

# United States of America

## Evaluation of Progress in Drug Control 2005-2006

# MEM

**Multilateral Evaluation Mechanism**



**Organization of American States - OAS**  
**Inter-American Drug Abuse Control Commission - CICAD**





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**ORGANIZATION OF AMERICAN STATES (OAS)  
Inter-American Drug Abuse Control Commission (CICAD)**

**Multilateral Evaluation Mechanism (MEM)  
Governmental Expert Group (GEG)**

**UNITED STATES OF AMERICA**

**EVALUATION OF PROGRESS IN DRUG CONTROL  
2005–2006**

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- White House Office of National Drug Control Policy (ONDCP)
- US Department of State
  - Bureau for International Narcotics and Law Enforcement Affairs (INL)
  - Bureau of Political-Military Affairs (PM)
  - Office of Defense Trade Controls Policy (DTCP)
- US Coast Guard
- US Department of Education
  - Office of Safe and Drug-Free Schools
- US Department of Health and Human Services
  - Substance Abuse and Mental Health Services Administration (SAMHSA)
  - Center for Substance Abuse Prevention (CSAP)
  - Center for Substance Abuse Treatment (CSAT)
  - Office of Pharmacologic and Alternative Therapies (OPAT)
  - National Institutes of Health (NIH)
  - National Institute on Drug Abuse (NIDA)
- US Department of Homeland Security
  - Bureau of Immigration and Customs Enforcement
- US Department of Justice
  - Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF)
  - Criminal Division, Narcotic & Dangerous Drug Section
  - Drug Enforcement Administration (DEA)
  - El Paso Intelligence Center (EPIC)
  - Office of Diversion Control
  - National Institute of Justice
  - Office of Justice Programs
    - Office of Juvenile Justice and Delinquency Prevention
    - Office of Justice Assistance
- National Highway Traffic Safety Administration (NHTSA)
- Centers for Disease Control and Prevention
  - National Center for Health Statistics
  - Division of Vital Statistics



## PREFACE

The Multilateral Evaluation Mechanism (MEM) is a diagnostic tool designed by all 34 member states of the Organization of American States (OAS) to periodically carry out comprehensive, multilateral evaluations of the progress of actions taken by member states and by the hemisphere as a whole, in dealing with the drug problem. The Inter-American Drug Abuse Control Commission (CICAD), an OAS specialized agency, implemented this Mechanism in 1998, 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 vehicle for disseminating information on the progress achieved by individual and collective efforts of OAS member state governments, catalyzing hemispheric cooperation, promoting dialogue among member state government authorities and precisely channeling assistance to areas requiring greater attention by optimizing resources. The MEM process itself is assessed by the Intergovernmental Working Group (IWG), comprised of delegations from the 34 member states, which meets before the onset of each MEM evaluation round to review and improve all operational aspects of the mechanism, including the indicators of the evaluation questionnaire.

National evaluation reports are drafted by experts from each member state, with experts not working on their own country's report, guaranteeing the transparent multilateral nature of the MEM. Each chapter is based on countries' responses to a questionnaire of indicators covering the main thematic areas of institution building, demand reduction, supply reduction and control measures<sup>1</sup> as well as subsequent comments and updated information provided by the government-appointed coordinating entities.

This report covers the full country evaluation for the MEM Fourth Round evaluation period 2005–2006. The follow-up report on the implementation progress of recommendations assigned to the United States of America will be published in June 2009. All MEM reports can be accessed through the following webpage: [www.cicad.oas.org](http://www.cicad.oas.org).

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<sup>1</sup> Information for the money laundering sub-section was also taken from the Financial Action Task Force (FATF) Summary of the Third Mutual Evaluation Report on Anti-Money Laundering and Combating the Financing of Terrorism report on the United States of America (2006).



## INTRODUCTION

The United States of America (US) has a total area of 9,629,091 km<sup>2</sup>, including 12,034 km of borders (with Canada 8,893 km – includes 2,477 with Alaska – and with Mexico 3,141 km) and 19,924 km of coastline. The country has a population of 298,444,215 (July 2006) with the main ethnic groups: white, black, hispanic, asian and indigenous. The US is the world's largest economy and third largest country by land area. It has a labor force of 149.3 million people, a 99 percent literacy rate, a per capita GDP of US\$42,000 (2006) and is a market-oriented economy. The country's exports include motor vehicles and parts, industrial machinery, aircraft, agricultural products, and telecommunications equipment. The United States is a constitutional-based federal republic divided into 50 states, 1 district, and numerous territories.

## I. INSTITUTIONAL STRENGTHENING

### A. National Anti-Drug Strategy

The United States of America (US) has a National Drug Control Strategy (NDCS), which is reviewed and approved annually by the President. The latest Strategy during the 2005–2006 evaluation period was released in February 2006. This strategy covers actions in the areas of demand reduction, supply reduction, development programs related to the prevention or reduction of illicit crops and production or trafficking of drugs (as part of the country's international efforts, but not domestically), control measures, money laundering, and program evaluation.

The NDCS is developed by the Office of National Drug Control Policy (ONDCP) of the White House, in conjunction with other federal agencies involved in drug control, and in consultation with members of the US Congress, state and local officials, foreign governments and domestic non-governmental organizations (NGOs). The country reports that 8 of 51 states or territories have implemented anti-drug plans benefiting 39,615,214 inhabitants (13.3% of the total US population). During the evaluation period, 2005–2006, the Office of National Drug Control Policy began a program in which it assisted more than 25 of the largest cities in the United States with the development of local anti-drug plans. During the reporting period three of these plans were completed, with the others in various stages of development.

There is a budget for financing the NDCS, the sources of which are: direct allocation from the central government, specific budget from other public agencies for the drug area, and self-financing. The budget for the Strategy increased over the evaluation period, as shown below:

**National Drug Control Strategy Budget, 2004–2006<sup>2</sup>**  
(millions)

Area	Approved budget (US\$)			Executed budget (US\$)		
	2004	2005	2006	2004	2005	2006
Demand Reduction	\$5,377.3	\$5,079.2	\$4,810.4	\$4,984.2	\$5,005.1	\$4,804.4
Supply Reduction	\$6,705	\$7,083.5	\$7,764.7	\$6,883.2	\$7,637.2	\$8,194.8
Total	\$12,082.3	\$12,162.7	\$12,575.1	\$11,867.4	\$12,642.3	\$12,999.2

<sup>2</sup> Web address for national drug budgets: <http://www.whitehousedrugpolicy.gov/policy/budget.html>



The ONDCP established by the Anti-Drug Abuse Act in 1988, is a component of the Executive Office of the President and is the national authority that coordinates national anti-drug policies. The US has indicated that the ONDCP has an independent annual budget considered adequate by the country. The budget for the years 2004–2006 is as follows:

**ONDCP annual budget, 2004–2006  
(millions)**

Year	Proposed budget (US\$)	Total budget received (US\$)
2004	\$523.6	\$522.2
2005	\$511.0	\$507.0
2006	\$267.5	\$474.0

**CICAD notes that the US has a National Drug Control Strategy (NDCS). The executed budget for the NDCS grew from \$12.1 billion in 2004 to \$12.5 billion in 2006, primarily due to increased resources for supply reduction. Spending on demand reduction showed little change from 2004 to 2005, and a decreased budget for 2006 was reported for this component of the strategy. The budget for the Office of National Drug Control Policy (ONDCP) decreased from 2004 to 2006, but is reported by the country to be adequate.**

## **B. International Conventions**

The US has ratified the following international conventions:

- Inter-American Convention on Mutual Assistance in Criminal Matters, 1992 (January 05, 2001)
- Inter-American Convention against Corruption, 1996 (September 15, 2000)
- United Nations Single Convention on Narcotic Drugs, 1961, as amended by the 1972 Protocol (Nov. 1, 1972)
- United Nations Convention on Psychotropic Substances, 1971 (April 16, 1980)
- United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988 (February 20, 1990)
- United Nations Convention against Transnational Organized Crime, 2000 (November 3, 2005)
  - Protocol against the Smuggling of Migrants by Land, Sea and Air
  - Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children
- United Nations Convention against Corruption, 2003 (October 30, 2006).

The Inter-American Convention against Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives and Other Related Materials- CIFTA (1997) was signed by the US on November 14, 1997 but is still pending ratification. The country has not acceded to the United Nations Convention on the Law of the Sea (1982) and the Protocol against the Illicit Manufacturing of and Trafficking in Firearms, their Parts, and Components and Ammunition of the United Nations Convention against Transnational Organized Crime (2000).





The US has bilateral cooperation agreements with 127 countries, three of which were signed during the evaluation period and five of which are not yet in force. The country has signed Mutual Legal Assistant Treaties with 58 countries, of which six have yet to come into force.

**CICAD notes progress made by the US in the ratification of the United Nations Convention against Transnational Organized Crime (2000) and two of its protocols in November 2005, and the United Nations Convention against Corruption (2003) in October 2006.**

**CICAD continues to be concerned that no progress has been made towards ratification of the Protocol against the Illicit Manufacturing of and Trafficking in Firearms and their Parts and Components and Ammunition of the UN Convention against Transnational Organized Crime, which was recommended for signature during the Second Evaluation Round, 2001–2002 and the Third Evaluation Round, 2003–2004. Similarly, there has been no progress towards ratifying the Inter-American Convention against Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives and other Related Materials (CIFTA), that was first noted during the First Evaluation Round, 1999–2000.**

### **RECOMMENDATIONS:**

1. **RATIFY THE INTER-AMERICAN CONVENTION AGAINST ILLICIT MANUFACTURING OF AND TRAFFICKING IN FIREARMS, AMMUNITION, EXPLOSIVES AND OTHER RELATED MATERIALS (CIFTA), A RECOMMENDATION REITERATED FROM THE FIRST EVALUATION ROUND, 1999–2000.**
2. **ACCEDE TO THE PROTOCOL AGAINST THE ILLICIT MANUFACTURING OF AND TRAFFICKING IN FIREARMS, THEIR PARTS AND COMPONENTS AND AMMUNITION, OF THE UNITED NATIONS CONVENTION AGAINST TRANSNATIONAL ORGANIZED CRIME (2000), A RECOMMENDATION REITERATED FROM THE SECOND EVALUATION ROUND, 2001–2002.**
3. **ACCEDE TO THE UNITED NATIONS CONVENTION ON THE LAW OF THE SEA. (1982)**

### **C. National Information System**

The Office of National Drug Control Policy (ONDCP) is the centralized office responsible for organizing, compiling and coordinating drug-related information. During 2004–2006, the country carried out a number of priority studies, including annual Surveys of Secondary School Students and National Household Surveys.

The country provides the following information regarding the availability of indicators necessary to carry out a study on the cost of drugs in the country:





Indicators necessary to carry out a study on the cost of drugs	2004	2005	2006
Number of requests for drug treatment in public & private institutions	X	X	X
Number of drug-related deaths or serious injuries	X	X	X
Number of convictions and length of sentence for drug trafficking	X	X	X
Substance use studies in general population, among students, or in workplace	X	X	X
Direct government expenditure related to drugs	X	X	X
Number of substance-use induced hospital admissions and length of stay	X	X	X
Number of persons undergoing drug treatment, type of treatment, and length of treatment	–	X	–
Premature death costs in terms of productivity	X	X	X
Arrests for possession and use of psychoactive substances	X	X	X
Number of persons imprisoned for crimes or offenses connected with substance abuse	X	X	X
Absenteeism costs	–	X	X

The country distributes information on drug prevention, treatment and rehabilitation programs, through web sites, press, and media, publications by the national drug authority and other government agencies, and documents that can be downloaded from ONDCP’s web site<sup>3</sup>. Drug-related information is available to the general public through:

- The ONDCP web site — resource for all sources of information related to U.S. drug policy, from state and local efforts to long range research projects.
- The Substance Abuse and Mental Health Administration (SAMSHA)<sup>4</sup> Substance Abuse Treatment Hotline — provides location and contact information for licensed, certified drug treatment facilities in the U.S. This hotline uses confidential web-based and telephone services.

**CICAD notes that the country has an adequate drug-related coordination, collection and data analysis system. Further, CICAD recognizes the country’s efforts to disseminate drug-related information using various means and mechanisms that target different key groups.**

## II. DEMAND REDUCTION

### A. Prevention

Drug abuse prevention programs are being implemented in the US, targeting key populations and are in general compatible with the CICAD Hemispheric Guidelines on School-based Prevention. During the years 2004–2006, the US carried out a number of prevention programs targeting school

<sup>3</sup> For additional information see <http://www.whitehousedrugpolicy.gov/publications/index.html>.

<sup>4</sup> US Department of Health and Human Services.



children and youth at the pre-school, primary, secondary, and university levels. Nevertheless, the country indicates that it does not routinely collect data on the coverage of the target populations. Prevention programs were also carried out, targeting other key populations, including community-based programs for youth outside the school system, youth at risk of becoming delinquent, indigenous groups, and drug use in the workplace. Regarding these programs, the US also indicates that there is no data related to the number of participants. The lack of information on coverage of participants of the various prevention programs limits the evaluation of the country's activities in this area. In addition, community-based programs exist at various levels of government and non-governmental organizations across the country, but information on them is not centralized.

The US offers specialized training in drug abuse prevention and treatment for substance abuse professionals, prevention specialists, college students, and criminal justice practitioners. The US provided data for the following courses in the treatment area:

#### Specialized training, 2004–2006

Name of short refresher courses or in-service training	Participants	Number of participants		
		2004	2005	2006
<b>Department of Justice</b>				
Drug Court Planning Initiative	Criminal justice practitioners	211	215	100
Drug Court Training Initiative	Criminal justice practitioners	600	1,000	800
Meth Regional Planning Meetings	Criminal justice practitioners	0	0	200

The US reports that diplomas and undergraduate university degrees were offered in prevention and treatment at various colleges and universities in Medicine; Psychology; Nursing School; Social Work; Sociology; Public Health and other disciplines that include content on substance abuse treatment and prevention. The country indicates that many universities offer graduate level courses and/or degrees in (or related to) preventing and treating addiction. Regional and international training abroad is offered through the International Coalition for Addictions Studies Education (INCASE). The country reports that the courses offered meet the national demand for professional training in prevention and treatment.

During the years 2004–2006, the US has carried out the following evaluations of its substance abuse prevention programs.



**Evaluations of substance abuse prevention programs, 2004–2006**

<b>Program/population evaluated</b>	<b>Title of evaluation performed</b>	<b>Type of evaluation performed/ methodology used</b>	<b>Year of program evaluation</b>
<b>US Department of Justice</b> School based prevention	Evaluation of Promising Programs for Substance Abuse Prevention	Outcome Evaluation (Quasi-experimental)  Conducted by PIRE (Pacific Institute for Research and Evaluation)	2004–2007
<b>SAMSHA/DHHS</b> SPF-State Incentive Grant Program	SPF-SIG Cross Site Evaluation	Process	2009–results due out
<b>US Department of Education</b> School-based prevention programs:  Safe and Drug-Free Schools and Communities Act (SDFSCA) State Grants program  Safe Schools/Healthy Students	Assessment of the extent to which SDFSCA State Grants program funds are used to support research-based programs  Safe Schools/Healthy Students Studies	Process evaluation  These studies look at desired outcomes, but do not use an experimental or quasi-experimental design.	2004–2006  First study began in 2000 and is nearly complete. The second was initiated in 2005 and is on-going.

During the years 2004–2006, the US has conducted research on the long-term impact of prevention programs through public and private institutions, non-governmental organizations (NGOs), and universities. In addition, the Prevention Research Branch of the Division of Epidemiology, Services and Prevention Research of the National Institute on Drug Abuse (NIDA) funds four types of Prevention Research: Basic Prevention, Efficacy and Effectiveness, Systems and Methodology.

The country reports that SAMHSA maintains a website for Model Programs<sup>5</sup> that have been tested in communities, schools, social service organizations, and workplaces nationwide, and have provided solid proof that they have prevented or reduced substance abuse and other related high-risk behaviors.

**CICAD recognizes the broad range offered by the US of curricula, programs, and training devoted to drug abuse prevention and evaluation, with particular emphasis on children and youth. However, CICAD notes that there is insufficient information to assess the extent of coverage of the target populations.**

<sup>5</sup> For additional information see <http://modelprograms.samhsa.gov>



## **RECOMMENDATION:**

4. **ESTABLISH A NATIONAL REGISTER OF PREVENTION PROGRAMS TO INCLUDE THE NATURE, NUMBER OF PARTICIPANTS, AND COVERAGE OF THE DIFFERENT PROGRAMS, A RECOMMENDATION REITERATED FROM THE THIRD ROUND OF EVALUATION, 2003–2004.**

### **B. Treatment**

The US has established guidelines for standards of care for drug abuse treatment on a national, state and local level. These guidelines are mandatory regulations for the Opioid Drugs in Maintenance and Detoxification Treatment of Opiate Addiction. Otherwise, the country indicates that application of the standards of care for drug abuse treatment is not required by law.

The US Department of Health and Human Services through its Office of Applied Studies of the Substance Abuse and Mental Health Services Administrations (SAMHSA) maintains a registry of treatment facilities and programs. Additionally, it has the respective instruments for accrediting treatment services and is in charge of their accreditation. Treatment programs are accredited by some states and by several non-governmental organizations. The US indicates that evaluation of the quality of treatment services is carried out every three years. Drug treatment personnel in the US receive ongoing training in their specialties through in-house and national training opportunities.

The country reports the availability of the following treatment modalities: 1,637 public and 9,216 private ambulatory (outpatient) programs, and 635 public and 4,118 private residential (in-patient) programs. In all cases, no specification of target population by gender is provided for these treatment modalities. Regarding treatment services, the country indicates the availability of 445 public and 2,379 private detoxification services, and 1,866 public and 11,329 private treatment and rehabilitation services.

In addition, through the US Department of Justice there are 1,755 specialized drug courts. The US reports on prison-based treatment services with drug dependency, counseling, and awareness programs, but data for the evaluation period are unavailable. The country has the following treatment centers providing services to specific populations<sup>6</sup>: women—4,054 (1,888 for pregnant or postpartum women); adolescents—4,164; prisoners—3,659; adult drug courts—985; juvenile—386; family—196; DWI—74; reentry—44; tribal—65; and campus—2.

The country indicates that evaluations of the impact and effectiveness of drug abuse treatment, rehabilitation and after-care programs have been carried out.

Regarding the evaluations of drug abuse treatment and rehabilitation programs conducted during the years 2004–2006, the US has provided the following:

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<sup>6</sup> For more information on drug courts in the US, see <http://www.ojp.usdoj.gov/BJA/grant/drugcourts.html>



**Evaluations of drug abuse treatment and rehabilitation programs, 2004–2006**

Program/population evaluated	Title of evaluation performed	Type of evaluation performed, methodology used	Year of program evaluation
Adult Males in Prison (NIJ)*	Prison-based Therapeutic Communities Evaluation	Experimental random assignment	Funded in 2002, draft report under revision
Juvenile Breaking the Cycle (NIJ)	Evaluation of the Juvenile Breaking the Cycle Program	Quasi-experimental design with a non-equivalent comparison group	1999–2005
Drug Court participants (BJA)**	National Drug Court Evaluation: Multi-Site Longitudinal Study	Outcome	2002–2008
Offender-Reentry Programming (BJA)	Multi-site evaluation of the Serious and Violent Offender Reentry initiative	Outcome	2002–2008

\* National Institute of Justice

\*\* Bureau of Justice Administration, US Department of Justice

As shown below, the number of patients receiving treatment and the number of treatment programs increased from 2004 to 2005.

**Patients Receiving Treatment and Treatment Programs<sup>7</sup>**

Patients and Treatment Programs	2004	2005
Number of patients (in millions)	1.07	1.08
Number of treatment programs	13,454	14,047

**CICAD acknowledges the extensive array of treatment programs and increases in the number of patients treated and in the number of treatment programs. CICAD recognizes that the country has conducted several evaluations on the impact and effectiveness of the demand reduction programs. While recognizing the existence of guidelines for minimum standards of care, CICAD is concerned that the US has not demonstrated progress in terms of ensuring the mandatory nature of the minimum standards of care for drug abuse treatment nationwide, as recommended during the Second Evaluation Round, 2001–2002.**

<sup>7</sup> National Survey of Substance Abuse Treatment Services (NSSATS): 2004.



## **RECOMMENDATION:**

5. **ADOPT THE NECESSARY MEASURES TO ENSURE THE MANDATORY NATURE OF THE MINIMUM STANDARDS OF CARE FOR DRUG ABUSE TREATMENT NATIONWIDE, A RECOMMENDATION REITERATED FROM THE SECOND EVALUATION ROUND, 2001 - 2002.<sup>8</sup>**

### **C. Statistics on Consumption**

The US reports that prevalence and incidence studies are carried out on a yearly basis among the general population, as well as specific populations. Regarding the results of these studies conducted in the year 2005, the US provided prevalence and incidence studies in the general population 12 years or older, and studies on prevalence and incidence for youth 12–17 years old and for 10<sup>th</sup> graders<sup>9</sup>.

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<sup>8</sup> Within the framework of the forty-second regular session of CICAD, 27–30 November 2007, the country provided the following statement: “The United States notes that SAMHSA’s Center for Substance Abuse Treatment has developed a series of documents entitled “Treatment Improvement Protocols” (TIPs) which are best practice guidelines for the treatment of substance abuse. The United States has also promulgated regulations that require all treatment programs that use an FDA-approved medication such as methadone or buprenorphine for the treatment of opioid addiction to meet specified minimal standards of care and to maintain accreditation. In a Federal system such as that in the United States, other standards are generally left to the individual States.”

<sup>9</sup> For these studies, the US provided the following bibliographical references: Substance Abuse and Mental Health Services Administration. (2006). Results from the 2005 National Survey on Drug Use and Health: National Findings (Office of Applied Studies, NSDUH Series H-30, DHHS Publication No. SMA 06-4194). Rockville, MD.  
Johnston, L. D., O’Malley, P. M., Bachman, J. G., & Schulenberg, J. E. (2006). Monitoring the Future National Survey Results on Drug Use, 1975–2005: Volume I, Secondary school students (NIH Publication No. 06-5883). Bethesda, MD: National Institute on Drug Abuse.



**Drug use prevalence in the general population (2005)**

Type of drug	Lifetime (percentage)			Last 12 months (percentage)			Last 30 days (percentage)		
	M	F	Total population	M	F	Total population	M	F	Total population
Alcohol	86.3	79.8	82.9	70.3	62.8	66.5	58.1	45.9	51.8
Tobacco	78.3	63.8	70.8	42.3	28.0	34.9	35.8	23.4	29.4
Solvents & Inhalants	12.5	6.4	9.4	1.1	0.7	0.9	0.3	0.2	0.3
Marijuana or Hashish	45.0	35.5	40.1	13.1	7.9	10.4	8.2	4.0	6.0
Hallucinogens	17.3	10.7	13.9	2.1	1.1	1.6	0.6	0.3	0.4
LSD	11.9	6.7	9.2	0.3	0.1	0.2	0.1	0.0	0.0
PCP	3.8	1.7	2.7	0.1	0.1	0.1	0.0	0.0	0.0
Heroin	2.0	0.9	1.5	0.2	0.1	0.2	0.1	0.0	0.1
Cocaine HCL	17.3	10.6	13.8	3.0	1.6	2.3	1.3	0.7	1.0
Crack	4.3	2.3	3.3	0.7	0.4	0.6	0.4	0.2	0.3
Tranquilizers / Sedatives/ Depressants	9.4/ 4.5/–	7.9/ 2.9/–	8.7/ 3.7/–	2.2/ 0.3/–	2.1/ 0.3/–	2.2/ 0.3/–	0.8/ 0.1/–	0.7/ 0.1/–	0.7/ 0.1/–
Barbiturates	–	–	1.3	–	–	–	–	–	–
Benzodiazepines	–	–	8.1	–	–	–	–	–	–
Stimulants	8.9	6.9	7.8	1.2	1.1	1.1	0.4	0.4	0.4
Amphetamines	–	–	3.7	–	–	–	–	–	–
MDMA (Ecstasy)	5.5	4.0	4.7	1.0	0.6	0.8	0.3	0.2	0.2
Methamphetamines	5.3	3.3	4.3	0.6	0.4	0.5	0.2	0.2	0.2
Any illicit drug	50.8	41.6	46.1	16.8	12.1	14.4	10.2	6.1	8.1





**Drug Use incidence in the general population (2005)**  
**(Last 12 months – in percentage)**

Type of drug	M	F	Total population
Alcohol	10.9	8.3	9.3
Solvents & Inhalants	–	–	0.4
Marijuana or Hashish	1.5	1.4	1.4
Hallucinogens	–	–	0.5
LSD	–	–	0.1
PCP	–	–	0.0
Heroin	–	–	0.0
Cocaine HCL	–	–	0.4
Crack	–	–	0.1
Tranquilizers / Sedatives/ Depressants	–	–	0.6/ 0.1/–
Stimulants	–	–	0.3
MDMA (Ecstasy)	–	–	0.3
Methamphetamines	–	–	0.1
Any illicit drug	2.2	2.2	2.2



**Drug use prevalence in specific populations (2005)**  
**(Population surveyed: 10<sup>th</sup> graders)**

Type of drug	Lifetime (percentage)	Last 12 months (percentage)			Last 30 days (percentage)		
	Total	M	F	Total	M	F	Total
Alcohol	63.2	—	—	56.7	32.8	33.6	33.2
Tobacco (Cigarettes)	38.9	—	—	—	—	15.1	14.9
Solvents & Inhalants	13.1	5.0	6.9	6.0	—	—	2.2
Marijuana and Hashish	34.1	28.1	24.9	26.6	—	—	15.2
Hallucinogens	5.8	4.8	3.1	4.0	—	—	1.5
LSD	2.5	1.9	1.0	1.5	—	—	0.6
Other hallucinogens	5.2	4.2	2.9	3.5	—	—	1.3
Heroin	1.5	1.1	0.8	0.9	—	—	0.5
Other Opioids	—	—	—	—	—	—	—
OxyContin	—	3.4	3.0	3.2	—	—	—
Vicodin	—	5.5	6.2	5.9	—	—	—
Cocaine HCL	5.2	3.6	3.3	3.5	—	—	1.5
Crack	2.5	1.6	1.7	1.7	—	—	0.7
Other Cocaine Type	4.6	3.3	2.7	3.0	—	—	1.3
Tranquilizers / Sedatives/ Depressants	7.1	4.3	5.3	4.8	—	—	2.3
Flunitrazepam (Rohypnol®)	—	0.3	0.6	0.5	—	—	—
GHB (Gamma hydroxybutyric acid)	—	—	—	0.8	—	—	—
Ketamine	—	—	—	1.0	—	—	—
Amphetamines	11.1	6.6	9.0	7.8	—	—	3.7
MDMA (Ecstasy)	4.0	2.6	2.5	2.6	—	—	1.0
Methamphetamines	4.1	2.6	3.0	2.9	—	—	1.1
Any illicit drug	38.2	30.5	28.9	29.8	—	—	17.3



**Drug use incidence in specific populations, 2005  
(Population surveyed: 10<sup>th</sup> graders)**

Type of drug	Last 12 months (percentage)
	Total Population
Alcohol	6.5
Tobacco (Cigarettes)	3.6
Marijuana	7.7
Hallucinogens	1.6
LSD	0.4
Other types of hallucinogens	1.7
Heroin	0.3
Cocaine HCL	1.7
Crack	0.6
Tranquilizers	1.9
Amphetamines	2.7

The results of the National Survey on Drug Use and Health (NSDUH) conducted in 2005 on the age of first use of alcohol or any drug in the US for youth 12 years or older who initiated use prior to age 18 are provided in the following table.

**Age of first use, 2005**

Type of Drug	Average Age of First Use For Youth 12 to 17		
	M	F	Total
Alcohol	14.9	14.7	14.8
Solvents & Inhalants	14.1	14.0	14.0
Marijuana	15.1	15.1	15.1
Cocaine HCL	16.2	15.7	15.9



The US has estimates of the percentage of youths that perceive drug use as being harmful to their health and well-being. Apart from occasional use of marijuana, the perceived risk associated with drug use increased between 2004 and 2005 among 12–17 year olds, in accordance to the results of the NSDUH shown in the table below.

**Perceived risk as harmful to their health and well-being**

Category (Age Group: 12–17 yrs)	% of those surveyed who believe that persons who carry out the following activities are at a great risk (or who think that it is quite harmful or very harmful):	
	2004	2005
Often smoke cigarettes	67.5	68.3
Often drink alcoholic drinks	38.1	38.4
Get drunk	61.8	63.8
Occasionally smoke marijuana	35	34.0
Often smoke marijuana	54.7	55.0
Occasionally take cocaine or crack	49.6	48.8
Often take cocaine or crack	79.8	79.9

The country keeps records on alcohol-related traffic accidents and fatal crashes. It reports that 7% of accidents were alcohol related in 2004 and 2005. Further, according to the federal National Highway Traffic Safety Administration's (NHTSA) Fatality Analysis Reporting System, the share of fatal crashes related to alcohol declined from 40% in 2004 to 39% in 2005. The country reports that there are no data available on drug-related accidents or fatal crashes.

The US indicates that guidelines on prevention activities related to alcohol-related accidents are mandatory under state and municipal laws concerned with drunk driving offenses and alcoholic beverage control. Federal guidelines are voluntary and are implemented as guidance and through funding to the states.

The police, media, US Department of Health and civil society organizations are the institutions in charge of carrying out activities to prevent alcohol-related accidents. Impaired drivers are subject to arrest, fines, jail, treatment, vehicle confiscation, driver's license suspension/revocation, education/media campaigns, school based programs, and screening for alcohol use disorders.

**CICAD recognizes that the country undertakes a broad range of surveillance initiatives producing extensive sets of drug use statistics, such as the ongoing National Household Survey on Drug Use and Health, and the student-focused survey, Monitoring the Future.**

**RECOMMENDATION:**

6. **ESTABLISH A NATIONAL SYSTEM TO KEEP RECORDS ON ACCIDENTS RELATED TO DRUG USE, A RECOMMENDATION REITERATED FROM THE THIRD EVALUATION ROUND, 2003–2004.**



### III. SUPPLY REDUCTION

#### A. Drug Production

The US reports that cannabis is grown illicitly within the country, but does not provide an estimate of production during the evaluation period, 2005–2006<sup>10</sup>. It is reported that the total number of plants removed through federal agencies increased over the evaluation period 2005–2006, from 4,412,156 plants in 2004 to 5,817,444 in 2005 and to 6,305,202 in 2006<sup>11</sup>. Indoor cannabis production has been detected in the US. From 2004 to 2006, the number of plants seized nearly doubled, increasing from 203,896 in 2004, to 270,935 in 2005, and to 400,892 in 2006.

The country's Drug Enforcement Administration (DEA) leads 113 state and local law enforcement agencies throughout the US in cannabis eradication and suppression efforts. The Domestic Cannabis Eradication/Suppression Program (DCE/SP) provided US\$13.5 million (2004), US\$14.8 million (2005), and US\$15.1 million (2006) to state and local law enforcement agencies to assist in cannabis eradication efforts<sup>12</sup>.

Regarding organic drugs, the country reports that two small illicit laboratories for hashish were dismantled in 2005. However, there were significant reductions in the number of illicit synthetic drug laboratories<sup>13</sup> dismantled. As shown in the table below, most of those laboratories were small.

**Number of illicit synthetic drug laboratories dismantled, 2004–2006**

Synthetic Drugs	2004			2005			2006		
	S	M	L	S	M	L	S	M	L
LSD	1	0	0	0	0	0	0	0	0
MDMA (Ecstasy & its derivatives)	12	3	1	7	3	3	15	2	1
Amphetamines	1	1	1	0	0	0	3	1	0
Methamphetamines	9,127	835	55	5,502	315	35	3,330	126	15
GHB	6	6	0	2	0	0	7	0	0
Methcathinone	31	3	1	15	1	0	5	0	0
Total	9,178	848	58	5,526	319	38	3,360	129	16

**CICAD notes that the United States has a program supporting the eradication of cannabis cultivation, and continues to dismantle illicit drug laboratories.**

<sup>10</sup> A study to evaluate current technology to detect, identify, and survey cannabis cultivation that was to be published in 2005 is reported to be ongoing.

<sup>11</sup> The country indicates that these results do not include efforts of state or local agencies, which do not report to the federal data system.

<sup>12</sup> Information on the program is available on DEA's website, <http://www.dea.gov/programs/marijuana.htm>.

<sup>13</sup> The country classifies small laboratories as 2 to 8 ounces; medium as 9 ounces to 9 pounds; and large as 10 to 20 pounds.



## B. Control of Pharmaceutical Products

The US has the following laws and regulations for the control of pharmaceutical products: Controlled Substances Act – CSA (1970) and the Code of Federal Regulations 21 Part 1300 to end, which is revised annually. There is a mechanism in place to monitor and prevent the diversion of pharmaceutical products, which is applicable to health professionals and entities authorized to handle these products. The competent authority responsible for coordinating activities related to the control of pharmaceutical products is the Drug Enforcement Administration (DEA) of the US Department of Justice. All pharmaceutical products containing active substances listed in the international conventions are controlled domestically in accordance with the United States' obligations as signatory of these conventions.

US national laws make provisions for penal, civil and administrative sanctions for the diversion of pharmaceutical products.

**Sanctions imposed for the diversion of pharmaceutical products, 2004–2006**

Type of Sanctions	2004	2005	2006
Penal	213 <sup>14</sup>	243	Not available
Civil	32	16	8
Administrative	49	24	12

The control mechanism for pharmaceutical products in the commercial sector includes import/export control, license control, monitoring distribution, inspection, administrative sanctions, registry of licensees and registry of quantities of pharmaceutical products sold. The health care sector of the mechanism includes license control, monitoring distribution, inspection, administrative sanctions and the transfer of unusual cases detected by administrative authorities to judicial authorities. As of the end of 2006, the country reports that Prescription Drug Monitoring Programs are active in 24 states and are being developed in 10 others. During the years 2004–2006, the US has issued the following licenses and permits as well as inspections conducted:

<sup>14</sup> Fiscal year data, ending Sept. 30. Includes criminal cases that resulted in sentences imposed in Federal Courts only (no data available on cases in the 50 states and territories). Source was the United States Sentencing Commission's annual sourcebooks. The United States controls anabolic steroids, and diverted steroids are frequently of pharmaceutical grade, manufactured abroad or domestically. The above data does not include steroids (20 steroids cases in FY-2005 and 12 cases in FY-2004).

**Licenses and permits issued and inspections conducted, 2004–2006**

<b>REGULATORY ACTIVITIES</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>
<b>Number of licenses issued to:</b>			
Importers	4	4	196
Exporters	10	35	249
Manufacturers	7	9	546
Distributors	22	23	900
<b>Number of permits issued for:</b>			
Importation	407	403	348
Exportation	3,221	3,372	2,818
<b>Number of inspections conducted</b>			
Physicians	44	63	106
Dentists	0	0	0
Pharmacists	1	0	0
Veterinarians	0	1	0
Importers	40	34	26
Exporters	41	34	44
Manufacturers	104	86	85
Distributors	211	155	183

The Drug Enforcement Administration Diversion Investigators routinely provide training courses for personnel in the public and private sector on prescribing, dispensing and distributing controlled pharmaceutical products, which satisfies the demand for training in the country. The DEA also hosts several national conferences annually. Automated information management systems facilitate the control of pharmaceutical products by monitoring trends in prescription practices for selected controlled substances.

During 2004–2006, the quantities of pharmaceutical products seized in the US generally increased, as shown in the following table:




**Pharmaceutical products seized, 2004–2006**

Pharmaceutical products	Number of seizures			Quantities seized		
	2004	2005	2006	2004	2005	2006
Oxycodone	331	314	257	17,712 tabs 516 caps 0.20 kg 0.29 l 22 other	21,413 tabs 138 caps <0.01 kg 20 other	59,157.82 tabs 661 caps 0.03 kg 357 other
Hydrocodone	527	591	313	153,088 tabs 1,919 caps 1.21 kg 34.88 l 2 other	199,975 tabs 1,228 caps 7.37 kg 3 other	954,861 tabs 120 caps 1.10 kg 5,395.5 other
Hydromorphone	42	31	18	8,845 tabs 0.02 kg	9,802 tabs 0.48 kg	8,849 tabs
Pentazocine	3	4	1	100 tabs 0.02 kg	40 tabs <.01 kg 6.7 mls	446 tabs
Codeine	103	104	47	9,087 tabs 187 caps 1.32 kg 69.75 l	12,586 tabs 29 caps 20.67 kg 1,344.56 l	3,449.5 tabs 338 caps 0.05 kg 60,880.1 other
Propoxyphene	33	45	15	4,452 tabs 25 caps <.01 kg	3,602 tabs 209 caps 0.11 kg 29 other	3,236.4 tabs 299 caps
Meperidine	27	18	10	43 tabs 3 caps <0.01 kg 0.05 l	48 tabs 21 caps <0.01 kg 0.14 l	13 tabs 14 caps 646.8 other
Methylphenidate	51	23	14	2,211 tabs 240 caps 0.15 kg	1,813 tabs 19 caps <0.01 kg	4,621 tabs 1,872 caps 0.4 kg
Dextroamphetamine	39	49	57	1,024 tabs 544 caps 16.02 kg 0.11 l	20,191 tabs 34 caps 16.7 kg 2 other	1,302,125.55 tabs 1,573.12 caps 42.26 kg 101.8 other
Diazepam	260	218	100	102,862 tabs 0.13 kg 0.18 l 7 other	29,686 tabs 1 caps 0.67 kg 0.24 l 95 other	122,652 tabs 6 caps <0.01 kg 1,728.4 other
Oxazepam	0	0	1	0	0	100 tabs
Flurazepam	4	2	0	77 caps	274 tabs 57 caps	0



Pharmaceutical products	Number of seizures			Quantities seized		
	2004	2005	2006	2004	2005	2006
Alprazolam	427	423	196	160,622 tabs 0.05 kg 0.08 l 0.5 other	67,289 tabs 0.04 kg 59 other	151,458.751 tabs 11 caps 0.08 kg
Estazolam	1	1	0	<0.01 kg	7 tabs	0

During 2004–2006, the following pharmaceutical products were disposed of:

**Pharmaceutical products disposed of 2004–2006\***

Pharmaceutical products	Quantities disposed of		
	2004	2005	2006
Oxycodone	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	17,532.551 tabs 1,546.7 caps 0.03 kg 897.4 other
Hydrocodone	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	105,302.89 tabs 1,299.6 caps 3.68 kg 36,622.2 other
Hydromorphone	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	3,958.5 tabs <0.01 kg
Pentazocine	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	217 tabs <0.01 kg
Codeine	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	4,185.001 tabs 876 caps 21.29 kg 3,378.8 other
Propoxyphene	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	2,884 tabs 428.2 caps <0.01 kg
Meperidine	Included in “Narcotics” under “Other”	Included in “Narcotics” under “Other”	43 tabs 2 caps
Methylphenidate	Included in “Stimulants” under “Other”	Included in “Stimulants” under “Other”	2,118.6 tabs <0.01 kg



**Pharmaceutical products disposed of 2004–2006\***

Pharmaceutical products	Quantities disposed of		
	2004	2005	2006
Dextroamphetamine <sup>15</sup>	107 tabs	17,276 tabs 2 caps 19.68 kg 139 mls 2 other	143,079 tabs 7 caps 17.72 kg 191.3 other
Diazepam	Included in “Tranquilizers” under “Other”	Included in “Tranquilizers” under “Other”	88,784.6 tabs 21.11 kg 63.4 other
Oxazepam	Included in “Tranquilizers” under “Other”	Included in “Tranquilizers” under “Other”	0
Flurazepam	Included in “Tranquilizers” under “Other”	Included in “Tranquilizers” under “Other”	717 caps
Alprazolam	Included in “Tranquilizers” under “Other”	Included in “Tranquilizers” under “Other”	127,361.23 tabs 0.04 kg
Estazolam	Included in “Tranquilizers” under “Other”	Included in “Tranquilizers” under “Other”	0
Others (specify)	97,032 tabs 2,223 caps 5.88 kg 105,058.66 mls 226,671 tabs	117,842 tabs 1,311 caps 24.72 kg 2,435.15 mls 4,316 tabs	—
Narcotics	43 caps 0.01 kg 35 mls	97 caps <0.01 kg 18.98 mls	
Tranquilizers			

\* The above information was only available in the categories listed under “Other” but includes the requested information for the listed drugs.

The US indicates that the sale and distribution of controlled pharmaceutical products or other drugs over the Internet has been identified in the country and its control is a challenge for regulatory and law enforcement authorities. Among other issues, the scope of this type of investigation generally spans state and often international jurisdictions. Web sites that illegally sell pharmaceutical drugs are developed and dismantled by the company in just a few days. Although there is no specific reference to the Internet in the US legislation, the country states that the Controlled Substance Act is applicable to the sale of pharmaceutical products via the Internet.

The country states that the functions and responsibilities of the administrative offices and police entities involved in the prevention and control of the sale of pharmaceutical products and drugs over the Internet have been defined, and lie with the Drug Enforcement Administration (DEA), Food & Drug Administration (FDA), and U.S. Customs and Border Protection.

<sup>15</sup> Amphetamine exhibits may include clandestinely manufactured amphetamines and diversion of pharmaceutical containing amphetamine.



The country states that awareness of the illicit sale of pharmaceutical products and other drugs over the Internet has increased in many ways. Administrative, regulatory, judicial, law enforcement, postal, customs and other agencies increase awareness through a cohesive working relationship. Most law enforcement agencies also have information on their web sites regarding the Internet sale of pharmaceutical drugs. These agencies also routinely provide training to industry and other regulatory and law enforcement agencies.

**CICAD notes the progress that the country has made in the control of pharmaceutical products through the implementation of automated information management systems, the Automation of Reports and Consolidated Order System developed by the DEA, and training courses for personnel in the public and private sectors on prescribing, dispensing and distributing controlled pharmaceutical products.**

**CICAD observes a low number of inspections conducted in comparison with the volume of licenses and permits issued by the country for the handling of pharmaceutical products, and encourages the country to increase its inspection activities.**

### C. Control of Chemical Substances

Legislation to control the use, diversion and trafficking of chemical substances in the US has been in place since 1970, with the Combat Methamphetamine Epidemic Act in 2005 being the most recent. All of the chemical substances listed in the United Nations international conventions are controlled in the US.

The country reports the following number of sanctions issued for the diversion of controlled chemical substances, in accordance with international conventions, for the years 2004 and 2005<sup>16</sup>:

**Sanctions for the diversion of controlled chemical substances, 2004–2005<sup>17</sup>**

Year	Penal <sup>18</sup>	Penal <sup>19</sup>	Civil	Administrative
2004	203	184	14	38
2005	199	180	11	58

There is a mechanism in place to monitor and prevent the diversion of controlled chemical substances applicable to health professionals and other entities authorized to handle these substances. The US reports that responsibility for various aspects of the mechanism is shared by several entities, as indicated in the following table:

<sup>16</sup> Data for 2006 are not available.

<sup>17</sup> Fiscal year data ending Sept. 30. Includes criminal cases that resulted in sentences imposed in Federal Courts only (no data available on cases in the 50 states and territories).

<sup>18</sup> The data represent the number of offenders convicted on any charge involving precursor chemicals (and includes those primarily sentenced for the chemical offense).

<sup>19</sup> The data represent the number of offenders who were primarily sentenced for the chemical offense (as opposed to, for example, an attempt or conspiracy to manufacture controlled substances).

**Entities responsible for monitoring and preventing the diversion of controlled chemical substances**

Component	Responsible Entity
National registry of Licensees	Drug Enforcement Administration U.S. Attorney General
License control (manufacture, distribution)	Drug Enforcement Administration U.S. Attorney General
Import/export control	Drug Enforcement Administration U.S. Secretary of Treasury & U.S. Attorney General
Inspections	Drug Enforcement Administration U.S. Secretary of Treasury
Control of distribution	Drug Enforcement Administration U.S. Attorney General
Control of the final commercialization	Drug Enforcement Administration U.S. Attorney General & U.S. Secretary Health & Human Services
Transport control	Drug Enforcement Administration U.S. Attorney General & U.S. Dept. of Transportation Secretary
Pre-export notifications	Drug Enforcement Administration
Imposition of sanctions	Drug Enforcement Administration U.S. Attorney General

Training courses are offered in the control of the diversion of chemical substances to law enforcement, regulatory, and customs officials to state and local law enforcement through its clandestine laboratory training classes. The Bureau of Immigration and Customs Enforcement (ICE) of the US Department of Homeland Security offers trainings at the High Intensity Drug Trafficking Areas (HIDTA); Organized Crime Drug Enforcement Task Force (OCDETF); Federal Law Enforcement Training Center (FLETC), DEA, California Narcotics Officers' Association (CNOA) and other state training. The country reports that the demand for training is satisfied.

The DEA maintains an automated information management system to capture and store import and export transactions. The US exports, imports and handles chemical substances in transit. Information on the number of pre-export notifications issued and pre-export notifications received by the country is provided in the table below:

**Pre-export notifications issued and received for controlled chemical substances, 2004–2006**

Year	Notifications Issued	Not Approved	Notifications Received
2004	5,076	5%	399
2005	5,820	5%	496
2006	3,868	2%	650

The country initiated 14 investigations in 2004, 35 in 2005, and 30 in 2006. These numbers reflect the fact that the DEA conducts an investigation into all pre-export notifications that are not approved.



The US reports that advance notice for the country's imports has been a benefit of using the pre-export notification, but reports problems with insufficient information while responding to pre-export notifications received during 2004–2006. The country indicated that most pre-export notifications do not contain enough information to match them with DEA records.

The US provides the following information on controlled chemical substances that were seized and disposed of during the years 2004–2006:

**Controlled chemical substances seizures, 2004–2006**

Controlled chemical substances	Number of seizures			Quantities seized		
	2004	2005	2006	2004	2005	2006
Acetic Anhydride	5	10	8	6 L	83 L	77 L
Acetone	4,959	3,043	1,677	1,953,047 L	44,326 L	9,530 L
Ammonia Gas (compressed)	4,612	3,060	1,723	2,207,168 kg	161,474 kg	3,023,713 kg
N-acetyl anthranilic acid	0	0	1	122 kg	5 kg	1 kg
Benzyl Chloride	3	1	0	8 L	4 L	0
Bromobenzine	1	3	4	2 L	0	1 L
Ephedrine	2	10	231	818 kg	1,370 kg	229 kg
Ethylamine	0	0	3	19 L	3 L	<1 L
Ethyl Ether	3,822	2,462	1,292	198,364 L	839 L	1,190 L
Freon	68	47	23	928 kg	969 kg	18 kg
Formamide	-	-	0	102 L	0	0
Gamma Butyrolactone	12	4	0	2,459 L	111 L	0
Hydriodic Acid	594	343	189	17,192 L	1,423 L	142 L
Hydrochloric Acid	5,730	3,550	2,423	56,168,296 L	11,414,192 L	30,266 L
Hydrogen Gas	65	51	19	136 kg	37 kg	21 kg
Hypophosphorous Acid	90	70	26	169 L	763 L	47 L
Iodine	5,198	3,267	1,963	66,827 kg	20,923 kg	1,432 kg
Lithium Metal	3,816	2,557	1,336	952 kg	693 kg	30 kg
Methyl Ethyl Ketone	236	131	77	540 L	1,835 L	111 L
Methylamine	9	5	2	8 L	15 L	1 L
Phenylpropanolamine	4	3	19	1 kg	0	1 kg
1-phenyl-2-propanone	0	0	46	316,660 L	1 L	2 L
Phenylacetic Acid	15	5	4	7 kg	925 kg	<1 kg
Piperidine	3	4	3	13 kg	4 kg	4 kg
Piperonal	0	1	1	0	1 kg	<1 kg
Potassium Metal	8	3	1	12 kg	1 kg	<1 kg

**Controlled chemical substances seizures, 2004–2006**

Controlled chemical substances	Number of seizures			Quantities seized		
	2004	2005	2006	2004	2005	2006
Potassium Permanganate	20	15	10	59 kg	93 kg	143 kg
Pseudoephedrine	36	175	2,114	174,423 kg	82 kg	289 kg
Red Phosphorus	4,073	2,352	1,201	3,023 kg	3,398 kg	1,766 kg
Safrole	0	2	7	18 L	6 L	5 L
Sodium Dichromate	15	9	4	4 kg	1 kg	1 kg
Sodium Hydroxide	4,395	3,030	1,555	5,549 kg	6,447 kg	6,585 kg
Sodium	-	-	8	52 kg	3 kg	1 kg
Sulfuric Acid	2,851	1,909	1,220	523,570 L	446,845 L	3,069,179 L
Thionyl Chloride	17	3	5	117 kg	4 kg	7 kg
Toluene	919	520	296	22,717 L	2,443 L	4,020 L



**Controlled chemical substances disposed of, 2004–2006**

Controlled chemical substances	Quantities disposed of		
	2004	2005	2006
Acetic Anhydride	3.35 kg	4.54 kg	2.17 kg
Acetone	1,880.68 kg	1,956.21 kg	3,693.61 kg
Benzyl Chloride	8.16 kg	0	0
Ephedrine	95.84 kg	721.31 kg	185.92 kg
Ethyl Ether	404.24 kg	595.99 kg	846.01 kg
Ethylamine	15.54 kg	2.27 kg	0
Gamma Butyrolactone	0	2.27 kg	0
Hydriodic Acid	124.67 kg	537.42 kg	194.24 kg
Hydrochloric Acid	1,278.22 kg	1,198.00 kg	1,619.94 kg
Iodine	16,179.41 kg	1,477.31 kg	3,379.90 kg
Iodine (Crystals)	909.13 kg	853.06 kg	1,559.61 kg
Isosafrole	0	0.47 kg	0
Methyl Ethyl Ketone	8.16 kg	12.77 kg	33.60 kg
N-acetylanthranilic Acid	0	4.76 kg	0.65 kg
N-ethylpseudoephedrine	0	0.20 kg	0
N-methylpseudoephedrine	0	0.45 kg	0
Phenylacetic Acid	3.18 kg	5.44 kg	0
Potassium Permanganate	0	86.46 kg	139.78 kg
Pseudoephedrine	163.81 kg	5.08 kg	61.26 kg
Red Phosphorus	2,383.06 kg	941.76 kg	1,451.80 kg
Safrole	6.80 kg	0	0
Sulfuric Acid	1,590.42 kg	2,273.26 kg	2,311.68 kg
Toluene	354.56 kg	467.59 kg	378.41 kg
White Phosphorus	0.45 kg	0	0

**CICAD notes that the country has an automated information management system in place to facilitate the secure and efficient handling of information on the control of the diversion of chemical substances.**



## IV. CONTROL MEASURES

### A. Illicit Drug Trafficking

The US provides information from two different sources, the Drug Enforcement Administration (DEA) and the US Coast Guard, on the number of seizures and the quantities of drugs seized as follows:

**Illicit drug seizures, 2004–2006**

Type of drugs	Number of seizures			Quantities of drugs seized		
	2004	2005	2006	2004	2005	2006
Opium	225	177	203	439 kg	549 kg	300 kg
Morphine	53	111	85	1 kg	13 kg	2 kg
Heroin	2154	2235	2204	2,118 kg	1,751.36 kg	1,785.3 kg
Cocaine	9,863	10,094	10,156	172,808 kg	174,575 kg	154,079 kg
Cocaine Base	70	68	54	133,633 kg	153,730 kg	130,197 kg
Cannabis plants	N/A**	N/A**	N/A**	235,511 plants	284,843 plants	121,882 plants
Leaf Cannabis (grass)	N/A**	N/A**	N/A**	1,192,847 kg	1,122,279 kg	1,151,171 kg
Cannabis Resin (hashish)	741	893	756	211 kg	388 kg	178 kg
Hashish Oil (liquid cannabis)		14	11	—	8.3 kg	1.3 kg
LSD*	40	22	32	4,774 dus	1,115 dus	455 dus
Amphetamine/ methamphetamine	4,423	4,987	4,451	3,893 kg	5,146 kg	4,638 kg
Other amphetamine-like stimulants	222	213	301	52 kg	1,332 kg	1,228 kg
MDMA (Ecstasy) and derivatives	1,073	983	1,091	2,690,117 dus	5,197,939 dus	6,789,569 dus
GHB	N/A**	N/A**	N/A**	30.72 L	68.47 L	6.0 L
Methadone	N/A**	N/A**	N/A**	0.39 L	0.9 L	1.8 L
Steroids	5,658	2,209	1,376	1,289,976 dus	488,238 dus	482,090 dus

\* Dus – dosage units

\*\* N/A – not available

While comprehensive national statistics for federal, state, local, tribal, or territorial prosecutions of illicit drug trafficking are not available, some statistics have been provided from known, discrete data sources, such as the US Department of Justice’s Automated Case Tracking System (ACTS) database and the Executive Office for United States’ Attorneys (EOUSA) database.



As shown in the following table, the number of persons formally charged with illicit drug trafficking in the US declined slightly from 2004 to 2006, while the number convicted increased.

**Persons formally charged with and convicted of illicit drug trafficking, 2004–2006**

Years	Formally charged	Convicted
2004	29,542	25,263
2005	29,859	25,419
2006	28,942	26,972

The country does not have laws or regulations at the Federal, State, or local levels that legalize the illicit possession of drugs for personal consumption. There are also no laws or regulations at the Federal level that legalize non-research related possession of drugs (such as marijuana) for personal use for medical or therapeutic purposes. However, several states have laws that permit the possession of marijuana for personal consumption for medical purposes. The criteria used by the US to distinguish simple possession for personal use from possession for illicit trafficking purposes vary in state, local, tribal and territorial legal systems. When a person is charged with simple possession, there are specialized drug courts that may apply alternative measures.

The country states that special drug courts have been established to take a non-adversarial approach to the adjudication of drug dependent offender cases through close court supervision of monitoring and intensive, continual treatment and rehabilitation. In federal cases, the court has discretion to order, as a condition of supervised release, treatment for drug/alcohol dependency. The number of persons to whom this alternative measure has been applied is not available.

The number of persons formally charged with and convicted of illicit drug possession is reported in the following table.

**Persons formally charged with and convicted of illicit drug possession, 2004–2006**

Year	Formally charged	Convicted
2004	299	193
2005	337	202
2006	239	282

In the US, the DEA and the US Coast Guard are the two national entities responsible for facilitating operational information exchange and collaboration among national and international authorities responsible for controlling illicit drug trafficking.



The number of judicial cooperation and extradition requests (made to other countries) regarding illicit drug trafficking, based on international agreements, and the number of replies granting the request, are summarized in the following table:

**Judicial cooperation and extradition requests, 2004–2006**

Type of Requests	Number of requests made			Number of requests granted		
	2004	2005	2006	2004	2005	2006
US Judicial Requests	77	60	66	39	46	44
Incoming Judicial Requests	38	45	53	47	34	28
US extradition requests	483	360	410	142	186	166
Incoming extradition requests	2	5	9	1	6	6

The central authority in the US responsible for making and receiving extradition requests is the Office of International Affairs, Criminal Division of the US Department of Justice. The US has extradition treaties with each CICAD member state. Extradition of US nationals is permitted under the law.

The US has conducted a broad range of specialized training courses for law enforcement, security, customs officers, prosecutors and the judiciary to address illicit drug trafficking, diversion, clandestine labs, and related criminal activity, such as money laundering. The country reports that training courses delivered during the evaluation period, 2005–2006 satisfied the needs of the country.

**CICAD observes that the country has an adequate legislative and institutional framework for the control of illicit drug trafficking. Recognizing the stated constraints and challenges associated with extradition and judicial cooperation requests, CICAD notes the progress made since the Third Evaluation Round, 2003–2004, and encourages the country to continue efforts to improve international cooperation.**

## **B. Firearms, Ammunition, Explosives and other Related Materials**

The federal agencies with responsibility for controlling the movement of firearms, ammunition, explosives, and other related materials in the country include: the US Department of Justice's Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF); the US Department of State's Office of Defense and Trade Controls (ODTC); and the US Department of Homeland Security's Customs and Border Protection (CBP) Agency.

The country has laws and regulations that criminalize the illicit trafficking in and manufacture of firearms, ammunition, explosives and other related materials. The same legislation establishes administrative controls over the importation of firearms, ammunition, explosives, and other related materials. The US indicates that there are no provisions of US law that criminalize or sanction the manufacturing of firearms parts without a license.

Under terms of the Gun Control Act, the National Firearms Act, and the Organized Crime Control Act, the United States requires authorization for the importation of firearms, ammunition, explosives, and other related materials. The International Traffic in Arms Regulations (ITAR), 123.14– Import Authorization is the current legislation that requires that the importing country first issue the necessary authorizations before the U.S. will issue the export authorization. In addition, these regulations



ensure that before authorizing embarkation of shipments of firearms, ammunition, explosives, and other related materials, the in-transit country has first issued the necessary authorization.

The US reports the following confiscated quantities of illicitly trafficked firearms, ammunition, explosives and other related materials for the years 2004 - 2006.

**Confiscated illicitly trafficked firearms, ammunition, explosives  
and other related materials, 2004–2006**

Year	Firearms	Ammunition	Explosives	Other related materials
2004	7,505	717,456	1,219	225
2005	6,143	428,804	996	713
2006	7,227	264,015	615	649
TOTAL	20,875	1,410,275	2,830	1,587

The country provided the following quantities of firearms, ammunition, explosives and other related materials confiscated in connection with arrests for illicit drug trafficking offenses, for the years 2004 - 2006.

**Firearms, ammunition, explosives and other related materials  
confiscated in connection with arrests for illicit drug trafficking offenses, 2004–2006**

Year	Number of arrests <sup>20</sup>	Firearms	Ammunition	Explosives	Other related materials	Number of operations <sup>21</sup>
2004	3,229	2,571	157,887	164	69	2,083
2005	3,836	3,154	199,387	751	382	2,381
2006	2,494	2,367	112,213	120	358	1,518

The country indicates that it has a national record-keeping system for the exportation and transit of firearms, ammunition, and other related materials. In the case of explosives, the system keeps records for exportation and transit only. The US State Department keeps computerized records for exportation and transit of these materials and for importation of firearms. The ATF keeps non-computerized records for importation of firearms, ammunition, and other related materials. Regarding the record keeping system, the US Department of State system maintains records for firearms by date and description but not serial or lot number.

In the US, four national agencies are responsible for the exchange of information and collaboration with agencies in other countries regarding the control of firearms, ammunition, explosives, and other related materials: the US Department of Justice's Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF); the US Department of Commerce (DOC); the US Department of State's Office of Defense and Trade Controls (ODTC); and the US Department of Homeland Security's Customs and Border Protection agency (CBP).

<sup>20</sup> Persons arrested on drug charge and confiscations occur during that year.

<sup>21</sup> Number of investigations of persons with drug charges.



**CICAD recognizes that the country keeps some records on the importation, exportation, and in-transit movement of firearms, ammunition, explosives and related materials. However, the lack of information from the country in this area has limited the ability to fully evaluate the country's progress. CICAD notes that the country's record keeping system for firearms maintains records by date and description but does not include serial or lot number. With respect to importation of explosives, CICAD is concerned about the absence of a records system, and that the US does not require verification that the exporting country has first issued the necessary license or permit before issuing an import license.**

**CICAD observes that progress has been made in connection with data gathering on confiscated weapons connected with arrests for illicit drug trafficking.**

### **RECOMMENDATIONS:**

7. **ESTABLISH A NATIONAL COMPUTERIZED DATABASE FOR KEEPING RECORDS ON THE IMPORT, EXPORT AND IN-TRANSIT MOVEMENTS OF FIREARMS, AMMUNITION, EXPLOSIVES AND OTHER RELATED MATERIALS, INCLUDING SERIAL AND LOT NUMBERS OF FIREARMS, A RECOMMENDATION REITERATED FROM THE THIRD EVALUATION ROUND, 2003–2004.**

### **C. Money Laundering**

Sections 1956 and 1957 of Title 18 of the United States Code criminalizes four different types of money laundering: basic money laundering; international money laundering (where criminal proceeds are moved into or out of the U.S.); money laundering in the context of an undercover "sting" case (where the money being laundered has been represented by a law enforcement officer as being criminal proceeds); and knowingly spending greater than US\$ 10,000 in criminal proceeds. This legislation, in force since 1986, has been amended frequently to correct problems encountered by the courts and add predicate offenses. The country includes illicit drug trafficking, traffic of firearms, traffic of human beings, organ trafficking, prostitution, pornography, kidnapping, extortion, corruption, terrorism and its financing, fraud and more than 200 offenses committed both in the country and abroad. Notwithstanding criminalization of predicate offenses, money laundering is considered an autonomous offense.

There is no national law authorizing the use of undercover special operations, the use of informants, or controlled deliveries in connection with special investigation activities to repress money laundering. However, these practices have been approved by jurisprudence (judicial precedents) in the Courts. Section 1956(a)(3) of the United States Code specifically provides for the use of such techniques in money laundering prosecutions by allowing a money laundering charge to be brought where law enforcement or its agent has "represented" property to be the proceeds of specified unlawful activity. Electronic surveillance is authorized, but must be ordered by a court. The Code of Criminal Procedure (CCP) in Rule 11 authorizes prosecutors to request reduction of the applicable penalty in cases in which the suspect pleads guilty; and Rule 35 of said Code authorizes requesting sentence reduction in accordance with the accused person's substantial assistance in the investigation or indictment of another person.

The Bank Secrecy Act and the Internal Tax Code subject the following sectors to anti-money laundering reporting and record-keeping rules: banks, money services businesses (money transmission businesses, money order businesses, currency exchanges, and check cashiers), stock exchanges, insurance companies, casinos, real estate agencies, lawyers, notaries, accountants, cross border movements of currency & negotiable bearer instruments, investment funds and insurance



brokers. All financial institutions subject to the Bank Secrecy Act must establish controls to prevent money laundering. In compliance with the Bank Secrecy Act and its regulations, banks, security purchase-sale intermediaries, casinos and money services businesses must report large currency transactions. With respect to cross-border cash transfers, the US has implemented a declaration and disclosure system that applies to incoming or outgoing physical transportations (by person, by container, or by mail) of cash and monetary instruments exceeding U\$10,000. The data collected on the declaration forms is maintained in a computerized database, which is available to all competent authorities involved in AML (anti-money laundering).

Other control measures established in the United States of America for financial institutions and others responsible are: currency transaction reports for currency transactions greater than US\$10,000; verification of client identity; preservation of records; existence of an enforcement official; existence of independent audits; know-your-client policies; and prohibition of anonymous accounts. In addition, the country reports that the Bank Secrecy Act and its implementing regulations contain a number of requirements that address the need to understand a customer's true identity and the nature of the customer's business. The United States of America has not mandated procedures relating to transaction registry and know-your-employee policies in the financial sector.

During the years 2004–2006, the number of persons formally charged and convicted for money laundering offenses in the US was as follows:

**Persons formally charged and convicted of money laundering, 2004–2006**

Fiscal year	Number of Defendants under 18 USC 1956		Number of Defendants under 18 USC 1957	
	Charged	Convicted	Charged	Convicted
2004	2,219	970	455	178
2005	2,127	749	425	326
2006	2,215	1,097	441	225

The U.S. financial intelligence unit is the Financial Crimes Enforcement Network (FinCEN), located within the US Department of Treasury. FinCEN is the entity responsible for receiving, requesting, analyzing and distributing information to the competent authorities concerning transactions that may result in money laundering offenses. FinCEN has its own budget, which was approximately \$74 million in 2006.

The US points out that FinCEN's Analysis and Liaison Division consults commercial, financial and law enforcement data bases in reply to requests by domestic and international law enforcement regulatory authorities and produces pro-active reports. During the 2004 fiscal year, this Division's analyzed 2,861 cases, in 2005 fiscal year 1,707 cases and in fiscal 2006, 1,650 cases.

FinCEN is a member of the Egmont Group and has signed Memoranda of Understanding for the exchange of information with similar units in 16 countries. Notwithstanding, national laws authorize it to share information without the need of signing said documents.





Banks, securities firms, insurance companies and money services businesses<sup>22</sup> (except check cashers) are required to report suspicious transactions to FinCEN, which receives a very substantial number of such reports each year. In addition, a broad range of businesses and entities are required to report large cash transactions of US\$10,000 or more. Federal law provides protection from civil liability for all suspicious activity reports (SARs) made to the appropriate authorities, and “tipping off” is prohibited. As shown below, the number of suspicious transactions has grown over the years from 2004 to 2006, with most growth found in depository institutions and money service businesses.

#### Number of Suspicious Activity Report Filings by Year

Form	2004	2005	2006
Depository Institution	381,671	522,655	567,080
Money Services Business	296,284	383,567	496,400
Casinos and Card Clubs	5,754	6,072	7,285
Securities & Futures Industries	5,705	6,936	8,129
Annual Totals	689,414	919,230	1,078,894

While the number of suspicious activity report filings increased substantially during the evaluation period, FinCEN does not have a follow-up system for suspicious transactions reports and the results obtained from said reports.

The US reports that it can obtain necessary documents and financial records for intelligence purposes and prosecution of money laundering offenses. Specifically, Section 314(a) of the USA PATRIOT Act enables federal law enforcement agencies, through FinCEN, to reach over 20,000 US financial institutions to locate accounts and transactions of persons that may be involved in money laundering. The financial institutions must query their records for data matches and report back to FinCEN indicating they have a match. Activities under Section 314(a) are reported in the following table.

Year	Number 314(a) cases*	Number of financial institutions that reported a positive match
2004	198	1,149
2005	92	833
2006	125	974

\* 314(a) of the US Patriot Act - Cases consist of the following three categories: money laundering, terrorism or terrorist financing

Assets forfeited under federal forfeiture statutes in connection with illicit drug trafficking and money laundering are managed by the US Marshals Service for the US Justice Department Fund, and by the US Treasury Department’s Executive Office for Asset Forfeiture for the US Treasury Department

<sup>22</sup> Money services businesses (MSBs) provide services related to money orders, travelers checks, check cashing, currency dealing or exchange, stored value (e.g. pawnbrokers), or money transfer services. Additional information on MSBs and suspicious transaction reporting is provided at [http://www.fincen.gov/msb\\_prevention\\_guide.pdf](http://www.fincen.gov/msb_prevention_guide.pdf).





Fund. These entities have their own budgets and manuals that establish the regulations for such management. The country reports that the total value of assets forfeited, in millions, was of US\$767.40 in 2005 and of US\$1,620.50 in 2006.

With respect to the proceeds of forfeited property, these proceeds are used to cover expenses derived from forfeiture operations; administration and disposition of property; third parties' interests; fair distribution; case-related expenses; Automatic Data Processing (ADP) equipment; special contract services; training and printing; operation of programs; storage; protection and destruction of controlled substances; contracts to identify forfeitable property; rewards in exchange of information; investigation expenses; purchase of evidence; equipment and transportation vehicles; and joint law enforcement operations.

The number of requests made and received by the US to freeze assets in money laundering cases and based on international agreements for the years 2004–2006 has not been provided.

US laws authorize the extradition of the country's nationals, and the central authority responsible for making and receiving the extradition requests is the Office of International Affairs, Criminal Division of the US Department of Justice. No data on requests for extradition for money laundering by the US and to the US have been provided.

**CICAD observes that the country has legislation, mechanisms and procedures that allow for the prevention and control of money laundering. While the US has made progress in lifting bank secrecy, the country lacks an adequate follow-up system for Suspicious Activity Reports.**

**CICAD notes with concern the lack of information on the number of requests made and received by the US to freeze assets per international agreements as well as the absence of information regarding extradition requests.**

### **RECOMMENDATION:**

- 8. IMPLEMENT A FOLLOW-UP SYSTEM FOR INVESTIGATING SUSPICIOUS ACTIVITY REPORTS.**



## CONCLUSIONS

CICAD notes that the US is continuing a multi-pronged National Drug Control Strategy (NDCS), focusing on demand reduction, supply reduction, development programs related to the prevention or reduction of illicit crops and production or trafficking of drugs (as part of the country's international efforts, but not domestically), control measures, money laundering, and program evaluation. It is also noted that expenditures on the federal level are continuing their growth from previous years, with the US executed budget for the National Drug Control Strategy growing to \$12.5 billion in 2006. It is also recognized that the country continues to indicate that the budget for the Office of National Drug Control Policy (ONDCP) is adequate.

CICAD observes progress by the US in the ratification of the United Nations Convention against Transnational Organized Crime (2000) and two of its three protocols in November 2005, and of the ratification of the United Nations Convention against Corruption (2003). However, CICAD continues to be concerned that no progress has been made toward accession to the Protocol against the Illicit Manufacture of and Trafficking in Firearms and their Parts and Components and Ammunition of the UN Convention against Transnational Organized Crime, which was recommended for signature during the Second Evaluation Round, 2001–2002, and the Third Evaluation Round, 2003–2004. Similarly, there has been no progress toward the ratification of the Inter-American Convention against Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives and Other Related Materials (CIFTA), which was first noted during the First Evaluation Round, 1999–2000.

CICAD notes that the country has an adequate drug-related coordination, collection and data analysis system and recognizes the country's efforts to disseminate drug information using various means and mechanisms that target different key groups.

CICAD acknowledges the extensive array of treatment programs and increases in the number of patients treated and in the number of treatment programs. While recognizing the existence of guidelines for minimum standards of care, CICAD is concerned that the United States has not demonstrated progress in terms of ensuring the mandatory nature of the minimum standards of care for drug abuse treatment nationwide, as recommended during the Second Evaluation Round, 2001–2002.

CICAD recognizes that the country undertakes a broad range of research, evaluation, and surveillance initiatives contributing to knowledge about drug abuse and its treatment, and producing extensive sets of drug use statistics, such as the ongoing National Household Survey on Drug Use and Health, and the student-focused survey, Monitoring the Future. CICAD is concerned about youths' relatively low perception of the risk associated with smoking marijuana in the US.<sup>23</sup>

CICAD views with satisfaction that the United States has a program supporting the eradication of cannabis cultivation, and that the country continues to dismantle a significant number of illicit drug laboratories.

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<sup>23</sup> Within the framework of the forty-second regular session of CICAD, 27–30 November 2007, the country provided the following statement: "The United States notes that although the perception of risk associated with marijuana use is lower than that associated with the use of other illegal drugs, the United States has experienced a 25 percent decline in youth marijuana use between 2001 and 2006 as measured by the Monitoring the Future study (December 2006), indicating an important shift in youth attitudes and behaviors."



CICAD notes the progress that the country has made in the control of pharmaceutical products through the implementation of automated information management systems, the Automation of Reports and Consolidated Order System developed by the DEA, and training courses for personnel in the public and private sector on prescribing, dispensing and distributing controlled pharmaceutical products. Similarly, CICAD acknowledges that there is an automated information management system in place to facilitate the handling of information on the control of the diversion of chemical substances. However, CICAD observes a low number of inspections conducted in comparison with the volume of licenses and permits issued by the country for the handling of pharmaceutical products, and encourages the country to increase its inspection activities.

CICAD recognizes that the country keeps some records on the importation, exportation, and in-transit movement of firearms, ammunition, explosives and related materials. However, the lack of information has limited the ability to fully evaluate the country's progress. CICAD notes that the country's record keeping system for firearms maintains records by date and description but does not include serial or lot number. That said, CICAD observes that progress has been made in connection with data gathering on confiscated weapons connected with arrests for illicit drug trafficking. With respect to importation of explosives, CICAD is concerned about the absence of a records system and that the US does not require verification that the exporting country has first issued the necessary license or permit before issuing an import license.

CICAD observes that the country has legislation, mechanisms and procedures that allows for the prevention and control of money laundering. While the US has made progress in lifting bank secrecy, the country lacks an adequate follow-up system for Suspicious Activity Reports.

CICAD views with concern the lack of information on the number of requests made and received by the US to freeze assets and the number of extradition requests.

CICAD recognizes the commitment of the US to the MEM process and its active participation.



## SUMMARY OF RECOMMENDATIONS

The following recommendations are assigned to the United States of America in order to assist the country in strengthening its policy to combat the problem of drugs and related activities and increase multilateral cooperation in the Hemisphere.

### INSTITUTIONAL STRENGTHENING

1. RATIFY THE INTER-AMERICAN CONVENTION AGAINST ILLICIT MANUFACTURING OF AND TRAFFICKING IN FIREARMS, AMMUNITION, EXPLOSIVES AND OTHER RELATED MATERIALS (CIFTA), A RECOMMENDATION REITERATED FROM THE FIRST EVALUATION ROUND, 1999–2000.
2. ACCEDE TO THE PROTOCOL AGAINST THE ILLICIT MANUFACTURING OF AND TRAFFICKING IN FIREARMS, THEIR PARTS AND COMPONENTS AND AMMUNITION, OF THE UNITED NATIONS CONVENTION AGAINST TRANSNATIONAL ORGANIZED CRIME (2000), A RECOMMENDATION REITERATED FROM THE SECOND EVALUATION ROUND, 2001–2002.
3. ACCEDE TO THE UNITED NATIONS CONVENTION ON THE LAW OF THE SEA. (1982)

### DEMAND REDUCTION

4. ESTABLISH A NATIONAL REGISTER OF PREVENTION PROGRAMS TO INCLUDE THE NATURE, NUMBER OF PARTICIPANTS, AND COVERAGE OF THE DIFFERENT PROGRAMS, A RECOMMENDATION REITERATED FROM THE THIRD ROUND OF EVALUATION, 2003–2004.
5. ADOPT THE NECESSARY MEASURES TO ENSURE THE MANDATORY NATURE OF THE MINIMUM STANDARDS OF CARE FOR DRUG ABUSE TREATMENT NATIONWIDE, A RECOMMENDATION REITERATED FROM THE SECOND EVALUATION ROUND, 2001 - 2002.<sup>24</sup>
6. ESTABLISH A NATIONAL SYSTEM TO KEEP RECORDS ON ACCIDENTS RELATED TO DRUG USE, A RECOMMENDATION REITERATED FROM THE THIRD EVALUATION ROUND, 2003–2004.

### CONTROL MEASURES

7. ESTABLISH A NATIONAL COMPUTERIZED DATABASE FOR KEEPING RECORDS ON THE IMPORT, EXPORT AND IN-TRANSIT MOVEMENTS OF FIREARMS, AMMUNITION, EXPLOSIVES AND OTHER RELATED MATERIALS, INCLUDING SERIAL AND LOT NUMBERS OF FIREARMS, A RECOMMENDATION REITERATED FROM THE THIRD EVALUATION ROUND, 2003–2004.
8. IMPLEMENT A FOLLOW-UP SYSTEM ON THE INVESTIGATING SUSPICIOUS ACTIVITY REPORTS.

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<sup>24</sup> Within the framework of the forty-second regular session of CICAD, 27–30 November 2007, the country provided the following statement: “The United States notes that SAMHSA’s Center for Substance Abuse Treatment has developed a series of documents entitled “Treatment Improvement Protocols” (TIPs) which are best practice guidelines for the treatment of substance abuse. The United States has also promulgated regulations that require all treatment programs that use an FDA-approved medication such as methadone or buprenorphine for the treatment of opioid addiction to meet specified minimal standards of care and to maintain accreditation. In a Federal system such as that in the United States, other standards are generally left to the individual States.”



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**Organization of American States - OAS**

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