and related recovery support services. The country monitors and evaluates implementation of its universal prevention, early intervention, and treatment and rehabilitation programs, and updates these accordingly. A multisectoral approach was adopted in their programs with participation of various population sectors.

Suriname programs are not monitored or evaluated in the areas of selective prevention programs, social reinsertion or related recovery services.



DEMAND REDUCTION

RECOMMENDATION 5

DESIGN AND IMPLEMENT A COMPREHENSIVE SYSTEM OF EVIDENCE-BASED UNIVERSAL, SELECTIVE, AND INDICATED PREVENTION PROGRAMS, WITH MEASURABLE OBJECTIVES, AIMED AT DISTINCT TARGET POPULATIONS, INCLUDING AT-RISK GROUPS.

Evaluation: Started

Suriname has universal and selective prevention programs addressing drug use and targeting distinct target populations. Selective prevention programs vary based on the presence of risk factors.

Suriname does not have indicated prevention programs or a comprehensive prevention system.



DEMAND REDUCTION

RECOMMENDATION 6

PROMOTE THE INTEGRATION OF TREATMENT AND RECOVERY PLANS AND PROGRAMS INTO THE PUBLIC HEALTH SYSTEM AND ADDRESS DRUG DEPENDENCE AS A CHRONIC, RELAPSING DISEASE.

Evaluation: Mostly complete

Suriname has a network of public health system facilities responsible for health needs within its territory. These facilities carry out drug use screening and have screening instruments in place for early detection of drug use; offer guidance and brief intervention in drug use cases; and systematically refer persons affected by drug use to treatment in public and private health institutions. The public health system, which coordinates with other sectors, along with non-governmental organizations (NGOs), and private institutions provide outpatient and residential treatment, aftercare, rehabilitation and recovery support services for persons affected by drug use. The facilities offering treatment and rehabilitation have monitoring systems for their programs, trained professionals to implement and manage them, and allow for collection of information regarding treatment and rehabilitation programs.

Suriname does not have an accreditation process for NGOs drug treatment centers.



DEMAND REDUCTION

RECOMMENDATION 7

FACILITATE ACCESS FOR DRUG-DEPENDENT PERSONS TO A SYSTEM OF DRUG TREATMENT, REHABILITATION, SOCIAL REINSERTION, AND RECOVERY SERVICES THAT ARE EVIDENCE-BASED AND FOLLOW INTERNATIONALLY-ACCEPTED QUALITY STANDARDS.

Evaluation: Partially complete

Suriname takes action to facilitate access to treatment, rehabilitation, and social reinsertion for the various population groups affected by drug use. Treatment and rehabilitation interventions are tailored to the population profiles being served.

Suriname's social reinsertion interventions are not tailored to the population profiles being served.



DEMAND REDUCTION

RECOMMENDATION 8

EXPLORE THE MEANS OF OFFERING TREATMENT, REHABILITATION, SOCIAL REINSERTION AND RECOVERY SUPPORT SERVICES TO DRUG-DEPENDENT CRIMINAL OFFENDERS AS AN ALTERNATIVE TO CRIMINAL PROSECUTION OR IMPRISONMENT.

Evaluation: Started

Suriname has drafted national legislation which establishes alternatives to incarceration for drug-dependent criminal offenders and submitted it to Parliament for approval.

Suriname does not have approved legislation that provides for alternatives to incarceration for drug-dependent criminal offenders.



DEMAND REDUCTION

RECOMMENDATION 9

STRENGTHEN GOVERNMENTAL RELATIONSHIPS WITH ACADEMIC AND RESEARCH INSTITUTIONS AND SPECIALIZED NON-GOVERNMENTAL ORGANIZATIONS (NGOs), IN ORDER TO GENERATE EVIDENCE ON THE DEMAND FOR DRUGS.

Evaluation: Complete

Suriname's national drug authority maintains cooperative relationships with academic and research institutions and relevant civil society organizations addressing issues related to drug demand reduction. Information produced by academic and research institutions and civil society organizations is used in the development of its policies, plans and programs. The country works with these institutions and organizations to support and enhance their capacity to collect data and prepare regular reports on trends in drug use.



DEMAND REDUCTION

RECOMMENDATION 10

PROMOTE AND STRENGTHEN TRAINING AND CONTINUING EDUCATION OF PROFESSIONALS, TECHNICIANS AND OTHERS INVOLVED IN THE IMPLEMENTATION OF DEMAND REDUCTION ACTIVITIES.

Evaluation: Mostly complete

Suriname offers introductory training and continuing education programs on all aspects of demand reduction to personnel involved in the implementation of activities in this field. The country makes available to its technical experts and professionals advanced drug demand reduction training programs at the regional and international level, which include a gender perspective. Also, the regular monitoring and evaluations conducted ensures that training in drug demand reduction meets the country's needs.

Suriname does not offer certificate, undergraduate, or graduate level training programs.



SUPPLY REDUCTION

RECOMMENDATIONS 11–15

Evaluation: Not applied

In consideration of Suriname's situation, CICAD agreed not to apply any category from the evaluation scale to the following recommendations, given that the country does not have significant illicit crop areas:

RECOMMENDATION 11: ADOPT AND/OR IMPROVE COMPREHENSIVE AND BALANCED MEASURES AIMED AT REDUCING THE ILLICIT SUPPLY OF DRUGS.

RECOMMENDATION 12: ADOPT AND/OR IMPROVE DATA COLLECTION AND ANALYSIS MECHANISMS WITH A VIEW TO CARRYING OUT ASSESSMENTS THAT WILL FACILITATE THE DEVELOPMENT OF PUBLIC POLICIES AIMED AT THE REDUCTION OF THE ILLICIT SUPPLY OF DRUGS.

RECOMMENDATION 13: PROMOTE STUDIES AND RESEARCH THAT CONTRIBUTE TO THE EARLY IDENTIFICATION AND MONITORING OF NEW AND EMERGING TRENDS THAT COULD PROVIDE UPDATED INFORMATION ON THE ILLICIT SUPPLY OF DRUGS.

RECOMMENDATION 14: ACCORDING TO THE NEEDS OF EACH COUNTRY, ADOPT COMPREHENSIVE MEASURES, SUCH AS INTEGRAL AND SUSTAINABLE ALTERNATIVE DEVELOPMENT AND LAW ENFORCEMENT INITIATIVES.

RECOMMENDATION 15: PROMOTE ACTIONS TO REDUCE THE NEGATIVE IMPACT ON THE ENVIRONMENT CAUSED BY THE WORLD DRUG PROBLEM, IN ACCORDANCE WITH NATIONAL POLICIES.



CONTROL MEASURES

RECOMMENDATION 16

IMPLEMENT PROGRAMS TO PREVENT AND REDUCE THE ILLICIT PRODUCTION OF PLANT-BASED AND SYNTHETIC DRUGS.

Evaluation: Mostly complete

Suriname has mechanisms and legislation to detect laboratories for the illicit manufacturing of synthetic and plant-based drugs. The country has continuous training programs for agents responsible for control operations relating to the dismantling of laboratories for the illicit manufacturing of drugs.

Suriname does not have any protocols for the dismantling of laboratories for the illicit manufacturing of drugs.



CONTROL MEASURES

RECOMMENDATION 17

ADOPT OR STRENGTHEN CONTROL MEASURES IN ORDER TO PREVENT THE DIVERSION OF CONTROLLED CHEMICAL SUBSTANCES TOWARDS ILLICIT ACTIVITIES

Evaluation: Partially complete

Suriname has legislation which criminalizes the illicit trafficking and diversion of controlled chemical substances as specified in Article 3.1.a.IV of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. The country has an updated register of all individuals and corporations handling controlled chemical substances, and also regulates manufacturers or distributors of controlled chemical substances through the use of licenses. There is a competent authority to coordinate the monitoring of controlled chemical substances.

Suriname does not conduct regular inspections or audits of the establishments of individuals or corporations authorized to handle controlled chemical substances, and the country does not have administrative or civil penalties to punish infractions or violations of said individuals or corporations that deal with controlled chemical substances nor mechanisms for issuance of, or the responding to, pre-export notifications of controlled substances to or from other states.



CONTROL MEASURES

RECOMMENDATION 18

ADOPT OR STRENGTHEN CONTROL MEASURES TO PREVENT THE DIVERSION OF NARCOTICS, PSYCHOTROPIC SUBSTANCES, PHARMACEUTICAL PRODUCTS WITH PSYCHOACTIVE PROPERTIES AND THOSE USED IN THE PRODUCTION OF SYNTHETIC DRUGS.

Evaluation: Complete

Suriname has legislation for the control of narcotics, psychotropic substances, and psychoactive pharmaceutical products in accordance with the United Nations Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, and the United Nations Convention on Psychotropic Substances of 1971. The country has a national authority responsible for coordinating activities for the control of narcotics, psychotropic substances, and pharmaceutical products with psychoactive properties. There are mechanisms to estimate drug requirements as provided in Article 19 of the Single Convention. The country also has domestic legislation authorizing administrative or civil penalties for infractions or violations of the regulations by medical professionals, professional managers, administrators, and legal representatives of establishments that work with narcotics, psychotropic substances, and psychoactive pharmaceutical products.



CONTROL MEASURES

RECOMMENDATION 19

ENSURE THE ADEQUATE AVAILABILITY OF NARCOTICS NEEDED FOR MEDICAL AND SCIENTIFIC USE.

Evaluation: Mostly complete

Suriname has a mechanism to periodically evaluate the availability of narcotics and psychotropic substances for medical use.

Suriname does not have a mechanism in place to ensure adequate availability of narcotics and psychotropic substances for scientific use.



CONTROL MEASURES

RECOMMENDATION 20

STRENGTHEN NATIONAL ORGANIZATIONS FOR THE CONTROL OF ILLICIT DRUG TRAFFICKING AND RELATED CRIMES.

Evaluation: Mostly complete

Suriname has a periodic evaluation mechanism with respect to the strengths and weaknesses of organizations responsible for the control of drug trafficking and related crimes. The country has as an informal information exchange mechanism among agencies for the control of drug trafficking and related crimes. There is a regulatory framework for the prevention of drug trafficking by air, sea and land.

Suriname does not have ongoing training for stakeholders involved in the control of drug trafficking. The country does not have a regulatory framework for the final and secure disposal of seized drugs.



CONTROL MEASURES

RECOMMENDATION 21

IDENTIFY NEW TRENDS AND PATTERNS REGARDING ILLICIT DRUG TRAFFICKING AND RELATED CRIMES.

Evaluation: Mostly complete

Suriname has updated analysis studies on recent trends in drug trafficking and related crimes.

Suriname does not update its regulations on the basis of the identification of new trends in drug trafficking and related crimes.



CONTROL MEASURES

RECOMMENDATION 22

PROMOTE IMPROVEMENTS IN INFORMATION SYSTEMS ON ILLICIT DRUG TRAFFICKING AND RELATED CRIMES.

Evaluation: Partially complete

Suriname has a national consolidated statistical information system on law enforcement operations for drug trafficking and related crimes.

Suriname does not have a national early warning system on new behaviors of criminal organizations related to drug trafficking. The country does not have studies or technical research on drug trafficking and related crimes. Suriname does not have studies on impurity profiles and characterization of drugs.



CONTROL MEASURES

RECOMMENDATION 23

ADOPT MEASURES FOR EFFECTIVE COOPERATION IN CRIMINAL INVESTIGATIONS, INVESTIGATION PROCEDURES, COLLECTION OF EVIDENCE, AND THE EXCHANGE OF INTELLIGENCE INFORMATION AMONG COUNTRIES, ASSURING DUE RESPECT FOR THE VARIOUS NATIONAL LEGAL SYSTEMS.

Evaluation: Mostly complete

Suriname has mechanisms for the secure and effective exchange of intelligence information in the investigations of cases involving drug trafficking and related crimes. There are training workshops on intelligence information exchange in the investigations of cases involving drug trafficking and related crimes. The country offers and participates in training activities in respect to special investigative techniques and management of the chain of custody for evidence in cases of drug trafficking and related crimes. There is a mechanism and guidelines for the coordination and information exchange for the prevention, investigations and control of activities in relation to drug trafficking via the Internet.

Suriname does not have a regulatory framework or operational guidelines for the investigation of all assets during drug trafficking cases.



CONTROL MEASURES

RECOMMENDATION 24

ADOPT OR STRENGTHEN, AS APPLICABLE, CONTROL MEASURES FOR THE ILLICIT TRAFFICKING OF FIREARMS, AMMUNITION, EXPLOSIVES AND OTHER RELATED MATERIALS ASSOCIATED WITH ILLICIT DRUG TRAFFICKING.

Evaluation: Mostly complete

Suriname has legislation criminalizing the illicit manufacturing of and trafficking in firearms, ammunition, explosives and other related materials. The country has a system of import and international transit licenses for transfers of firearms, ammunition, explosives and other related materials. Also, there is a registry of firearms, ammunitions, explosives and other related materials seized during drug trafficking operations as it relates to the Inter-American Convention against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives and Other Related Materials of 1997.

Suriname does not have measures in place to eliminate losses of diversions in instances of licit trade. The country does not have a national authority responsible for coordinating controls on the illicit manufacturing of and trafficking in firearms, ammunition, explosives and other related materials.



CONTROL MEASURES

RECOMMENDATION 25

ESTABLISH, UPDATE, OR STRENGTHEN LEGISLATIVE AND INSTITUTIONAL FRAMEWORKS IN MATTERS OF PREVENTION, DETECTION, INVESTIGATION, AND PROSECUTION OF MONEY LAUNDERING.

Evaluation: Complete

Suriname criminalizes money laundering in accordance with the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 and the United Nations Convention against Transnational Organized Crime of 2000. The country has a Financial Intelligence Unit (FIU) in accordance with the principles of the Egmont Group and the Financial Action Task Force (FATF) recommendations on FIUs. The country has regulations for the prevention and control of money laundering, financing of terrorism and forfeiture of illicitly derived assets that allows for the possibility of forfeiture of assets related to money laundering.



CONTROL MEASURES

RECOMMENDATION 26

CREATE OR STRENGTHEN, IN ACCORDANCE WITH NATIONAL LEGISLATION, THE COMPETENT NATIONAL ORGANIZATIONS FOR THE MANAGEMENT OF SEIZED AND/OR FORFEITED ASSETS, AND THE DISPOSITION OF FORFEITED ASSETS.

Evaluation: Not started

Suriname does not have an agency for the management of seized and forfeited assets derived from drug trafficking and related crimes. Also, the country does not have regulations on the management and disposition of seized and forfeited assets, which include guidelines for the appropriate administration of such assets, and it has not participated in training programs for that purpose.



INTERNATIONAL COOPERATION

RECOMMENDATION 27

REAFFIRM THE PRINCIPLE OF COOPERATION CONTAINED IN INTERNATIONAL INSTRUMENTS TO ADDRESS THE WORLD DRUG PROBLEM, THROUGH ACTIONS TO ENSURE COMPLIANCE AND EFFECTIVENESS.

Evaluation: Partially complete

Suriname has ratified the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988, the United Nations Convention against Transnational Organized Crime of 2000, the Inter-American Convention on Mutual Assistance in Criminal Matters of 1992 and has designated central authorities in said conventions. The country has legal provisions to permit extradition of foreign nationals for the serious crimes of drug trafficking and money laundering. In the case of its citizens, it does not provide for extradition for those crimes, but rather judges them in accordance with domestic law. There is legislation for reciprocal judicial assistance to third party States in investigations, trials and legal proceedings on drug trafficking and asset laundering. The country also has agreements and memoranda of understanding with a number of countries on mutual legal assistance. There are appropriate secure channels for the exchange of information. The country has implemented measures to authorize the confiscation of proceeds derived from drug trafficking or property of equal value, and materials and equipment or other instrumentalities used in or intended for use in any manner in the commission of the crime of drug trafficking. Also, the country has taken other measures to strengthen international cooperation in fighting drug trafficking.

Suriname does not have legislation or other legal provisions that would permit the use of controlled delivery of narcotic drugs and psychotropic substances in order to identify persons involved in the crime of drug trafficking.



CONCLUSIONS

The MEM Sixth Evaluation Round report reflects the country's internal reality regarding the implementation of the Hemispheric Drug Strategy (2010) and its Plan of Action (2011-2015) from 2013 to mid-2014. CICAD recognizes that among the 27 common recommendations, Suriname completed five, eight mostly completed, six partially completed, two started, one not started and five do not apply.

In the area of Institutional Strengthening, Suriname has a national drug authority which functions in the Bureau of National Security. There is a national drug plan. The country has no national observatory on drugs. No priority drug demand reduction studies exist but there is some priority drug supply reduction information (4 of 10).

In the area of Demand Reduction, Suriname has comprehensive demand reduction programs. The country has selective prevention programs, social reinsertion and related recovery services which are not monitored or evaluated. There are universal and selective prevention programs but not indicated prevention programs or a comprehensive prevention system. Various population groups have access to the public health system facilities offering early detection screening of drug use. Those facilities offering treatment and rehabilitation programs monitor said programs. There is no accreditation process for drug treatment centers. Suriname has started to explore alternatives to incarceration for drug-dependent criminal offenders. There are relationships with academic and research institutions and civil society organizations, which generates information used to develop policies, plans and programs. Training and continuing education for demand reduction personnel exist as well as advanced drug demand reduction training programs at the regional and international levels. There are no certificate, undergraduate, or graduate level training programs.

In the area of Supply Reduction, CICAD agreed not to apply any category from the evaluation scale, given that Suriname does not have significant illicit crop areas.

In the area of Control Measures, Suriname has mechanisms to detect and identify laboratories for the illicit manufacturing of synthetic and plant-based drugs; however, there are no protocols in place to dismantle such laboratories.

With regard to the control of chemical substances and pharmaceutical products, there is legislation for the control of controlled chemical substances, regulations for

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the manufacturers and distributors of these substances and a national authority to coordinate the monitoring of such substances. The country does not conduct regular inspections or audits of the establishments of individuals or corporations authorized to handle these substances, there is no administrative or civil penalties for infractions or violations by the said individuals or corporations, nor mechanisms for the issuance of, or to the responding to, pre-export notifications of controlled substances to or from other countries.

There are formal and informal exchange mechanisms among agencies responsible for the control of drug trafficking and related crimes. Also, mechanisms exist for the secure and effective exchange of intelligence information in investigation cases related to this area. The country has national statistical information in drug trafficking and related crimes. No regulatory updates are done based on the identification of new trends. There are no ongoing training programs for the stakeholders involved in said control. No regulatory framework exists for the final and secure disposal of seized drugs. Also, there is no national early warning system on new behaviors of criminal organizations.

There is legislation criminalizing the illicit manufacturing of and trafficking in firearms, ammunitions, explosives and other related materials, however, there is no national authority for coordinating controls or measures in place to prevent losses or diversions in cases of licit trade.

There are regulations for prevention and control of money laundering as well as its criminalization. There are no regulations, nor a national agency for the management of seized and forfeited assets, derived from drug trafficking and related crimes.

In the area of International Cooperation, Suriname has ratified the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988, the United Nations Convention against Transnational Organized Crime of 2000, the Inter-American Convention on Mutual Assistance in Criminal Matters of 1992 and has designated central authorities in said conventions. The country has legal provisions to permit extradition for the crimes of drug trafficking and money laundering. There are laws and legal provisions to provide reciprocal judicial assistance to third party States in investigations, trials, and legal proceedings for drug trafficking and related crimes. However, the country does not have legislation or other legal provisions that would enable it to use controlled delivery of narcotic drugs and psychotropic substances in order to identify persons involved in the crime of drug trafficking.

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CICAD recognizes Suriname for its continued participation and commitment during the Sixth Evaluation Round of the MEM. In accordance with its national situation, the country is encouraged to fully implement the Plan of Action (2011-2015) of CICAD's Hemispheric Drug Strategy (2010).



SUMMARY OF THE STATUS OF COMPLIANCE WITH RECOMMENDATIONS

	INSTITUTIONAL STRENGTHENING	
NO.	RECOMMENDATION	EVALUATION
1	Establish and/or strengthen national drug authorities, placing them at a high political level, with the mission to coordinate the effective planning and implementation of national drug policies.	COMPLETE
2	Design, implement, strengthen and update national evidence-based strategies and policies on drugs.	COMPLETE
3	Establish and/or strengthen National Observatories on Drugs or similar technical offices to develop national drug information systems and foster scientific research on this subject.	PARTIALLY COMPLETE
	DEMAND REDUCTION	
4	Develop and implement comprehensive demand reduction policies, plans and/or programs.	PARTIALLY COMPLETE
5	Design and implement a comprehensive system of evidence-based universal, selective, and indicated prevention programs, with measurable objectives, aimed at distinct target populations, including at-risk groups.	STARTED
6	Promote the integration of treatment and recovery plans and programs into the public health system and address drug dependence as a chronic, relapsing disease.	MOSTLY COMPLETE
7	Facilitate access for drug-dependent persons to a system of drug treatment, rehabilitation, social reintegration, and recovery services that are evidence-based and follow internationally-accepted quality standards.	PARTIALLY COMPLETE
8	Explore the means of offering treatment, rehabilitation, social reinsertion and recovery support services to drug-dependent criminal offenders as an alternative to criminal prosecution or imprisonment.	STARTED
9	Strengthen governmental relationships with academic and research institutions and specialized non-governmental organizations (NGOs), in order to generate evidence on the demand for drugs.	COMPLETE
10	Promote and strengthen training and continuing education of professionals, technicians and others involved in the implementation of demand reduction activities.	MOSTLY COMPLETE



	SUPPLY REDUCTION			
11	Adopt and/or improve comprehensive and balanced measures aimed at reducing the illicit supply of drugs.	NOT APPLIED		
12	Adopt and/or improve data collection and analysis mechanisms with a view to carrying out assessments that will facilitate the development of public policies aimed at illicit supply of drugs reduction.	NOT APPLIED		
13	Promote studies and research that contribute to the early identification and monitoring of new and emerging trends that could provide updated information on the illicit supply of drugs.	NOT APPLIED		
14	According to the needs of each country, adopt comprehensive measures, such as integral and sustainable alternative development and law enforcement initiatives.	NOT APPLIED		
15	Promote actions to reduce the negative impact on the environment caused by the world drug problem, in accordance with national policies.	NOT APPLIED		
	CONTROL MEASURES			
16	Implement programs to prevent and reduce the illicit production of synthetic and plant-based drugs.	MOSTLY COMPLETE		
17	Adopt or strengthen control measures in order to prevent the diversion of controlled chemical substances towards illicit activities.	PARTIALLY COMPLETE		
18	Adopt or strengthen control measures to prevent the diversion of narcotics, psychotropic substances, pharmaceutical products with psychoactive properties and those used in the production of synthetic drugs.	COMPLETE		
19	Ensure the adequate availability of narcotics needed for medical and scientific use.	MOSTLY COMPLETE		
20	Strengthen national organizations for the control of illicit drug trafficking and related crimes.	MOSTLY COMPLETE		
21	Identify new trends and patterns regarding illicit drug trafficking and related crimes.	MOSTLY COMPLETE		
22	Promote improvements in information systems on illicit drug trafficking and related crimes.	PARTIALLY COMPLETE		
23	Adopt measures for effective cooperation in criminal investigations, investigation procedures, collection of evidence, and the exchange of intelligence information among countries, assuring due respect for the various national legal systems.	MOSTLY COMPLETE		
24	Adopt or strengthen, as applicable, control measures for the illicit trafficking of firearms, munitions, explosives, and other related materials associated with illicit drug trafficking.	MOSTLY COMPLETE		

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25	Establish, update, or strengthen legislative and institutional frameworks in matters of prevention, detection, investigation, and prosecution of money laundering.	COMPLETE
26	Create or strengthen, in accordance with national legislation, the competent national organizations for the management of seized and/or forfeited assets, and the disposition of forfeited assets.	NOT STARTED
	INTERNATIONAL COOPERATION	
27	Reaffirm the principle of cooperation contained in international instruments to address the world drug problem, through actions to ensure compliance and effectiveness.	PARTIALLY COMPLETE



GLOSSARY

I. INSTITUTIONAL STRENGTHENING

Relevant actors: includes civil society, scientific community, university based researchers, government at the national, regional and local levels.

II. DEMAND REDUCTION

Alternatives to incarceration: vary from jurisdiction to jurisdiction, but most involve suspension of the judicial process provided the offender volunteers to participate in a monitored drug treatment program.

Available evidence: use of information, from different sources, to support an effect with an adequate degree of confidence, so that it can be used as a basis for a particular recommendation. The quality of the information sources will indicate the level of confidence for the estimate of the effect.

Comprehensive (prevention) system: organizations and programs that provide addiction prevention services, and are interconnected with each other and with several organizations, programs and channels that provide support services.

Indicated prevention programs: a set of actions targeting persons who use drugs.

Public health system: Includes all organizations, institutions and resources whose principal objective is to carry out activities designed to improve health. The majority of national health systems include the public, private, traditional and informal sectors. The four primary functions of a health system include: provision of services, generation of resources, financing and management.

Selective prevention programs: a set of actions targeting a specific segment of the population, which, because of personal, social, family, or socio-cultural and related characteristics, is vulnerable to the diverse risk factors leading to drug use.

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Social reinsertion: any social intervention with the aim of integrating former or current problem drug users into the community. The three 'pillars' of social reinsertion are (1) housing, (2) education and (3) employment (including vocational training). May also be referred to as "social re-integration."

Universal prevention programs: a set of preventive actions targeting the entire population independent of risk.

III. SUPPLY REDUCTION

Regulatory framework: the set of established laws and regulations that governs the activities of the institutions responsible for the formulation, development and application of drug supply reduction policies and/or programs.

Risk factors: risk factors are those conditions that contribute to the emergence or strengthening of illicit activities and/or to the neutralization of law enforcement activities.

Social inclusion: a situation which ensures that all citizens, without exception, are able to exercise their rights, use their skills, and take advantage of opportunities available to them.

Vulnerable populations: those sectors or population groups that, due to poverty, ethnic origin, health, age, gender or disability, are unable to develop and improve their circumstances. This vulnerability places such persons at a disadvantage with regard to exercising their full rights and freedoms.

IV. CONTROL MEASURES

Drug characterization and impurity profiling: use of scientific laboratory information in support of law enforcement operation work, aimed at establishing links between drug samples. It consists of the systematic collection and sharing, in a standardized form, of physical and chemical information on a drug seizure, including the analysis and use of trace impurities to link different drug samples.





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