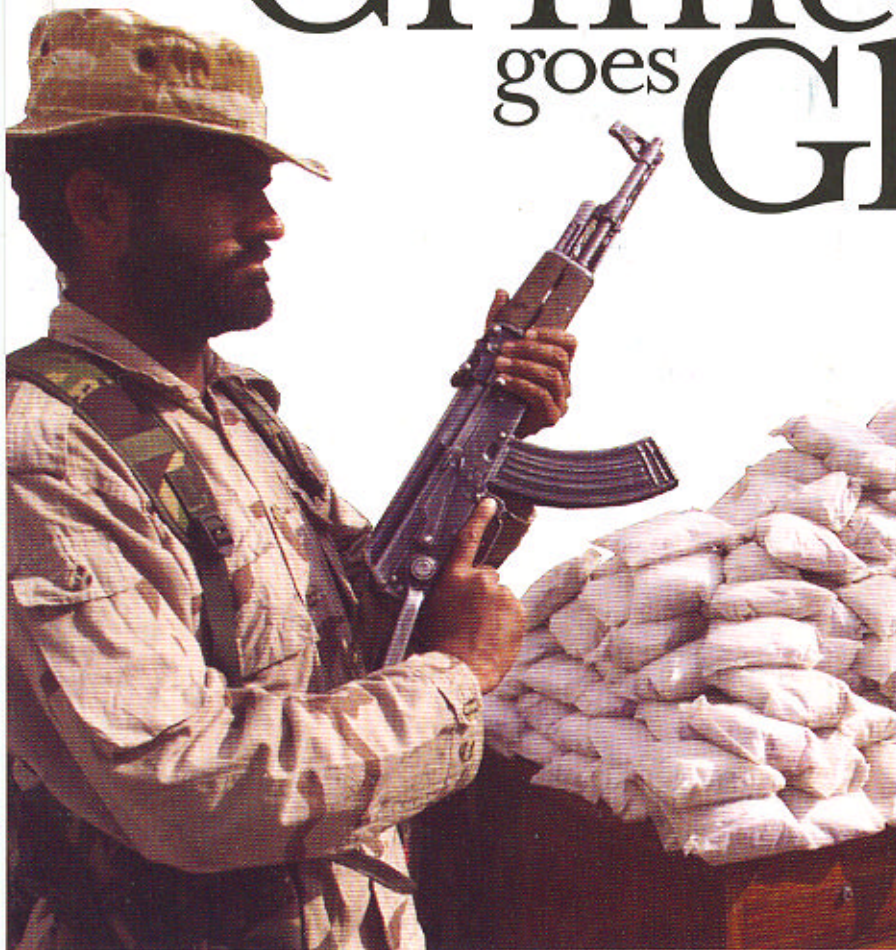


# Georgetown Journal

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## Crime goes Global



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## Stemming the Contagion

### *Regional Efforts to Curb Afghan Heroin's Impact*

Svante E. Cornell

Afghanistan's heroin industry is one of the most intractable and far-reaching consequences of the violence that has racked that country since 1980. Producing on average three-quarters of the global supply of heroin since the mid-1990s, Afghanistan supplies the majority of heroin consumed in Europe and nearly all the heroin for Russia's booming market. Even in the United States, a minor portion of the heroin consumed is of Afghan origin. The human and material costs of heroin addiction have been significant worldwide. In addition, money earned from the heroin industry has been a powerful part of financing rebellions. The Kosovo Liberation Army and the Marxist-Leninist Kurdistan Workers' Party in Turkey are the best-known rebel groups to have financed their activities through the heroin trade.

The consequences of the Afghan heroin industry have been even worse for Afghanistan's neighbors. Iran, Pakistan, and the Central Asian states of Kyrgyzstan, Kazakhstan, Tajikistan, Turkmenistan, and Uzbekistan have become major transit routes for Afghanistan's opiates. Although many of these countries initially dismissed the transit of drugs through their territory as Afghanistan's problem alone, they came to perceive this trade as a major and multi-

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faceted threat to their own social, economic, and national security.<sup>1</sup>

The heroin industry brings crime and addiction that threaten the very fabric of society in states poorly equipped to handle such challenges. The drug trade has exacerbated corruption in the weak states bordering Afghanistan, impairing their economic and political functioning and infiltrating their governments to an unknown extent. With links to insurgency and terrorism, the drug trade threatens national and regional security. Militant organizations such as the Islamic Movement of Uzbekistan (IMU) have financed their operations through drugs.<sup>2</sup> Although systematic research into the phenomenon has been relatively scant, it is clear that the region's security has become inseparable from Afghanistan's illicit crops.

With limited international resources and attention, the region has been left alone to deal with the fallout of the drug trade. The total budget of the United Nations Office on Drugs and Crime (UNODC) is roughly \$100 million per

national cooperation—a prerequisite for containing a problem that is transnational by nature. The often tense relations between the states of the region have not helped either. Given the importance of the region to U.S. national security interests, the adverse effect of the drug trade on the region's stability is bound to harm U.S. interests in Central Asia.

### **Waking Up to the Problem.**

Afghanistan has grown opium for centuries, yet other countries, such as Iran and Pakistan, were the primary producers.<sup>3</sup> By the late 1990s, however, Afghanistan was the center of production, and both Pakistan and Iran were declared virtually poppy-free. The growth of narcotics production in Afghanistan resulted in two major changes in production patterns: a major increase in the quantity of opiates and the growth of heroin processing inside Afghanistan. Until the late 1990s, Afghanistan mainly produced raw opium or morphine base, which was refined into heroin in Pakistan, southeastern Turkey,

**Pakistan, which had 20,000 heroin addicts in 1980, now has a half million chronic heroin users. The prevalence rate among the adult male population is over 2 percent.**

year globally. This figure is miniscule compared to the estimated \$1 billion generated annually by the cultivation of opium in Afghanistan, in addition to the proceeds of heroin processing and smuggling. This disparity has impaired efforts to establish meaningful inter-

or the Balkans. Today, the overwhelming majority of heroin processing takes place inside Afghanistan. Both Iran and Pakistan have seen addicts turning from opium to heroin use, exacerbating their domestic drug problem as a result of heroin's extremely addictive nature and

## In spite of drug control efforts, Iran remains the main transit route for Afghan drugs destined for Europe.

the spread of HIV through needle sharing. The same problems also occurred in Russia and the states of Central Asia.

Hence Pakistan, which had 20,000 heroin addicts in 1980, now has a half million chronic heroin users. The prevalence rate among the adult male population is over 2 percent. The proportion of injecting drug users is also rapidly increasing, especially in urban areas.<sup>4</sup>

Iran's drug problem is even larger. In 2003, the Iranian Drug Control Headquarters estimated that the country had two million 'serious drug users,' including over 300,000 injecting heroin users.<sup>5</sup> Unlike in Pakistan, heroin has not yet eclipsed opium as the main drug. That said, a trend toward increasing heroin use is obvious.<sup>6</sup> A 2000 study estimated that 2.8 percent of the population over fifteen years of age abused opiates.<sup>7</sup>

In Central Asia, the problem has not reached such proportions, although heroin addiction has risen sharply to an estimated 1 percent of the population across the region today. An HIV epidemic and substantial problems with Hepatitis C have followed as well.

**National Responses.** Afghanistan's neighbors have responded to the problem with a variety of counter-narcotics measures. While these steps initially focused on supply reduction, they eventually acquired a prominent demand control aspect. Iran has invested the most significant resources in drug control efforts, spending upwards of \$250 mil-

lion a year.<sup>8</sup> It spent the lion's share of these resources on supply reduction, including the posting of 30,000 law enforcement officers on the Pakistani border. Over 3,500 officers have been killed in encounters with heavily armed drug traffickers, especially in the tri-border area linking Iran's Sistan-Baluchistan province with Afghanistan's Nimroz province and Pakistani Baluchistan. Iran has invested in physical installations along the border with Afghanistan. Such measures include patrol roads, several twenty-mile long ditches, and huge concrete walls to stem drug traffickers. In spite of these efforts, Iran remains the main transit route for Afghan drugs destined for Europe, with police seizing 72 tons of opium, 9 tons of morphine, and 4 tons of heroin in 2002.<sup>9</sup> In recent years, the Iranian government has begun to spend a larger portion of its resources on demand reduction, realizing that supply reduction alone has thus far proved fruitless.<sup>10</sup>

In Pakistan, narcotics acquired a prominent place in the country's economic and political life in the 1980s and 1990s. It was not until the late 1990s, following the coup of General Pervez Musharraf, that the government stepped up its counter-narcotics efforts. The first priority was to control opium production in the country. Pakistan eradicated almost all opium cultivation, an impressive feat considering opium is cultivated primarily in the unruly Federally Administered Tribal Areas

(FATA) along the Afghan border.<sup>12</sup> Though opium cultivation increased again in the FATA in 2003, Pakistan's government has addressed the narcotics situation seriously.<sup>13</sup>

Substantial increases in heroin seizures and the arrest and extradition of traffickers have also taken place after the government approved and implemented a drug control master plan in 1999. Pakistan in 2001 seized 2.6 tons of opium, almost 7 tons of morphine, and almost 6 tons of heroin. As in Iran, efforts aimed at demand reduction and treatment have increased, though they remain inadequate.<sup>13</sup>

The states of Central Asia vary widely in their counter-narcotics efforts. Two main trafficking routes are known to exist. Tajikistan and Kyrgyzstan form a crucial corridor for heroin traffickers from northern Afghanistan toward Russia and Europe. UNODC and independent experts estimate that another, perhaps equally significant route, transits Turkmenistan, the Caspian Sea, and Russia or the South Caucasus on its way to Europe. Yet, since the late 1990s isolationist Turkmenistan has minimized its cooperation with both regional and international counter-narcotics efforts,

opiates and, with Kazakhstan, the largest addiction and HIV problems. These problems are less severe in Uzbekistan, while Turkmenistan does not report figures on such issues. Tajikistan reports yearly seizures of approximately 4 tons of heroin, with seizure rates in Kyrgyzstan also increasing rapidly.<sup>14</sup>

The Central Asian states have wrestled with the question of how to institutionalize drug control in the government hierarchy. Iran operates its counter-narcotics efforts primarily through a Drug Control Headquarters, created in 1989, that coordinates efforts among at least eleven agencies and ministries. The unwieldy structure has had only moderate success at coordination.<sup>15</sup> Insofar as supply reduction is concerned, Iran has a special and well-funded police force responsible for patrolling the border with Afghanistan. Still, Iranian customs are not fully integrated into the drug control program.<sup>16</sup>

In Pakistan, a Narcotics Board, renamed the Narcotics Control Board (NCB) in 1973, was established under the Revenue Division in 1957. An Anti-Narcotics Task Force was created in 1991, forming the law enforcement arm of anti-narcotics; this branch merged with

## Countries fighting the tide of Afghanistan's opiates face a severe deficit in regional cooperation.

attracting much international criticism. Uzbekistan, sandwiched between these two routes, has a strict border regime with its neighbors, but it still receives a fair share of drug trafficking. Kyrgyzstan and Tajikistan report the highest seizures of

the NCB in 1995, creating a unified Anti-Narcotics Force with 1,500 personnel.

For their part, Tajikistan and Kyrgyzstan eventually formed specific Drug Control Agencies, funded by and in cooperation with the UNODC, with

the largest donations coming from the United States. These agencies have relatively broad responsibilities and are law enforcement bodies in their own right. Kazakhstan, Turkmenistan, and Uzbekistan, on the other hand, operate State Commissions on Narcotics whose primary function is to coordinate with other state agencies. These bodies have much fewer capabilities and personnel than the Tajik and Kyrgyz Drug Control Agencies that have a staff of 360 and 240 persons, respectively.<sup>17</sup>

In short, the multifaceted security, border control, and health challenges posed by the narcotics trade have contributed to the divergent strategies adopted by Afghanistan's neighbors. Such divergent approaches have, in turn, impeded meaningful cooperation in the fight to curb the flow of illicit drugs in the region.

### **Regional Cooperative Efforts.**

Countries fighting the tide of Afghanistan's opiates face a severe deficit in regional cooperation. Aside from the Economic Cooperation Organization (ECO), no multilateral initiatives include all of the region's states. The organizations that exist, moreover, are more often than not dominated by one powerful state and mainly seek to advance the national interest of that state, as is the case with Russia and the Collective Security Treaty Organization (CSTO). The lack of genuine regional cooperation mechanisms, such as the EU in Europe and ASEAN in Southeast Asia, has impeded regional cooperation in counter-narcotics efforts across the region.

Even more problematic, mutual suspicion between regional states continues to prevent cooperation. Turkmenistan's isolationist policy and instinctive rejection

of most types of international cooperation is the most extreme case. Tension between Kazakhstan and Uzbekistan or between Uzbekistan and its smaller neighbors complicates cooperation in Central Asia, and the Central Asian states distrust the regional intentions of Iran and Pakistan.

Given this regional dynamic and the diverse challenges narcotics pose, the lack of effective cooperation in drug control is not surprising.<sup>18</sup> Afghanistan's immediate neighbors have attempted to coordinate and cooperate, but such efforts have remained largely ineffective at the bilateral and especially multilateral levels.

Only the ECO includes the Central Asian states as well as Afghanistan, Iran, and Pakistan. The ECO, which has thus far been the best-placed organization to coordinate regional counter-narcotics efforts, made drug control a priority in 1993. With UNODC support, it established a Drug Control Coordination Unit in 1999.<sup>19</sup> However, this body has not yet established itself as an effective actor in regional drug control.

Likewise, more minor regional bodies have added drug control to their agenda. The Commonwealth of Independent States, the CSTO, the Central Asian Cooperation Organization (CACO), and the Shanghai Cooperation Organization have all discussed counter-narcotics strategy, proclaimed it a major concern, and established specialized units to work on the issue. The CACO, for example, founded an Interstate Drug Control Commission, and the CSTO has discussed setting up a counter-narcotics body in Dushanbe, Tajikistan. In spite of this flurry of activity, few concrete steps have been taken to advance meaningful drug control. Most importantly, close to nothing has been done to devise a com-

mon regional strategy. Regional talks have focused on supply reduction and interdiction, but they have not addressed the varying positions states have taken on the larger strategies of drug control.

That said, some bilateral cooperative efforts have taken root. Iranian and Pakistani law enforcement bodies have enjoyed fruitful cross-border communications, helping to interdict shipments crossing into Iran from Pakistan. In the past, drug shipments just turned back into Pakistan once intercepted by Iranian law enforcement, but the Iranians can warn Pakistani authorities of the location of a returning drug convoy, leading to a higher rate of interdiction.<sup>20</sup> Likewise, the Kyrgyz and Tajik Drug Control Agencies have begun coordinating some of their activities, though much remains to be done.

### **International Support and Western Response.**

Against the weakness of national and regional counter-narcotics efforts, international organizations have provided advice and financing. The UN Office on Drugs and Crime is the main international body operating in the region. With offices in most regional states, the UNODC played a leading role in establishing the Drug Control Agencies in Tajikistan and Kyrgyzstan. The UNODC has since become a crucial actor in regional drug control in spite of its limited resources and bureaucratic impediments. UNODC activities have facilitated the limited level of coordination that exists between regional states in counter-narcotics. Moreover, it has helped develop the institutional abilities of several countries to intercept narcotics shipments and formulate counter-narcotics policies.

Yet the UNODC's main successes have

resulted less from regional cooperation than from bilateral cooperation with the countries of the region. Its main effort at cross-border cooperation, the so-called 'Osh Knot' project in the Ferghana valley area involving Kyrgyzstan, Tajikistan, and Uzbekistan, made some headway in coordinating law enforcement bodies in the late 1990s.<sup>21</sup> It was, nevertheless, dismantled despite growing narcotics problems in the Ferghana valley.

For its part, the United States has funded and supported UNODC efforts in Central Asia. The Drug Enforcement Administration (DEA) has field offices in Islamabad and Tashkent that seek to work bilaterally within the region. U.S. efforts are limited, given the priority accorded to Latin America, the main supplier of opiates, cocaine, and cannabis to the United States. For political reasons, the DEA cannot operate in Iran or cooperate with Iranian drug control officials.

In comparison to the United States, the performance of the European Union and of individual European states has been disappointing. Europe is the main destination of the Afghan heroin industry, but its attention to counter-narcotics in Central and Southwest Asia has been feeble. Far from approximating U.S. efforts in Latin America, European assistance to Central Asia does not even match the U.S. commitment to the region.

European measures focus on the Central Asia Drug Action Program (CADAP) and on the Border Management Program (BOMCA). The budget of these initiatives is approximately 36 million euros over seven years. Several European states contribute individually to the UNODC efforts in the region.<sup>22</sup>

The European contribution is vastly inadequate to address the size of the

problem. The EU's initiatives have a different focus than those of the United States and the UNODC. Despite the success of the BOMCA and CADAP in supporting the Drug Control Agencies of Kyrgyzstan and Tajikistan, EU programs

naught. Very little suggests that a meaningful reduction in Afghanistan's opium and heroin production will occur in the short- to medium-term. With ever growing amounts of heroin transiting their borders, Afghan's neighbors seem help-

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## The dangers of unabated drug trafficking are clear; unless the trend is reversed, rising addiction and epidemics will continue to hamper economic and social development.

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have long been skeptical of creating agencies similar to them. Instead, European efforts have focused on the coordination of existing institutions.<sup>23</sup> This approach is questionable considering the endemic corruption in these institutions. Regional experts estimate that up to 70 percent of law enforcement officials are corrupt.<sup>24</sup>

**Conclusions.** The production of opium in Afghanistan continues to grow at an alarming pace. At 131,000 hectares, the 2004 crop was the largest in the country's history and a 64 percent increase over 2003. Due to poor climate conditions, opium yield was relatively low this year. The 4,200 tons of opium that were produced did not break the 1999 record of 4,500 tons, although it did imply a 17 percent increase over 2003.<sup>25</sup> More worrying, every province in Afghanistan now cultivates opium, which indicates a qualitative shift in opium production. In spite of international support for the current Afghan regime, the heroin industry seems to thrive unabated. Hopes in 2001 and 2002 that opium production in Afghanistan would go the way of the Taliban have come to

less as the social, economic, political, and even military implications of the drug trade ravage the region.

Most states in the region are poor, impeded by significant corruption, have porous borders, and have limited resources to deploy to counter-narcotics efforts. Inevitably, the resources they can muster are diverted from crucial and necessary development tasks. The situation in Iran is particularly disheartening; in spite of spending more than twice the UNODC's global budget on counter-narcotics programs, Iran has been able to make no more than a dent in the quantity of drugs crossing the border. Central Asian states, on the other hand, have no such resources to divert, and the drug trade will, therefore, continue to disrupt their societies.

The international response to this crisis has been far from adequate. The UNODC has spent an increasing proportion of its resources in the region, but it remains largely impotent because of the reluctance on the part of member states to contribute. Moreover, its bureaucratic character makes it difficult for the UNODC to criticize government

corruption or the infiltration of states by criminal elements.

Among industrialized countries, the United States has spent far more than its share on counter-narcotics in Central Asia. It is the leading contributor to the UN efforts in the region, supporting its limited bilateral initiatives. This is despite the fact that only a small portion of drugs consumed in the United States comes from, or through, Central and Southwest Asia. The growing realization of a link between narcotics and terrorism is raising U.S. awareness of the problem. Although American counter-narcotics efforts in the region are likely to increase, the United States will on the whole remain preoccupied with Latin America.

European states, by contrast, have failed to take responsibility. Some European leaders have gone as far as to malign Afghanistan and the transit states of Central and Southwest Asia for failing to stem the drug trade that harms their societies. But the drug trade is a demand-driven industry. Thus, the addicts in European societies contribute to the crisis. So far, Europe has shown little interest in recognizing its responsibility or acting on the issue.

With little prospect of reduction in opium production in Afghanistan in the foreseeable future, Afghanistan's neighbors are likely to continue to face the adverse consequences of drug trafficking. This fact has important implica-

tions for development, stability, and security. The dangers of unabated drug trafficking are clear; unless the trend is reversed, rising addiction and epidemics will continue to hamper economic and social development. Criminal interests will continue to infiltrate political systems, whose power lies primarily in the great financial assets available to them. As a result, the domestic and international legitimacy of the region's governing elites, especially those in Central Asia, will inevitably erode.

Finally, the link between narcotics and terrorism in the region will undermine the quest for peace and stability. Regional volatility will dampen the region's attractiveness to investors and widen the obstacles to development. Barring significant increases in external assistance or the unlikely event of a rapid downturn in opium production in Afghanistan, these processes are likely to escalate in the coming years. But such adverse consequences will not remain limited to the region. To the contrary, they will directly impede the international community's efforts to build stable, accountable states in this volatile region.

*Author's Note:* Research for this article was made possible by grants from the Office of the Swedish National Drug Policy Coordinator and the Swedish Crisis Management Agency.

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