

RESEARCH BRIEF

COVID-19 and the drug supply chain: from production and trafficking to use



UNITED NATIONS OFFICE ON DRUGS AND CRIME
Vienna

**COVID-19 AND THE DRUG SUPPLY CHAIN:
FROM PRODUCTION AND TRAFFICKING TO USE**

UNITED NATIONS OFFICE ON DRUGS AND CRIME (UNODC)
RESEARCH BRIEF PREPARED BY THE RESEARCH AND TREND ANALYSIS BRANCH
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ACKNOWLEDGEMENTS

The report *COVID-19 and the Drug Supply Chain: from Production and Trafficking to Use* was prepared by the UNODC Global Research Network under the supervision of Jean-Luc Lemahieu, Director of the Division for Policy Analysis and Public Affairs and Angela Me, Chief of the Research and Trend Analysis Branch.

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This is the first report produced by the UNODC Global Research Network and special thanks go to all its members at UNODC Headquarters and Field Offices across the world whose valuable inputs made the development of this report possible:

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The Research and Trend Analysis Branch is also grateful for the drug data provided by the European Commission's Joint Research Centre (JRC).

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EXECUTIVE SUMMARY

The COVID-19 crisis is taking its toll on the global economy, public health and our way of life. The virus has now infected more than 3.6 million people worldwide, killed 250,000 and led Governments to take drastic measures to limit the spread of coronavirus disease 2019. Roughly half of the global population is living under mobility restrictions, international border crossings have been closed and economic activity has declined drastically, as many countries have opted for the closure of non-essential businesses.

Drug trafficking relies heavily on legal trade to camouflage its activities and on individuals being able to distribute drugs to consumers. The measures implemented by Governments to counter the COVID-19 pandemic have thus inevitably affected all aspects of the illegal drug markets, from the production and trafficking of drugs to their consumption.

Having said that, the impact of those measures varies both in terms of the different business models used in the distribution of each type of drug and the approaches used by different countries to address the pandemic. These range from the closure of international border crossings, while allowing domestic travel, to moderate-to-strict shelter-in-place orders, or a complete lockdown of all activities, including suspension of essential services other than for emergencies. The impact on actual drug production may vary greatly depending on the substance and the geographical location of its production.

Based on the most recent data from government authorities, open sources, including the media, and the network of UNODC field offices, the evidence available suggests the following ongoing dynamics in the impact of the COVID-19 pandemic on the illicit drug markets.

Measures implemented to prevent the spread of COVID-19 are having a mixed impact on the drug supply chain

The impact of the measures implemented to address the COVID-19 pandemic appears to have been most homogenous to date at the very end of the drug supply chain, in the destination markets. Many countries across all regions have reported an overall shortage of numerous types of drugs at the retail level, as well as increases in prices, reductions in purity and that drug users have consequently been switching substance (for example, from heroin to synthetic opioids) and/or increasingly accessing drug treatment. Some countries in the Balkans and in the Middle East, where measures are not so strict during the day, have, however, reported less disruption.

The overall impact on bulk supply is reportedly more heterogenous, both across drugs and across countries. Increased controls resulting from the implementation of measures to fight the spread of COVID-19 have had double-edged consequences on large-scale drug supply. Some countries, such as Italy and countries in Central Asia, have experienced a sharp decrease in drug seizures. Other countries, such as Niger, have reported a cease in drug trafficking. There have also been reports of organized criminal groups involved in drug trafficking becoming distracted from their usual illicit activities by emerging crime linked to the COVID-19 pandemic; for example, cybercrime and trafficking in falsified medicines in the Balkan countries.

On the other hand, other countries, including the Islamic Republic of Iran and Morocco, have reported large drug seizures, indicating that large-scale drug trafficking is still taking place, and some have reported an increase in interdiction resulting from increased controls. An example of an increase in drug enforcement is seen in the United Kingdom of Great Britain and Northern Ireland, where an improvement in the interdiction of “county lines” activities, a trafficking modus operandi particular to

that country in which young disadvantaged people are exploited, has been reported. “Fortuitous” drug interceptions in countries such as Egypt have also resulted in mid-scale drug seizures made during street controls, and reports from Nigeria indicate continued drug trafficking, with a possible increase in the use of postal services.

Drug production

Restrictions resulting from the lockdown could hinder the production and sale of opiates in major producing countries

With the key months for the opium harvest in Afghanistan being March to June, the 2020 opium harvest is taking place during the COVID-19 crisis and it could be affected if the large labour force needed is not able or willing to travel to the areas where opium poppy is grown in the country. This may be due to mobility restrictions imposed by the Government or non-state actors, or by the spread of the COVID-19 virus itself, which may deter workers from travelling or reduce the workforce available due to sickness. A shortage of poppy lancers has already been observed in the western and southern provinces of the country, mainly due to the closure of a border crossing with Pakistan. However, women in poppy-growing households appear to be increasingly engaged in the poppy lancing process, as do people who lost their jobs due to the COVID-19 crisis.

The decline in international trade resulting from the pandemic could also lead to a shortage in the supply of acetic anhydride, a precursor vital to the manufacture of heroin, which is not produced in Afghanistan. Such a shortage could lead to a reduction in the manufacturing of heroin or push it outside the country or even the region.

In Myanmar, there are indications that the 2020 opium harvest, which was concluded before the onset of the pandemic, faces a shortage of buyers possibly because of the related restrictions of movement. There are no indications to date of measures to control the spread of the COVID-19 virus having an impact on opium production in Mexico.

Measures are impeding cocaine production in the short term but a resurgence is likely in the event of economic crisis

Reports from Colombia indicate that law enforcement pressure has increased during the pandemic and that the coca bush eradication campaign is continuing as planned. Cocaine production appears to be being impeded, as producers, especially in eastern Colombia, are suffering from a shortage of gasoline, which was previously smuggled from the Bolivarian republic of Venezuela and is essential in cocaine production.

In the Plurinational State of Bolivia, political turbulence in late 2019 and the recent challenges related to the spread of COVID-19 appear to be limiting the ability of state authorities to control coca bush cultivation, which could lead to an increase in its cultivation. In Peru, a drop in the price of cocaine is indicative of a reduction in trafficking opportunities and may discourage coca bush cultivation in the short-term, although the looming economic crisis may lead more farmers to increase or take up coca cultivation in all the major cocaine-producing countries.

Reduced trade is limiting the availability of precursors for synthetic drugs in some regions

Synthetic drugs can be produced in virtually every country. The COVID-19 measures could have an effect on synthetic drug production if they lead to a reduction in the availability of precursor

substances that are either diverted from the legal trade or produced illicitly. Where precursor chemicals are supplied from within a region and trafficking has not been impeded (for example, in South-East Asia), the production of synthetic drugs is only marginally affected by the restrictions stemming from the measures to control the spread of COVID-19. Also, where there is domestic manufacture using domestic precursors, as is the case of mephedrone and other popular synthetic drugs in the Russian Federation, no major impact on the domestic drug market is visible. The large-scale illicit production of synthetic drugs using precursors imported from other regions is more likely to be affected. Indeed, there are reports that the reduction in trade from South-East Asia has limited the supply of chemical precursors in Mexico, where it seems to have disrupted the manufacture of methamphetamine and fentanyl, as well as in Lebanon and Syria, where it is affecting the manufacture of amphetamine-type stimulants, in particular of “captagon”. In Czechia, the closing of the international borders has led to a reduction in the availability of precursors and a shortage of methamphetamine is expected.

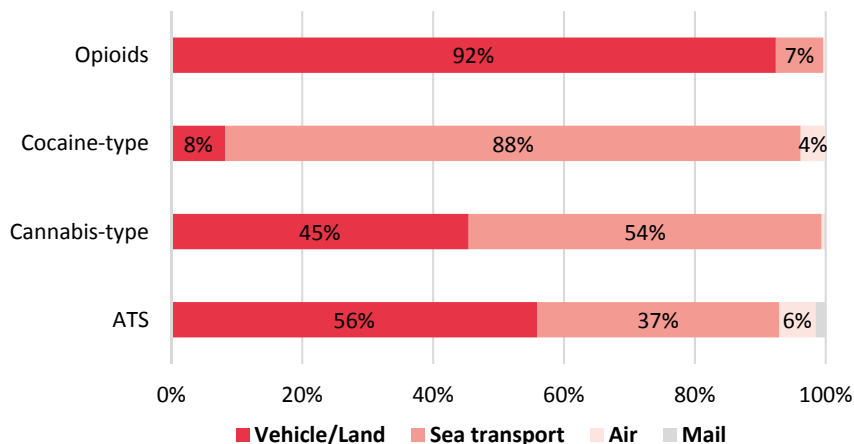
Drug trafficking

Drug trafficking by air is likely to be completely disrupted by the restrictions imposed on air travel

The trafficking of different drugs has been impacted to varying extents by the restrictions in movement and closure of borders imposed to prevent the spread of COVID-19, depending on how drugs were trafficked before the pandemic. Heroin is mostly trafficked by land, often alongside legal cargo, whereas cocaine is mostly trafficked by sea, also using non-commercial craft such as specialised boats and yachts. Synthetic drugs tend to be trafficked by air, with certain substances reaching some countries in large proportions, which is carried out by air couriers using body packs or concealing drugs in their personal luggage. The biggest impact on drug trafficking can thus be expected in countries where large proportions of drugs are trafficked by air.

Given the almost universal restrictions imposed on air traffic, the supply of drugs by air may be completely disrupted. This is likely to have a particularly drastic effect on the trafficking of synthetic drugs, not least methamphetamine, to countries in South-East Asia, such as the Republic of Korea and Japan, and in Oceania, such as Australia, as well as on the cocaine trafficking that relied on commercial flights prior to the pandemic.

Modes of transportation, by substance (as a percentage of weight seized), UNODC Drugs Monitoring Platform, January 2017–April 2020



Source: UNODC Drugs Monitoring Platform.

Signs of increased use of maritime routes to traffic heroin to Europe

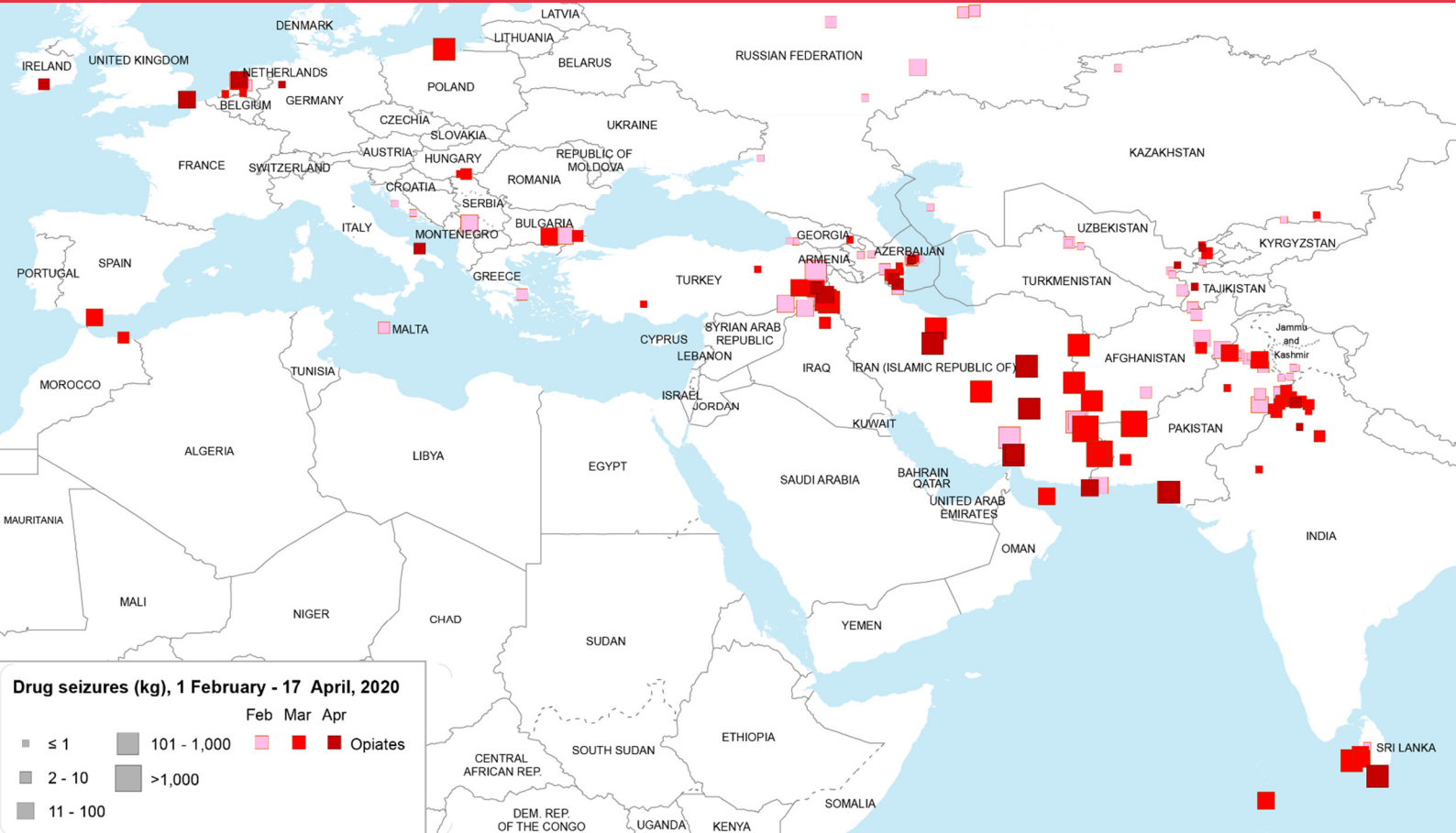
Reports from the main heroin trafficking routes indicate that the COVID-19 measures may have increased the risk of interception when the drug is trafficked by land as such shipments may now be intercepted more frequently than those trafficked by other modes of transport. Recent significant seizures of opiates in the Islamic Republic of Iran have been attributed to those measures. CARICC, the Central Asian Regional Information and Coordination Centre for Combating Illicit Trafficking of Narcotic Drugs, estimates that heroin trafficking overland may have become riskier in Central Asia.

A recent uptick in heroin seizures in the Indian Ocean could be interpreted as indication of an increase in the use of maritime routes for trafficking heroin to Europe along the “southern route”. If confirmed, the shift to the southern route would indicate a change in the strategy of drug trafficking organizations as a result of the COVID-19 measures.

Border measures appear to be hindering trafficking in opiates

Reports from the Americas point to increased control at borders that is making the trafficking of heroin from Mexico to the United States of America more difficult than before the onset of the pandemic. Similar reports have come from Myanmar, which supplies East and South-East Asia with heroin: a sudden drop in opium prices suggests that buyers are no longer able to reach producing areas in order to purchase opium or heroin. This situation could, however, also be linked to major ongoing counter-narcotics operations.

Seizures of opiates as recorded in the UNODC Drugs Monitoring Platform, February to April 2020



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Large shipments of cocaine are still being trafficked but by alternative means

There are indications that the reduction in air traffic to Europe resulting from the COVID-19 measures may already have led to an increase in direct cocaine shipments by sea cargo from South America to Europe. Similarly, reports from Colombia indicate an increase in maritime drug trafficking and a decrease in cocaine trafficking by land. Relatively recent large seizures of cocaine made in European ports demonstrate that the trafficking of large shipments of cocaine is still ongoing.

Indications of a reduction in the flow of cocaine is not yet affecting seizures in destination markets

Cocaine continues to be seized in large quantities in Europe and in Latin America, which not only indicates that drug trafficking is ongoing but also that law enforcement is continuing to intercept such shipments. There are, however, indications of a reduction in the flow of cocaine from source countries to destination countries. In Peru, falling cocaine prices and difficulties in trafficking cocaine abroad have been reported, which could lead to an overall reduction in cocaine trafficking in the near future.

COVID-19 measures are likely to lead to the stockpiling of drugs

It is likely that, as a reaction to a reduction in opportunities for drug traffickers to distribute drugs in local markets owing to the lockdown, actors along the drug supply chains are stockpiling drugs. The decrease in prices reported by mostly drug-producing countries may be an indicator of such a development. Increasing stockpiles may lead to an oversupply of drugs once restrictions are lifted, which could result in an increase in the availability of low-cost, high-purity drugs and could lead to an increase in the risk of drug overdoses.

Indications the lockdown is increasing demand for cannabis

Continued large-scale seizures of cannabis products in the Middle East and North Africa suggest that cannabis resin trafficking to Europe is not being disrupted by the restrictions related to the COVID-19 pandemic. There are indications that the lockdown measures in Europe may lead to an increase in demand for cannabis products, which could intensify drug trafficking activities from North Africa to Europe in the future.

Local nature of cannabis implies trafficking will remain unaffected

In general, trafficking in cannabis may not be affected in the same way as trafficking in heroin or cocaine, given that cannabis production often takes place near consumer markets and traffickers are thus less reliant on long, transregional shipments of large quantities of the drug.

Enforcement of COVID-19 measures may play into the hands of drug traffickers

The response of Member States to countering drug trafficking may also, to some degree, be affected by the COVID-19 crisis. In countries with limited law enforcement capacity, enforcing measures to counter the spread of COVID-19 may divert resources away from counter-narcotics efforts, making drug trafficking and production less risky for organized criminal groups and providing a conducive environment for illicit activities. Moreover, there are indications that drug trafficking groups are adapting their strategies in order to continue their operations, and that some have started to exploit the situation so as to enhance their image among the population by providing services, in particular to the vulnerable.

Drug consumption

Drug shortages have been reported and could have negative health consequences for people with drug use disorders

Many countries have reported drug shortages at the retail level, with reports of heroin shortages in Europe, South-West Asia and North America in particular. Drug supply shortages can go together with an overall decrease in consumption (for example, of drugs that are mostly consumed in recreational setting such as bars and clubs) but may also, especially in the case of heroin, lead to the consumption of harmful domestically-produced substances, as well as more harmful patterns of drug use by people with drug use disorders. In terms of alternatives, some countries in Europe have warned that heroin users may switch to substances such as fentanyl and its derivatives. An increase in the use of pharmaceutical products such as benzodiazepines and buprenorphine has also been reported, to the extent that their price has doubled in some areas.

Harmful patterns deriving from drug shortages include an increase in injecting drug use and the sharing of injecting equipment and other drug paraphernalia, all of which carry the risk of spreading blood-borne diseases, such as HIV/AIDS and hepatitis C, and COVID-19 itself. Risks resulting from drug overdose may also increase among people who inject drugs and who are infected with COVID-19.

Some countries have reported that the activities of organizations providing support to people who use drugs have been severely affected. In response to a reduction in the accessibility of treatment service provision during the lockdown, some countries have increased low-threshold services and reduced barriers for obtaining opiate-substitution medication; for example, allowing pharmacies to dispense methadone, as in the United Kingdom. Other countries, however, have reported difficulties in maintaining services for drug users.

Economic difficulties caused by COVID-19 could change drug consumption for the worse

In the long run, the economic downturn caused by the COVID-19 crisis has the potential to lead to a lasting transformation of the drug markets. The economic difficulties caused by the COVID-19 crisis may affect people who are already in a position of socioeconomic disadvantage harder than others. This could lead to an increase in the number of people resorting to illicit activities linked to drugs in order to make a living (production, transport, etc.) and/or being recruited into drug trafficking organizations.

Based on the experiences of the economic crisis of 2008, it is fair to assume that the economic downturn may lead to reductions in drug-related budgets among Member States, an overall increase in drug use, with a shift towards cheaper drugs, and a shift in patterns of use towards injecting drugs and to substances with an increased risk of harm due to a greater frequency of injections.

POLICY IMPLICATIONS

Mitigating the potentially harmful effects of the COVID-19 pandemic on drug markets and on the ability of countries to control drug production, trafficking and use requires adaptive and quick responses by the international community. In the short term, drug market disruptions may lead to an increase in harmful drug use practices and to novel strategies by drug trafficking groups aiming to overcome obstacles. People who use drugs may increasingly access the darknet in order to overcome the effects of street control and drug delivery by mail could become more popular.

The economic downturn caused by the COVID-19 crisis could, in the medium-term, lead to further increases in drug production, trafficking and use. The crisis may have a transformative effect on drug markets and may exacerbate the socioeconomic situation of vulnerable groups who in turn may increasingly resort to illicit activities. Indeed, an increasing number of people may resort to illicit activities to compensate for the loss of licit income and unemployment. Once restrictions are lifted, economic shocks may also prompt an increase in drug consumption, as observed in the past. In parallel, the economic crisis will limit the capacity of Member States to curb drug production and mitigate harms resulting from drug consumption, if fewer funds are available for counter-narcotic programmes and alternative development, as well as for drug treatment and prevention programmes.

Tackling drug trafficking remains an international responsibility. Most of the demand for trafficked substances comes from countries other than those where drugs are produced and most drug-related income is generated in destination countries. As such, tackling drug trafficking remains a shared responsibility that requires a concerted international effort targeting the new challenges related to the COVID-19 pandemic, which are affecting countries of supply, transit and destination.

The evidence collected so far suggests that the COVID-19 pandemic and the measures to contain it, are affecting the drug supply chain, from production and trafficking to consumption, to varying degrees. Close monitoring of the supply chain and of drug use patterns and their consequences is paramount in order to assess whether the observed changes are only temporary or if drug markets will undergo a lasting transformation. Close monitoring is also required to close gaps in the understanding of the dynamics of drug markets, in particular in Africa, where information on drug trafficking and drug consumption remains scarce.

Further information is also needed to improve understanding of how the impact of the COVID-19 pandemic on drug production and drug trafficking may be affecting terrorist organizations, which benefit financially from facilitating trafficking in drugs and other illicit materials.

BACKGROUND

The COVID-19 pandemic is taking its toll on the global economy, public health and people's way of life. The virus has now infected more than 3.5 million people, killed 250,000 and led Governments to take drastic measures to reduce the spread of coronavirus disease 2019.¹ Roughly half of the global population is living under mobility restrictions and numerous border crossings² have been closed. Economic activity has declined drastically as many countries have opted for closure of non-essential businesses. Unemployment has skyrocketed in many countries,³ further reducing the demand for goods and services. As a result, the World Trade Organization expects world trade to fall by between 13 and 32 per cent in 2020, with potential recovery only in 2021 or 2022.⁴

Limitations of this research brief

The aim of this research brief is to present a rapid assessment of the impact of the COVID-19 pandemic on the drug supply chain, from drug production and trafficking to consumption. It builds upon the limited information that UNODC has been able to collect within the past few weeks through:

- reports provided by 35 Member States that responded to the UNODC call to report real-time information on the impact of COVID-19 on crime and drugs;
- qualitative assessments made by UNODC field offices;
- data reported to the UNODC Drugs Monitoring Platform; and
- anecdotal information collected through the media.

While UNODC has presented and analysed the information available with rigour in order to avoid bias, timeliness has been prioritized over comprehensiveness and the information-base for the analysis remains limited and, in some cases, anecdotal. With new data arriving on a daily basis and in a situation that is evolving very rapidly, the brief will remain a living document to be updated regularly as and when new information becomes available to UNODC. The analysis presented here should therefore be viewed as a preliminary assessment of the impact of COVID-19 on the drug markets, which is aimed at alerting the international community about how the drug problem could be affected in the short-term and from a long-term perspective.

UNODC continues to monitor drug markets by collecting real-time information. Drug seizure cases are collected and analysed frequently in the UNODC Drugs Monitoring Platform, which draws results from text mining/text analytics (also known as "web scraping") to update drug seizure cases. Combining the information with price and purity data, as well as qualitative information from field offices and Governments is key to maintaining an overview of possible rapid changes.

¹ Available at <https://coronavirus.jhu.edu/map.html>.

² As at March 30, 2020, the International Organization for Migration reported that 133 countries had imposed mobility restrictions, with 584 land crossings closed and 320 more partially closed (out of a total of 1,075 monitored), and some 76 sea border crossings closed and 80 partially closed. Available at <https://migration.iom.int/>.

³ International Labour Organization. Available at https://www.ilo.org/global/topics/coronavirus/impacts-and-responses/WCMS_739047/lang--en/index.htm.

⁴ World Trade Organization. Available at https://www.wto.org/english/news_e/pres20_e/pr855_e.htm.

Drug trafficking relies heavily on legal trade to camouflage its activities and on individuals being able to distribute drugs to consumers. The measures implemented by Governments to counter the COVID-19 pandemic have thus inevitably affected all aspects of the illegal drug markets, from the production and trafficking of drugs to their consumption. This disruption may be temporary, or it may lead to lasting drastic changes in drug supply chains, or at least in some parts of them.

There are different possible mechanisms by which the COVID-19 pandemic may be affecting drug markets. Market reactions to shocks that happened in the past, such as the heroin shortages in 2001 in Australia and Estonia, in 2010/11 in the United Kingdom, the Russian Federation and other European countries, or the ban on opium cultivation imposed by the Taliban in Afghanistan in 2001, can give indications of how the drug markets may be reacting.

Based on the most recent data supplied by government authorities, open sources, including the media, and the network of UNODC field offices, this research brief describes the impact of the COVID-19 pandemic on drug markets to the extent that is currently possible.

HOW COULD COVID-19 AFFECT DRUG MARKETS?

Mobility restrictions, closed borders and a decline in overall world trade can disrupt the supply chains of drug markets and may diversify drug trafficking patterns and routes. Sudden changes in the supply and availability of drugs can in turn trigger changes in consumption behaviours.

The following section explores the potential impact of different immediate consequences of measures to counter the spread of COVID-19 on the three key elements of the drug markets: drug production, drug trafficking and drug consumption. All three steps can affect drug markets at the global, regional and local levels. The effects may vary greatly depending on local manifestations of COVID-19 measures and regional characteristics of drug markets.

1. Mobility restrictions of individuals

Very strict and far-reaching restrictions on personal movement can make cross-border trafficking in drugs and precursor chemicals more difficult than beforehand and limit the distribution of drugs to users at the retail level.

The measures implemented by Governments to counter the spread of COVID-19 comprise a wide range of approaches, from prohibiting border crossings, while allowing domestic travel, to moderate-to-strict shelter-in-place orders, or a complete lockdown of all activities, including suspension of essential services other than for emergencies. In many countries, the cross-border movement of private citizens has come to a complete halt.

There is evidence that these measures have disrupted cross-border drug trafficking and the domestic distribution of drugs at least partially. The intensity of the restrictive measures has defined the intensity of the disruption. In countries where most drugs are trafficked across illegal or informal border crossings, if curfews are not sufficiently enforced, the impact may be smaller than in situations where mobility restrictions are strictly enforced. Countries with very strict mobility restrictions have experienced a decreased in the availability of drugs at the street level, with reduced street purity and higher prices (e.g., Czechia, Italy,⁵ the Islamic Republic of Iran⁶ and the United Kingdom). Other countries, in the Middle East and North Africa,⁷ for example, have seen no or only limited reductions in drug availability at the retail level. Reports from North Macedonia and Nigeria⁸ show that drug traffickers have adopted novel ways of overcoming the restrictions and continue supplying users with drugs.

Cross-border trafficking may be strongly affected by the mobility restrictions in countries where substances are mostly trafficked by air couriers (*in corpore*,⁹ or using body packs), such as methamphetamines in the Republic of Korea, or where significant quantities of drugs are trafficked by air, as in the case of the trafficking of cocaine to Europe. In such cases, given the restrictions imposed

⁵ Ministry of Interior, Italy. See also <https://www.facebook.com/drugreporter/videos/745122862689260/>.

⁶ Islamic Republic News Agency. Available at <https://www.irna.ir/news/83740144/دادر-هشدار-مواد-مخدر-کنندگان-مصرف-کنندگان-پلیس-به-مصرف-کنندگان>.

⁷ UNODC field office assessment.

⁸ UNODC field office assessment.

⁹ Includes swallowing, anal and vaginal concealment.

on air traffic almost everywhere, a sudden cease in cross-border trafficking or a change in different trafficking methods can be expected.

2. Reduction in global trade in commodities

Drugs are often concealed and transported alongside legal products, for example, in maritime containers or modified lorries. An overall reduction in legal trade may affect drug supply as it makes it more challenging for drug trafficking groups to identify suitable trafficking routes and easier for authorities to intercept illicit shipments.¹⁰

The World Trade Organization expects a sharp downturn in world merchandise trade over the course of 2020 due to the disruption of supply chains and an economic recession.¹¹ China's exports fell by 17.2 per cent during January and February 2020 compared with the same period in 2019.¹² The reduction in supply of goods from China and the subsequent reduction in demand from countries in Europe and other regions where lockdowns have been put in place, have caused a visible reduction in maritime trade,¹³ and it is thought that the COVID-19 crisis will lead to a significant reduction in overall imports and exports.¹⁴

The impact of a reduction in global trade is most likely to affect substances that are transported alongside licit goods and services and along legal trade routes. In the case of specialized transport, such as yachts and other modified boats for transatlantic cocaine trafficking, or fishing boats for trafficking synthetic drugs in South-East Asia, the reduction in licit trade will have a comparatively smaller impact.

A reduction in trading in goods may have an effect on how heroin is trafficked from the main source, Afghanistan, to the main destination markets in Europe. Heroin is often transported via land transit in bulk on cargo trucks, with licit trade frequently being used to conceal shipments. The main land routes involve numerous border crossings, and a reduction in the transport of licit goods may lead to increased scrutiny by border authorities.

If these changes disrupt established trafficking routes, drug trafficking groups will quickly adjust to the situation by changing routes, using unofficial border crossings and shifting trafficking modes, for example, from commercial cargo by land to informal maritime transportation using fishing vessels.

There are early indications that heroin trafficking from Afghanistan to Europe may indeed be shifting southwards and from land to maritime transportation. The southern route (Afghanistan–Islamic Republic of Iran and Pakistan–Indian Ocean–Arabian Peninsula–Africa–Europe) may thus gain in importance at the expense of to the “northern” and “Balkan” routes.

Cocaine trafficking may be affected differently by lockdown measures since the drug is mostly trafficked by sea and traffickers often rely on non-commercial vessels such as private boats. This trafficking method is not directly affected by a reduction in commercial cargo and may increase if the

¹⁰ UNODC field office assessment.

¹¹ World Trade Organization. Available at https://www.wto.org/english/news_e/pres20_e/pr855_e.htm.

¹² South China Morning Post. Available at <https://www.scmp.com/economy/china-economy/article/3074060/coronavirus-chinas-exports-and-imports-plummeted-january-and>.

¹³ Sea News. Available at <https://seanews.co.uk/features/covid-19-crisis-shipping-trade-recovery-will-be-uneven/>.

¹⁴ European Commission. Available at https://trade.ec.europa.eu/doclib/docs/2020/april/tradoc_158713.pdf.

availability of other options decreases. Indeed, reports from Colombia suggest that increases in border controls have led to a reduction in cocaine trafficking via land routes and an increase in the pre-existing trafficking of cocaine by sea, in particular using submersibles for shipments to Central America and container cargo for shipments to Europe. Similarly, light aircraft traffic to transit countries has apparently increased.¹⁵

Reduced licit trade may not have a direct impact on synthetic drugs that are produced and trafficked within regions using informal border crossings or non-commercial sea routes. Potential disruptions, however, may occur due to a lack of precursor substances in Europe, Latin America and the Middle East, where precursor chemicals are imported from East Asia.

3. Varying levels of law enforcement activity and the risk of interception of drugs

Government-decreed lockdowns can have an impact on the interception of trafficked drugs and on the real and perceived risk of drug trafficking. The impact can go in two different directions. The interception of drugs and risk of arrest of traffickers may be reduced where law enforcement efforts are diverted towards the enforcement of COVID-19 measures. Mobility restrictions and shelter-in-place orders themselves can lead to a reduction in staff available for intelligence work (working-from-home and a reduction in personnel to avoid infection) and may make domestic and international law enforcement operations more challenging. Priorities may shift and the capacity of law enforcement to monitor and intercept drug shipments and to disrupt organized crime networks may be reduced.

In such a scenario, COVID-19 measures may create a conducive environment for illegal activities and drug trafficking groups may try to seize the opportunity to increase their activities and to expand their influence in the drug markets, as has been suggested, for example, in the case of the Taliban in Afghanistan¹⁶ and organized crime groups in Mexico.¹⁷

Conversely, an increase in controls to enforce lockdown measures, such as street patrols and increased border controls, may increase the efficiency of law enforcement efforts and increase the probability of drug shipments being intercepted and of drug production being limited. Reports from Colombia, for example, indicate that an increase in law enforcement activities and a reduction in the availability of chemicals necessary for cocaine production are limiting production capacities in the country.¹⁸

The rapid assessment undertaken for this brief suggests that both situations are emerging, with some countries in lockdown situations still making drug interceptions on a large, and possibly increasing, scale, while others are making hardly any drug seizures.

¹⁵ UNODC field office assessment.

¹⁶ Armed Conflict Location & Event Data Project. Available at <https://acleddata.com/2020/04/16/cdt-spotlight-taliban-in-afghanistan/>.

¹⁷ Media report made available to UNODC. Available at <https://www.am.com.mx/opinion/-El-crimen-organizado-durante-la-pandemia-20200414-0007.html>.

¹⁸ UNODC field office assessment.

4. Economic downturn may lead to a long-term increase in illicit drug trafficking and consumption

The COVID-19 crisis is like no other. As a result of the pandemic, the global economy is projected to contract by 3 per cent in 2020, far more than during the financial crisis of 2008–09.¹⁹ The COVID-19 crisis is hitting economies across the world almost simultaneously through both the trade and financial channels.²⁰

There is still uncertainty about the duration and intensity of the COVID-19 crisis. Governments are facing the unprecedented double challenge of containing the health pandemic, while simultaneously responding to its economic and social impact. Flattening the pandemic curve through containment policies is the primary objective for most of them and flattening the recession curve through socioeconomic policies is the second.²¹

The economic contraction will probably have the greatest effect on developing economies, with the poorest members of society in those countries being those most affected. In relation to drug markets and based on the experience of the financial crisis of 2008/2009, it is fair to assume that the economic downturn may lead both to a lasting transformation of the illicit drug markets and the potential aggravation of illicit drug economies worldwide.

The economic downturn may lead to

- Reduced drug budgets available for measures aimed at reducing demand and supply of drugs.
- Reduced economic opportunities for the population and increasing unemployment rates, which may increase participation in illegal activities such as drug trafficking.
- Increased corruption facilitated by the expected budgetary difficulties of countries and decreasing opportunities for licit employment.
- Increased substance use and aggravated harmful drug use due to the deterioration in the socioeconomic situation. People with drug use disorders may increase their involvement in criminal activities to pay for drugs unless sufficient treatment for such groups can be provided.
- Increased drug production and drug trafficking may be affecting terrorist organizations that benefit financially from facilitating trafficking in drugs and other illicit materials. Reports²² have indicated that some non-state actors are already trying to seize opportunities to bolster their legitimacy by exploiting the COVID-19 crisis.

¹⁹ International Monetary Fund, *World Economic Outlook, Chapter 1: The Great Lockdown* (2020).

²⁰ World Bank, *Part I. COVID-19: Impact and Response* (2020).

²¹ Ibid.

²² Afghanistan: Armed Conflict Location & Event Data Project, available at <https://acleddata.com/2020/04/16/cdt-spotlight-taliban-in-afghanistan/>; Italy: available at <https://edition.cnn.com/2020/04/19/europe/italy-mafia-exploiting-coronavirus-crisis-aid-intl/index.html>; Mexico: available at <https://www.am.com.mx/opinion/-El-crimen-organizado-durante-la-pandemia-20200414-0007.html>.

POTENTIAL IMPACT OF THE COVID-19 MEASURES ON DRUG PRODUCTION

Drug markets are characterized by a variety of products with a dynamic combination of substances. Globally, the four largest drug markets are cannabis, cocaine, opiates (mainly heroin) and synthetic drugs, each with a different geographical spread. The production of heroin and cocaine is concentrated in few countries, while synthetic drugs and cannabis are produced in virtually all countries.²³

The measures aimed at restricting the spread of COVID-19 may affect drug production differently, given its peculiar characteristics in terms of manufacturing modalities (concentrated in few countries or taking place in many) and inputs (labour force and chemicals). The measures can affect drug production directly, for example, by reducing the workforce available for harvest; or indirectly, for example, by disrupting the supply chain of precursor chemicals, which are often diverted from licit markets. The sale of drugs at the source of production can also be affected. If buyers cannot reach remote locations where drugs are cultivated or produced because of mobility restrictions, the overall supply will be affected.

COVID-19 measures have the potential to disrupt drug supply from source countries in the short term

Opiates

More than 95 per cent of all illicit opiates (opium, morphine, heroin) originate in only three countries: Afghanistan (82 per cent), Mexico (8 per cent) and Myanmar (7 per cent).²⁴ In all three countries, illicit opium poppy is grown in fields and harvesting opium is a labour-intensive activity. Once poppy capsules mature in the fields, farmers often require external labour to “lance” them repeatedly over a period of 10 to 14 days, an operation that can require a sizeable work force.²⁵ Once opium is collected, its active ingredient, morphine, is extracted and converted into heroin by using chemicals under international control, such as acetic anhydride.

The COVID-19 crisis may hinder opium production and heroin manufacture in several ways: if mobility restrictions are enforced, the availability of workers to collect opium gum is reduced. Moving harvested opium to heroin laboratories may also become more challenging and, as a result of the reduction in trade and stricter border controls, those laboratories may face shortages of the imported chemicals required to produce heroin. Moreover, potential buyers may not be able to reach the location where opiates are on sale.

²³ Percentages relate to the 2018 global production of opium: UNODC, *World Drug Report 2019: Global Overview of Drug Demand and Supply* (United Nations publication, Sales No. E.19.XI.8 (Booklet 2)), pp. 45-46.

²⁴ UNODC, *World Drug Report 2019*, estimated shares of oven-dry opium production of global total.

²⁵ For example, in 2018, Afghan farmers employed the equivalent of roughly 190,700 full-time workers to help them weed and harvest opium poppy; see UNODC/MCN, *Afghanistan Opium Survey Report 2018, Challenges to Sustainable Development, Peace and Security* (July 2019).

Afghanistan

Afghanistan closed its borders for individual travel to the Islamic Republic of Iran at the end of February 2020 and to Pakistan at the end of March 2020, and imposed restrictions on free movement within the country at the end of March 2020. Border crossings are open for cargo and commercial traffic.

The 2020 opium harvest takes place between the end of March and June. At the time of writing, cases of COVID-19 have been confirmed in all opium poppy-cultivating provinces and movement restrictions have been put in place in many cities.²⁶ The extent to which the measures to counter the spread of COVID-19 or the pandemic itself are affecting the harvest is not yet clear. The harvest relies on a very large number of seasonal workers, who often migrate from other parts of the country or from neighbouring countries such as Pakistan.²⁷

A shortage of poppy lancers has already been observed in the western and southern provinces of the country, mainly due to the closure of official border crossings with Pakistan. However, women in poppy-growing households appear to be increasingly engaged in the poppy lancing process, as do people who lost their jobs due to the COVID-19 crisis. The payment of people employed for the 2020 harvest also seems to have increased in comparison with previous years, from about one sixth to one third of the harvest for all lancers employed, which suggests a possible shortage of lancers and/or high yields.²⁸

Heroin manufacture may also be affected. The most important chemical in heroin manufacture, acetic anhydride, is not manufactured in Afghanistan and is not legally available. It reaches Afghanistan exclusively by being diverted from legal markets and then being trafficked to the country by land. Local traffickers maintain some stocks of acetic anhydride²⁹ and a short-term shortage can probably be overcome, but once those supplies are used up, heroin manufacture within the country may slow down. A shortage of acetic anhydride may not necessarily be caused by border closures in and around Afghanistan, but by reduced opportunities to obtain the substance from licit markets such as those in China and the European Union.³⁰

Recent trends in the price of acetic anhydride in Afghanistan are not currently giving a firm indication of possible supply disruptions or other changes in the market: one set of prices indicate an increase and therefore a potential shortage, while others indicate a decrease, which would contraindicate a shortage.

Lastly, the effect will depend on the reaction of non-state actors and local power brokers, such as the Taliban. Media reports³¹ have indicated that the Taliban largely support the COVID-19 restrictive

²⁶ Available at <https://tolonews.com/index.php/health/covid-19-govt-limits-residents-movement-herat>.

²⁷ The harvest requires a considerable work force. For example, in 2018, Afghan farmers employed the equivalent of roughly 190,700 full-time workers to help them weed and harvest opium poppy.

²⁸ UNODC field office assessment.

²⁹ UNODC, "Voices of the Quchaqbar" – *Understanding Opiate Trafficking in Afghanistan from the Perspective of Drug Traffickers*, forthcoming.

³⁰ China and European countries are named as points of origin of acetic anhydride seized in Pakistan and the Islamic Republic of Iran. Available at https://www.incb.org/incb/en/precursors/technical_reports/precursors-technical-reports.html.

³¹ Available at https://www.washingtonpost.com/world/the_americas/coronavirus-taliban-ms-13-drug-cartels-gangs/2020/04/13/83aa07ac-79c2-11ea-a311-adb1344719a9_story.html.

measures and are reportedly enforcing quarantines for migrants and distributing gloves, masks and information on how to avoid spreading the virus. It has also been reported that the Taliban are enforcing social distancing, by cancelling public gatherings and weddings and asking people to pray at home rather than at mosques.³² If and how non-state actors will enforce measures that can potentially affect the 2020 opium harvest and heroin manufacture is yet to be seen.

The situation in Afghanistan is closely monitored through frequent updates on the price of opium and acetic anhydride (monthly), seizures and law enforcement activity in the country and neighbouring countries. UNODC is also conducting surveys among farmers on the 2020 opium harvest.

Figure 1: Prices of two different qualities of acetic anhydride, January 2016 to March 2020



Source: Afghanistan drug price monitoring system, Ministry of Interior, Afghanistan. No further information on the qualities of acetic anhydride are available. Data from the past has shown that acetic anhydride prices react to market fluctuations, such as, for example, those resulting from the record harvest of 2017.

Myanmar

Opiates produced in Myanmar mostly supply countries in East and South-East Asia and in Oceania. The 2020 harvest in Myanmar was not affected by the COVID-19 crisis as it took place at the beginning of the year.

Reports³³ from the field indicate, however, that opium farmers and traffickers are finding it difficult to sell their products to buyers from abroad. With China having been the first country affected by the virus and related restrictions, its neighbouring and adjacent countries were affected by the situation comparatively early on and the impact on the drug market may be already visible. Reports from the field indicate a sharp drop in opium prices in March 2020, which could be an indication of a reduction in demand by buyers. However, other dynamics in the local drug markets could also have contributed to the drop: at the time of writing, a large-scale international counter-narcotics operation among the Mekong countries is being conducted, which may affect local drug markets.³⁴ Myanmar is also a

³² Al Jazeera. Available at <https://www.aljazeera.com/news/2020/04/taliban-launches-campaign-afghanistan-fight-coronavirus-20040605113086.html>.

³³ UNODC field office.

³⁴ Office of the Commander-in-Chief of Defence Services, Myanmar. Available at <http://www.cincds.gov.mm/node/6847> Authorities reported seizing more than 143 million methamphetamine tablets, 286 kilograms of heroin, 291 kg of morphine, 16 kg of opium

country with large-scale illicit manufacturing of methamphetamine and the combination of the COVID-19 restrictions and considerable law enforcement operations may also affect the synthetic drugs market.

Ultimately, the effects of the COVID-19 crisis on the markets for opiates and synthetic drugs will depend on the intensity of the restrictive measures and their duration. The availability of precursor substances required in the manufacturing of heroin and synthetic drugs does not seem to be affected because those substances are mostly trafficked within the region and through unofficial border crossings.³⁵

Overall, the COVID-19 measures do not seem to have affected drug production in Myanmar directly, but they may have limited opportunities to sell products to foreign buyers.

Mexico

In Mexico, opium is produced throughout the year and there is no dedicated growing season. Contrary to what happens in Afghanistan, the opium harvest is spread over time and there is no single period in the year when a large workforce is needed. For that reason, the immediate impact of COVID-19 measures on current opium production may be limited, but the situation requires careful monitoring as changes in mobility restrictions and police activities may disrupt the opiate trade from the farm-gate onward.

The manufacturing of heroin in Mexico may not be heavily affected by the reduction in trade either, since the main precursor, acetic anhydride, can be produced in the country. The trafficking of heroin may, however, still be disrupted because its main destination is the United States where the borders are affected by COVID-19 restrictions.³⁶ The illicit production of synthetic drugs, mainly methamphetamine and fentanyl (and its analogues), is also likely to be disrupted because of a possible shortage of imported precursors. Indeed, a shortage in the supply of fentanyl precursors originating in China has been reported in the media.³⁷

Cocaine

Coca leaf is produced in Colombia, Peru and the Plurinational State of Bolivia. All three countries adopted mobility restrictions to contain the spread of COVID-19 in March/April 2020, but since coca bush is a perennial plant that grows and is harvested throughout the year, the overall impact on the annual coca leaf harvest resulting from those restrictions could be limited.

However, cocaine production may be more affected in terms of a reduction in eradication and shortage of precursors. While media sources report that the eradication campaign is continuing as planned in Colombia,³⁸ in response to the pandemic, Peru suspended eradication efforts on 15 March,

bricks, 135 kg of raw opium, 1.6 kg of solid opium poppy, and 441 kg of crystalline methamphetamine over the period 28 February to 15 March 2020.

³⁵ UNODC field office assessment.

³⁶ Vice.com. Available at https://www.vice.com/en_ca/article/bvgazz/sinaloa-cartel-drug-traffickers-explain-why-coronavirus-is-very-bad-for-their-business.

³⁷ Ibid.

³⁸ El País. Available at <https://elpais.com/internacional/2020-04-23/la-erradicacion-forzosa-de-plantios-de-coca-en-colombia-una-chispa-en-medio-de-la-pandemia.html>.

2020.³⁹ In the Plurinational State Bolivia, the sociopolitical conflicts of October/November 2019 had already affected the coca leaf market and cocaine production, as the premature withdrawal of the eradication task groups caused a reduction in eradication compared with the previous year.⁴⁰ Moreover, after November 2019, the “Social Control” approach that had been adopted earlier was abandoned and the states⁴¹ were placed in charge of regulating the number of coca producers and the area of their plantations, and adopted their own rationalization or eradication measures.

In Colombia,⁴² intensified law enforcement and closed borders may reduce cocaine production capacity. Coca producers, in particular in eastern Colombia, are reportedly suffering from a shortage of gasoline, a chemical essential for cocaine production, which was previously smuggled from the Bolivarian Republic of Venezuela. The supply chains for trafficking cocaine abroad appear to be strongly affected by the increase in police controls, which could lead producers to stockpile the drug in Colombia.

In Peru, DEVIDA, the national drug control agency,⁴³ has reported a 46 per cent drop in the price of coca leaf from January to April 2020. Media sources⁴⁴ have also reported a sharp decline in cocaine prices since the implementation of COVID-19 restrictions. The price drop has been attributed to decreasing demand by traffickers who have had difficulties in transporting the drug. Low coca leaf and cocaine prices may discourage farmers from increasing the area under coca bush cultivation in the short term, but in the longer term, illicit coca bush cultivation may increasingly offer the impoverished rural population an alternative to the economic losses resulting from the COVID-19 measures.

Synthetic drugs

Occurring in every region across the world, the production of synthetic drugs is less geographically centralized than the production of heroin and cocaine, although large-scale production is concentrated in just a few countries in all regions. In general, traffickers are able to produce large quantities of synthetic drugs at relatively low cost and ship large amounts within and across regions. Without geographic constraints such as the need for access to suitable land and a climate conducive to drug cultivation, clandestine manufacturing facilities can generally be set up anywhere and operated with relatively little in the way of logistics and workforce requirements.

Where the measures implemented to restrict the spread of COVID-19 could have the greatest impact is on the availability of internationally controlled precursor substances.⁴⁵ If domestic manufacturing facilities and the domestic supply of precursors are available, the supply of synthetic drugs may only

³⁹ CORAH project, Ministry of Interior, Peru.

⁴⁰ UNODC field office assessment.

⁴¹ Departamentos.

⁴² UNODC field office assessment.

⁴³ DEVIDA, Reporte N.1 – April 2020, Monitoreo de precios de hoja de coca y derivados cocainicos en zonas estratégicas de intervención.

⁴⁴ Media sources made available to UNODC through the Ministry of Interior, Peru. Available at <https://peru21.pe/peru/el-precio-de-la-droga-en-peru-se-desploma-por-efecto-del-coronavirus-noticia/> and <https://larepublica.pe/sociedad/2020/04/03/coronavirus-productores-de-hoja-de-coca-en-puno-reportan-desplome-de-su-precio-lrsd/>.

⁴⁵ UNODC, “An expanding synthetic drugs market – Implications for precursor control”, *Global SMART Update*, vol. 23 (March 2020). Available at https://www.unodc.org/documents/scientific/Global_SMART_23_web2.pdf.

be affected in areas under very strict mobility restrictions. If, however, production depends on imported precursor substances, the production of synthetic drugs may be reduced.

Depending on the length of the disruption, there is potential for the further fragmentation of the market. Countries in South-East Asia, for example, are currently supplied by large-scale production in a few countries. If lockdown measures continue, production sites may be relocated or newly established in order to further decentralize supply from the regional to the national or subnational levels.

At the national level, the Russian Federation is an example of a country where there may not have been major disruptions in the production of synthetic drugs. Mephedrone and other popular synthetic drugs are produced domestically and their precursors are now also sourced in the country itself rather than being imported, as in the past.⁴⁶

The synthetic drug market (mostly methamphetamine) in Mexico has already been affected by the COVID-19 crisis. Some media sources suggest that methamphetamine prices more than doubled between January 2020 and March 2020,⁴⁷ while others even speak of a sixfold increase in the price of methamphetamine in that country in recent months,^{48, 49} as imports of chemicals from East Asia have come to a halt.⁵⁰

Synthetic drug production in the European Union (amphetamine, MDMA and methamphetamine) relies on chemicals imported from East Asia⁵¹ and partly on chemicals trafficked within Europe.⁵² In Czechia, the closure of borders has led to a reduction in the availability of precursors for methamphetamine production and a lack of methamphetamine in the market is expected.

The manufacture of “captagon” in Lebanon and Syria may be disrupted as a result of the decline in trade with South-East Asia, from where the precursor chemicals needed in its production are imported.⁵³ Consequently, law enforcement agencies in countries in the Arabian Peninsula (United Arab Emirates, Oman) are expecting a decrease in the trafficking of “captagon”.

⁴⁶ CARICC. Available at <https://caricc.org/index.php/en/>.

⁴⁷ Alejandro Hope (security analyst and former Mexican intelligence officer), “Narcos are suffering from the Covid-19 lockdown too – organised crime dealt big blow by disrupted supply chains and blocked sales channels”, *Financial Times*, 20 April 2020. Available at <https://www.ft.com/content/42341ce6-82e5-11ea-b555-37a289098206>.

⁴⁸ Prices for 1 pound of methamphetamine allegedly increased in Mexico from 2,500 pesos to 15,000 pesos according to the Mexican weekly *Riodoce*, reported by Sandra Weiss, “How the coronavirus lockdown is hitting Mexico’s drug cartels”, *Deutsche Welle* (DW), 4 April 2020. Available at (<https://www.dw.com/en/how-the-coronavirus-lockdown-is-hitting-mexicos-drug-cartels/a-53001784>).

⁴⁹ Keegan Hamilton, “Sinaloa Cartel Drug Traffickers Explain Why Coronavirus Is Very Bad for Their Business”, *Vice News*, 23 March 2020. Available at https://www.vice.com/en_us/article/bvgazz/sinaloa-cartel-drug-traffickers-explain-why-coronavirus-is-very-bad-for-their-business.

⁵⁰ *Vice.com*. Available at https://www.vice.com/en_us/article/bvgazz/sinaloa-cartel-drug-traffickers-explain-why-coronavirus-is-very-bad-for-their-business.

⁵¹ International Narcotics Control Board (INCB), *Precursors 2019*, United Nations, Vienna 2020.

⁵² European Monitoring Centre for Drugs (EMCDDA) and Drug Addiction and Europol, *EU Drug Markets Report 2019*, (Publications Office of the European Union, Luxembourg, 2019).

⁵³ UNODC field office assessment.

Cannabis

Cannabis products are often locally produced and distributed through very short, domestic supply chains. There are no indications that these short supply chains have been disrupted by the COVID-19 measures. Indeed, there are indications that the lockdown measures in Europe may be leading to an increase in demand for cannabis products,⁵⁴ which may in turn lead to an intensification of drug trafficking activities from North Africa to Europe.

Economic downturn will make vulnerable households more economically dependent on opium and coca leaf production

Socioeconomic surveys conducted annually by UNODC with community leaders and households in countries affected by illicit crop cultivation consistently show that the absence of infrastructure and services are important determinants of illicit crop cultivation and that income inequality, food insecurity, weak governance and insecurity are both causes and consequences of illicit crop cultivation. Over the years, households that cultivate illicit crops have shown higher levels of multi-dimensional poverty than those that do not.

The severe contraction of economic growth and the instability emerging from the COVID-19 crisis are expected to have a significant impact on the number of households cultivating illicit crops worldwide, as affected farmers may be more inclined to participate in the illegal economy if it provides them with an opportunity to recover (which other crops cannot easily offer) and secure access to a market once borders are reopened.

In Latin America, long-term increases in illicit crop cultivation are expected due to an increase in household vulnerability

Latin America is expected to suffer the worst economic crisis in its history, with a contraction of 5.3 per cent, comparable only to the Great Depression of 1930 (5.0 per cent reduction).⁵⁵ The economy of Mexico, the third largest producer of opium poppy worldwide, is expected to contract even further than the regional and global average (by 6.5 per cent), as the economy of the United States, its main commercial partner, is also expected to shrink. In Colombia, Peru and the Plurinational State of Bolivia, the Andean countries that produce almost all coca worldwide, the economy is expected to shrink by 2.6, 4.0 and 3.0 per cent, respectively.^{56, 57} In Latin America overall, based on conservative estimates, the percentage of people living below the poverty line is expected to increase by 4 percentage points (from 30 to 34 per cent), and extreme poverty by 2 percentage points (from 11 to 13 per cent), mostly because of the inadequate social protection systems in the region.⁵⁸

⁵⁴ See section on consumption.

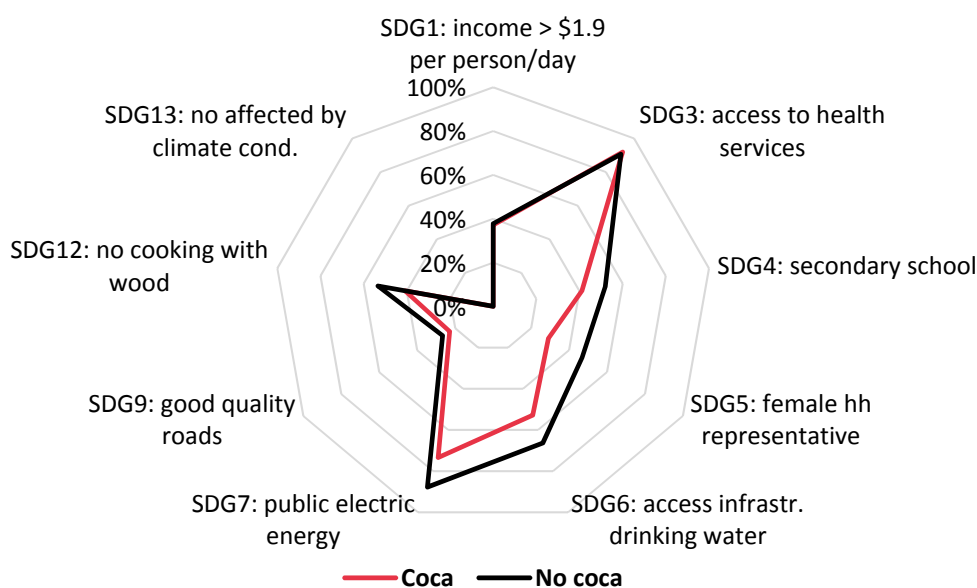
⁵⁵ ECLAC. 2020, "Measuring the Impact of COVID-19 with a View to Reactivation", Special Report 2.

⁵⁶ Inter-American Development Bank, "El Impacto del COVID-19 en las Economías de la Región. América Central" (2020).

⁵⁷ ECLAC. 2020, "Measuring the Impact of COVID-19 with a View to Reactivation", Special Report 2.

⁵⁸ ECLAC. 2020, "Latin America and the Caribbean and the COVID-19 Pandemic. Economic and Social Effects", Special Report No 1.

Figure 2: Development gap between coca-growing households and non-coca-growing households in Colombia



Source: UNODC calculations using data from 6,000 households in 12 departments in 2017. The baseline data reflect the situation before the beginning of the project.

Note: The development gap refers to the difference in Sustainable Development Goal indicators between households cultivating illicit crops (red line) and households not cultivating illicit crops (blue line). The closer the line to the outside boundaries of the graphs, the better the situation of the households in relation to the Sustainable Development Goal indicators.

The COVID-19 crisis will affect both the quantity of jobs (increased unemployment and underemployment) and the quality of work (reduced wages and access to social protection) available, in particular among the most vulnerable groups, such as informal sector workers.⁵⁹ In Mexico, the percentage of formal jobs expected to be lost is between 5 and 14 per cent; in Colombia, Peru and the Plurinational State of Bolivia, the figure is expected to be between 3 and 14 per cent. In Latin America, most of the labour in the agriculture and fishing sector is informal (84 per cent). Although no precise estimates are available, the number of informal jobs lost will be even higher than the number of formal jobs lost.⁶⁰

This severe economic contraction and subsequent job losses are expected to lead to an increasing number of vulnerable households resorting to negative coping mechanisms, such as illicit crop cultivation, if other income-generating options are not in place. The sudden disruption observed in Peru, where coca leaf prices fell by 46 per cent from January to April 2020, is likely to be short-lived as consumer prices of cocaine are increasing and drug traffickers are adaptable. For example, at the United States–Mexico border, drug trafficking organizations are moving more products through cross-border tunnels and increasing sightings of drones and ultralights suggest that traffickers may be increasing air deliveries.⁶¹ Conversely, in the Plurinational State of Bolivia, the political turbulence at

⁵⁹ Ibid.

⁶⁰ Inter-American Development Bank, "Cómo Impactará la COVID-19 al Empleo? Posibles Escenarios para América Latina y el Caribe" 2020.

⁶¹ Noticias Financieras (English), "From Peruvian cocaleros to retailers in Paris, coronavirus tops the drug trade" 24 April 2020.

the end of 2019 and the COVID-19 crisis at the beginning of 2020 could be facilitating farmers to relax the social enforcement of one cato of coca cultivation per family, possibly leading to an increase in cultivation.⁶²

In the case of Mexico, the decrease in opium poppy cultivation in recent years has not only been associated with a sharp drop in opium poppy prices caused by the increasing use of fentanyl in the United States, but also with an intensification of extortion and kidnapping perpetrated by organized crime groups to compensate for decreasing revenues.⁶³ During the ongoing COVID-19 pandemic, cartels are reported to be giving away supplies across their territories of influence and using “social activism” to earn the goodwill of the local population. Increasing unemployment, decreasing income and higher prices of illicit crops cultivated (e.g., cocaine and heroin) are expected to make membership of a drug cartel increasingly attractive.^{64, 65}

In Afghanistan, increases in food prices and overwhelmed coping mechanisms are expected to trigger illicit crop cultivation

The COVID-19 pandemic is not only restricting the movement of people but also of basic consumer goods due to logistical and trade constraints in Afghanistan, the largest producer of opium poppy worldwide. Prices of key food items such as wheat, wheat flour and cooking oil increased by up to 20 per cent during March-April 2020. To make matters worse, Afghanistan suffers from a wheat deficit, which is offset by imports, primarily from Kazakhstan; however, as a precautionary measure to minimize the economic impact of the pandemic, Kazakhstan has introduced an overall export cap, which is expected to create further significant increases in food prices in Afghanistan.⁶⁶ Such increases will be felt the most by vulnerable populations, as well as those already depending on humanitarian assistance. More than 80 per cent of people are living on less than the international applied poverty line (\$1.90 per day).⁶⁷

The COVID-19 crisis has come on top of a string of atypical weather years, including a widespread drought in 2018 and high seasonal floods in 2019, which had already resulted in high levels of hunger and malnutrition and escalating rates of household debt. These recent climate-related shocks have placed Afghanistan on the verge of famine and made the country extremely vulnerable to other shocks, such as the current pandemic.⁶⁸

⁶² As stated by the UNODC’s field office of Bolivia.

⁶³ Network of Researchers in International Affairs. 2019. “No More Opium for the Masses. From the US Fentanyl Boom to the Mexican Opium Crisis: Opportunities Amidst Violence?”.

⁶⁴ BBC, 22 April 2020, “Covid-19 Security: Mexico cartels ‘fill void’ left by government in pandemic”.

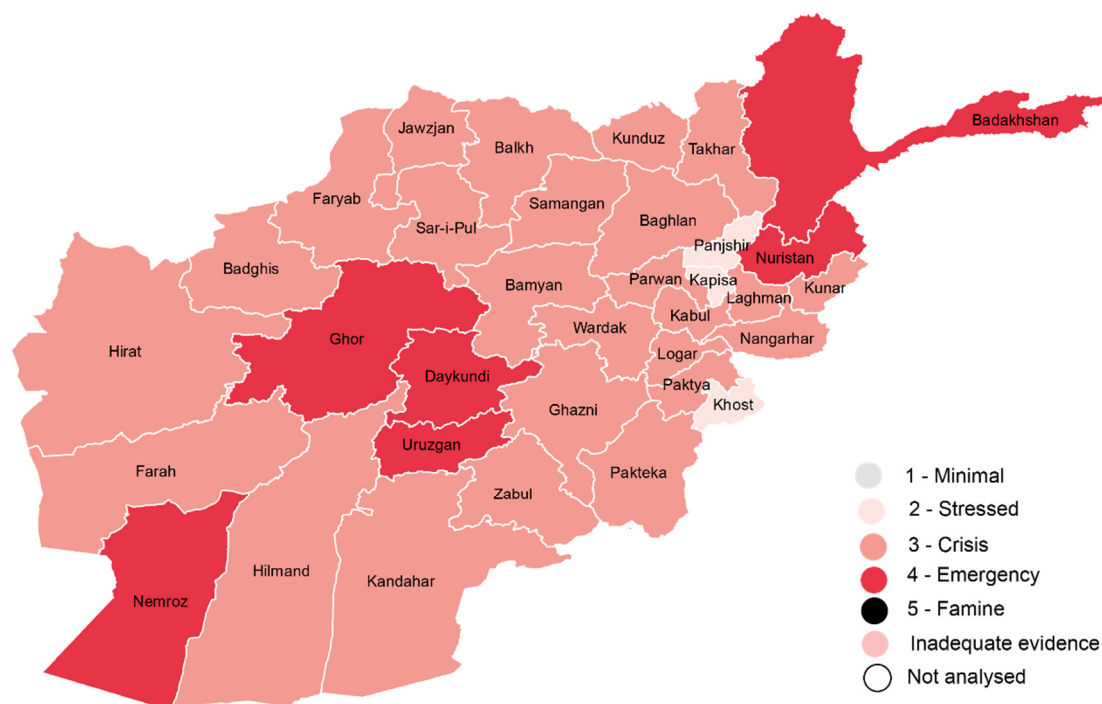
⁶⁵ The New York Post, 28 March 2020, “Coronavirus pandemic drives up price of heroin, meth and fentanyl”.

⁶⁶ OCHA, “Afghanistan. Brief: COVID-19. Number 36” 16 April 2020.

⁶⁷ United Nations, “COVID-19 Multi-Sector Humanitarian Country Plan. Afghanistan”, 24 March 2020.

⁶⁸ Food Security Information Network, “Global Report on Food Crises. Joint Analysis for Better Decisions” 2020.

Figure 3: Acute food insecurity situation, by province, Afghanistan, November 2019–March 2020



Source: Food Security Information Network, *Global Report on Food Crises: Joint Analysis for Better Decisions* (2020).

The disruption of markets and mobility restrictions related to the COVID-19 crisis already seem to be negatively impacting labour markets and purchasing power in Afghanistan. A quarter of the labour force is unemployed and 80 per cent of employment is unstable, comprising self-employment, daily labour and in-kind work.⁶⁹ During March–April 2020, the purchasing power of casual labourers and pastoralists deteriorated by 20 per cent and 14 per cent, respectively, reportedly as a result of their inability to work due to lockdown measures.⁷⁰

Global remittances are projected to decline sharply, by around 20 per cent, due to the economic crisis induced by the COVID-19 pandemic and subsequent lockdowns,⁷¹ with a considerable impact on rural livelihoods and food and nutrition security,⁷² especially in countries such as Afghanistan that are heavily dependent on remittances.

Depending on the degree to which the economy is interrupted, loss of livelihood may overwhelm currently precarious coping mechanisms. The erosion of already fragile livelihoods may generate discontent among the population, fuelling social unrest.⁷³ All these developments are likely to further reduce licit economic opportunities and increase the propensity of the rural population to engage in opium cultivation, trafficking and heroin manufacture.

⁶⁹ United Nations, *COVID-19 Multi-Sector Humanitarian Country Plan - Afghanistan* (24 March 2020).

⁷⁰ OCHA, "Afghanistan. Brief: COVID-19. Number 36" 16 April 2020.

⁷¹ World Bank, "World Bank Predicts Sharpest Decline in Remittances in Recent History" (April 22, 2020).

⁷² FAO, "Migrant Workers and the COVID-19 Pandemic" (2020).

⁷³ FAO, "Addressing the impacts of COVID-19 in food crises" (2020).

POTENTIAL IMPACT ON DRUG TRAFFICKING ACROSS BORDERS

Organized criminal groups react adaptively to market changes. Past experience has demonstrated the capacity of such groups to rapidly adapt their modus operandi or switch market in response to shocks or new opportunities. For example, following a poppy blight in Afghanistan in 2010 and concurrent political developments, cannabis was increasingly produced in the country and international drug trafficking groups increased trafficking in cannabis products from Afghanistan to Europe.^{74, 75} In the past, in some parts of Peru, coca cultivation was scaled back concurrently with an increase in illicit mining in response to increases in the price of gold.⁷⁶ The rapid adaptation of organized criminal groups to new environments has already been reported in some Balkan countries where certain organized criminal groups involved in drug trafficking are moving into forms of crime linked to the COVID-19 virus, such as cybercrime and trafficking in falsified medicines.⁷⁷

It is expected that groups will also adapt their drug trafficking strategies to overcome the measures implemented to counter the spread of COVID-19. The following strategies may vary depending on the severity of the restrictions imposed during the crisis:

- changing modes of transportation and trafficking routes to less risky (still open) routes, or to exploit weaknesses in border controls;
- increasingly using alternative trafficking modes, such as the darknet and postal services for actual drug shipments; and
- stockpiling drugs and waiting for restrictions to be lifted if drugs cannot be moved or sold, in which case, the market will be over-supplied once the COVID-19 measures are suspended.

Impact may vary greatly depending on the modes of transportation used before the COVID-19 crisis

Drugs are trafficked in very different ways depending on the type of drug and its geographical reach. Data recorded in the UNODC Drugs Monitoring Platform show that cocaine-type drugs are predominantly seized at sea (maritime transport) in contrast to opiates, which are mostly seized in vehicles (land transport). Synthetic drugs are often trafficked by air as well, with some countries being supplied with certain substances almost exclusively by air couriers.

The biggest impact on drug trafficking can thus be expected in countries where substances are predominantly, or at least in large proportions, trafficked by air passengers (*in corpore*, using body packs, or concealed in personal luggage). Given the almost universal restrictions imposed on air traffic, the supply of such drugs may be completely disrupted in those countries, in the short term at least, until drug traffickers adapt and change trafficking modes. This may affect synthetic drugs trafficked to

⁷⁴ U.S. Department of State, "U.S. and Afghanistan Announce \$25.7 Million in Good Performers Initiative Awards for Provincial Counternarcotics Achievements", November 2010. Available at (<https://2009-2017.state.gov/r/pa/prs/ps/2010/11/150762.htm>).

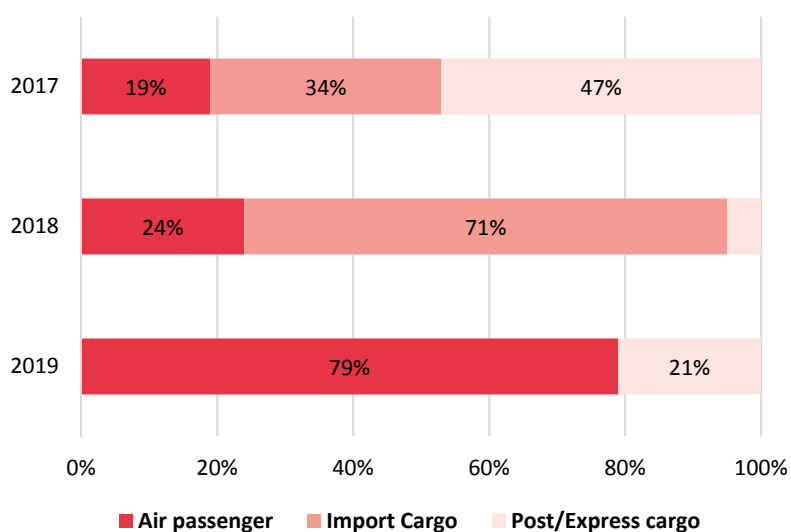
⁷⁵ UNODC, *World Drug Report 2012* (United Nations publication, Sales No. E.12.XI.1).

⁷⁶ UNODC/DEVIDA Peru, 2018 Perú Monitoreo de Cultivos de Coca 2017, December 2018.

⁷⁷ UNODC field office assessment.

countries in South-East Asia, such as the Republic of Korea or Japan, and in Oceania, such as Australia.⁷⁸

Figure 4: Modes of transport of trafficking methamphetamines in the Republic of Korea, 2017–2019



Source: Korea Customs Service.

The disruption may lead air trafficking to be replaced where possible by drug distribution by mail. In Europe, some cocaine is also trafficked by air using couriers⁷⁹ and the drastic restrictions on civil aviation have most likely led to a shift to other trafficking modes. Belgian authorities have indicated that the reduction in air traffic may have already led to changes in how cocaine is being trafficked and have observed an increase in direct shipments by sea cargo from South America to Europe.⁸⁰ Overall, the disruption of cocaine trafficking from the ports of origin or transit in Latin America to the destination ports in Europe may be limited. Indeed, relatively recent large seizures of cocaine in European ports demonstrate that trafficking of large shipments of cocaine is still ongoing.

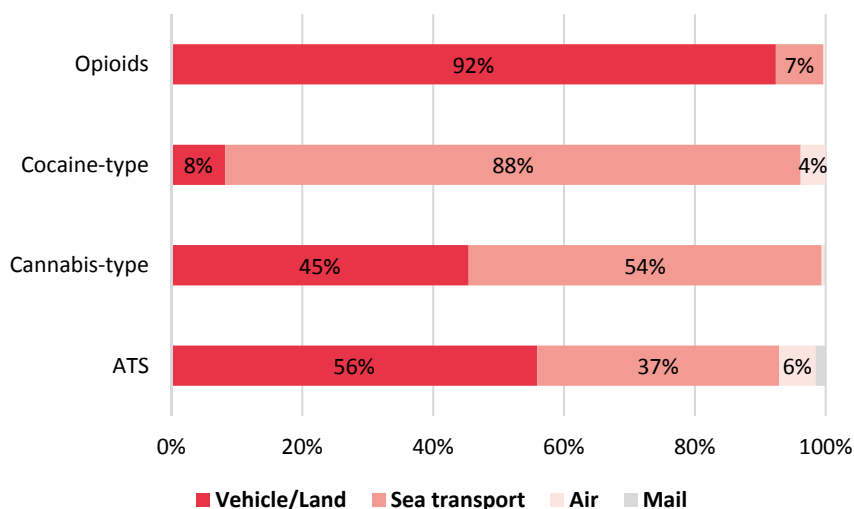
Cross-border trafficking of heroin relies mostly on road transportation using commercial and private vehicles driven from the drug's main source, Afghanistan, to its main destination markets in Europe. An exception is the southern route, which includes maritime trafficking via the Indian Ocean from the southern parts of the Islamic Republic of Iran and Pakistan. The impact of the COVID-19 measures on heroin trafficking therefore depends a great deal on countries' law enforcement efforts and the continuing accessibility of the trafficking routes.

⁷⁸ UNODC field office assessment.

⁷⁹ EMCDDA. Available at http://www.emcdda.europa.eu/cocaine-trafficking-europe_en.

⁸⁰ New York Post, April 04, 2020. Available at <https://nypost.com/2020/04/30/europe-flooded-with-cocaine-despite-coronavirus-trade-disruptions/>.

Figure 5: Mode of transportation, by substance (as percentage of weight seized in individual seizures), UNODC Drugs Monitoring Platform, January 2017–April 2020



Source: UNODC Drugs Monitoring Platform.

Are drug trafficking groups adapting to the COVID-19 measures?

It has been documented that one of the general approaches of drug traffickers is to choose trafficking routes and modes that minimize cost and risk yet maximize profit.⁸¹ Changes in the risk (or perceived risk) of interception and the availability of transportation can thus lead traffickers to change their tactics and shift trafficking routes and modes.

This has been documented previously. In 2015, for example, a deviation from trafficking heroin via the “Balkan route” (Afghanistan–Islamic Republic of Iran–Turkey–Europe) towards a route via the Caucasus was documented as a possible response to increased controls in Turkey owing to large flows of migrants heading towards countries in the European Union.⁸² The emergence of cocaine trafficking from Latin America to Europe via West Africa in the late 2000s is another example of a deviation in a trafficking route, in this case driven by the exploitation of cheap labour, weak governance and an increase in the availability of cheap flights.⁸³ As experienced in the past, drug traffickers today are likely to be exploring avenues to overcome the COVID-19 restrictions by shifting drug transportation to routes that they perceive to be less risky.

Although the data currently available remain limited, reports by Member States and UNODC field offices indicate that the COVID-19 crisis has already affected drug trafficking and the seizure of drugs in Member States. Some countries have reported a large increase in drug seizures, which has been

⁸¹ UNODC, *World Drug Report*, various editions.

⁸² UNODC, *World Drug Report 2017, Booklet 3*, pp. 16; UNODC, *Global AOTP Update* vol. 2 (August 2019).

⁸³ Costa Storti, Cláudia, and Paul De Grauwe, “The cocaine and heroin markets in the era of globalisation and drug reduction policies”, *International Journal of Drug Policy* 20 (6) (2009), pp. 488–96; UNODC, “Cocaine Trafficking in West Africa – The threat to stability and development” (2007).

attributed, at least partially, to an increase in controls related to the COVID-19 measures, while others have reported stability or even a reduction in drug interceptions, indicating either a reduction in supply or the capacity of law enforcement to seize drugs. Other countries, such as Niger, have reported a cease in drug trafficking.⁸⁴

Opiates

The Islamic Republic of Iran consistently seizes the majority of the opiates seized globally and thus plays a key role in understanding heroin trafficking. Media and law enforcement reports from that country indicate that there was an increase in seizures at the beginning of 2020, with two significant seizures made as late as April, of more than 27 tons of opium and 1.2 tons of heroin.⁸⁵ This has been attributed to increased controls in the country due to the COVID-19 measures.⁸⁶

Central Asia, the centre of the “northern route”, along which opiates are trafficked from Afghanistan to the Russian Federation, may also have become a riskier territory for drug trafficking due to increased border controls related to the COVID-19 measures. The UNODC Drugs Monitoring Platform and the Central Asian Regional Information and Coordination Centre for Combating Illicit Trafficking of Narcotic Drugs (CARICC)⁸⁷ observed major seizures on the border between the Islamic Republic of Iran and Azerbaijan as late as March 2020, after the borders were already closed. The CARICC Report indicated that heroin trafficking along the northern route may have become more challenging for drug trafficking groups.

Kazakhstan reported a significant decrease in drug seizures registered in the first three months of 2020 compared with 2019.⁸⁸ Since the onset of the effect of the COVID-19 measures only began in March 2020, this development may be the result of other factors. The situation in Central Asia and Transcaucasia has been volatile and trafficking routes appear to be changing quickly.

A recent uptick in heroin seizures in the Indian Ocean could be an indication that drug traffickers may be making more use of maritime routes to traffic heroin to Europe by using the southern route (Afghanistan–Indian Ocean–Africa–Europe).⁸⁹ Such a development may be going hand in hand with a decreased in trafficking along the land routes, i.e. the Balkan route and the northern route. This shift, if confirmed, would indicate a change in strategy by drug trafficking organizations in response to the COVID-19 measures, but other dynamics may be playing a role in this change. Increased seizure activities in the Indian Ocean could also be attributable to a reduction in licit traffic, which is making the identification of suspicious transports easier than before.⁹⁰ The increase could also be a seasonal phenomenon, however, as there was a similar spike in seizures in Sri Lanka around the beginning of 2019.

⁸⁴ UNODC Field office assessment.

⁸⁵ Islamic Republic of Iran, Iran Drug Control Headquarters. Available at http://www.dchq.ir/index.php?option=com_content&view=article&id=61160:099012701&catid=90&Itemid=5512.

⁸⁶ Islamic Republic of Iran. Available at <https://www.irna.ir/news/83740144/مواد-مخدر-پلیس-به-مصرف-کنندگان-مواد-مخدر-هشدار-داد-هشدار-داد>.

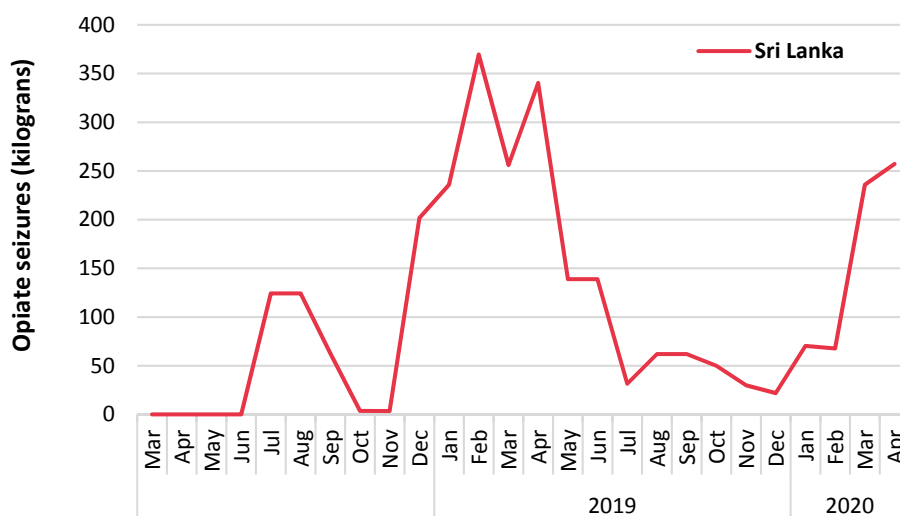
⁸⁷ CARICC information bulletin No. 211.

⁸⁸ Committee on Legal Statistics and Special Accounts, General Prosecutor’s Office, Kazakhstan, <https://qamqor.gov.kz/portal/page/portal/POPageGroup/Services/Pravstat>.

⁸⁹ UNODC field office reports.

⁹⁰ Ibid.

Figure 6: Seizures of opiates as recorded in the UNODC Drugs Monitoring Platform (3-month moving average), 2018–2020, Sri Lanka (kilograms)



Source: UNODC Drugs Monitoring Platform.

In the Balkan countries, which are transited by drugs en route to the European Union by land, borders are currently closed to private travel, but open for the commercial transport of goods in Albania, Kosovo,⁹¹ North Macedonia, Serbia and Montenegro. Controls and border checks in these countries/territories have increased significantly and passenger vehicles can obviously no longer be used for drug trafficking, but commercial trade and unofficial border crossings (green borders) remain an option.

In the Americas, most of the heroin trafficked originates within the region itself. According to a media report,⁹² trafficking in all substances from Mexico to the United States has become more challenging and supply chains have been disrupted. The same report also indicates the stockpiling of drugs and cash along the border, a decrease in money laundering and online sales via the darknet.

In summary, there are indications that heroin trafficking along land routes has become riskier and may be slowing down heroin supplies to end-consumer markets. A shift may be taking place towards the southern route, which relies to a greater extent on maritime trafficking and transit countries with weaker law enforcement capacity than those along the land routes.

The next few months will be crucial to improving understanding of whether these developments are feeding into and possibly accelerating a longer-term trend or will be limited to the duration of the pandemic.

⁹¹ All references to Kosovo should be understood to be in compliance with Security Council resolution 1244 (1999).

⁹² Los Angeles Times. Available at <https://www.latimes.com/world-nation/story/2020-04-20/cartels-are-scrambling-virus-snarls-global-drug-trade>.

Cocaine

Recent data on cocaine seizures have revealed that large cocaine shipments continue to be intercepted in all the major markets in Latin America and Europe. These seizures (mostly) document large-scale cross-border trafficking activity and may be indicative of the continued international trafficking of cocaine. According to media sources,⁹³ the customs authorities in Belgium suspect that drug traffickers were counting on a reduction in the number of inspections and increased their efforts to move drugs using transatlantic maritime shipments that enter Europe directly.⁹⁴

In Colombia, an increase in controls implemented at the country's borders appears to have led to a reduction in cocaine trafficking across land routes and increased trafficking by sea, in particular using submersibles for trafficking to Central America and container cargo for trafficking to Europe. Similarly, the use of light aircraft traffic has apparently increased.⁹⁵

There are indications of cocaine shortages outside the cocaine-producing countries. Reports from the United States⁹⁶ indicate shortages of cocaine on the street, and reports from Brazil⁹⁷ indicate sharp increases in wholesale cocaine prices due to a lack of product trafficked from Colombia or Peru. This is in line with the aforementioned information from Peru pointing to a reduction in the possibility of traffickers moving product outside the country.

In the media, Brazilian authorities⁹⁸ have interpreted the shortage as being caused by a reduction in supply due to the COVID-19 restrictions and a reduction in demand in Europe, where strict lockdown measures may have reduced cocaine consumption drastically, as the drug is often consumed in recreational settings such as bars and clubs, which are not currently accessible in most European countries. This, together with limited options for distributing products from the point of entry to the end-consumer, may have led to a disruption to the demand for the drug.

It can be assumed that such a disruption in the supply chain could lead drug trafficking groups to stockpile drugs close to the source countries. Once the COVID-19 restrictions are lifted, there is a risk that the market will be flooded with low-cost, high-quality cocaine, which could lead to an increase in use and related harms among drug users.

⁹³ Brussels Times. Available at www.brusselstimes.com/all-news/belgium-all-news/106814/coronavirus-belgiums-infection-rate-is-decreasing/.

⁹⁴ UNODC field office assessment.

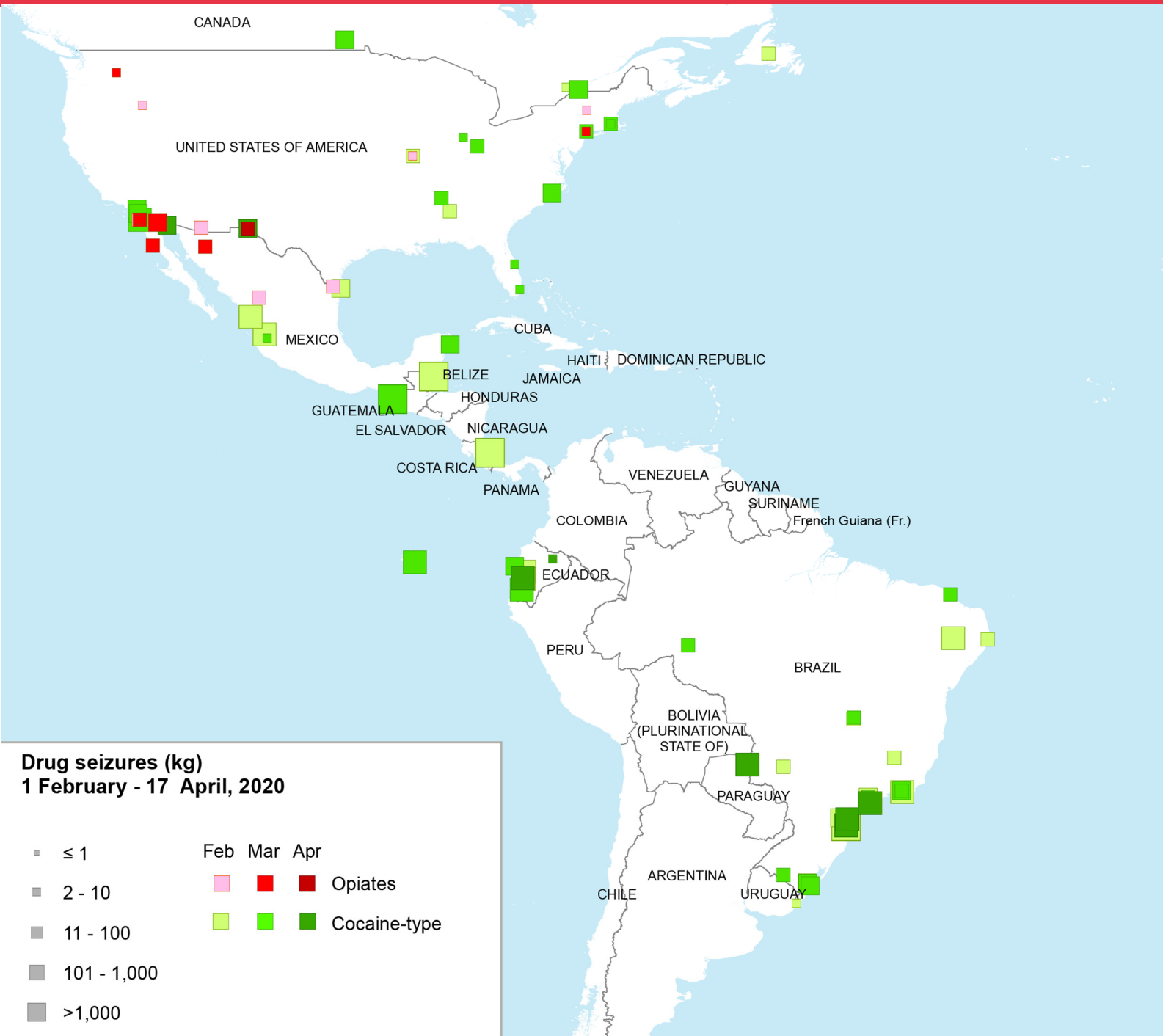
⁹⁵ Ibid.

⁹⁶ Los Angeles Times. Available at <https://www.latimes.com/world-nation/story/2020-04-20/cartels-are-scrambling-virus-snarls-global-drug-trade>.

⁹⁷ Reuters. Available at <https://www.reuters.com/article/us-health-coronavirus-latam-narcotics-sp-idUSKCN2242ZI>.

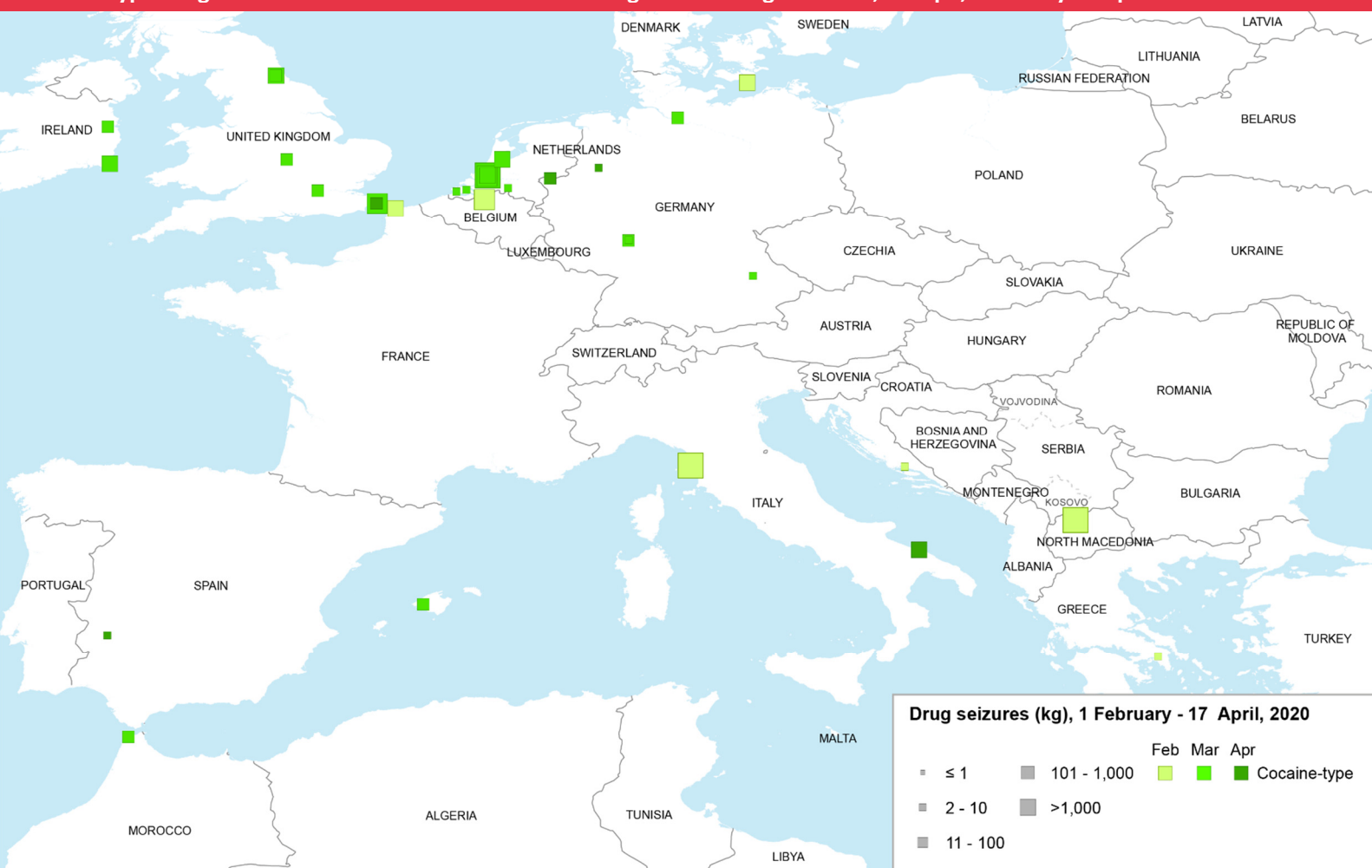
⁹⁸ Ibid.

Opiate and Cocaine-type drug seizures as recorded in the UNODC Drugs Monitoring Platform, Americas, February to April 2020



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

Cocaine-type drug seizures as recorded in the UNODC Drugs Monitoring Platform, Europe, February to April 2020.



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

Cannabis

In contrast to the production of other plant-based drugs, which is concentrated in a limited number of countries, cannabis is produced in almost all countries across the world. Cannabis products are often produced and distributed locally via very short domestic supply chains.⁹⁹ There are no indications that these supply chains have been drastically disrupted by the COVID-19 measures.

Continuing large-scale seizures of cannabis products in the Middle East and North Africa suggest that cannabis trafficking is not being disrupted by the COVID-19 restrictions. There are indications that the lockdown measures in Europe may be triggering an increase in demand for cannabis products,¹⁰⁰ which may lead to intensified drug trafficking activities from North Africa to Europe.

⁹⁹ UNODC, *World Drug Report 2019* (United Nations publication, Sales No. E.19.XI.8).

¹⁰⁰ See section on drug consumption.

IMPACT OF THE COVID-19 MEASURES ON DRUG USE

Countries on all continents have reported that the COVID-19 measures have had an impact on the availability of drugs at the street level, on access to drug treatment and other health services. Other countries with comparatively more relaxed measures have not been affected to the same extent. In the long-run, the economic consequences of the COVID-19 measures are likely to have a lasting impact on drug use and patterns of consumption.

Availability of drugs

Reports emerging from different countries point to a shortage of drugs among end-consumers caused by reduction in imports of drugs and/or by strict lockdown measures that prohibit the personal interaction involved in selling and purchasing drugs. Drug distribution still relies heavily on in-person contact, with drugs ordered through the darknet and mailed to users only representing a very small proportion (around 0.2 per cent of retail sales in the United States and the European Union).¹⁰¹ Other countries, however, have reported an unchanged situation or changes in the distribution of drugs at the retail level to circumvent or exploit lockdown measures.

Indicators of drug shortages at the retail level, such as reports from the Islamic Republic of Iran, have indicated increases in prices in certain provinces together with a decrease in the purity of narcotics.¹⁰² This is consistent with the impact recorded during previous supply shocks, such as the Australian “heroin drought” in 2001 and the heroin shortages in several European countries, including the United Kingdom and the Russian Federation in 2010/11).¹⁰³

In Czechia, heroin has disappeared from the street-level market and there is concern about a potential increase in the use of fentanyl, harmful domestically produced illicit substances and of alcohol in combination with benzodiazepines. In Montenegro, the demand for pharmaceutical products such as buprenorphine has seen a sudden increase and prices have almost doubled.¹⁰⁴

In the United Kingdom, there was an initial drop in retail prices in the days prior to the lockdown because dealers were concerned that they would not be able to access their stocks thereafter,¹⁰⁵ but subsequent supply shortages¹⁰⁶ have led to rising drug prices as many dealers have ceased trading due to increased police checks on the street.¹⁰⁷ The intensification of controls stemming from the COVID-19 measures have facilitated an increase in drug-related arrests in the United Kingdom, where the

¹⁰¹ UNODC, *World Drug Report 2019*.

¹⁰² Available at Islamic Republic News Agency: <https://www.irna.ir/news/83740144/داد-هشدار-مواد-مخدر-کنندگان-مصرف-کنندگان-پلیس-به-مصرف-کنندگان-مواد-مخدر-هشدار-داد>. The provinces where the changes were observed are not named in the article.

¹⁰³ Hallam, Christopher, *The Heroin Shortage in the UK and Europe* (March 1, 2011). Available at SSRN: <https://ssrn.com/abstract=1908881> or <http://dx.doi.org/10.2139/ssrn.1908881>; EMCDDA: <http://www.emcdda.europa.eu/system/files/attachments/2849/4.%20JMO%20-%20TDI%20meeting,%20heroin%20presentation.pdf>.

¹⁰⁴ UNODC field office assessment.

¹⁰⁵ Sky News, 3 April 2020. Available at <https://news.sky.com/story/coronavirus-price-of-street-drugs-rises-due-to-lockdown-measures-dealer-says-11967377>.

¹⁰⁶ The Guardian. Available at <https://www.theguardian.com/society/2020/apr/12/coronavirus-triggers-uk-shortage-of-illicit-drugs>.

¹⁰⁷ Sky News, 3 April 2020 (<https://news.sky.com/story/coronavirus-price-of-street-drugs-rises-due-to-lockdown-measures-dealer-says-11967377>).

police have increased the interception of traffickers facilitating “county lines”, in which organized criminal groups move narcotics out of large urban areas and into small towns and villages.¹⁰⁸ The same sources have also mentioned the potential for an increase in the use of fentanyl and other synthetic alternatives in the United Kingdom.¹⁰⁹ Similar reports have been found in Italy¹¹⁰ and the United States.¹¹¹

Slovenia¹¹² has reported a stable situation but expects the situation to change when drug inventories are depleted. The situation in the Middle East and North Africa appears to be stable in terms of drug availability. The COVID-19 crisis does not seem to have disrupted domestic (retail) drug trafficking in those subregions.¹¹³ Although the availability of information on drug trafficking differs from country to country, the lockdown measures do not appear to have made drug distribution in cities more difficult, as significant seizures in Cairo, Egypt, and Tangier, Morocco, in mid-April have shown.¹¹⁴ The continued supply has been explained by a continuing demand for drugs and by mobility restrictions not being strictly enforced during daytime. CARICC¹¹⁵ assessed that the COVID-19 measures implemented by the authorities of the Russian Federation may not have had a major impact on the domestic drug market given its domestic production. In the Russian Federation, many of these substances are also trafficked over the darknet, most notably via the Hydra platform, with no personal interactions that could be limited by the restrictions.¹¹⁶

Belgian authorities have reported¹¹⁷ an increase in cannabis herb prices, which may point to an increase in demand given that cannabis herb is mostly produced domestically (in contrast to cannabis resin or hashish, which is a mostly imported substance) and the supply chain may not have been adversely affected. Cannabis herb prices have started to increase in the United Kingdom as well, irrespective of a general decrease in other drug prices, also reflecting a possible increase in cannabis use.¹¹⁸ Similar reports¹¹⁹ have come from North Macedonia, where drug prices have remained stable, with the exception of cannabis. In France, the stockpiling of cannabis before the lockdown has been reported.¹²⁰

Street dealers seem to have contrived new strategies to overcome the mobility restrictions. There is information from North Macedonia that street-level dealers have been dressing as medical personnel,

¹⁰⁸ The Guardian. Available at <https://www.theguardian.com/uk-news/2020/apr/13/gangs-still-forcing-children-into-county-lines-drug-trafficking-police-covid-19-lockdown>.

¹⁰⁹ The Guardian. Available at <https://www.theguardian.com/society/2020/apr/12/coronavirus-triggers-uk-shortage-of-illicit-drugs>.

¹¹⁰ Available at <https://www.facebook.com/drugreporter/videos/745122862689260/>.

¹¹¹ Available at <https://nypost.com/2020/03/28/coronavirus-pandemic-drives-up-price-of-heroin-meth-and-fentanyl/>.

¹¹² Submission to UNODC.

¹¹³ UNODC field office assessment.

¹¹⁴ Cases from April 15 to April 17, 2020.

¹¹⁵ Available at <https://caricc.org/index.php/en/>.

¹¹⁶ UNODC, *World Drug Report 2020* (forthcoming).

¹¹⁷ Available at https://www.rtbf.be/info/regions/detail_le-coronavirus-fait-grimper-le-prix-du-cannabis?id=10469349.

¹¹⁸ Available at <https://news.sky.com/story/coronavirus-price-of-street-drugs-rises-due-to-lockdown-measures-dealer-says-11967377>.

¹¹⁹ UNODC field office.

¹²⁰ Available at <https://www.ofdt.fr/BDD/publications/docs/Bulletin-TREND-COVID-1.pdf>.

delivery service staff, etc., to avoid detection by the police when going about their business. The increased use of dogs to make deliveries has also been observed, since dog walking is permitted during the lockdown. A media source from the United Kingdom has reported that drug dealers have been posing as key workers in protective equipment in order to sell drugs¹²¹ and reports from Nigeria point to increased use of postal services for drug trafficking.¹²²

In summary, there are indications that the COVID-19 restrictions have already led to a disruption in the availability of drugs in many street-level markets and to an increase in prices. Depending on the substance, this may reduce overall consumption, which may mostly be the case for drugs that are used in recreational settings, or it may cause drug users to seek substitutes, which are often more harmful, as expected of highly addictive substances.

Health consequences for people who use drugs

The consequences of a reduction in drug supply depend on the type of substance and the pattern of its use. Drugs that are mostly consumed for recreational purposes may be either consumed less or replaced by more easily available drugs such as alcohol. Public locations and events such as night clubs, bars and concerts are currently closed, so drug use specifically associated with those settings may only occur to a very limited extent,¹²³ affecting the use of typical “party” substances such as “ecstasy”.¹²⁴ For other substances, such as heroin, and for persons with drug use disorders, the supply shortage can have profound health consequences.

Supply disruptions of heroin can, for example, potentially trigger a switch by people who use drugs to even more harmful practices, examples of which have been documented. Heroin shortages have been linked with increased use of synthetic opioids, including fentanyl, in a few European countries.¹²⁵ The use of home-produced injectable opioids such as “krokodil” as a more harmful alternative to heroin has also been documented.¹²⁶

Another health aspect of the COVID-19 mobility restrictions affecting people who use drugs is the possible disruption of access to drug treatment services, clean drug-using equipment and vital medications. Heroin users who cannot access opiate-substitution therapy risk severe withdrawal symptoms. Lack of access to treatment and safe practices may increase the risk of an aggravated drug use disorder, or bear health consequences through needle sharing and other unsafe practices.

Shortages in the supply of drugs may prompt users to opt for more efficient ways of drug administration, such as injecting drugs. This carries additional risks, however, such as the spread of blood-borne diseases (HIV/AIDS, hepatitis C), while the sharing of injecting equipment, as well as the

¹²¹ Available at <https://www.express.co.uk/news/uk/1269771/coronavirus-fine-police-uk-lockdown-rules-drug-dealers>.

¹²² UNODC field office assessment.

¹²³ China reported to UNODC a sharp reduction in drug use in bars and nightclubs due to the strict lockdown measures.

¹²⁴ Available at <https://www.ofdt.fr/BDD/publications/docs/Bulletin-TREND-COVID-1.pdf>

¹²⁵ Mounteney J. and others, “Fentanyl: are we missing the signs? Highly potent and on the rise in Europe”, *International Journal of Drug Policy*, 26 (2015), pp. 626–631.

¹²⁶ Jean-Paul C. Grund, Alisher Latypov and Magdalena Harris, “Breaking worse: The emergence of krokodil and excessive injuries among people who inject drugs in Eurasia”, *International Journal of Drug Policy*, vol. 24, Issue 4, (2013), pp. 265-274.

sharing of inhalation, vaping, inhalation devices and other drug paraphernalia, contaminated with COVID-19 may increase the risk of infection and play a role in the spread of the COVID-19 virus.

The risk of drug overdose may also increase among people who inject drugs and who are infected with the COVID-19 virus, while underlying chronic medical conditions linked to drug use may increase the risk of developing severe illnesses if infected with the virus.¹²⁷ The main life-threatening effects of any opioid, such as heroin, are slow down and stopping a person from breathing. Since COVID-19, like any severe infection of the lung, can also cause breathing difficulties, there may be an increase in the risk of overdose among opioid users.

Country reports have shown varying levels of service continuance and responses. Reports from Bolivia¹²⁸ indicate that a lack of public treatment centres and their availability only in urban centres is making accessibility of services during the COVID-19 pandemic even more challenging. Community services are struggling for funding and are not able to accept new patients.¹²⁹ Government and municipalities provide shelters for the street population, but they do not provide support in managing abstinence, which prevents drug users from coming to those spaces on a regular basis.¹³⁰

During the lockdown (February 2020) China registered a sharp reduction in the number of newly-registered drug users across all substances (opioids, amphetamine-type substances, cannabis and cocaine), but expected a rebound with the lifting of restrictions.

Czechia¹³¹ has reported a reduction in the capacity of substitution treatment and of beds available for detoxification and in-patient treatment during the lockdown. The country has reported stable or even increased demand for low-threshold services such as needle exchange programmes. Substitution treatment is still in place and substances for treatment are dispensed over a longer period of time, in contrast to earlier daily dispensation.

In order to increase accessibility to opioid-substitution therapy, the United Kingdom is planning to dispense methadone without new prescriptions to those who already use it,¹³² although the measure has triggered concerns by the Advisory Council on the Misuse of Drugs that it may lead to an increase “in drug misuse and diversion”.¹³³

Bulgaria has reported that drug treatment facilities are continuing to operate during the COVID-19 crisis and has reported the possibility of receiving methadone hydrochloride and slow-release morphine for home use, as well as the provision of telemedicine options and remote psychological counselling.

¹²⁷ EMCDDA, “COVID 19 and people who use drugs”, 25 March 2020. Available at (www.emcdda.europa.eu/publications/topic-overviews/covid-19-and-people-who-use-drugs).

¹²⁸ UNODC field office assessment.

¹²⁹ Therapeutic Communities of Bolivia (2020).

¹³⁰ Ibid.

¹³¹ Czechia National Monitoring Centre for Drugs and Addiction.

¹³² Available at <https://www.theguardian.com/politics/2020/apr/08/methadone-to-be-handed-out-without-prescription-during-covid-19-crisis#maincontent>.

¹³³ Available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/878524/COVID-19_ACMD_advice_on_proposed_legislative_changes_to_enable_supply_of_controlled_drugs_during_a_pandemic1.pdf.

Long-term effects due to the economic consequences of the COVID-19 crisis

In the short term, the COVID-19 crisis may lead to an overall decrease in drug use even though specific problems for groups already living at the margins of society remain and their living conditions may deteriorate substantially. In the long term, however, the economic downturn caused by the COVID-19 crisis could lead to a lasting transformation of drug consumption patterns, as the economic consequences caused by COVID-19 may lead to increased poverty and decreased economic opportunities for already vulnerable populations.

The more precarious socioeconomic situation may be conducive to substance use and could aggravate harmful drug use among the population. The increased involvement of dependent drug users in criminal activities to pay for their drug habit may also be a consequence, unless sufficient treatment can be provided to such groups.

Studies on the 2008 global financial crisis have shown changes in drug use patterns and the delivery of services. Similar trends may materialize from the economic downturn related to COVID-19. The impact of the 2008 financial crisis was documented mostly in Europe, where 15 out of 19 countries reported cuts to drug-related budgets, ranging from 2 to 44 per cent.¹³⁴

There was also an increase in drug use and a shift from more expensive to cheaper drugs, a shift towards injecting drugs and to substances with an increased risk of harm due to more frequent injections.¹³⁵ In Italy, for example, there was a decrease in the use of heroin and cocaine and a concurrent increase in the use of cannabis and methamphetamine, which possibly reflected individuals' decreased income levels. Other countries such as Greece and Spain, saw an increase in drug use, particularly among older people and people who became unemployed.¹³⁶ In Romania, a shift was observed among people who inject drugs, with 97 per cent interviewed in 2009 reporting heroin as the main drug of injection and, in 2012, most respondents (49.4 per cent) reporting the injection of amphetamine-type stimulants (mostly synthetic cathinones) and only 38.1 per cent of heroin. In Greece, an increase in injecting a cheap new stimulant-type drug known as "sisa" (methamphetamine) was reported. "Sisa" can be made in a kitchen using ephedrine, hydrochloric acid, ethanol and car battery fluid.¹³⁷

The close monitoring of markets through surveys, and price and purity monitoring can help in identifying trends in a timely manner, which can help the design of effective drug strategies.

¹³⁴ Claudia Costa Storti and others, "Economic recession, drug use and public health", *International Journal of Drug Policy*, vol. 22, No. 5 (September 2011), pp. 321-325.

¹³⁵ UNODC, *World Drug Report 2014*.

¹³⁶ Dom G and others., "The Impact of the 2008 Economic Crisis on Substance Use Patterns in the Countries of the European Union", *International Journal of Environmental Research and Public Health* 13(1) (2016).

¹³⁷ UNODC, *World Drug Report 2014*.