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# MULTILATERAL EVALUATION MECHANISM (MEM)

INTER-AMERICAN DRUG ABUSE CONTROL COMMISSION (CICAD)

SECRETARIAT FOR MULTIDIMENSIONAL SECURITY (SMS)

# Hemispheric Report

Evaluation Report on Drug Policies

**2019**

## **ACKNOWLEDGEMENTS**

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# HEMISPHERIC REPORT

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# TABLE OF CONTENTS

- INTRODUCTION** ..... 7
- BACKGROUND** ..... 9
- OVERVIEW** ..... 11
- CHAPTER 1**
- INSTITUTIONAL STRENGTHENING** ..... 15
  - A. National drug authorities ..... 15
  - B. National drug plans or strategies ..... 18
  - C. Coordination of national drug policies ..... 20
  - D. National observatories on drugs ..... 21
  - E. Alternatives to incarceration for low-level drug-related offenses ..... 24
  - F. Comprehensive social inclusion programs ..... 26
  - G. Proportionate sentencing for drug-related offenses ..... 27
- CHAPTER 2**
- DEMAND REDUCTION** ..... 29
  - A. Demand reduction policies ..... 29
  - B. Drug use prevention strategies or programs ..... 31
  - C. National drug treatment systems ..... 33
  - D. Training and certification in the areas of prevention, treatment and social reintegration ..... 35
  - E. Accreditation of treatment centers and supervision of prevention programs, and care and treatment services ..... 37

## CHAPTER 3

### **SUPPLY REDUCTION** ..... 39

- A. Policies and programs aimed at reducing the illicit supply of drugs..... 39
- B. Mechanisms to collect and analyze information on the illicit supply of drugs..... 40
- C. Alternative, integral, and sustainable development programs..... 41
- D. Programs to mitigate the impact of illicit crops and drug production on the environment..... 42
- E. Small-scale drug trafficking effects on public health, the economy, social cohesion, and citizen security..... 43

## CHAPTER 4

### **CONTROL MEASURES** ..... 45

- A. Programs aimed at preventing and reducing drug trafficking..... 45
- B. Control measures to prevent the diversion of controlled chemical substances..... 48
- C. Control measures to prevent the diversion of pharmaceutical products..... 50
- D. Adequate availability and accessibility of controlled substances for medical and scientific purposes..... 51
- E. New psychoactive substances (NPS) and amphetamine-type stimulants..... 53
- F. Money laundering derived from drug trafficking..... 54
- G. Agencies for the administration of seized assets from drug trafficking and money laundering..... 56
- H. National information gathering systems and mechanisms for exchanging intelligence information..... 57

CHAPTER 5

**INTERNATIONAL COOPERATION** ..... **59**

- A. Cooperation and coordination mechanisms on drug policies ..... 59
- B. Cooperation and coordination mechanisms for the forfeiture and management of assets derived from drug trafficking ..... 61
- C. Support for the Multilateral Evaluation Mechanism ..... 62
- D. Strengthening international legal cooperation related to the world drug problem ..... 63
- E. Hemispheric judicial cooperation mechanisms and mutual legal or judicial assistance related to drug trafficking ..... 64

**CONCLUSIONS** ..... **67**





# INTRODUCTION

The Multilateral Evaluation Mechanism (MEM) was implemented in 1998 pursuant to the mandate of the Second Summit of the Americas, held in Chile. Since then, the MEM has been the instrument by which the Organization of American States (OAS), through the Inter-American Drug Abuse Control Commission (CICAD), measures the progress of actions undertaken by OAS member states to address the drug problem in the Hemisphere. As the only multilateral evaluation of its kind in the world, the MEM highlights the strengths and weaknesses of OAS member states' drug policies in the national reports, and encourages dialogue among policymakers.

The seventh evaluation round is based on the objectives of the *Plan of Action on Drugs 2016-2020* of the *OAS Hemispheric Drug Strategy*, which, in turn, is aligned with the recommendations of the *Outcome Document of the 2016 United Nations General Assembly Special Session on the World Drug Problem (UNGASS)*, and the *Sustainable Development Goals (SDGs) of the United Nations 2030 Agenda on Sustainable Development*.

As a diagnostic tool, the MEM adopts an intrinsically multilateral approach in its evaluation and promotes cooperation to support member states to address the multifaceted drug problem effectively. The methodology used in the MEM process includes the analysis of information received from member states and established of a dialogue for drafting national evaluation reports.

This Hemispheric Report covers the period from 2014 to early 2019 and provides an overview of the findings, reflecting the new methodology adopted in the MEM seventh evaluation round. It also contains a general review of member states' performance with respect to their drug control policies. This report includes background information and an overview reflecting the Hemisphere's state of compliance, an analysis of each of the five thematic areas of drug control of the *OAS Hemispheric Drug Strategy*, and the conclusions reached for each of those areas. There are also analyses based on the four sub-regions of the Hemisphere: Caribbean, Central America, North America, and South America.

The findings found in the national evaluation reports identify a number of challenges and the countries' efforts in their drug policies. These reports were presented and approved at the CICAD sixty-fifth regular session in Buenos Aires, Argentina in May 2019.<sup>1</sup>

The evaluation conducted in this round used information provided by the following 33 participating OAS member states: Antigua and Barbuda, Argentina, The Bahamas, Barbados, Belize, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Dominica, Dominican Republic, Ecuador, El Salvador, Guatemala, Grenada, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, the Federation of Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, the United States of America, and Uruguay.

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1 MEM seventh round national reports: [http://www.cicad.oas.org/Main/Template.asp?File=/mem/reports/7/ronda\\_7\\_eval\\_eng.asp](http://www.cicad.oas.org/Main/Template.asp?File=/mem/reports/7/ronda_7_eval_eng.asp)



# BACKGROUND

The seventh evaluation round of the Multilateral Evaluation Mechanism (MEM) was developed based on the 30 objectives and corresponding priority actions of the *Plan of Action on Drugs 2016-2020* of the *OAS Hemispheric Drug Strategy*.

In 2017, the CICAD Commission convened the Inter-Governmental Working Group (IWG), composed of representatives from the OAS member states. This group was responsible for reviewing the MEM process, and updating the documents for the seventh round to evaluate compliance of member states' actions in relation to the aforementioned objectives. The IWG drafted an evaluation questionnaire, an evaluator's manual, a procedural manual, and a calendar of activities.

As a result, the seventh round began in 2018, and it was based on information provided by the member states through their National Coordinating Entities (NCEs). This information was analyzed by the Governmental Expert Group (GEG), including drug control specialists from the OAS member states in their respective areas of drug control, which drafted all national reports, except that of their own country. These reports are the product of collaboration and mutual review of the information by the GEG.

The GEG analyzed the thematic areas of Institutional Strengthening, Demand Reduction, Supply Reduction, Control Measures, and International Cooperation. Some priority actions were not considered, since they were not measurable.

The 30 objectives are distributed in the following five thematic areas:

- Institutional Strengthening – 7 objectives;
- Demand Reduction – 5 objectives;
- Supply Reduction – 5 objectives;
- Control Measures – 8 objectives; and
- International Cooperation – 5 objectives.

The following sub-regions of the Hemisphere were also considered:

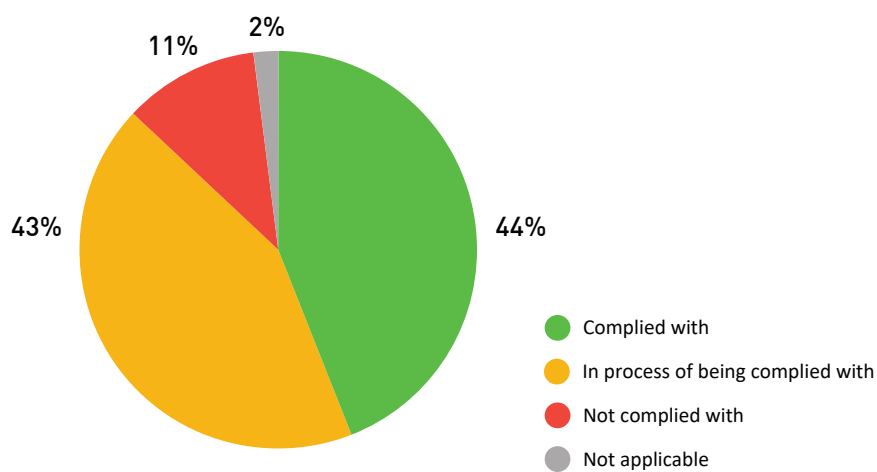
- Caribbean – Antigua and Barbuda, The Bahamas, Barbados, Belize, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, the Federation of Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, and Trinidad and Tobago;
- Central America – Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama;
- North America – Canada, Mexico, and the United States of America; and
- South America – Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Paraguay, Peru, and Uruguay.

The MEM reports focus on crosscutting issues that are important not only for CICAD, but also for the OAS, such as human rights, gender, age, culture and social inclusion. The national reports also take into account the recommendations of the *Outcome Document of the 2016 United Nations General Assembly Special Session on World Drug Problem (UNGASS 2016)* and the *Sustainable Development Goals (SDGs) of the United Nations 2030 Agenda on Sustainable Development*.

# OVERVIEW

Per data compiled from seventh round national reports: 44% of all objectives have been complied with, 43% are in the process of being complied with, 11% have not been complied with, and two percent were not applicable given that there are countries where no significant areas of illicit crops have been detected.

**Status of compliance with the objectives of the Hemispheric Plan of Action on Drugs 2016-2020**  
All thematic areas  
n=990

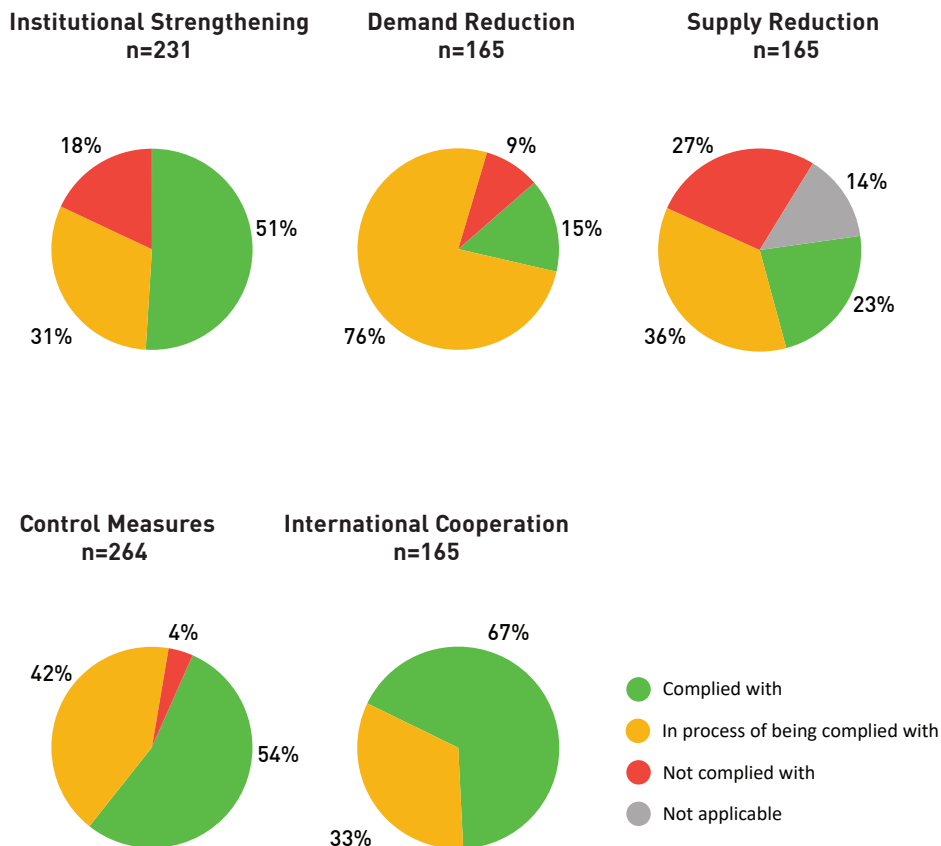


The thematic area reflecting the highest percentage of objectives met was found in International Cooperation with 67%, followed by 54% in the area of Control Measures. Meanwhile, in the Institutional Strengthening area, 51% of its objectives have been met, and 23% in the Supply Reduction area (or 27% if “not applicable” objectives are excluded). Lastly, the area of Demand Reduction has 15% of compliance, which also shows the highest percentage of objectives in the process of compliance with 76%, followed by Control Measures with 42%, Supply Reduction with 36%, International Cooperation with 33% and Institutional Strengthening with 31%.

Lastly, Supply Reduction was the area with the highest percentage of unmet objectives with 27% (or 31% if “not applicable” objectives are excluded), followed by Institutional Strengthening with 18%, Demand Reduction with nine percent, Control Measures with four percent, and finally, the International Cooperation area that did not have any unfulfilled objectives.

**Status of compliance with the objectives of the  
Hemispheric Plan of Action on Drugs 2016-2020,  
by thematic area**

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Analyzing the levels of compliance by sub-region in the Hemisphere, North America has the highest percentage of met objectives, 60%, followed by South America with 54%, Central America with 51%, and finally the Caribbean with 32%. On the other hand, the Caribbean has the highest percentage of objectives in the process of compliance with 48%, while the other three sub-regions have a similar percentage between 36% and 39%.

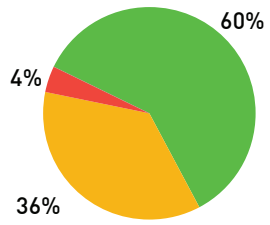
Similarly, the Caribbean has the highest percentage of non-complied objectives with 17%, while Central and South America have seven percent and six percent, respectively, and North America with four percent.

Lastly, the not applicable objectives pertinent to the Supply Reduction area are found in Central America with three percent, the Caribbean with three percent, and South America with one percent.

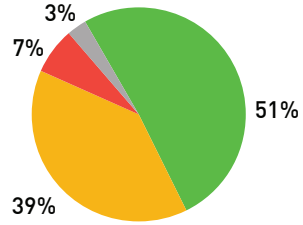
**Status of compliance with the objectives of the  
Hemispheric Plan of Action on Drugs 2016-2020,  
by sub-region**

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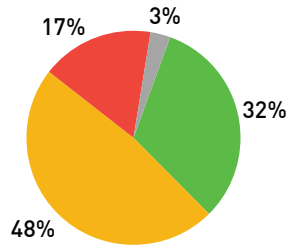
**North America**  
n=90



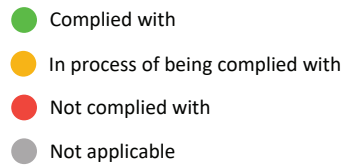
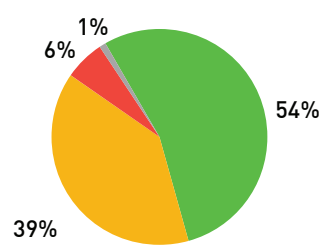
**Central America**  
n=180



**Caribbean**  
n=450



**South America**  
n=270







# CHAPTER 1

# INSTITUTIONAL STRENGTHENING

## A. National drug authorities

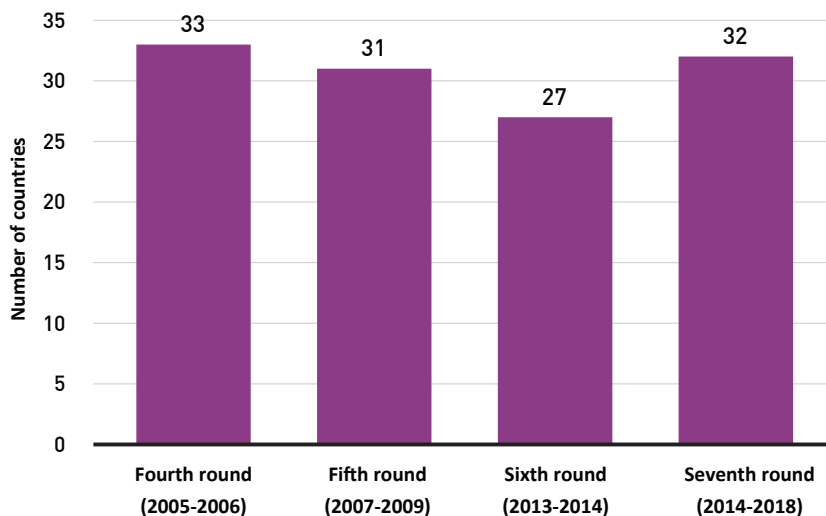
### OBJECTIVE 1

ESTABLISH AND/OR STRENGTHEN NATIONAL DRUG AUTHORITIES, PLACING THEM AT A HIGH POLITICAL LEVEL AND PROVIDING THEM WITH THE NECESSARY CAPABILITIES AND COMPETENCIES TO COORDINATE NATIONAL DRUG POLICIES IN THEIR STAGES OF FORMULATION, IMPLEMENTATION, MONITORING, AND EVALUATION.

With reference to the establishment or strengthening of national drug authorities, placing them at a high political level and providing them with the necessary capabilities and competencies to coordinate national drug policies in their stages of formulation, implementation, monitoring, and evaluation, the MEM seventh evaluation round showed that 28 member states (85%) fully comply with all relevant evaluation criteria, while five countries (15%) are in the process of complying with these requirements.

It was noted that the OAS member states that participated in the seventh round (33) have a national drug authority within their governmental administrative structure, and 28 of them (85%) have a legal basis. Between 2005 and 2018, the Hemisphere presented variations in the number of countries that have this authority. However, in the last evaluation period 2014 - 2018, the number has remained constant as 32 countries have a national drug authority.

**Evolution of countries with a national drug authority**



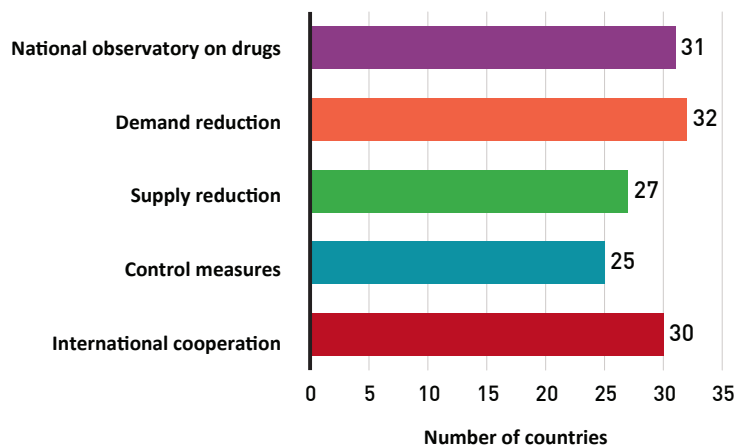
All countries have the capacity to lead the formulation, implementation, monitoring and evaluation of national drug policies and interinstitutional coordination in this area.

In the Hemisphere, 32 member states' national drug authorities (97%) coordinate and organize the area of Demand Reduction; 27 countries (82%) coordinate Supply Reduction; and 25 countries (76%) do so in the area of Control Measures. Along these lines, there are 31 countries (94%) that have a national drug observatory, and 30 countries (91%) that coordinate and organize other areas, such as International Cooperation and Evaluation, among others.

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**Areas of coordination of the national drug authority**

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In reference to the annual budget of the national drug authorities, almost all member states (32 or 97%) have designated funds. Only 11 countries (33%) have an independent budget, while 19 countries (58%) have an integrated budget with that of another government institution.

Lastly, 30 countries (91%) have created and strengthened ongoing coordination and organization mechanisms among government institutions to formulate, implement, monitor, evaluate and update evidence-based national drug policies.

## B. National drug plans or strategies

### OBJECTIVE 2

FORMULATE, IMPLEMENT, EVALUATE AND UPDATE NATIONAL DRUG POLICIES AND/OR STRATEGIES THAT WILL BE COMPREHENSIVE AND BALANCED, BASED ON EVIDENCE THAT INCLUDE A CROSS-CUTTING HUMAN RIGHTS PERSPECTIVE, CONSISTENT WITH OBLIGATIONS OF PARTIES UNDER INTERNATIONAL<sup>2</sup> LAW WITH A FOCUS ON GENDER AND EMPHASIZING DEVELOPMENT WITH SOCIAL INCLUSION.

In regard to the formulation, implementation, evaluation, and updating of comprehensive and balanced national drug policies or strategies that incorporate a cross-cutting human rights perspective, consistent with parties' obligations under international law, with a focus on gender and emphasizing development with social inclusion, the MEM seventh round showed that 17 member states (52%) fully comply with all relevant evaluation criteria, seven countries (21%) are in the process of compliance, while nine member states (27%) do not meet these requirements.

It was revealed that 24 member states (73%) have a national drug plan or strategy including the areas of Demand Reduction, Supply Reduction, Control Measures, drug observatory, and International Cooperation.

Similarly, in 24 countries (73%) the majority of the relevant actors from the priority areas are involved in drafting, implementation, evaluation, and updating of national drug plans or strategies.

In relation to the promotion of territorial/local management of drug plans or strategies, it was found that 18 countries (55%) have local governments that have transferred responsibilities on drug issues and have enough autonomy to take responsibility of and implement concrete actions, in coordination with the national drug authority.

In 25 countries (76%), there is an office focused on promoting, coordinating, training, and providing technical support on drug-related issues to local governments, but only 17 member states (52%) have a decentralized operational and coordination structure at the local level to respond to the drug problem.

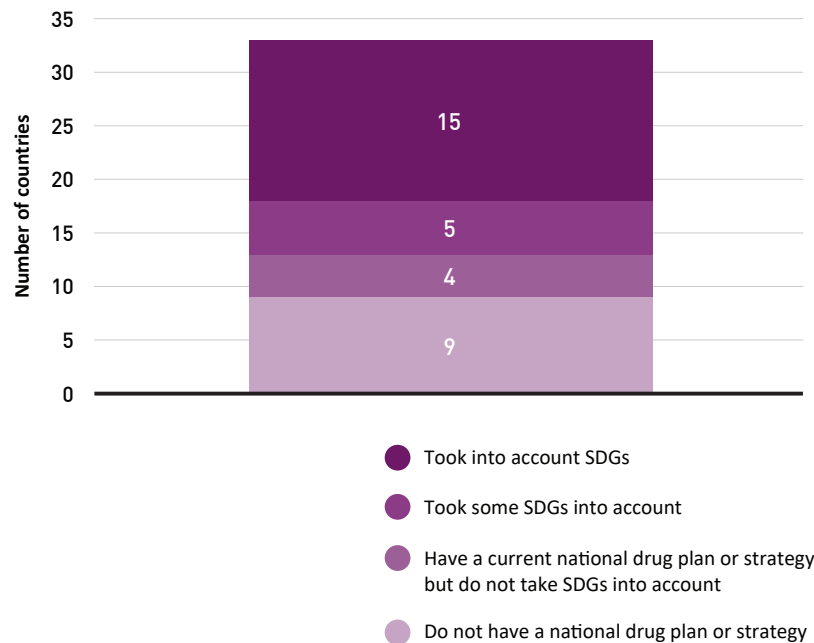
In addition, 17 countries (52%) have mechanisms to transfer funds for drug-related projects, implemented by local municipalities or governments.

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<sup>2</sup> Full respect for international law and the Universal Declaration of Human Rights, observing the principles of sovereignty and the territorial integrity of States, nonintervention in the internal affairs of States, fundamental liberties, inherent human dignity, and equal rights and mutual respect among States.

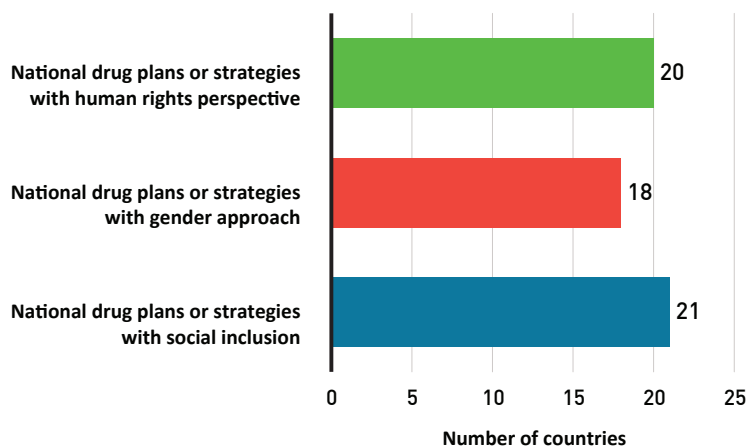
Similarly, 15 countries (45%) took into account all the *Sustainable Development Goals (SDGs) of the United Nations 2030 Agenda on Sustainable Development*, to develop their national drug plans or strategies, and five countries (15%) took some of these objectives into consideration.

**Countries that took into account the United Nations Sustainable Development Goals (SDGs), to develop their national drug plans or strategies**



Lastly, 21 countries (64%) formulated, implemented and updated their national drug plans or strategies, integrating a human rights perspective, 18 countries (55%) included a gender approach, and 20 countries (61%) included development with social inclusion.

Countries that have included a human rights perspective, a gender and/or a social inclusion approach, in their national drug strategies



## C. Coordination of national drug policies

### OBJECTIVE 3

DESIGN AND COORDINATE NATIONAL DRUG POLICIES AND/OR STRATEGIES WITH OTHER PUBLIC POLICIES AND/OR STRATEGIES THAT ADDRESS FUNDAMENTAL CAUSES AND CONSEQUENCES OF THE DRUG PROBLEM.

In relation to the design and coordination of national drug policies and/or strategies with other public policies and/or strategies that address fundamental causes and consequences of the drug problem, the seventh round showed that 22 member states (67%) fully comply with all relevant evaluation criteria. There are nine countries (27%) in the process of compliance, while two member states (six percent) do not comply with these requirements.

The establishment of policy and technical coordination mechanisms at the interinstitutional and multisectoral levels is necessary to achieve an integrated, balanced and multidisciplinary approach to the drug problem, including all its causes and consequences.

Within this framework, the MEM seventh round showed that the majority of countries (31, or 94%) have means to coordinate between agencies responsible for drug policies and those responsible for other public strategies or policies.

It was also found that 26 countries (79%) have multisectoral plans and programs aimed at preventing and counteracting the socio-economic causes and consequences of the drug problem, particularly those affecting human rights, public health, gender, and development.

It was corroborated that countries include issues such as the prevention of crime (19 countries, or 58%), victimization and social exclusion (21 countries, or 64%), corruption (12 countries, or 36%), gender approach (14 countries, or 42%), and others such as poverty reduction, citizen safety, non-criminalization of the drug user, among others, in the development of the state's public social policy (17 countries, or 52%) to address the socio-economic causes and consequences of the drug problem.

## D. National observatories on drugs

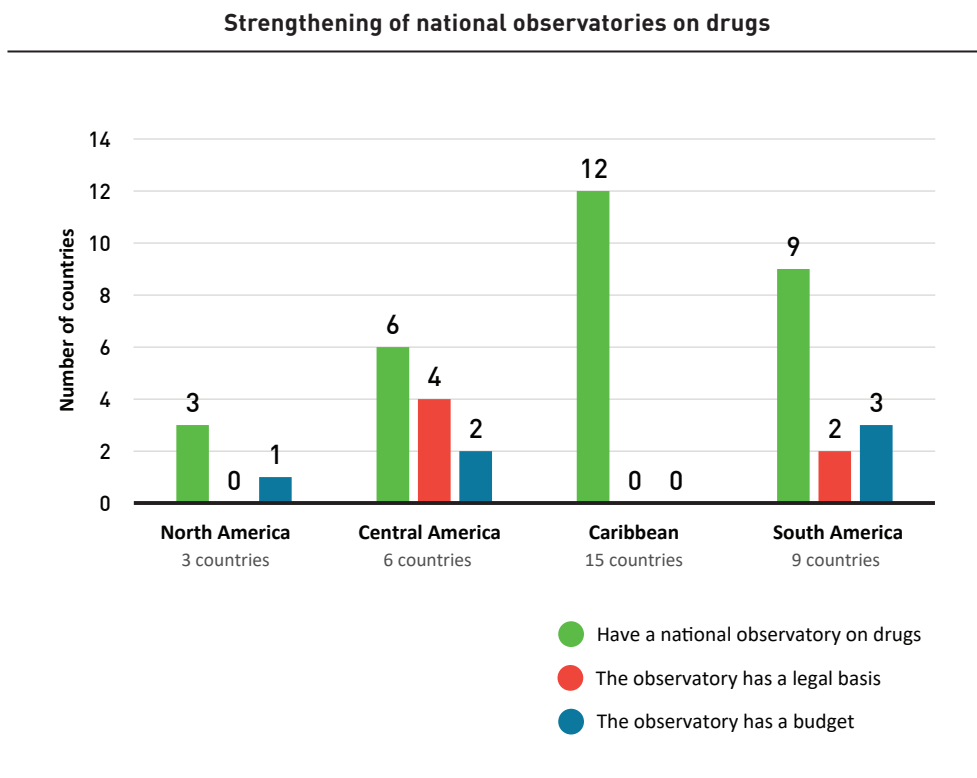
### OBJECTIVE 4

ESTABLISH AND/OR STRENGTHEN NATIONAL OBSERVATORIES ON DRUGS (OR SIMILAR TECHNICAL OFFICES) FOR THE DEVELOPMENT OF NATIONAL DRUG INFORMATION SYSTEMS AND FOSTERING SCIENTIFIC RESEARCH IN THIS AREA.

In relation to the establishment or strengthening of national observatories on drugs (or similar technical offices) for the development of national drug information networks and the promotion of scientific research in this area, the seventh round showed that nine member states fully comply with all relevant evaluation criteria, while 24 countries (73%) are in the process of complying with these requirements.

Specifically, in relation to the establishment of national observatories on drugs (or similar technical offices) with financial, human and technological resources, it was found that 30 countries (91%) have observatories, while only three countries do not. Likewise, six countries (18%) have observatories with a legal basis and a defined budget. As seen in the following graph, all countries in North America (three) have observatories, but they do not have a legal basis, and only one has a defined budget. On the other hand, in Central America, all the countries (six) have observatories, with four of them having a legal basis, and a third of them, that is to say two countries, have a budget for these observatories. In the Caribbean, most countries (12) have observatories although none reported the existence of a legal

basis or designated budget. Finally, South America shows an intermediate scenario with nine countries having observatories, two of them with a legal basis and three of them with a budget.



## National drug information networks

Regarding the existence of a national drug information network in the national observatory on drugs, 25 countries (76%) have a network that includes actors from different sectors, such as civil society (22 or 67%), health institutions (18 or 55%), statistical and census institutions (13 or 39%), universities (13 or 39%), private consultants (12 or 36%), and other social actors and international cooperation agencies (15 or 45%).

Twenty-nine countries (88%) carried out and published studies in the area of Demand Reduction during the evaluation period. Of these, 21 countries (64%) conducted surveys of secondary school students; 18 countries (55%) conducted national household surveys; 16 countries (48%) have patient registers of treatment centers; six countries (18%) have cross-sectional survey of patients in treatment centers; five countries (15%) conducted surveys of patients in emergency rooms; eight countries (24%) have surveys of higher education students; 10 countries (30%) have conducted surveys of populations in conflict with



the law; 10 countries (30%) conducted studies of drug-related mortality; eight countries (24%) have studies of drug-related morbidity; eight countries (24%) have conducted studies on gender conditions related to drug problems; seven countries (21%) conducted surveys of other target populations; and 16 countries (48%) reported conducting other studies.

In addition, 32 countries (97%) have information related to Supply Reduction, trafficking and related crimes. Among the different topics, 22 countries (67%) have information on the quantification of illicit crop cultivation including crops grown indoors; 31 member states (94%) have information on the number of seizures of illicit drugs and raw materials for their production; 28 member states (85%) have information on the quantities of illicit drugs and the raw material for their production seized; 16 member states (48%) have information on the number of seizures of controlled chemical substances (precursors); 16 countries (48%) have information on the quantities of seized controlled chemical substances (precursors); 16 member states (48%) have information on the number of seizures of pharmaceutical products, as well as the quantities of seized pharmaceutical products; 27 member states (82%) have information on the number of persons formally charged with drug use, possession and trafficking; 23 countries (70%) have information on the number of persons convicted of drug use, possession and trafficking; 11 countries (33%) have information on the number of laboratories producing illicit plant-based drugs detected and dismantled; 13 member states (39%) have information on the number of laboratories illicit drugs of synthetic origin detected and dismantled; 15 countries (45%) have information on the chemical composition of seized drugs; 18 countries (55%) have information on sale price of drugs (for consumers); 23 member states (70%) have information on the number of persons formally charged with money laundering; and 20 countries (61%) have information on the number of persons convicted of money laundering; 16 member states (48%) have information on the number of persons formally charged with trafficking in firearms, explosives, ammunition and related materials; 10 countries (30%) have information on the number of persons formally charged with diversion of chemical substances; and nine countries (27%) have information on the number of persons convicted of diversion of chemical substances.

The studies conducted by (24 or 73%) of the 33 participating OAS member states include data disaggregated by gender, age, socio-economic and educational level, as well as ethnicity.

In addition, 18 countries (55%) carried out or are carrying out studies to evaluate drug programs or interventions in the area of Demand Reduction, five of them in the area of Supply Reduction, and three countries in Control Measures.

## E. Alternatives to incarceration for low-level drug-related offenses

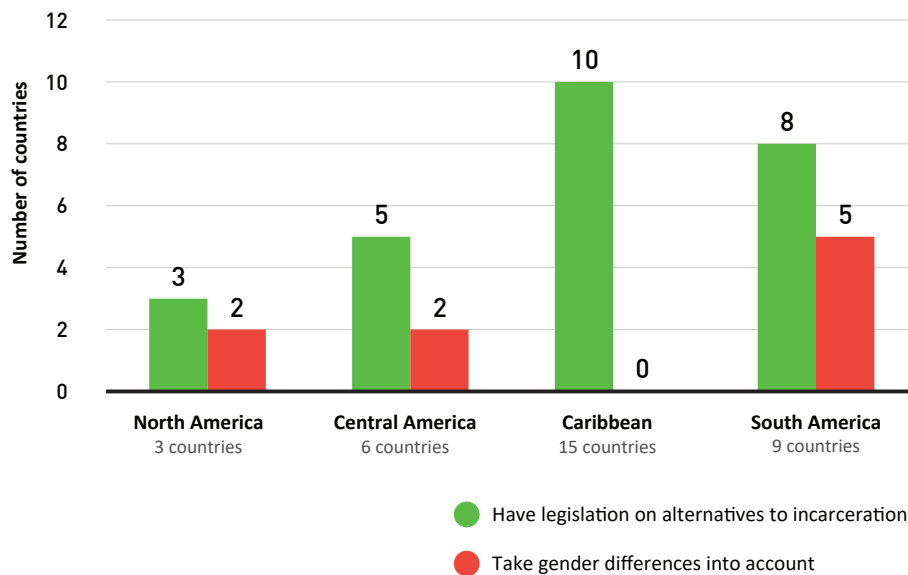
### OBJECTIVE 5

ENCOURAGE THE DESIGN, ADOPTION AND IMPLEMENTATION OF ALTERNATIVES TO INCARCERATION FOR LOW-LEVEL DRUG-RELATED OFFENSES, WHILE TAKING INTO ACCOUNT NATIONAL, CONSTITUTIONAL, LEGAL AND ADMINISTRATIVE SYSTEMS AND IN ACCORDANCE WITH RELEVANT INTERNATIONAL INSTRUMENTS.

In regard to the encouragement of the design, adoption and implementation of alternatives to incarceration for low-level drug-related offenses, while taking into account national, constitutional, legal and administrative systems and in accordance with relevant international instruments, the seventh round revealed that eight member states (24%) fully comply with all the relevant evaluation criteria, 17 countries (52%) are in the process of compliance, while eight member states (24%) do not comply with these requirements.

The seventh round showed that 26 countries (79%) have legislative alternative measures to incarceration. Out of these 26 countries, nine take into account gender differences in accordance with the relevant international instruments. The chart below indicates that North American countries present a favorable scenario for this indicator, since all countries have alternative measures and only one does not consider the gender perspective. South American countries show a positive outlook as well, where eight countries out of nine have alternative measures and five incorporate a gender perspective. For the Central American countries, five out of six countries have alternative measures. However, only two include a gender perspective. On the other hand, 10 of 15 Caribbean countries have alternative measures, and none of them takes into account gender perspective.

### Alternative measures to incarceration for low-level drug-related offenses



In addition, of the 26 countries that have alternative measures to incarceration for low-level drug-related offenses, 13 indicated that they have mechanisms to monitor and evaluate the impact of implementing those alternative measures.

Further, in terms of mechanisms to evaluate the impact of alternative measures, all North American countries have these measures. For Central America, three out of six countries have the above-mentioned mechanisms. On the other hand, out of nine South American countries, only three have these evaluation mechanisms. Lastly, for the Caribbean, only four out of 15 countries have mechanisms to monitor alternative measures to incarceration.

## F. Comprehensive social inclusion programs

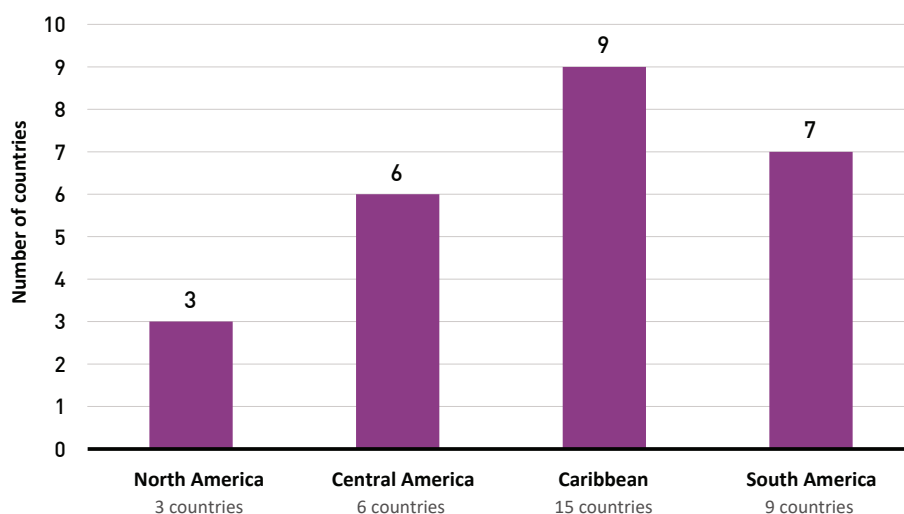
### OBJECTIVE 6

PROMOTE AND IMPLEMENT, AS APPROPRIATE, IN ACCORDANCE WITH THE POLICIES, LAWS AND NEEDS OF EACH COUNTRY, COMPREHENSIVE PROGRAMS THAT PROMOTE SOCIAL INCLUSION, ESPECIALLY TO THOSE VULNERABLE POPULATIONS WITH DIFFERENT LEVELS AND FORMS OF INVOLVEMENT.

In regard to the promotion and implementation of comprehensive programs that promote social inclusion, especially to those vulnerable populations, with different levels and forms of involvement, the MEM seventh evaluation round revealed that 25 member states (76%) fully comply with all the relevant evaluation criteria, while eight countries (24%) do not comply with these requirements.

The seventh round showed that 25 countries (76%) have interinstitutional and multisectoral programs that promote the social integration of individuals affected by the drug problem. Seven countries (21%) do not have such programs. The sub-regional distribution chart below shows that North America and Central America present a favorable outlook for this indicator, with all countries showing compliance. South American countries also show a positive scenario, with seven out of nine countries indicating that they are compliant. On the other hand, only nine out of 15 Caribbean countries have interinstitutional and multisectoral programs for the promotion of social integration for persons affected by the drug problem.

Countries with interinstitutional and multisectoral programs that promote the social integration of individuals affected by the drug problem



## G. Proportionate sentencing for drug-related offenses

### OBJECTIVE 7

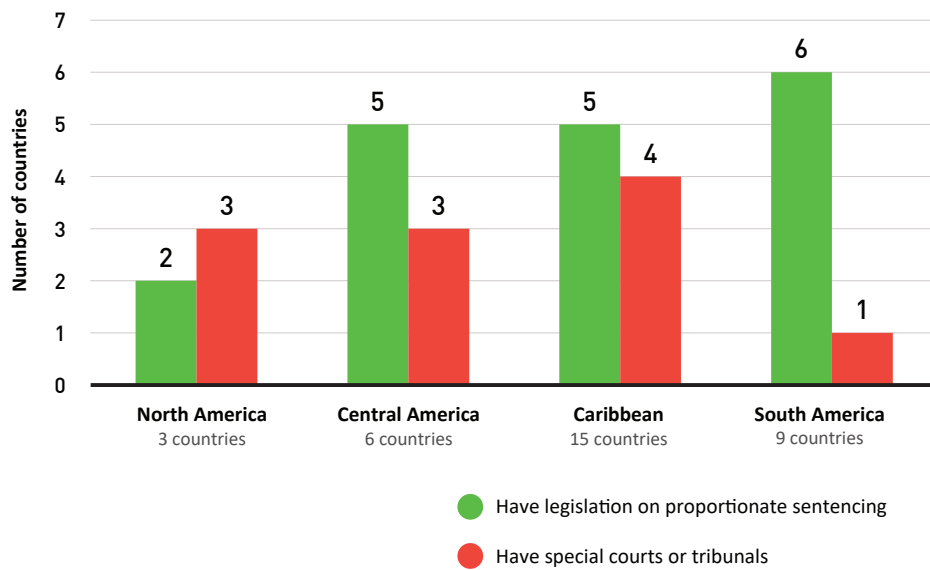
FOSTER PROPORTIONATE SENTENCING, WHERE APPROPRIATE, THAT ADDRESS THE SERIOUSNESS OF DRUG OFFENSES AND SAFEGUARDING LEGAL PROCEEDINGS.

In regard to the fostering of proportionate sentencing addressing the seriousness of drug offenses and safeguarding legal proceedings, the seventh round revealed that 10 member states (30%) fully comply with all the relevant evaluation criteria, nine (27%) are in the process of compliance, and 14 countries (42%) do not comply with these requirements.

In particular, for low-level drug-related offenses, the seventh round indicates that 18 countries (55%) have legislation. From a sub-regional perspective, the chart below illustrates that both North America and Central America have a favorable outlook for this indicator with the exception of one country from each sub-region that does not have this type of legislation. Likewise, six South American countries have legislation on proportionate sentencing and, in the Caribbean, only five countries do.

Furthermore, as it relates to special courts or tribunals for low-level drug-related offenses, only 11 countries (33%) have judicial systems. On one hand, referencing the chart below, North America demonstrates a favorable scenario of this indicator, as all countries show compliance. On the other hand, only three countries from Central America have these special courts. As it relates to the Caribbean, only four countries indicate that they are compliant. Lastly, only one South American country has special courts for low-level drug-related offenses.

Countries with proportionate sentencing for low-level drug-related offenses



# CHAPTER 2

# DEMAND REDUCTION

## A. Demand Reduction policies

### OBJECTIVE 1

ESTABLISH DEMAND REDUCTION POLICIES WITH A PUBLIC HEALTH FOCUS THAT ARE EVIDENCE-BASED, COMPREHENSIVE, MULTIDISCIPLINARY, MULTISECTORAL, AND RESPECTFUL OF HUMAN RIGHTS, CONSIDERING THE GUIDELINES AND/OR RECOMMENDATIONS OF SPECIALIZED INTERNATIONAL ORGANIZATIONS.

In regard to establishing Demand Reduction policies with a public health focus that are evidence-based, comprehensive, multidisciplinary, multisectoral, and respectful of human rights, considering the guidelines or recommendations of specialized international organizations, the seventh round revealed that four countries (12%) fully comply with all the relevant evaluation criteria, while 29 countries (88%) are in the process of complying with these requirements.

This round showed that the majority of countries indicated that they have Demand Reduction policies: all 33 countries (100%) have prevention programs, 32 countries (97%) have treatment programs, and 31 countries (94%) have social integration programs.

Twenty-one countries (64%) follow the guidelines of international organizations for prevention programs, while (22 or 67%) and (17 or 52%) countries follow the international guidelines for treatment and social integration programs respectively.

Countries have reported the establishment or updating of programs in the areas of prevention, treatment and social integration to include the following approaches:

- Human rights – 28 countries (85%);
- Age – 28 countries (85%);
- Gender – 25 countries (76%); and
- Inter-cultural – 24 countries (73%).

## Process evaluations and results of Demand Reduction programs

Throughout all of the rounds, the evaluation of Demand Reduction programs has been a recurring weakness. However, incremental progress has been made in this area given that, in the fourth round, 33% of the countries carried out some evaluation, which then increased to 41% by the sixth round.

In this seventh evaluation round, (20 or 61%) of the reporting countries indicated that they monitor and evaluate their Demand Reduction programs by conducting process evaluations. Almost half of the countries (16 or 48%) evaluate intermediate results, while only seven countries (21%) perform impact evaluations. It is important to note that 12 countries (36%) do not conduct evaluations of any kind.

## Coordination mechanisms for the development and implementation of Demand Reduction programs

Twenty-eight countries (85%) implement coordination mechanisms for the development and implementation of programs to reduce demand jointly with civil society and other social stakeholders, academic, and research institutions.

## Measures aimed at minimizing the adverse consequences of drug abuse

The majority of the countries (23 or 70%) implement measures aimed at minimizing the adverse public health and social consequences of drug abuse, using the technical guide, jointly published by the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC), and the Joint United Nations Program on HIV/AIDS (UNAIDS).<sup>3</sup> Ten countries (30%) indicate that they do not implement these measures.

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<sup>3</sup> WHO, UNODC, UNAIDS, *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (2012 revision). Available at: [http://www.who.int/hiv/pub/idu/targets\\_universal\\_access/en/](http://www.who.int/hiv/pub/idu/targets_universal_access/en/).



## B. Drug use prevention strategies or programs

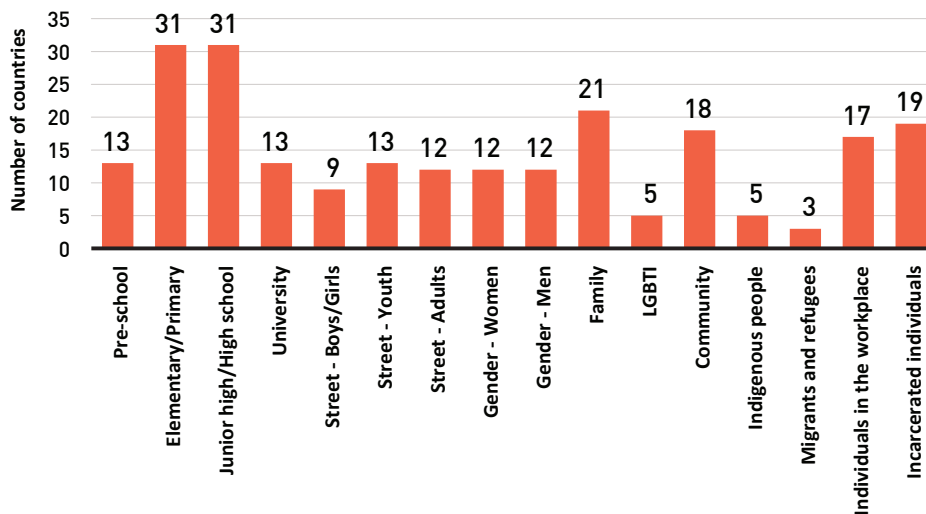
### OBJECTIVE 2

ESTABLISH AND/OR STRENGTHEN AN INTEGRATED SYSTEM OF UNIVERSAL, SELECTED AND INDICATED PREVENTION PROGRAMS ON DRUG USE, GIVING PRIORITY TO VULNERABLE AND AT-RISK POPULATIONS, EVIDENCE-BASED AND INCORPORATING A HUMAN RIGHTS, GENDER, AGE AND MULTICULTURAL APPROACH.

In regard to the establishment or strengthening of an integrated system of universal, selected, and indicated prevention programs on drug use, giving priority to vulnerable and at-risk populations, which are evidence-based and incorporate a human rights, gender, age and multicultural approach, the seventh round showed that two member states (six percent) fully comply with all relevant evaluation criteria of this objective. There are 30 countries (91%) are in the process of compliance, while one country (three percent) does not meet these requirements.

The seventh round showed that the populations mostly addressed by prevention programs are primary and secondary students, since in most countries (31 or 94%), they have programs aimed at these populations. In addition, 21 countries (64%) have family programs; 19 countries (58%) for incarcerated individuals; 18 countries (55%) for the community; 17 countries (52%) for individuals in the workplace; 13 countries (39%) for preschool, university and street youth; and 12 countries (36%) for street adults and gender (male and female). Lastly, only 27% (nine) of the countries have programs for street children; 15% (five countries) for lesbian, gay, bisexual, transgender or intersex (LGBTI) population and indigenous peoples; and nine% (three countries) for migrants and refugees.

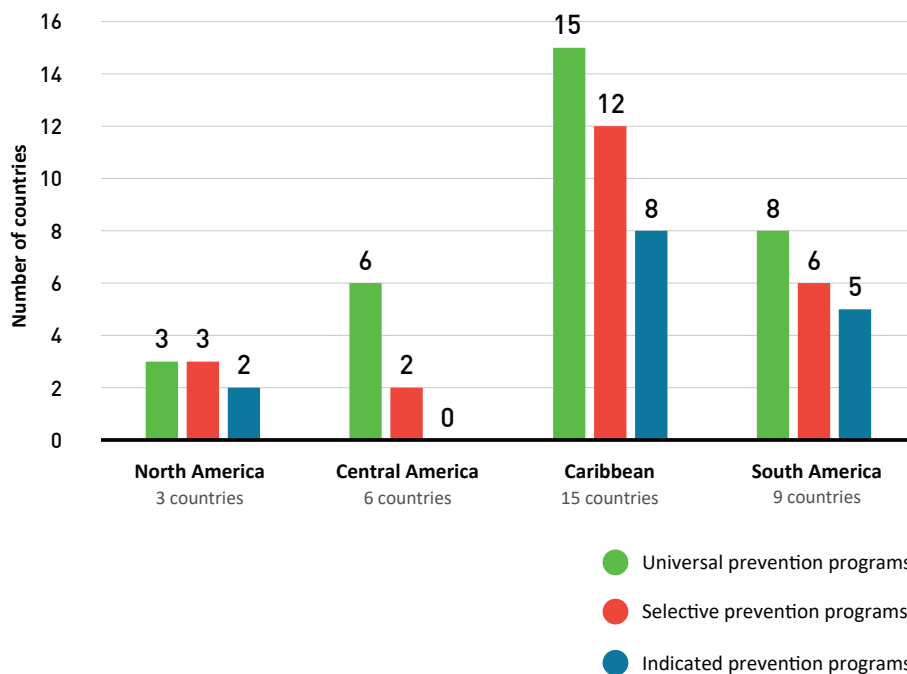
Countries with prevention programs in different populations



Throughout all evaluation rounds, the prevalence of prevention programs for the school population over other at-risk populations has been sustained. However, while there has been a steady improvement in the coverage of school prevention programs, there has also been progress in relation to the number of specific populations covered by country.

In terms of the type of prevention programs, almost all countries (32 or 97%) have universal prevention programs, while 23 countries (70%) have selective prevention programs, and only (15 or 45%) have indicated prevention programs. Analyzing the situation by region, as shown in the graph below, there are varying scenarios. On the one hand, essentially all countries in North America have all types of prevention programs, while in Central America, all countries have universal prevention programs, only two countries have selective prevention programs and none has indicated prevention programs. The disparity referred to, in terms of the lack of selective and indicated prevention programs in Central America, shows the urgent need to direct efforts to facilitate the implementation of such programs. On the other hand, the situation between the Caribbean and South America is more balanced, with more than half of the countries (63% in South America and 53% in the Caribbean) having all the categories of prevention programs considered.

Universal, selective and indicated prevention programs



It is important to also conceptualize the types of prevention (universal, selective and indicated), since the approach to be carried out with each group of the population will depend on it, on the context and on the specific needs identified with the different target groups.

## C. National drug treatment systems

### OBJECTIVE 3

ESTABLISH AND STRENGTHEN, AS APPROPRIATE, A NATIONAL TREATMENT, REHABILITATION AND SOCIAL INCLUSION SYSTEM FOR PEOPLE WITH PROBLEMATIC DRUG USE, INCLUDING A HUMAN RIGHTS AND GENDER-BASED APPROACH, TAKING INTO ACCOUNT INTERNATIONALLY ACCEPTED QUALITY STANDARDS.

In regard to establishing and strengthening of a national treatment, rehabilitation and social inclusion system for people with problematic drug use, that includes a human rights and gender-based approach, taking into account internationally accepted quality standards, the seventh round revealed that 11

countries (33%) fully comply with all the relevant evaluation criteria, 20 member states (61%) are in the process of compliance, while two (six percent) do not comply with the requirements.

## Comprehensive programs and devices for care, treatment, rehabilitation and social inclusion

In the seventh round showed that most countries established or strengthened a national system for comprehensive treatment, rehabilitation and social integration for people with problematic drug use, utilizing a variety of specialized programs and devices. In this regard, 28 countries (85%) have early intervention devices and diverse treatment modalities, 27 countries (82%) utilize dual pathology devices, 26 countries (79%) have crisis intervention devices, and 25 countries (76%) have social integration services related to recovery support. Likewise, almost 80% of countries (26) take into account UNODC and WHO standards in their programs and devices.

Notably five countries (15%) have no national system for comprehensive treatment, rehabilitation and social integration for people with problematic drug use.

## Monitoring and evaluation of results of care, treatment, rehabilitation and social inclusion programs

In the seventh round, all but three countries (91%) have mechanisms that facilitate access and ensure the quality of treatment services for people with problematic drug use disorders. This is an improvement from the sixth round, in which only 18 countries were fully compliant.

With respect to countries that provide both outpatient and residential services, public health networks outnumber those provided by non-governmental organizations, private or religious institutions.

The gender perspective is included in the services provided in 24 countries (73%). Additionally, 23 countries (70%) maintain cooperative relationships with governmental/non-governmental organizations for the social integration of vulnerable populations.

Twenty countries (61%) have mechanisms to continuously monitor and evaluate the results of care, treatment, and social integration programs. However, less than half of the countries consider human rights and gender approaches in their monitoring and evaluation.

Lastly, 22 countries (67%) have mechanisms to supervise establishments that offer treatment and rehabilitation services to people with problematic drug use.

## Measures to protect the rights of people in treatment programs and services

Seventy-three percent of the countries (24) have mechanisms for the protection of the rights of people with problematic drug use in treatment programs and services.

## D. Training and certification in the areas of prevention, treatment and social reintegration.

### OBJECTIVE 4

FOSTER ONGOING TRAINING AND CERTIFICATION OF HUMAN RESOURCES THAT PROVIDE PREVENTION, TREATMENT, REHABILITATION AND SOCIAL REINTEGRATION SERVICES.

In relation to ongoing training and certification of human resources that provide prevention, treatment, rehabilitation and social reintegration services, the seventh round showed that one member state (three percent) fully comply with all relevant evaluation criteria for this objective, 31 countries (94%) are in the process of compliance, while one member state (three percent) does not meet these requirements.

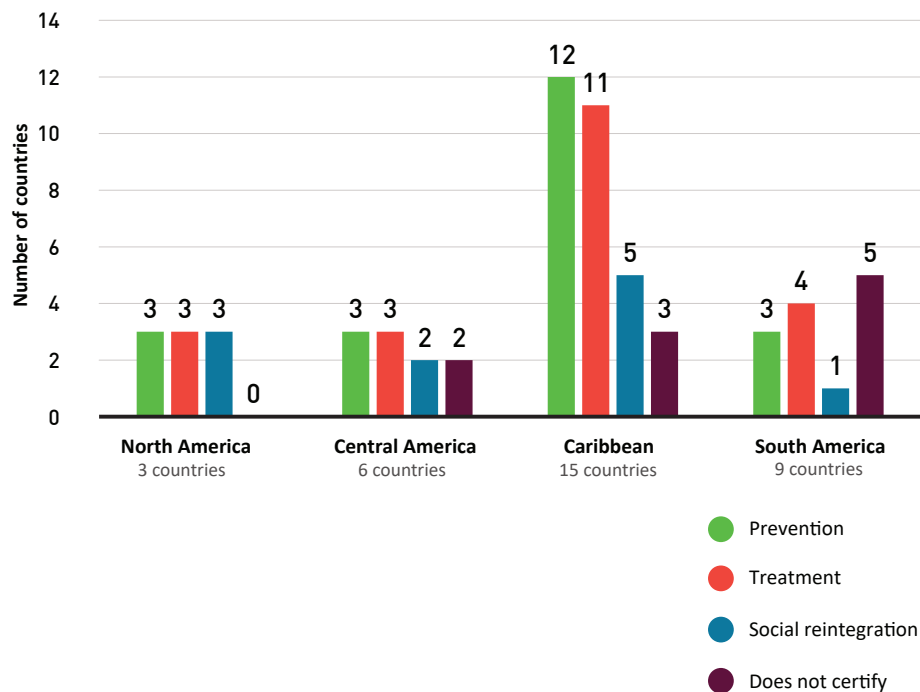
### Ongoing training programs in the areas of prevention, treatment and social reintegration

The seventh round found that just over three quarters of countries (76% or 25) offer ongoing competency-based training in the areas of prevention, treatment, and social reintegration. At the same time, slightly more than half (58%) of the member states (19) participate in trainings offered by specialized international organizations. However, it is important to note that only five countries (15%) incorporate the gender perspective in such training, therefore the international commitments that each country agreed to (through UNGASS) should be highlighted and observed in the actions carried out. There has been no improvement in this area with respect to previous rounds, given that the number of countries offering training has remained constant since the sixth round, and the number of countries participating in training provided by specialized international organizations has even decreased. For this reason, it is necessary to prepare a diagnosis that allow for better management at an international level.

## Personnel certification

In relation to the personnel certification, the seventh round showed that 21 countries (64%) certify personnel that work in prevention and treatment services, while 11 countries (33%) certify those working in social reintegration. As seen in the following graph, North America presents a positive scenario for this indicator, since all countries certify the personnel that work in all services. However, there is room for improvement in all other regions. In this regard, the Caribbean presents an intermediate scenario, where most countries certify the personnel that provide prevention and treatment services, although only a third certify those that provide services in social reintegration. Thus, it is important to consider the importance of carrying out reviews to determine the training needs of personnel, which allows for realistic planning, and therefore the creation of a network of qualified personnel in this area and to include the certification of the institutions in charge of such action within their legal mandate. In addition, as personnel are certified, they will have the opportunity to provide better technical and professional attention. Finally, in South America, nearly half of the countries (five), and in Central America, one third of the countries (two) do not certify personnel.

**Certification of personnel working in prevention, treatment and social reintegration services**



With respect to the level of certifications, there is a great variety among the countries, being the majority basic and intermediate level, and only four countries certifying at an advanced level.

## **E. Accreditation of treatment centers and supervision of prevention programs, and care and treatment services**

### **OBJECTIVE 5**

ESTABLISH AND/OR STRENGTHEN GOVERNMENTAL INSTITUTIONAL CAPACITIES TO REGULATE, ENABLE, ACCREDIT AND SUPERVISE PREVENTION PROGRAMS AND CARE AND TREATMENT SERVICES.

In the establishment or strengthening of governmental institutional capacities to regulate, enable, accredit and supervise prevention programs, and care and treatment services, the seventh round revealed that seven member states (21%) fully comply with all the relevant evaluation criteria, 16 countries (48%) are in the process of compliance, while 10 member states (30%) do not comply with these requirements.

### **Governmental institutional capacities to regulate, enable, accredit and supervise prevention programs, and care and treatment services**

The seventh round showed that 20 countries (61%) have an accreditation process for their treatment centers, which is the same as in the fourth and fifth rounds. Forty-five percent of the countries (15) have supervisory mechanisms to ensure the quality criteria of their prevention programs and 18 countries (55%) have mechanisms to ensure the quality criteria of their care or treatment services.

### **Assessments on national needs and the care and treatment services offered**

The seventh round revealed that 16 countries (48%) have developed an assessment to determine national needs regarding care and treatment services offered.





# CHAPTER 3

# SUPPLY

# REDUCTION

## A. Policies and programs aimed at reducing the illicit supply of drugs

### OBJECTIVE 1

DESIGN, IMPLEMENT AND STRENGTHEN COMPREHENSIVE AND BALANCED POLICIES AND PROGRAMS, AIMED AT PREVENTING AND DECREASING THE ILLICIT SUPPLY OF DRUGS, IN ACCORDANCE TO THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

In regard to the design, implementation and strengthening of comprehensive and balanced policies and programs, aimed at preventing and decreasing the illicit supply of drugs, in accordance to the territorial realities of each country and respecting human rights, the MEM seventh round revealed that 15 member states (45%) fully comply with all the relevant evaluation criteria, five countries (15%) are in the process of compliance for these requirements, while 13 member states (39%) do not comply with these requirements.

The seventh round highlighted that significant areas of illicit crop cultivation were detected in 10 member states (30%) in the region.

However, 23 member states (70%) have designed, implemented and updated their national policies and programs to prevent and decrease illicit crops and the illicit production of drugs.

As to whether traditional licit uses are taken into account, where there is historical evidence on such uses, when designing and implementing policies and programs to reduce the illicit supply of drugs, nine countries (27%) were assessed positively. Likewise, the evaluation showed that 11 countries (33%) include environmental protection measures in their policies and programs to reduce the illicit supply of drugs.

On the other hand, 19 countries (58%) indicated the drug supply reduction programs implemented by their country supplemented by drug-related crime prevention initiatives that address social and economic risk factors. From this group, almost all of the programs included participation from civil society and other social stakeholders.

## B. Mechanisms to collect and analyze information on the illicit supply of drugs

### OBJECTIVE 2

DEVELOP AND IMPLEMENT MECHANISMS TO COLLECT AND ANALYZE INFORMATION FOR THE DEVELOPMENT OF POLICIES AND ACTIONS AIMED AT DECREASING THE ILLICIT SUPPLY OF DRUGS.

In relation to the development and implementation of information gathering and analysis mechanisms for the development of policies and actions aimed at reducing the illicit supply of drugs, the seventh round showed that two member states (six percent) fully comply with all relevant evaluation criteria of this objective, 29 countries (88%) are in the process of compliance, while two member states (six percent) do not comply with these requirements.

The adoption or improvement of mechanisms to collect and analyze information, aimed at developing diagnoses that facilitate the development of public policies in this area, is an essential aspect for dealing with the illicit supply of drugs, in accordance with the *OAS Hemispheric Drug Strategy*.

Accordingly, the seventh round of the MEM showed that most countries in the Hemisphere (31 or 94%) have mechanisms or systems to collect and analyze information related to illicit supply of drugs.

Twelve countries (36%) carried out periodic studies and research on the structural and socioeconomic factors influencing the illicit supply of drugs situation, while 20 countries indicated that they did not.

During the evaluation period, four countries (12%) prepared or updated studies or research on medical and scientific uses and other legal use of crops containing narcotic or psychotropic substances subject to the international control system.

To understand the dynamics of the supply of drugs subject to the international control system, as well as that of new psychoactive substances (NPS), 19 countries (58%) promoted or implemented mechanisms to identify chemical profiles and characteristics of such drugs. On the other hand, 20 countries (61%) made progress in implementing mechanisms for identifying NPS.

With regard to the use of standardized and comparable methodologies to measure illicit crops and drug production, six (18%) out of 10 countries, where significant areas of the crops have been detected, reported their application.

## C. Alternative, integral and sustainable development

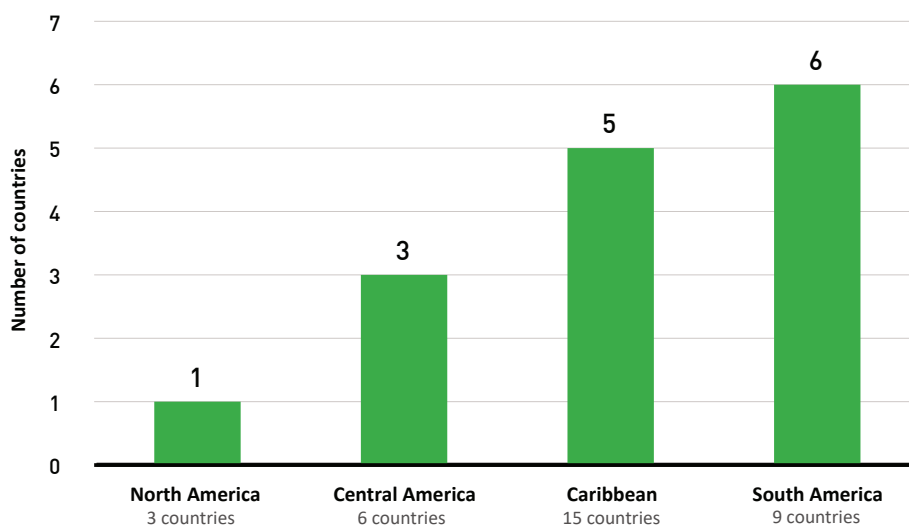
### OBJECTIVE 3

DESIGN, IMPLEMENT AND/OR STRENGTHEN LONG-TERM PROGRAMS, WHICH ARE BROAD AND AIMED AT DEVELOPMENT THAT INCLUDES RURAL AND URBAN ALTERNATIVE, INTEGRAL AND SUSTAINABLE DEVELOPMENT PROGRAMS, AND, AS APPROPRIATE, PREVENTIVE ALTERNATIVE DEVELOPMENT, IN ACCORDANCE WITH THE POLICIES, LEGISLATIONS AND NEEDS OF EACH COUNTRY, AS APPROPRIATE.

With respect to the design, implementation or strengthening long-term programs, including rural and urban alternative, integral and sustainable development programs, and preventive alternative development, the seventh round showed that 13 member states (39%) fully comply with all relevant evaluation criteria of this objective, when applicable; five countries (15%) are in the process of compliance; while 15 member states (45%) do not comply with these requirements.

The seventh round showed that six countries (18%) have designed and implemented alternative, integral and sustainable development programs, and four countries (12%) use intermediate or outcome results indicators for monitoring the effectiveness of their programs. The evaluation also shows that there are 15 countries (45%) promoting sustainable urban development programs or initiatives, with the following sub-regional distribution:

Countries with sustainable urban development programs or initiatives



Similarly, 10 countries (30%) exchanged experiences in the implementation of these programs.

The evaluation presented some concerns, since there are countries that have not implemented or that stopped implementing sustainable development programs several years ago.

## D. Programs to mitigate the impact of illicit crops and drug production on the environment

### OBJECTIVE 4

DESIGN AND IMPLEMENT PLANS AND/OR PROGRAMS TO MITIGATE AND REDUCE THE IMPACT OF ILLICIT CROPS AND DRUG PRODUCTION ON THE ENVIRONMENT, WITH THE INCORPORATION AND PARTICIPATION OF LOCAL COMMUNITIES, IN ACCORDANCE WITH THE NATIONAL POLICIES OF MEMBER STATES.

In relation to the design and implementation of plans or programs to mitigate and reduce the impact of illicit crops and drug production on the environment, with the incorporation and participation of local communities, in accordance with the national policies of the member states, the seventh round showed that three member states (nine percent) fully comply with all relevant evaluation criteria of this objective. There are three countries (nine percent) in the process of compliance, four countries (12%) do not comply with these requirements and in 23 countries (70%), no significant areas of illicit crops have been detected.

The seventh round revealed that research and studies were carried out on the extent of the environmental impact caused by the illicit cultivation of crops and illicit drug production, in five countries (15%) and in four of these countries, specific plans based on the result of research carried out to mitigate or reduce the negative environmental impact.

## E. Small-scale drug trafficking effects on public health, the economy, social cohesion and citizen security

### OBJECTIVE 5

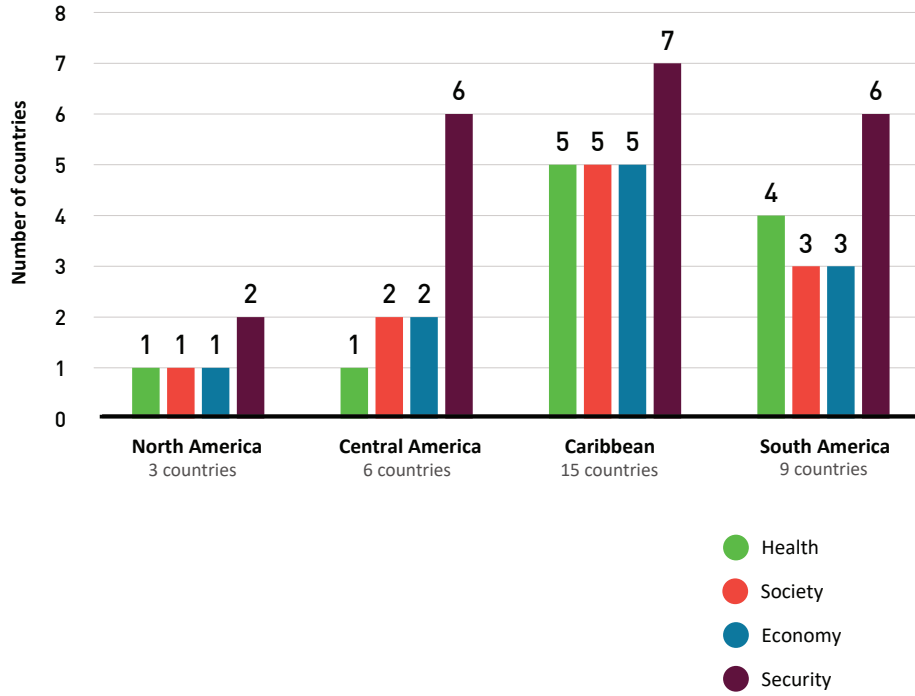
ESTABLISH, AS APPROPRIATE, AND BASED ON EVIDENCE THE EFFECTS CAUSED BY SMALL-SCALE DRUG TRAFFICKING ON PUBLIC HEALTH, THE ECONOMY, SOCIAL COHESION AND CITIZEN SECURITY.

With respect to the establishment, based on evidence, of the effects caused by small-scale drug trafficking on public health, the economy, social cohesion and citizen security, the seventh round showed that five member states (15%) fully comply with all the relevant evaluation criteria of this objective. There are 18 countries (55%) in the process of compliance, while 10 member states (30%) do not comply with these requirements.

The seventh round demonstrated that 11 member states (33%) have characterization methodologies with territorial and socio-economic approaches on micro-drug trafficking or small-scale drug trafficking and how this phenomenon affects public health, the economy, social cohesion and citizen security, while the majority of the countries (22 or 67%) indicated that they do not have such methodologies.

With regard to the exchange of information on the effects of small-scale drug trafficking or micro-drug trafficking, 64% (21 countries) carry out this exchange in the security sector; 33% (11 countries) in the health sector; and the same percentages in the social sectors 33% (11 countries) and economic sectors 33% (11 countries). Moreover, the following graph shows that the exchange in the security sector takes place in the largest number of countries in all sub-regions. Approximately one third of the countries in all sub regions carry out this information exchange in the other three sectors (health, social and economic).

Exchange of information on the effects of micro-drug trafficking by sectors



# CHAPTER 4

# CONTROL MEASURES

## A. Programs aimed at preventing and reducing drug trafficking

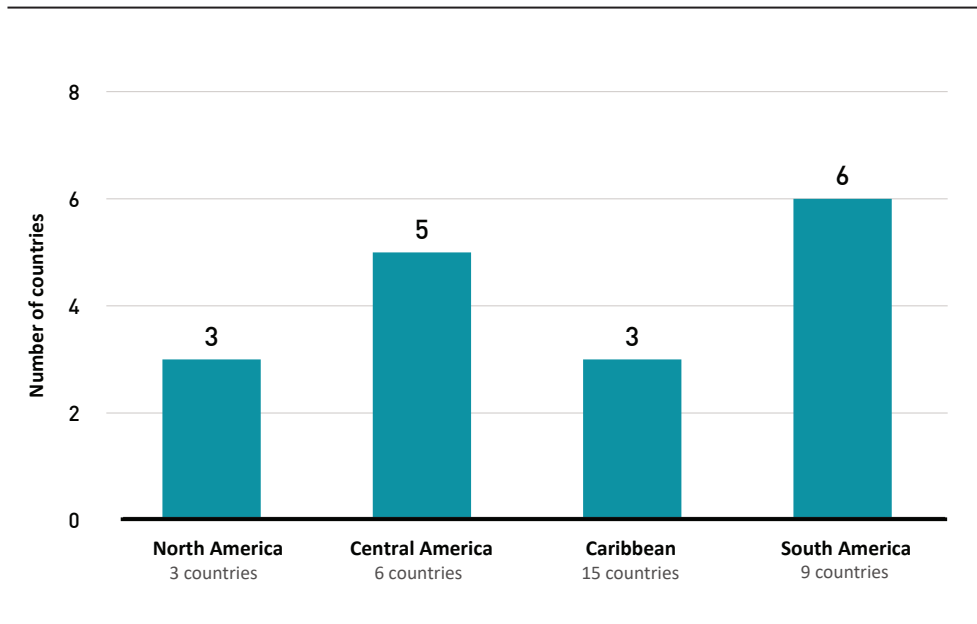
### OBJECTIVE 1

ADOPT AND/OR STRENGTHEN COMPREHENSIVE AND BALANCED PROGRAMS AIMED AT PREVENTING AND REDUCING DRUG TRAFFICKING, IN ACCORDANCE WITH THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

With regard to the adoption or strengthening of comprehensive and balanced programs aimed at preventing and reducing drug trafficking, the seventh round showed that 12 member states (36%) fully comply with all the relevant evaluation criteria of this objective, while 21 member states (64%) are in the process of complying with these requirements.

The seventh round also showed that more than half of the countries in the Hemisphere, 17 countries (52%) implement procedures and strengthen personnel capacities for the detection, investigation, and dismantling of laboratories or illicit drug processing facilities. It was also observed that of the 16 countries (48%) that do not have such procedures or protocols, 36% (12 countries) are in the Caribbean, nine percent (six countries) in South America, and three percent (one country) in Central America.

**Countries with protocols or operating procedures to detect, investigate, and dismantle laboratories of illicit drugs**

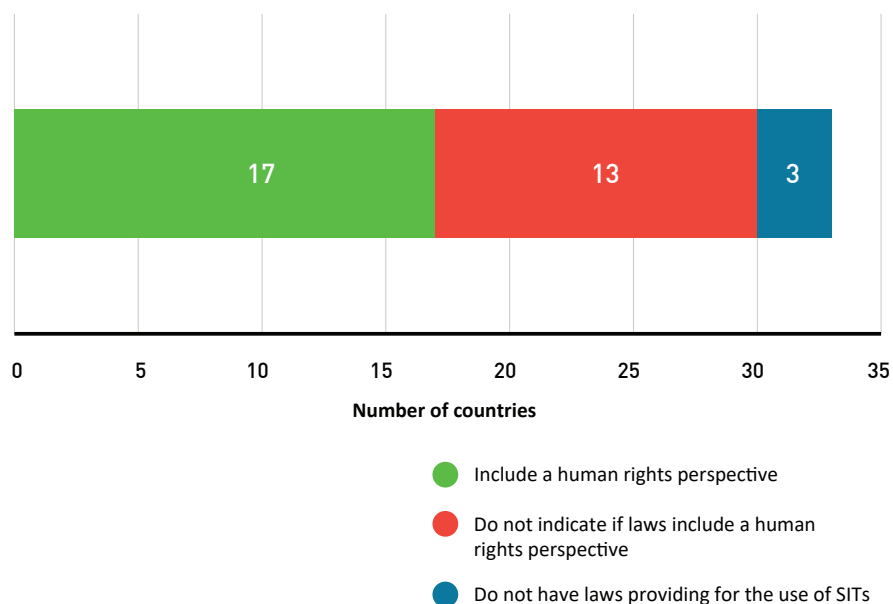


With regard to strengthening the design, updating and implementation of programs aimed at land, riverine, air and sea interdiction, 30 countries (91%) carry out this activity, and the remaining nine percent did not provide information on the implementation of these programs, which is distributed in two Caribbean countries (six percent) and one in Central America (three percent).

The seventh round also revealed that 30 countries (91%) have laws or regulations providing for the use of specialized investigative tools and techniques to prevent and reduce drug trafficking; however, it highlighted that only (17 or 52%) of the countries consider a human rights perspective in their legal frameworks.



**Countries with laws or regulations providing for the use of specialized investigation tools and techniques (SITs) to prevent and reduce drug trafficking**



Another aspect revealed by this round is that most of the countries (32 or 97%) implement or participate in ongoing training programs linked to regulations, processes and procedures on drug trafficking and related crimes, as well as specialized investigative techniques and intelligence for personnel. The remaining three percent are located in the Caribbean.

In 20 countries (61%), diagnosis or updated studies are carried out to identify new trends and threats related to drug trafficking and related crimes, 39% (13 countries) lack these mechanisms and are distributed as follows: 30% in the Caribbean (10 countries), three percent (one country) in North America and three percent (one country) in South America.

Lastly, notably 97% of the countries (32) have an agency responsible for analyzing chemical substances, precursors and pharmaceutical products, including new psychoactive substances (NPS).

## B. Control measures to prevent the diversion of controlled chemical substances

### OBJECTIVE 2

ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION OF CONTROLLED CHEMICAL SUBSTANCES TOWARDS ILLICIT ACTIVITIES.

In regard to the adoption or strengthening of Control Measures to prevent the diversion of controlled chemical substances towards illicit activities, the seventh round revealed that 13 countries (39%) fully comply with all the relevant evaluation criteria, 19 countries (58%) are in the process of compliance, while one country (three percent) do not comply with these requirements.

In terms of promotion of inter-agency coordination to improve cooperation with the chemical industry in preventing diversion towards illicit activities, 32 countries (97%) have a competent authority for controlling domestic trade. With the exception of one country in the Caribbean, all sub-regions in the Hemisphere have said authority. Meanwhile, (25 or 76%) member states have instruments or mechanisms to inform the industry and users in general of applicable control and methods to prevent the diversion of controlled chemical substances. It is important to highlight that all countries in Central America and South America have these instruments or mechanisms, as well as nine countries in the Caribbean and one country in North America.

The evaluation also indicated that 73% of member states (24) carry out analyses that include the exchange of information through existing mechanisms of substances, their analogs and precursors that pose a threat to public health. More than half of the member states in Central America, the Caribbean and South America have these analyses, while in North America, all three countries do.

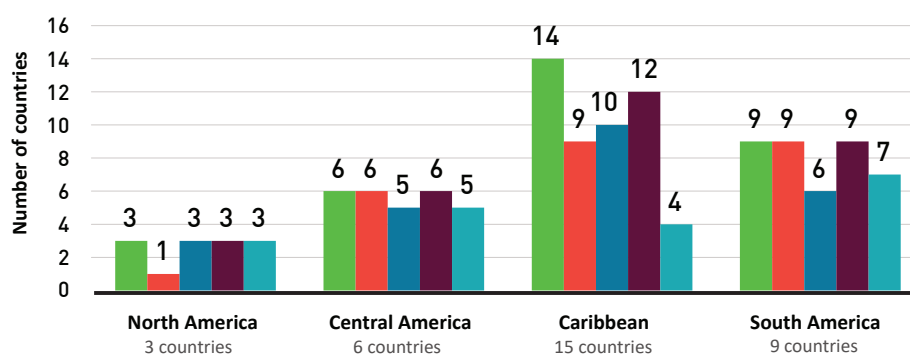
Along these lines, it is notable that countries have taken a step further by strengthening the existing control system to prevent the diversion of controlled chemical substances. On one hand, 25 countries have legislation incorporating the control measures in Article 12, paragraph 8 of the 1988 United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, to prevent diversion of controlled chemical substances towards illicit activities, while six member states have partially included it. On the other hand, 22 countries have incorporated paragraph 9 of said Convention, while 10 member states do so to a partial extent.

The seventh round showed, with the exception of three countries in the Caribbean, that all member states in North America, Central America, and South America use the International Narcotics Control Board Pre-Export Notification (INCB PEN-Online) information system for controlled chemical substances.

In regards to the training for relevant drug control personnel on the identification and handling of controlled chemical substances, 19 member states have training programs of this kind, while 14

countries do not have them. North America reflects a positive scenario for this indicator, while in the Caribbean, only four countries (27% of this sub-region) have these training programs. Nonetheless, the situation between Central America and South America is more equitable, having these programs in five countries (83% of Central America) and in seven countries (78% of South America).

#### Control measures to prevent diversion of controlled chemical substances



- Have a competent authority for the administration of controlled chemical substances
- Have mechanisms to inform the industry about controls to prevent diversion of controlled chemical substances
- Have analyses and information exchange on substances, analogs and precursors
- Use INCB PEN-Online
- Have training programs to identify and handle controlled chemical substances

## C. Control measures to prevent the diversion of pharmaceutical products

### OBJECTIVE 3

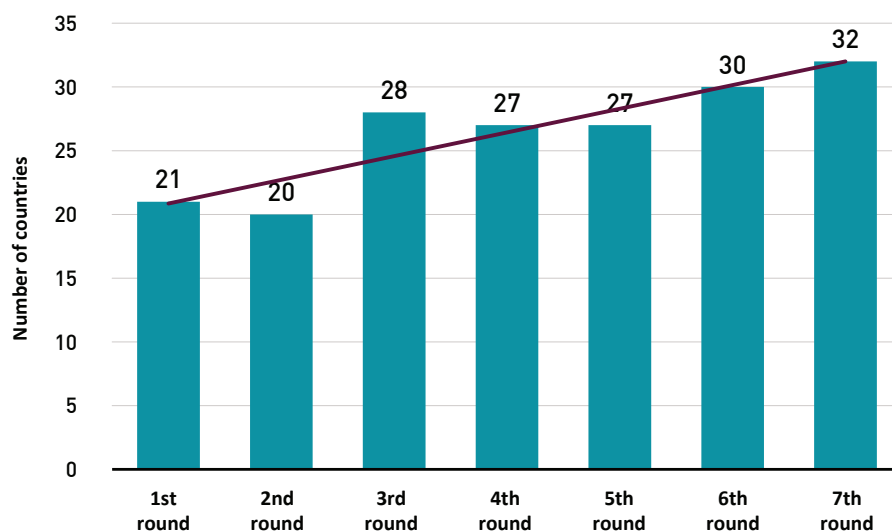
ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION TOWARDS ILLICIT ACTIVITIES OF PHARMACEUTICAL PRODUCTS CONTAINING PRECURSOR SUBSTANCES OR THOSE CONTAINING NARCOTIC DRUGS AND/OR PSYCHOTROPIC SUBSTANCES, ENSURING THE ADEQUATE AVAILABILITY AND ACCESS SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES.

For the adoption or strengthening of Control Measures to prevent diversion towards illicit activities of pharmaceutical products containing precursor chemicals or those containing narcotic drugs or psychotropic substances, to ensure the adequate availability and access solely for medical and scientific purposes, the seventh round revealed that 26 member states (79%) fully comply with all the relevant evaluation criteria, while seven countries (21%) are in the process of complying with these requirements.

In this context, 31 countries (94%) have an updated register of individuals and corporations handling pharmaceutical products containing these substances, 30 countries (91%) issue licenses to manufacturers and distributors, and 28 countries (85%) carry out regular inspections or audits of the establishments of individuals and corporations authorized to handle pharmaceutical products containing precursor chemicals, narcotics or psychotropic substances.

With reference to the update of the existing regulations and control measures to prevent diversion of pharmaceutical products containing narcotic drugs or psychotropic substances, 32 countries (97%) have established criminal, civil or administrative penalties for violations by individuals or corporations that handle pharmaceutical products containing precursor substances, narcotics or psychotropic substances. It is worth noting that generally throughout all the evaluation rounds, as noted in the following chart, progress has been made.

Countries with criminal, civil and/or administrative penalties for violations by individuals or corporations that handle pharmaceutical products



## D. Adequate availability and accessibility of controlled substances for medical and scientific purposes

### OBJECTIVE 4 | ENSURE ADEQUATE AVAILABILITY AND ACCESSIBILITY OF SUBSTANCES SUBJECT TO INTERNATIONAL CONTROL SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES, PREVENTING THEIR DIVERSION.

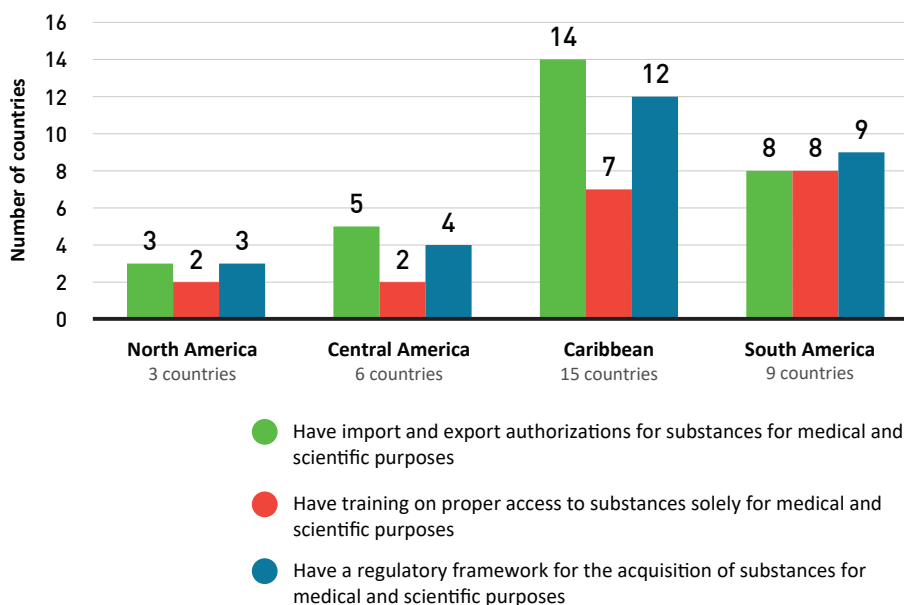
To ensure adequate availability and accessibility of substances subject to international control solely for medical and scientific purposes, preventing their diversion, the seventh round revealed that 17 member states (52%) fully comply with all the relevant evaluation criteria, 15 countries (45%) are in the process of compliance, while one member state (three percent) does not comply with these requirements.

The member states have worked towards streamlining the process for issuing import and export authorizations for controlled substances for medical and scientific purposes, in accordance with national legislation. In this sense, 30 member states (91%) have special processes for issuing import and export authorizations for substances subject to international control for medical and scientific purposes. All countries in North America and the majority of the countries in the Caribbean, Central America, and South America, have these processes.

For the adoption of measures, in accordance with national legislation, to provide capacity building for national competent authorities and health professionals, 19 countries (58%) have carried out training or awareness activities on the proper access to substances subject to international control solely for medical and scientific purposes. However, in 14 countries (42%) the performance of these activities is pending. In this case, the sub-regional distribution is as follows: most countries from South America have conducted this type of training; two out of three countries in North America, half of the countries (seven) from the Caribbean, and only a third of the countries (two) from Central America have carried out these activities.

Member states have also worked towards improving the access to controlled substances for medical and scientific purposes by appropriately addressing existing barriers, including those related to legislation, regulations and health care systems, among others, while preventing their diversion, abuse and trafficking. More specifically, 28 countries (85%) have a regulatory framework or guidelines to govern the acquisition of substances subject to international control for medical and scientific purposes, while five countries (15%) do not have this framework. North America and South America reflect a favorable situation of this indicator, given that all countries have this regulatory framework, while in the Caribbean, 12 out of 15 countries and, in Central America, only four out of six countries have the abovementioned framework.

**Availability and accessibility of internationally controlled drugs for medical and scientific purposes**



## E. New psychoactive substances (NPS) and amphetamine-type stimulants

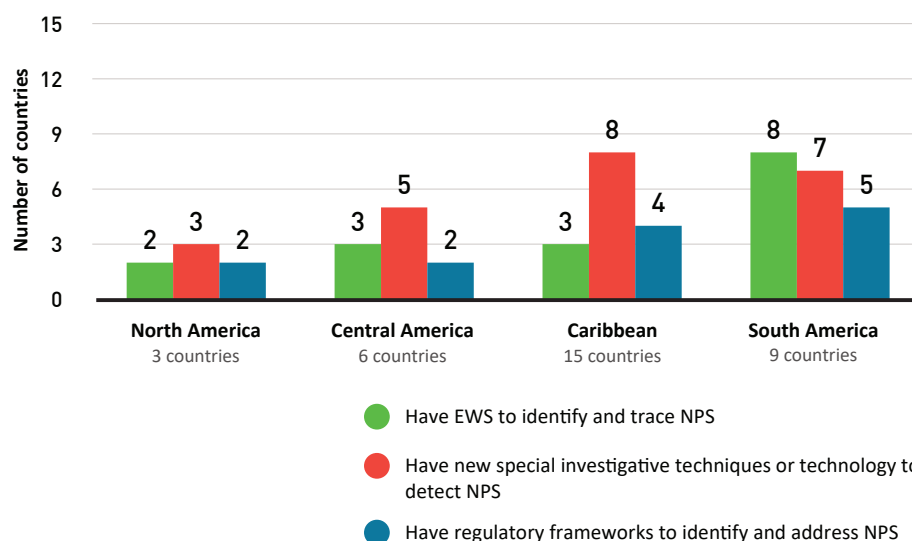
### OBJECTIVE 5

STRENGTHEN NATIONAL CONTROL MEASURES TO ADDRESS THE CHALLENGE OF NEW PSYCHOACTIVE SUBSTANCES AND THE THREAT OF AMPHETAMINE TYPE STIMULANTS.

In regard to the strengthening of the national Control Measures to address the challenge of new psychoactive substances (NPS) and the threat of amphetamine-type stimulants, the seventh round revealed that five member states (15%) fully comply with all the relevant evaluation criteria, 22 countries (67%) are in the process of compliance, while six member states (18%) do not comply with these requirements.

Member states have established or strengthened early warning systems (EWS) at the national level to promote, as appropriate, collaboration and the exchange of information with other existing regional or global systems. In this sense, 16 countries (48%) have developed this kind of system to identify and track NPS, amphetamine-type stimulants and other substances subject to international control. From this group of 16, half of them have shared information with other regional or global systems. Almost all of the countries in South America (eight), two out of three countries in North America, half of the countries in Central America (three), and only a fifth of the countries in the Caribbean (three) have EWS.

Strengthening national measures to address the challenge of new psychoactive substances (NPS)



Furthermore, member states have worked towards the improvement of the capabilities to detect and analyze NPS by making resources and tools available for those responsible in this area according to the possibilities of member states. It is noted that during the seventh round, 23 countries (70%) have acquired and used new special investigative techniques, updated equipment or technology to detect and analyze NPS, while 10 countries did not name any techniques.

In this sense, North America, Central America and South America reflect a favorable outlook for this indicator. All countries in North America (three) have new special techniques, in Central America, five out of six countries (83%) and, in South America, seven out of nine countries, comply with this priority action. On the other hand, in the Caribbean, only eight out of 15 countries (53%) use these new special techniques.

It is observed that countries have also been aiming to design and implement national regulatory tools to address the challenges at the onset of NPS. In this sense, 13 countries (39%) have regulatory frameworks and/or guidelines that identify and address the challenges posed by the onset of NPS and amphetamine-type stimulants, while 20 member states (61%) do not have this type of regulatory framework/guidelines. In this sense, there is a need for improvement, with the sub-regional distribution as follows: two out of three countries in North America have regulatory framework, five out of nine countries in South America, two out of six countries in Central America and four out of 15 countries in the Caribbean.

## F. Money laundering derived from drug trafficking

### OBJECTIVE 6

ESTABLISH, UPDATE AND STRENGTHEN, AS APPROPRIATE, THE LEGISLATIVE AND INSTITUTIONAL FRAMEWORKS TO COUNTER MONEY LAUNDERING DERIVED FROM DRUG TRAFFICKING.

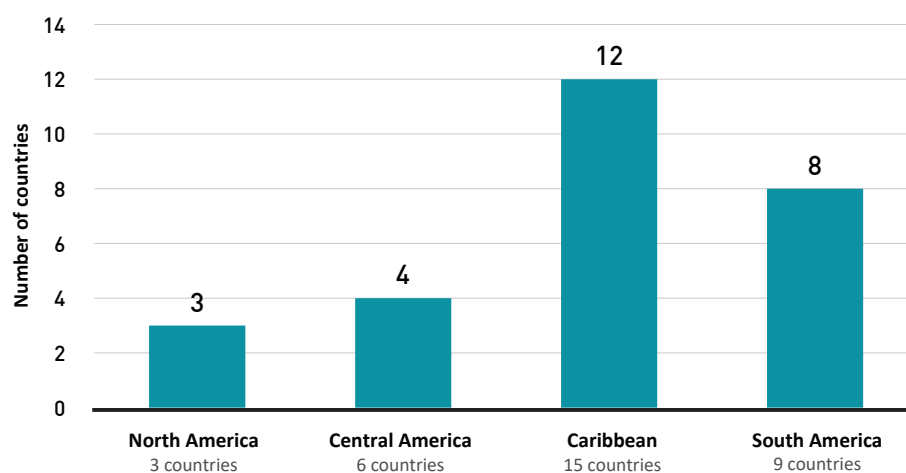
With respect to establishing, updating and strengthening the legislative and institutional frameworks to counter money laundering derived from drug trafficking, the seventh round showed that 25 member states (76%) fully comply with all relevant evaluation criteria of this objective, while eight countries (24%) are in the process of complying with these requirements.

In this round, 32 member states (97%) have established, updated or strengthened the legislative and institutional frameworks to counter money laundering derived from drug trafficking.



Eighty-two percent of the countries (27) have protocols that enable the authorities to conduct financial and asset investigations parallel to drug trafficking investigations, the other six countries (18%) is distributed as follows: The Caribbean with nine percent (three countries); Central America with six percent (three countries) and South America with three percent (one country).

**Countries with protocols that enable the authorities to conduct financial and asset investigations parallel to drug trafficking investigations**



All countries (33 countries, or 100%) have mechanisms allowing for inter-agency coordination and cooperation in the area of preventing and controlling money laundering. Likewise, all countries (33 countries, or 100%) have a Financial Intelligence Unit as a government agency.

With regard to the countries' capacity to have mechanisms for analyzing money laundering risk, in accordance with the Financial Action Task Force (FATF) recommendations, the seventh round showed that 94% (31 countries) have such mechanisms, while six percent of the member states (two countries) located in South America lack them.

## G. Agencies for the administration of seized assets from drug trafficking and money laundering

### OBJECTIVE 7

ESTABLISH AND/OR STRENGTHEN AGENCIES FOR THE ADMINISTRATION AND DISPOSITION OF SEIZED AND/OR FORFEITED ASSETS IN CASES OF DRUG TRAFFICKING, MONEY LAUNDERING AND OTHER RELATED CRIMES.

In relation to the establishment and strengthening of agencies for the administration and disposition of seized assets in cases of drug trafficking, money laundering and other related crimes, the seventh round showed that 21 member states (64%) fully comply with all relevant evaluation criteria of this objective, while 12 countries (36%) are in the process of complying with these requirements.

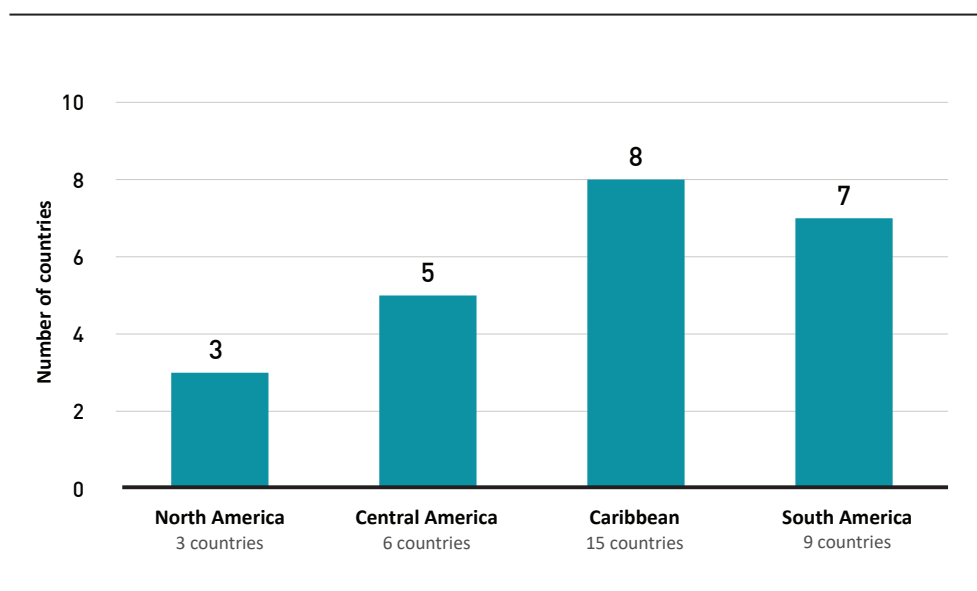
The seventh round showed that the 33 participating member states (100%) have legislation, regulations, or procedures, as well as other specific measures, in accordance with international treaties and conventions, to facilitate the seizure and forfeiture of assets, instrument, or products deriving from drug trafficking and other related crimes.

Similarly, 94% of the member states evaluated (31) have a competent authority responsible for the administration of seized and forfeited assets, while two countries (six percent) located in South America do not have this authority.

Eighty-eight percent of the countries (29) have regulations to facilitate the accountability and transparency of the administration of seized and forfeited assets, while those that do not have them; in this case, 12% (four), are among the countries that make up the Caribbean.

Seventy percent of the countries (23) assessed in this round offer or participate in specialized training programs for the administration and disposition of seized and forfeited assets. Those that do not have such programs (30%) are distributed as follows: 21% (seven countries) in the Caribbean; six percent (two countries) in South America and three percent (one country) in Central America.

Countries that offer or participate in specialized training programs for the administration and disposition of seized and forfeited assets



## H. National information gathering systems and mechanisms for exchanging intelligence information

### OBJECTIVE 8

STRENGTHEN NATIONAL INFORMATION GATHERING SYSTEMS AND MECHANISMS FOR EXCHANGING INTELLIGENCE INFORMATION TO DETECT ROUTES AND METHODS USED BY CRIMINAL DRUG TRAFFICKING ORGANIZATIONS.

Regarding the strengthening of national information gathering systems and mechanisms for exchanging intelligence information to detect routes and methods used by criminal drug trafficking organizations, the seventh round showed that 23 member states (70%) fully comply with all relevant evaluation criteria of this objective, seven countries (21%) are in the process of compliance, while three member states (nine percent) do not comply with these requirements.

As for intelligence exchange mechanisms, the seventh round revealed that 88% of countries (29) have them and 12% of member states (four) do not have them yet.

On national information gathering mechanisms on drug trafficking and related crimes, including alerts on changing behaviors and modus operandi of criminal organizations, 73% of the countries evaluated (24) have such systems, but not 27% (nine countries), distributed as follows: 15% (five countries) in the Caribbean, six percent (two countries) in South America, three percent (one country) in Central America and three percent (one country) in North America.

# CHAPTER 5

# INTERNATIONAL COOPERATION

## A. Cooperation and coordination mechanisms on drug policies

### OBJECTIVE 1

PROMOTE AND STRENGTHEN COOPERATION AND COORDINATION MECHANISMS TO FOSTER TECHNICAL ASSISTANCE, IMPROVE EXCHANGE OF INFORMATION AND EXPERIENCES, AND SHARE BEST PRACTICES AND LESSONS LEARNED ON DRUG POLICIES AND RELATED CRIMES.

In regard to the promotion and strengthening of the cooperation and coordination mechanisms to foster technical assistance, improve exchange of information and experiences, and share best practices and lessons learned on drug policies and related crimes, the seventh round revealed that 20 member states (61%) fully comply with all the relevant evaluation criteria, while 13 countries (36%) are in the process of complying with these requirements.

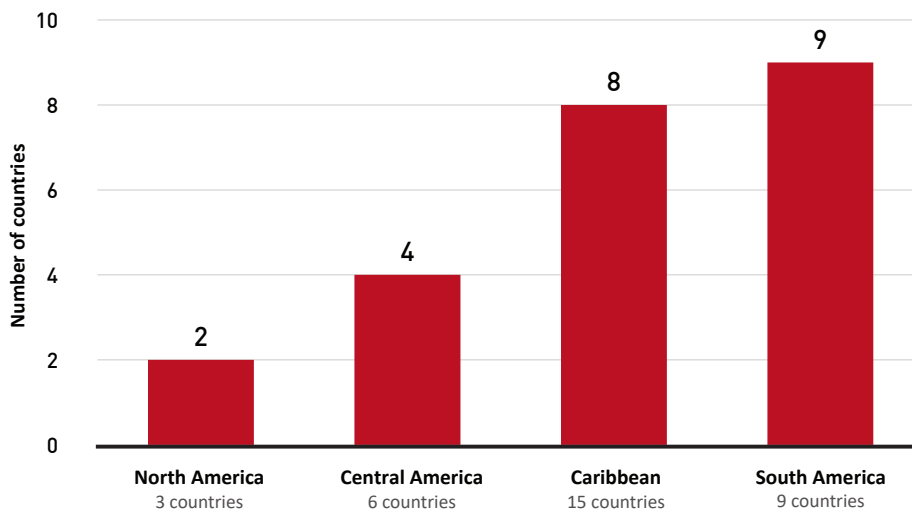
International cooperation is one of the key tools with which to confront the world drug problem. One of the most important *OAS Hemispheric Drug Strategy* principles is the common and shared responsibility to strengthen hemispheric and regional cooperation, based on collective efforts to address the problem, with the objective of continuously improving the drug policies of the member states.

The *OAS Hemispheric Plan of Action on Drugs 2016-2020* establishes priority actions for the OAS member states, placing individuals at the center of drug policies, with a crosscutting focus on human rights, gender perspective and development, supported by evidence-based drug policies.

For this evaluation round, 31 countries in the Hemisphere (94%) report carrying out activities for the promotion, strengthening, or implementation of technical assistance and horizontal cooperation among OAS member states, third States and with international organizations. In this seventh round, 23 countries (69%) exchanged technical knowledge with their counterparts on drug policies, including regulations, studies, research, and bibliographic material produced by countries and international organizations. As depicted in the following graph, all South American countries have incorporated this indicator into their drug policies. More than half of Central American and Caribbean countries

also implement this indicator in their drug policies. Finally, most North American countries exchange technical knowledge related to drug policy as well.

**Countries exchanging technical knowledge, including regulations, studies, research, and bibliographic material on drug policies**



Significant progress has been observed in the establishment of secure communication channels for the exchange of intelligence information on drug interdiction and control. In this context, 32 countries in the Hemisphere (97%) have established secure channels. Similarly, almost all of these countries (30 or 91%) promote the exchange with their foreign counterparts of best practices on training, as well as specialization and professional development of the staff responsible for implementing national drug plans or strategies.

It is important to highlight the relevance that countries have given to strengthening coordination activities to prevent crimes related to drug trafficking. In this regard, all 33 countries implement policies to combat related crimes associated with drug trafficking, and almost all countries (30 or 91%) employ mechanisms for bilateral law enforcement coordination and collaboration, focused on the dismantling of criminal groups linked to drug trafficking and related crimes.

## **B. Cooperation and coordination mechanisms for the forfeiture and management of assets derived from drug trafficking**

### **OBJECTIVE 2**

STRENGTHEN THE MULTILATERAL COOPERATION AND COORDINATION MECHANISMS IN THE AREA OF FORFEITURE AND MANAGEMENT OF ASSETS DERIVED FROM DRUG TRAFFICKING AND RELATED CRIMES.

In regard to the strengthening of the multilateral cooperation and coordination mechanisms in the area of forfeiture and management of assets derived from drug trafficking and related crimes, the seventh round revealed that 26 member states (79%) fully comply with all the relevant evaluation criteria, while seven countries (21%) are in the process of complying with these requirements.

In the seventh round, member states have continued with the process of reviewing and updating the regulatory and procedural frameworks that allow for effective cooperation mechanisms with other countries and relevant international organizations on forfeiture and management of assets derived from drug trafficking, money laundering and other related crimes. The majority of the countries in the Hemisphere (29 or 88%) have reviewed and updated these frameworks. Along these lines, all 33 countries have been evaluated by the Financial Action Task Force (FATF), the Caribbean Financial Action Task Force (CFATF) or the Financial Action Task Force of Latin America (GAFILAT).

Over the rounds, progress has been made in the creation of mechanisms and procedures that guarantee the investigation and forfeiture of assets derived from drug trafficking and related crimes. However, a number of countries still face difficulties in identifying and proving the link that these assets have with criminal groups.

It should be noted that 30 countries in the Hemisphere (91%) have mechanisms and procedures that enable their competent authorities to undertake expeditious actions in response to mutual legal assistance requests on investigation and forfeiture of assets derived from drug trafficking and related crimes. Additionally, all of the countries evaluated (33) have competent authorities with legal powers to exchange information on money laundering investigations, including identification and tracking of the instruments associated with this offense, through information exchange networks, such as the International Criminal Police Organization (INTERPOL), Regional Asset Recovery Network (RRAG), among others.

## C. Support for the Multilateral Evaluation Mechanism

### OBJECTIVE 3

SUPPORT THE MULTILATERAL EVALUATION MECHANISM (MEM) PROCESS, NOTING THE LEVEL OF PROGRESS AND COMPLIANCE OF THE COMMITMENTS UNDERTAKEN BY MEMBER STATES.

With reference to support for the Multilateral Evaluation Mechanism (MEM) process, noting the level of progress and compliance of the commitments undertaken by member states, the seventh round showed that 21 countries (64%) fully comply with all the relevant evaluation criteria of this objective, while 12 member states (36%) are in the process of complying with these requirements.

In accordance with the purposes of the *OAS Hemispheric Drug Strategy* and the priority actions of its *Plan of Action 2016-2020*, member states have strengthened the MEM process through the fulfillment of the commitments assumed. Thus, 25 countries (76%) systematically gather current and quality information to follow-up on the implementation of MEM recommendations.

The countries participate actively and in a timely manner in each of the activities they carry out according to the methodology approved by CICAD, and according to this, 32 countries (97%) have designated competent authorities and representatives to carry out MEM related activities. In addition, 28 countries (85%) have indicated that they disseminate their national reports to the public and to the competent authorities for the adoption of the necessary corrective and proactive actions. It is also noted that 24 countries (73%) have participated in the exchange of information on hemispheric cooperation initiatives focused on addressing the world drug problem, to support the implementation of the recommendations issued by the MEM process.



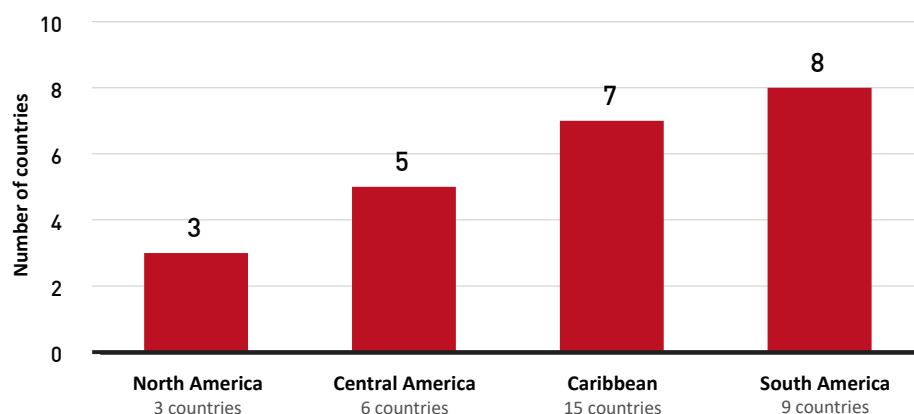
## D. Strengthening international cooperation as defined in the international legal instruments related to the world drug problem

### OBJECTIVE 4 | STRENGTHEN INTERNATIONAL COOPERATION AS DEFINED IN THE INTERNATIONAL LEGAL INSTRUMENTS RELATED TO THE WORLD DRUG PROBLEM, WITH RESPECT FOR HUMAN RIGHTS.

Regarding the strengthening of International Cooperation, as defined in the international legal instruments related to the world drug problem, with respect for human rights, the seventh round showed that 17 member states (52%) fully comply with all relevant evaluation criteria of this objective, while 16 countries (48%) are in the process of complying with these requirements.

This round showed that 23 countries of the Hemisphere (70%) have enacted legislation or adopted administrative measures and actions to improve the implementation of the obligations set forth within international legal instruments regarding the world drug problem, respecting human rights and gender equality. In the following graph, North America reflects a favorable situation with respect to this indicator, since all countries have enacted legislation to improve the implementation of their obligations established in the international instruments. It is also observed that almost all countries in South and Central America also have this indicator. However, more than half of the countries of the Caribbean (eight) have not implemented the actions of this indicator.

**Countries that have enacted or adopted legislation or administrative measures and actions to improve the implementation of the obligations set forth within international legal instruments regarding the world drug problem (2014-2018)**



The importance of ratifying, acceding to and complying with the commitments established by the international instruments related to the world drug problem and related crimes should be noted. With regard to international conventions, beginning with the United Nations Convention Against Transnational Organized Crime (2000) and its Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, it is noted that all the evaluated countries have ratified this convention and the aforementioned protocol. The Protocol against the Smuggling of Migrants by Land, Sea and Air has been ratified by 30 countries (91%). Likewise, 26 countries (79%) have ratified the Protocol Against the Illicit Manufacturing of and Trafficking in Firearms, their Parts and Components and Ammunition. Also, the importance to fulfill the commitments established by the United Nations Single Convention on Narcotic Drugs (1961), (amended by the 1972 Protocol), the United Nations Convention on Psychotropic Substances, (1971), and the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), which have been ratified by all the countries participating in this evaluation round. Finally, the United Nations Convention Against Corruption (2003) has been ratified by 30 member states (91%).

With respect to the regional conventions, it can be observed that almost all countries (31 or 94%) have ratified the Inter-American Convention Against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives, and other Related Materials (CIFTA) (1997), and all member states have ratified the Inter-American Convention Against Corruption (1996). While, 26 countries (79%) have ratified the Inter-American Convention on Mutual Assistance in Criminal Matters (1992).

Finally, it is significant to highlight the importance of implementing the recommendations emanating from the *2016 United Nations General Assembly Special Session on the World Drug Problem (UNGASS)*.

## **E. Hemispheric judicial cooperation mechanisms and mutual legal or judicial assistance related to drug trafficking**

### **OBJECTIVE 5**

PROMOTE COMMON UNDERSTANDING OF NATIONAL LEGAL NORMS, REGULATIONS, AND INTERNAL PROCEDURES FOR THE IMPLEMENTATION OF HEMISPHERIC JUDICIAL COOPERATION MECHANISMS AND MUTUAL LEGAL OR JUDICIAL ASSISTANCE RELATED TO DRUG TRAFFICKING AND RELATED CRIMES.

With regard to the promotion of a common understanding of national legal norms, regulations, and internal procedures for the implementation of hemispheric judicial cooperation mechanisms and mutual legal or judicial assistance related to drug trafficking and related crimes, the seventh round

showed that 26 member states (79%) fully comply with all relevant evaluation criteria of this objective, while seven countries (21%) are in the process of meeting these requirements.

In the sense of an institutional framework that facilitates judicial cooperation among member states to promote a common understanding of national legal norms, regulations, and internal procedures for the implementation of hemispheric mechanisms for judicial cooperation and mutual legal or judicial assistance related to drug trafficking and related crimes, the seventh round noted that 32 countries (97%) in the Hemisphere have established bilateral or sub-regional international cooperation agreements on mutual legal assistance, and 30 countries (91%) have adopted legislation on mutual legal or judicial assistance to third States in investigations, prosecutions, and judicial proceedings concerning drug trafficking and related crimes.

The seventh round showed an increase in the number of countries with legal provisions empowering their competent authorities to receive extradition requests. The existence of legal provisions allowing extradition is noted, and member states are aware of the adoption of measures to promote and confront drug trafficking and to facilitate extraditions, in accordance with the legal regulations of each State. In this context, all of the countries evaluated (33) have laws on extradition for drug trafficking; however, 28 countries (85%) have laws that allow the extradition of their nationals for the same offense.

The seventh round also revealed significant progress made by the states in the area of international cooperation, with the implementation, for the most part, of the objectives of the *OAS Hemispheric Drug Strategy and its Plan of Action 2016-2020*.



# CONCLUSIONS

The seventh evaluation round of the Multilateral Evaluation Mechanism (MEM) successfully assessed member states' compliance with the 30 objectives of the *Plan of Action on Drugs 2016-2020 of the OAS Hemispheric Drug Strategy*.

In the area of Institutional Strengthening, it is noteworthy that 85% of the OAS member states have national authorities at a high political level with the capacity and competence to coordinate their drug policies. On one hand, 76% of the countries implement comprehensive programs for social inclusion in vulnerable populations, while 42% of the member states do not foster proportionate sentencing, that address the seriousness of drug offenses and safeguarding legal proceedings.

In the area of Demand Reduction, it is notable that 33% of the countries have complied with the establishment of a national system for the treatment, rehabilitation and social inclusion of people with problematic drug use. On the other hand, 94% of member states are in the process of fully meeting the objective regarding the ongoing training and certification of personnel that provide these services in addition to prevention. Moreover, it is highlighted that 30% of the countries have not complied with the establishment or strengthening of governmental capacities to regulate, enable, accredit and supervise prevention programs and care and treatment services.

In Supply Reduction, significant areas of illicit crops have been detected in 30% of countries. On the other hand, 45% of the countries design, implement, and strengthen their policies and programs aimed at preventing and reducing the illicit supply of drugs. Likewise, 88% of the countries are in the process of fully complying with the implementation of mechanisms for the collection and analysis of information used for the development of the aforementioned policies. Furthermore, 45% of member states do not formulate sustainable urban development initiatives for people affected by illicit drug-related activities.

In the area of Control Measures, 79% of member states have strengthened their control measures to prevent the diversion of pharmaceutical products to illicit activities, ensuring their availability exclusively for medical and scientific purposes. It should also be noted that 76% of the countries have reinforced their regulatory and institutional frameworks to counter the laundering of assets derived from drug trafficking. On the other hand, it is noted that 18% of the countries have not strengthened their national measures to address the challenge of new psychoactive substances or amphetamine-type stimulants. Nevertheless, 67 % of member states are already in the process of doing so.

In the area of International Cooperation, 61% of the countries have strengthened their cooperation and coordination mechanisms to promote technical assistance, improve the exchange of information and experiences, and share good practices and lessons learned on drug policies and related crimes. Similarly, 79% of member states have promoted a common understanding of national legal norms and procedures for implementing hemispheric mechanisms for judicial cooperation and mutual legal or judicial assistance related to drug trafficking and related crimes. In contrast, 48% of the countries have

not strengthened international cooperation, in accordance with the international legal instruments related to the world drug problem.

To conclude, it is important to mention that the OAS member states' decision to use the MEM to evaluate the *Plan of Action on Drugs 2016-2020 of the OAS Hemispheric Drug Strategy* has demonstrated absolute confidence and objectivity in the validity of this Mechanism. The methodology developed by the MEM has worked favorably, with the ongoing support and technical assistance of the CICAD Executive Secretariat through the MEM Unit. Thus, national reports have been produced to guide member states in strengthening their policies and programs that comprehensively address the world drug problem in the Hemisphere.





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