

KINGDOM OF CAMBODIA  
NATION RELIGION KING

A map of Cambodia is shown in the background, with various regions labeled: THAILAND, ODAR MEANGHEY, BAN TEAY BIEANHEY, BATTAMBANG, PALEU, PRAH VIHEAR, STUNG TRENG, RATANAK KIRI, MONDUL KIRI, KAMPONG THOM, KAMPONG CHANG, KAMPONG SPEU, PINHOM SRAH, SREY VENH, KAMPONG BAKED, SWAY RIENG, KAMPOT, and VIETNAM. The word "LAOS" is also visible at the top right.

THE 5-YEAR NATIONAL PLAN  
ON  
DRUG CONTROL  
2005-2010



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## **The 5-Year National Plan on Drug Control (2005-2010)**

**This national plan is composed of 6 chapters:**

**Chapter 1: Background Information**

**Chapter 2: Principles, Strategies and Objectives**

**Chapter 3: Drug Control Activities**

**Chapter 4: Resource Requirements and Financing**

**Chapter 5: Implementations of Priority Projects in Regional and International Cooperation**

**Chapter 6: Monitoring and Evaluation**

## **Introduction**

Many countries in the world regardless of whether they are developing or developed countries, are affected by drug infiltration.

Drug is a substance which affects the physical and nerve systems of the body. A number of drugs have been known and used quite long time ago.

Drugs are divided into two categories: natural drugs and synthetic drugs. Natural drugs are namely cannabis, opium and cocaine etc. that have been grown long time ago. Then, as science has developed and in order to respond to the users' need, another types of drug called synthetic drugs, namely amphetamine, methamphetamine and ecstasy are produced. These are drugs synthesized by different types of chemicals or precursors.

As precursors' control measures have not been very thoroughly tightened, a lot of precursors have been diverted into illegal markets, causing an increase of illicit production of ATS.

The magnitude and the increase of illicit drugs production and psychotropic substances, have caused severe life-threatening problems and have greatly impacted on the economical, cultural and political foundations of each country.

The widespread of illicit drug trafficking severely affects society in particular children and youth in many parts of the world had been exploited through drug abuse. This is serious danger which cannot be assessed.

Illicit drug trafficking is an international criminal act carried out by complex network which aims to destroy economy's foundation and to threat the stability and sovereignty of many countries in the world.

Drugs are sources of many offenses, which result in the development of clandestine economy that is very difficult to be detected and intercepted even by a developed country's law enforcement agency. Illicit drug trades will end up in tragedy, which will pose a lot of concerns to the whole world and will create a serious problem amongst many severe problems that are presently being faced by the entire world. South East Asia is similar to other parts of the world as there is drug production site in the golden triangle which is bordered by Myanmar, Thailand and Lao PDR. Because of fact that the Kingdom of Cambodia is bordered by Thailand and Lao PDR, therefore Cambodia cannot escape from drug crossing, drug abuse, and the laundering of money gained from illicit trade.

Drug addicts are the victims be affected by drug traders' ambition. Not only these people who will be receiving bad destiny but the whole family and society will also be affected. Drug addicts are considered as patients who should receive assistance and the right to get the second chance in their life time after being rehabilitated.

The control of illicit drugs is a top priority as set by different law enforcement agencies. Law enforcement officers should possess technical skill and in depth knowledge on drug matter as well as on the drug control law and equipped with right strategy for data collection, follow up, investigation and tracing all drug-related activities.

Cambodia is being threatened by drugs under various forms such as drug trafficking, drug storage, drug production and drug abuse which require strong measures to counter all possible impacts.

Because of the fact that drug matter is a very complicated and dangerous issue for the entire society, therefore the present National Plan is being developed.

## **Chapter 1: Background Information**

### **1.1 Geographic Situation and People**

#### **1.1.1. Geography**

The Kingdom of Cambodia is located in Southeast Asia, in the southern part of the Indochinese peninsula and covers an area of 181,035 square kilometers. It lies between the northern latitudes of 10 and 15 degrees and between the eastern longitudes of 102 and 108 degrees.

#### **a) Borders**

The Kingdom of Cambodia has a border of 2,600 kilometers in length, 5/6<sup>th</sup>s of which is a land border and the remainder(1/6<sup>th</sup>) a maritime border. Cambodia is bordered to the north by the Lao People's Democratic Republic, to the east and south by the Socialist Republic of Vietnam and to the west by the Kingdom of Thailand and the Gulf of Thailand, with a coastline of 440 kilometers.

#### **b) Land Form**

The land surface of the Kingdom of Cambodia look like frying pan which is composed of low central plains in the middle and surrounded by mountains, plateaux and coastal areas to the southwest. The country is divided into four major geographic regions:

- The Central Plain, located in the central part of the country, with a population density of 235 persons per square kilometer, consists of Phnom Penh municipality and the provinces of Kandal, Kampong Cham, Svay Rieng, Prey Veng and Takeo.
- The Tonle Sap Basin, with a density of 57 persons per square kilometer, consists of the provinces of Battambang, Kampong Thom, Siem Reap, Banteay Meanchey, Pursat and Kampong Chhnang.
- The Coastal Areas, with a population density of 49 persons per square kilometer, located in the southwestern part of the country, consists of the municipalities of Sihanoukville and Kep and the provinces of Kampot and Koh Kong.
- Plateaux and Mountainous Areas, with a small population density of 17 persons per square kilometer, consists of Pailin municipality and

the provinces of Kampong Speu, Oddar Meanchey, Preah Vihear, Kratie, Stung Treng, Ratanakiri and Mondulhiri.

### **1.1.2. Climate**

Located in the tropics, Cambodia is dominated by the monsoon season, known as tropical wet and dry. This climate, with heavy rainfall, creates favourable conditions for the growth of plants and crops. The maximum temperature ranges from 27.5°C to 29.5°C, whereas the minimum temperature ranges from 24°C to 26.5°C. There is little change of temperature at different times of the year nor in different regions, including mountainous areas and plateaux.

### **1.1.3. Population, Religion, Culture**

Based on statistics of the 1998 population census conducted by the National Institute of Statistics of the Ministry of Planning, the population of Cambodia is 11.44 million with 2.4% population growth per year. As of 2004, the actual population figure may have risen to approximately 13 million.

Buddhism is the state religion; other religions also co-exist such as Islam, Christianity, etc. The people of Cambodia are gentle, friendly and work mainly in agriculture. Cambodia is one of the poor countries in the world with steadily increasing food and employment demands.

### **1.1.4. Social Structure (Education, Health, Other Social Services)**

Cambodia has experienced a long period of chronic war that has destroyed its social infrastructure and human resources (Pol Pot Regime). The Royal Government has been striving for the restoration of all sectors such as education, health, etc., in order to raise the knowledge, welfare and living conditions of citizens, especially those living in rural areas.

Despite such efforts made by the Royal Government and civil society groups, the majority of the urban and rural population has yet to acquire sufficient knowledge needed for social development.

## **1.2 Political Regimes and Economy**

### **1.2.1. Political Structure**

The 1993 constitution of the Kingdom of Cambodia adopts a constitutional monarchy as part of a democratic regime in which the king reigns but does not rule in accordance with the principles of the constitution, liberal democracy and pluralism. Cambodia is an independent, sovereign, peaceful, permanently neutral and non-aligned state.

The constitution has classified three major powers that include the legislature, the executive and the judiciary.

The Legislative Branch consists of the Senate and the National Assembly. The National Assembly is established through a general election held every 5 years. The legislative term of the Senate is 6 years and its number, nominated through appointment and non-general votes totaling half the number of National Assembly members.

The Executive Branch is the institution of the Royal Government that is led by one Prime Minister who is assisted by Deputy Prime Ministers, Senior Ministers, Ministers and Secretaries of State as members.

The Judicial Branch is an independent institution consisting of three levels, Municipal/Provincial courts, Appeals Court and Supreme Court, with the aim to guarantee and protect the rights and freedoms of citizens.

### **1.2.2. Administrative Structure and Economy**

The Kingdom of Cambodia is administratively divided into 24 provinces /municipalities and consists of 185 districts/khans, 1,621 communes/quarters and 13,707 villages.

Since the end of the wars, the Royal Government has been striving to restore the foundations of the national economy that had fallen beneath zero. Despite such efforts, 36 percent of the total population still lives under the poverty line with US\$250-280 annual income per capita that is insufficient to support the daily lives of people. The main source of income is agriculture. Tourism is steadily increasing; heavy industries are not yet operational. The national revenue comes mainly from taxes and duties. An increasing number of rural people have moved to urban areas to find work in garment factories in order to improve their living condition; however, people in rural and remote areas still encounter hardship with their everyday lives. The Royal Government is pushing the implementation of a development policy in all areas with the aim of alleviating poverty.

## **1.3 Illicit Drug Situation**

### **1.3.1. Illicit Drug Situation in the Region and in the World**

#### **a) Opium and Heroin**

Three-quarters of the world's production of opium and heroin was produced in the area of the Golden Crescent. Afghanistan is the first ranking with 3/4<sup>th</sup> of the world heroin production. The remainder was produced in the area of the Golden Triangle and in South America.

Between 2000 and 2001, the world's opium production declined by 65% (it was estimated at 4,700 metric tons in 2000 and 1,600 metric tons in 2001). From 1999 to 2002, the poppy cultivation in the Golden Triangle decreased by 40%.

The world's heroin production in 2002 was approximately 450 metric tons. The United Nations Office on Drugs and Crime (UNODC) notes that the number of opium and heroin abusers worldwide is estimated at 15 million people, including heroin-injecting abuse that is closely linked with the alarming increase in the transmission of HIV that leads to AIDS. Central Asia and Europe are the main opium and heroin markets.

**b) Cocaine**

Cocaine ranks as the number two of drug abuse worldwide, especially in America. The world's total cocaine production was estimated at 800 metric tons in 2002. The global number of cocaine abusers is estimated at 14 million. It is noted that there is a rapid increase in the number of cocaine abusers in South America. Colombia is the world's biggest cocaine producer; followed by Peru and Bolivia. Cocaine traffickers have been seeking new markets in Europe.

**c) Cannabis**

Cannabis is widely produced, trafficked and abused worldwide. Statistics and cultivation control systems cannot be used to exactly determine the locations, extent nor trends of cannabis cultivation and production globally. Therefore, it is only the result of seizure of cannabis that reflects the sources of cannabis production in the world. However, new technologies for cost-effective surveying of cannabis cultivation are becoming available.

In recent years, cannabis cultivation has declined remarkably; this reflects the efforts of law enforcement agencies to eradicate cannabis crops. 23,900 metric tons of cannabis was seized in 2000 and 18,500 metric tons were confiscated in 2001.

**d) Amphetamine-Type Stimulants (ATS)**

Asia is an important methamphetamine producing region in which China, Thailand and Myanmar are major producers. The methamphetamine production in the region has dramatically increased in the 1990's. Seizures of large amounts of methamphetamine (41 tons in 2000 and 26 tons in 2001) also indicate the large-scale availability of precursor chemicals, illicit drug abuse and trafficking in the region.

Recently, the production, trafficking and abuse of illicit drugs have been intensively suppressed in Thailand (which constitutes 29% of methamphetamine seized in East and Southeast Asia). Facing the strengthening of law enforcement, illicit drug trafficking groups are seeking alternative drug producing locations in neighbouring countries, especially those with weak legal systems. Heroin trafficking-related criminal organisations have also engaged in producing and trafficking methamphetamine. Small-scale methamphetamine production has also been found through drug control activities in a number of countries in the region.

Amphetamine is mainly produced in Europe, the USA and Australia. The amphetamine production in Australia accounts for 20% of the world's amphetamine seized from 1989 to 1999. Phenyl acetic acid, used in the manufacture of amphetamine and methamphetamine, has also reportedly been seized in Asia.

Ecstasy is reportedly produced in Europe, North America and Australia. In recent years, ecstasy trafficking has dramatically increased, especially in the USA, Southeast Asia, South Africa and the Middle East. Precursor chemicals used in the production of ecstasy have been transported from Europe, North America and Asia in recent years.

### **1.3.2. Illicit Drug Situation in Cambodia**

Cambodia is threatened by a rapid increase of illicit drug trafficking due to its weak legal system, inadequate human resources and widespread poverty among its citizens. The geographic location of the country, close to the Golden Triangle, also contributes to the use of Cambodia as an active abusing, trading, transit and trafficking location for illicit drugs.

### **1.3.3. Production and Plantation of illicit drugs**

#### **a) Cannabis**

So far, cannabis has been secretly planted in provinces along the Mekong River, in remote and mountainous areas as well as in the

provinces of Sihanoukville, Koh Kong, Battambang, Banteay Meanchey, Siem Reap, Kampong Cham, Kratie, Kampot, Kandal, Takeo and Kampong Speu.

Following tough measures by the Royal Government, especially by the Prime Minister and Deputy Prime Minister / Chairman of the NACD, a large-scale destruction of cannabis plantations was carried out in 2001 in the provinces of Kampot and Kampong Cham (approximately 60 hectares). Since then, it has been noted that cannabis cultivation has markedly decreased.

#### **b) Synthetic Drugs**

There are many signs indicating that international criminals are moving the illicit production of synthetic drugs, especially methamphetamine, into Cambodia. Besides the seizure of a large-scale ATS-producing machine in Koh Kong province (16 November 2002) that had not been used for several years, only 7 small-scale movable tablet-making machines have been seized by the authorities. It has been reported that international illicit drug producing syndicates have moved approximately 40 drug-producing locations from the Cambodia-Thai border to the Thai-Laos border. However, it is suspected that the illicit drugs are still being produced along the Cambodia-Thai border.

#### **c) Heroin**

International organized illicit drug trafficking syndicates transport heroin into Cambodia mainly from the Golden Triangle for re-export to third countries such as Australia, Singapore, Taiwan, Hong Kong and Vietnam via Phnom Penh International Airport, Sihanoukville seaport and land border crossings. It is believed that Cambodia has not yet acquired sufficient capacity to produce heroin.

#### **d) Precursor Chemicals**

Cambodia is not a producer of precursor chemicals. However, the competent authorities authorize the legal import of thousands of metric tons of acetic acid glacial, chlorhydric acid, sulphuric acid, ethyl ether, acetone, toluene, etc., every year for industrial purposes. With huge quantities of these chemicals being imported, the NACD Secretariat has expressed its concern about the possible diversion of such chemicals to the black market for use in the production of illicit drugs.

### **1.3.4. Illicit Drug Trafficking**

#### **a) Heroin**

Heroin trafficking has been observed in particular in the northern and eastern parts of Cambodia, namely Stung Treng Province. It is difficult to estimate the quantity of heroin coming to Cambodia but such trafficking can be assessed through in-country seizures as well as confiscations in various countries such as Sydney, Australia, Tayning province of Vietnam and Hong Kong, China where it has been reported that such illicit drugs have been concealed within containers, trucks, ships, aircraft and letters sent through the post office.

**b) Synthetic Drugs**

During 2003, despite close control undertaken by law enforcement officers, Stung Treng province remains a 'hot spot' for methamphetamine trafficking from the Golden Triangle to Cambodia for use in this country and for overseas export. Based on figures from law enforcement agencies, it has been reported that the northwestern provinces (next to Thailand) and those located in the northeastern part of the country (next to Laos) are the main routes for methamphetamine trafficking into and through Cambodia which has been increasing year-by-year.

**c) Cannabis**

Most of the cannabis plantation in Cambodia is aimed at export to overseas such as to Vietnam and China etc. However, after the 2001 eradication campaign, the quantity of cannabis plantation has been significantly decreasing.

**1.3.5. Drug Abuse and Related Crimes**

**a) Drug abuse**

The provisional statistics provided by provinces/municipalities in 2003 show that there are 4,387 drug addicts nationwide. This is the only available figure reported; more drug addicts may not yet have been found. Drug experts claim that the actual number of drug addicts is approximately ten times more than the cases reported, meaning in Cambodia there are in total of about 43,870 drug abusers. However, the UNODC annual World Drug Report in 2000 suggests that, on average, there are 3-4% of a country's populations involved in some form of substance abuse. If this is the case, it would mean that there are 360,000 to 480,000 drug abusers in Cambodia. Based on the results of a pilot survey on drug abuse conducted by the NACD in cooperation with the U.S. Centers for Disease Control and Prevention and the UNODC in Phnom Penh, Sihanoukville and Battambang

province among 3,500 school pupils ranging from grade 9 to grade 12 in late 2001, one-in-five school pupils had tried abusing some form of illicit drug. All forms of drug abuse, including swallowing, smoking, sneezing and injecting, are worryingly spreading (undertaken both clandestinely and sometimes openly in public).

Most of the users are pupils within and outside of the school system. Users may also include children of more affluent families as well as laborers, construction workers, factory and enterprise workers, sex workers, beer-promotion girls and Karaoke girls... Drug abuse is now spreading amongst lower-class youth and abandoned children. In addition, our great concern is being raised over the rapid increase in HIV/AIDS (and Hepatitis B) transmission through intravenous drug use (IDU) and unsafe sexual practices whilst under the influence of illicit drugs.

**b) Drug-related crimes**

It is noted that drug-related crimes, such as robberies, murders, domestic violence and kidnapping, etc, are habitually barbarous whilst under the influence of illicit drugs.

**c) Money laundering**

Currently, the National Bank of Cambodia, the Ministry of Economy and Finance, the Ministry of Justice and the Ministry of Interior are corporately working with experts of the International Monetary Fund (IMF) toward the drafting of money laundering law and financing terrorism for submission to the Royal Government for its approval.

## **1.4 Drug Control Activities in Cambodia**

### **1.4.1. Organizational Structure of NACD**

Royal Decree N<sup>o</sup> ៩៧/រកត/០៩៩៥/៦៥ issued on 7 September 1995 stipulates the composition of the National Authority for Combating Drugs (NACD), consisting of the two Co-Prime Ministers as Chairmen, Minister of Justice as Deputy Chairman and ten concerned ministries as members (Ministry of Justice, Ministry of Interior, Cabinet of Ministers, Ministry of Health, Ministry of National Defense, Ministry of Foreign Affairs and International Cooperation, Ministry of Economy and Finance, Ministry of Education, Youth and Sports, Ministry of Social Affairs, Labors, Training and Youth Rehabilitation, and the National Bank). The NACD has one Secretariat-General, which is commonly referred to as the NACD Secretariat, and is responsible for implementing the Royal Government's drug control policy

and ensuring the effective management and coordination of the Government's measures.

A new Royal Decree N<sup>o</sup> ជំរក់/រក្សា/០២០០/១០៨ issued on 22 February 2000 to transfer the position of Chairman of the NACD from the two Co-Prime Ministers to H.E. Sar Kheng, the Deputy Prime Minister and Co-Minister of Interior.

#### **1.4.2. Drug Control Activities**

##### **a) Cannabis cultivation**

- In 2002, nearly 12 hectares of cannabis plantation were destroyed.
- In 2003, over 6 hectares of cannabis plantation were destroyed.

##### **b) Synthetic drugs**

- In 2002, 77 ATS cases were suppressed with 223 offenders arrested and 137,660 ATS tablets confiscated.
- In 2003, 184 ATS cases were suppressed with 349 offenders arrested and 209,527 ATS tablets confiscated.

##### **c) Heroin**

- In 2002, one heroin case was suppressed with one offender arrested and 1.9 kg of heroin confiscated.
- In 2003, 6 heroin cases were suppressed with 24 offenders arrested and 46.274 kg of heroin confiscated.

#### **1.4.3. Cooperation between the NACD, donors, UN, NGO's and the private sectors**

The Royal Government is requesting the National Assembly to ratify the 1961 UN Convention on Narcotic Drugs, the 1971 UN Convention on Psychotropic Substances, and the UN 1988 Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances.

The Royal Government has signed memorandum of understanding and bilateral agreements with Thailand, Laos, Vietnam and Federation of Russia on cooperation to control the illicit traffic in narcotic drugs, psychotropic substances and precursor chemicals.

Additionally, Cambodia is a member of the signatory countries of the sub-region (Cambodia, Vietnam, Laos, Thailand, Myanmar, China and UNODC). The Royal Government has also attended the bilateral and trilateral annual sub-regional MOU ministerial meetings (with Vietnam and

Laos) on drug control cooperation, as well as provincial level meetings amongst the provinces along the borders of Cambodia, Thailand, Vietnam and Laos.

UNODC is the most important partner of the Secretariat-General of the NACD. The NACD also works in partnership with foreign embassies, international organization, concerned non-governmental organizations (NGOs) and the private sectors.

The Ministry of Justice is completing a draft amendment of the law on drug control that is hoped to contain strict and full provisions aimed to help courts to bring illicit drug criminals to trial.

The Ministry of Health has established a counseling and outpatient unit as part of the mental health unit of the Preah Sihanouk Hospital, Phnom Penh. In addition, a drug rehabilitation center in Chom Choa, Phnom Penh, of the Ministry of Social Affairs also admits children who abuse drugs. In order to solve this problem effectively, the Royal Government of Cambodia has approved, in principle, the establishment of one drug abuse treatment center in Phnom Penh.

The Ministry of Education, Youth and Sports has integrated illicit drug awareness into multi-level school curricula, ranging from primary education to higher education.

The NACD has signed a memorandum of understanding with the National AIDS Authority (NAA) with the aim of preventing the transmission of HIV through intravenous drug use and unsafe sexual practices whilst under the influence of illicit drugs.

The Secretariat-General of the NACD has established an 'information and data office' aimed at collecting and analyzing illicit drug-related data and associated information. The center is linked with UNODC sub-regional and national capacity building projects with the objective of exchanging and disseminating necessary information to the region via website.

The NACD has cooperated with UNODC in Cambodia to collect data on illicit drug abuse in the country, in the first stage by creating a communications and data collection network with officials in 9 priority provinces/municipalities: Phnom Penh, Pailin, Sihanoukville, Koh Kong, Battambang, Banteay Meanchey, Kampong Cham, Kandal and Siem Reap. In the future, this network will be expanded to all provinces/municipalities nationwide.

With cooperation from UNODC, the Secretariat-General has established 5 computer-based training centers for law enforcement agencies at the

NACD Secretariat as well as in Sihanoukville, Battambang and Siem Reap and the customs office in Phnom Penh. In addition, border liaison offices (BLOs) have been established at 6 major border crossings: Cham Yeam in Koh Kong province, Poipet in Banteay Meanchey province, Duong Kralor in Stung Treng province, Bavet in Svay Rieng province, Kaom Somnor in Kandal province and a bilateral crossing point at Chrey Thom in Prey Veng province.

#### **1.4.4. Assessment of drug control activities (achievements and gaps)**

In response to the Government strategy, local authorities of different levels (municipal and provincial) as well as all concerned institutions have been successfully fulfilling their duties regarding the control of illicit drug production and trafficking. However, the knowledge of Cambodian officers remains limited. Therefore, there is a need for an upgrade of technical expertise of such staff. The equipment and supplies needed for the NACD's operation should also be considered. The structure of the NACD itself should also be strengthened.

The Royal Government believes that criminals continue to solicit Cambodian farmers to cultivate cannabis by providing funds, seeds and by promising a higher purchase price as compared with legal crops. Such unfortunate activities occur because of the poor living conditions (of the people), clandestine activities (carried out in a concealed environment) and the lack of knowledge that such plantations are illegal. Therefore, there is a need for more education on the subject and for tightening aspects of law enforcement.

The production, trafficking and trade of illicit drugs, in particular ATS, is a very complex issue. Cambodia has allegedly been blamed as the source of such production. Despite the fact that there is no credible information regarding large-scale production of such substances that would be sufficient for export, the Royal Government has noticed a number of signs that indicate a worrisome situation.

The NACD Secretariat believes that the preliminary statistics of the number of drug addicts as reported by provincial and municipal drug control committees does not reflect the true extent of the problem. Therefore, there is a need to make a scientific assessment of the number of drug addicts and a subsequent treatment scheme in response.

Based on the above outline, it can be concluded that the illicit drug matter is becoming an urgent issue for everyone in Cambodia and requires an urgent and collaborative solution with strong commitment and responsibility for its fulfillment. Failure in relation to prevention, suppression and punishment will turn Cambodia into a place for an

increasing number of criminal activities as such criminals are under pressure from neighboring countries.

## **Chapter 2: Principles, Strategies and Objectives**

### **2.1. Principles**

The following principles have been incorporated whilst developing the National Plan:

- Multi-sectoral and holistic approaches
- Community and family participation
- Human rights

### **2.2. Strategies**

The Royal Government of Cambodia has adopted the following strategies for tackling illicit drug issues in the country:

- Reduction and lead to fully eradication of drug demand
- Reduction and lead to fully eradication of drug supply
- Law enforcement
- Reduction of risks caused by drug abuse (comprehensive approach to HIV/AIDS)
- Strengthening of international cooperation

### **2.3 Long Term Objectives**

In order to ensure that Cambodia becomes an illicit drug free society, the Royal Government of Cambodia has adopted the following long-term objectives:

- Elimination of illicit drugs **abuse**
- Elimination of illicit drugs **trafficking and production**
- Elimination of illicit drugs cultivation
- The Control of **precursor chemicals** diversion
- The Strengthening of **law enforcement to be effective**

### **2.4 Immediate Objectives**

#### **2.4.1. Strengthening the structure of the NACD and relevant institutions**

- a) Strengthen the **capacity of the National Authority for Combating Drugs (NACD)**, its **secretariat** and its **drug control commission** (at municipal, provincial, district and commune levels). At the same time, the **inter-ministerial working groups** on precursor chemical control and the NACD working group will also be strengthened in order to let these working groups to improve their performance.

- b) Establish and ensure the **operation of new working groups** for drug abuse education and prevention and for law enforcement.
- c) Strengthen **international cooperation**.

#### 2.4.2. Reduction of demand for illicit drugs

- a) Increase **public awareness** of the harmful effects of using illicit drugs and the resulting impact of illicit drugs upon society.
- b) **Encourage the involvement of the private sector, religious organisations and NGO's** in the fight against illicit drug use.
- c) **Integrate illicit drug and HIV/AIDS education into primary, secondary and tertiary school curricula** as well as into the non-formal education system, including the provision of related teacher training.
- d) Regular **monitoring** and **evaluation** of drug abuse prevention activities.
- e) **Share and distribute information** and experiences on drug control activities with relevant stakeholders.
- f) Ensure that existing drug abusers are given adequate health, education and comprehensive approaches to HIV/AIDS in a legal manner to reduce their demand for illicit drugs and to prevent the spread of HIV/AIDS through illicit drug use.

#### 2.4.3. Reduction of illicit crop cultivation

- a) Develop an effective **alternative development plan** to replace illicit cultivation.
- b) Intensify the **propaganda campaign** against illicit cultivation.
- c) **Raise public awareness** of the drug law regarding illicit drugs cultivation.
- d) **Cooperate with neighbouring countries** and learn about the most effective methodologies concerning alternative cultivation in accordance with geographical context of Cambodia.

#### 2.4.4. Control, production and trafficking of illicit drugs

- a) Improve **cooperation between the NACD, Police, Military Police, Customs and Excise, Camcontrol and other relevant authorities** at all levels (capital, provincial, district and commune).
- b) Continue to use the Computer Based Training (**CBT**) mechanism in order to strengthen the capacity of relevant staff of the NACD, Police, Military Police, Customs and Excise, Camcontrol and other relevant authorities at all levels. In addition, other necessary training will be considered, for these same authorities, in order to keep abreast of the rapidly evolving of drug offences.
- c) Strengthen the current **Border Liaison Offices (BLO's)**, by cooperating with neighboring countries and expanding to other strategic exit points such as ports and airports.
- d) Intensify the **control of precursor chemicals and psychotropic substances**.
- e) Enhance the **capacity of the laboratory technicians** of the NACD through training and the provision of necessary equipment.
- f) Encourage the **participation of the public regarding disclosure** of information related to drug trafficking, smuggling, production and use the provision of rewards as a further motivation.
- g) **Upgrade the capacity of law enforcement agencies by providing rewards** and necessary **investigative tools** needed for interdiction activities.
- h) Improve cooperation with neighboring countries regarding the fight against drug trafficking.

#### 2.4.5. Legislation

- a) Continue to push the ratification of the **three international drug control Conventions** of 1961, 1971 and 1988, as soon as possible.
- b) Continue to push the amendment of the drug control law. **Review and activate** the following draft law, sub-decrees and prakas:
  - i) **Money laundering sub - decree** with the National Bank.
  - ii) **Seized assets and national fund for drug control sub-decree** with the Ministry of Economy and Finance (MoEF).
  - iii) **Mutual legal assistance sub-decree** with the Ministry of Justice (MoJ).

- iv) **Control delivery prakas** with the Ministry of Justice (MoJ).
- c) Establish sub-decrees and procedures needed for an effective implementation of the illicit drug laws.
- d) Ensure effective implementation of the current drug control law.

#### 2.4.6. **Treatment, rehabilitation and reintegration**

- a) Develop a drug abuse **treatment, rehabilitation and reintegration policy** for the royal government approval.
- b) Establish **drug treatment, rehabilitation and reintegration centers** in Phnom Penh and in priority provinces.
- c) Create a **counseling team** for follow-up of patients at the community and family level.
- d) Encourage the involvement of **communities, NGOs, families, religions and former drug abusers** in the treatment, rehabilitation, reintegration and follow-up of drug users.

## Chapter 3: Drug Control Activities

### 3.1. Strengthening the structure of the NACD and relevant institutions

#### 3.1.1 Strengthening of the NACD's Structure

- 3.1.1. a) Strengthen the **capacity** of the **NACD as a whole, its Secretariat** and related ministries in order for them to have appropriate capacity to carry out their tasks.
- b) Create a **drugs information centre** within the structure of the NACD Secretariat.
- c) **Rearrange the status** of the NACD Secretariat to be an administratively and financially independent institution.
- d) Ministry and institution members of the NACD must have a unit which will carry out drug control activities in accordance with their roles and responsibilities.
- e) The United Nations Office on Drugs and Crime (UNODC) and other UN agencies are important partners that will ensure effective implementation of the drug control national plan.
- f) The NACD Secretariat will take steps to **strengthen the existing drug control commission structure**, including municipal, provincial, district and commune levels, through regular operation of the NACD Secretariat network at those levels. It is proposed that the Provincial Drug Control Commission should possess their own budget based on Government decision # 09 សន្តិសុខ dated 25 February 2004.
- g) The NACD should possess a unit to monitor the activities of Provincial Drug Control Commissions.
- h) The NACD Secretariat will take steps to strengthen **the inter-ministerial working group** through strengthening the existing mechanism and training. At the same time, the NACD working groups will define their roles, responsibilities and working procedures in order to ensure their work effectiveness.
- i) The NACD Secretariat will request additional funds from the royal Government needed for construction of buildings in order to cope with the current and future workload.

3.1.2. Other **new working groups** necessary for drug control activities will also be established in the same way in order to respond to the actual situation. Those groups may include the working group on education and prevention, the treatment working group and the law enforcement working group.

3.1.3 With the support of UNODC, the NACD will strive to strengthen **cooperation** with bilateral and multilateral donors.

## **3.2. Reduction of demand for illicit drugs**

### **3.2.1. Public awareness on drugs and its impact upon society**

3.2.1. a) The Secretariat of the NACD will coordinate – where applicable – with relevant ministries, NGOs and civil society groups, the media and local authorities to **increase public awareness** (in particular, youth) about illicit drugs, including linkages between illicit drugs and HIV/AIDS in cinemas, entertainment centers, schools, factories, markets and key areas where the most at-risk population groups are concentrated, etc., Municipals, provinces, relevant ministries and institutions should have their own budget responsible for such activities.

b) The NACD Secretariat should coordinate with relevant institutions to reduce other aspects of harm caused by illicit drug use, i.e. **harm reduction**. In order to prevent the spread of HIV/AIDS due to drug abuse, the NACD will **consider and ask for guideline from the Royal Government to adopt a policy and implementation methodologies and good practices** – as used and proven to be successful in other countries – amongst intravenous drug users (IDU's). This activity will be under the responsibility and close monitoring of the NACD Secretariat.

c) An **assessment of the impact of public awareness campaigns** will be made in due course in order to review the strengths and weaknesses of such activities. **Lessons learned and best practices** generated from such assessments will be recommended for incorporation into the development of new information, education and communication (IEC) materials and their application in future interventions. The NACD Secretariat has the responsibility to coordinate the development of IEC strategies and guidelines in collaboration with other relevant governmental and non-governmental agencies.

d) The NACD Secretariat will cooperate with the media, relevant ministries, NGO's, civil society groups and local authorities at all levels

in order to facilitate and regulate the **operation of mobile demand reduction teams** in targeted areas.

### 3.2.2. Urge and encourage the participation of other institutions in the fight against illicit drugs

- 3.2.2. a) Public awareness of illicit drugs and their effects will be the priority subjects for illicit drug prevention activities. The public and private media have to become the communication role in order to scale-up illicit drug awareness amongst the public. The NACD Secretariat will dialogue, and ensure collaboration, with the private sector, in particular communication media such as TVs, radios and Telecom Companies.
- 3.2.2. b) The NACD Secretariat will organize **regular meetings with relevant NGO's**, civil society groups and former drug abusers with the aim of involving them in public awareness activities.
- 3.2.2. c) The NACD Secretariat will collaborate with relevant institutions to organize innovative educational approaches, such as illicit drug awareness **contests, Question and Answer (Q&A) quizzes about illicit drugs, free telephone hotline, etc.** Reasonable rewards and attractive gifts will be used in order to attract the public and youth to participate in such events.
- 3.2.3. The NACD Secretariat will work closely with the Ministry of Education, Youth and Sports (MoEYS) and the National AIDS Authority (NAA) to develop a concrete plan outlining key elements necessary for the **integration of illicit drugs and HIV/AIDS education** into all levels of education (both formal and non-formal systems); behaviour change and self-confident in solving the problems among students.
- 3.2.4. An effective mechanism for **monitoring and evaluation** of drug abuse prevention activities will be established by the NACD Secretariat so as to ensure effectiveness in the running of such future activities.
  - 3.2.4. a) The NACD and relevant partners will undertake **research, surveys** in order to,
    - i) Understand the underlying **causes** and **consequences** of drug abuse;
    - ii) **Assess the impact of preventive** interventions implemented;
    - and,
    - iii) To **identify emerging issues** related to drug abuse and HIV/AIDS that require urgent intervention.
  - 3.2.4. b) **Sentinel surveillance** will be conducted by the NACD Secretariat and relevant partners on a regular basis in order to keep track of the drug

abuse situation and HIV/AIDS prevalence and to monitor such trends. The first year prevalence rate will be used as the baseline reference for comparison in the future.

- 3.2.5. The drug information unit of the NACD Secretariat will **document and share information** and experiences on illicit drug control activities with all stakeholders. The information centre, in cooperation with the Department of Legislation, Education and Prevention of the NACD Secretariat and others, will strive to use, and/or develop, effective ways to educate the public and youth about the problems of illicit drugs.

### 3.3. Reduction of illicit crop cultivation

#### 3.3.1 Action plan for alternative development

- 3.3.1. a) The NACD Secretariat, in collaboration with the Ministry of Rural Development (MoRD), the Ministry of Commerce (MoC), the Ministry of Agriculture, Forestry and Fishery, UN, relevant NGO's and foundations, will develop an effective **alternative development plan** to replace cannabis cultivation in specific areas of Cambodia. A **comprehensive list** of areas where cannabis cultivation is present or is likely to occur will be established by an inter-ministerial working group to be established by the NACD.
- 3.3.1 b) The NACD Secretariat will work closely with the Ministry of Agriculture, Forestry and Fishery to **develop a technical team** to work with concerned communities and families on the issue of alternative development; **technical guides and manuals will also be made for such target populations.**
- 3.3.1 c) The Ministry of Commerce (MoC) will help to **find local and international markets** for the crops and products produced by those communities benefiting from the alternative development interventions.
- 3.3.1 d) A well established **monitoring and evaluation** mechanism will be developed by the NACD Secretariat for easy monitoring and follow-up of illicit drug cultivation.
- 3.3.1. e) **Study tours and visits** will be organized for NACD and concerned officials to see real experiences and lessons learnt in this regard in other countries of the region and beyond.
- 3.3.2. The NACD Secretariat, in close collaboration with government institutions and concerned authorities, will intensify the **eradication campaign** against illicit drug cultivation.

- 3.3.3. The NACD Secretariat, in close collaboration with the Ministry of Justice and relevant ministries, will **incorporate relevant chapters and articles of the drug control law** into the public drug awareness programmes so as to make people aware of the drug control law.
- 3.3.4. With the support of UN agencies, in particular UNODC, the NACD will research - such as through the use of the internet and hard copy documents - for the most **effective ways of undertaking alternative cultivation** and to share such information with all relevant authorities, communities and families.

### 3.4. Control of illicit drug production and trafficking

#### 3.4.1 Strengthening the Cooperation to prevent the production, trafficking, and distribution of illicit Drugs

- 3.4.1. a) The NACD will continue to **improve its cooperation** with the Police, Military Police, Customs, CamControl and other relevant authorities at all levels (municipal, provincial and district) by way of having regular meetings during which each institution will **report the progress made** and lessons learnt related to the control of illicit drug production and trafficking. All reports will be fed into the drug information centre of the NACD Secretariat for analysis, reporting, archiving and appropriate distribution.
- b) Common **report form(s)** will be developed, agreed upon and used for easy reporting, recording and analysis (by all relevant governmental and non-governmental agencies).

#### 3.4.2. Computer Based Training (CBT) to strengthen law enforcement officers

- 3.4.2. a) The NACD, with the support of UNODC and donor agencies, will continue to use and expand the **Computer Based Training (CBT) mechanism** to strengthen the technical capacity of law enforcement officers and competent authorities at all levels. In addition, other necessary training will be considered for such law enforcement officers and authorities in order to upgrade competencies in light of the rapidly evolving and complex criminal networks. Provision of equipment, including communications apparatus, will also be considered.
- 3.4.2. b) A **needs assessment** of illicit drug control law enforcement agencies, including the anti-drug police, will be made by NACD. Subsequently, a response plan will be formulated for approval and implementation.
- 3.4.2. c) An **assessment of the effectiveness of the CBT training** on the number of cases intercepted and arrests made will be undertaken periodically.

### 3.4.3. Strengthening and expanding the Border Liaison Offices (BLO's)

- 3.4.3. a) NACD, will look for support from others donors country, especially UNODC in order to strengthen the current **Border Liaison Offices** (BLO's), their cooperation with neighbouring countries and to expand BLO's to other strategic points such as ports and international airports and provinces along the Mekong River.
- 3.4.3. b) The NACD Secretariat, with the support of UNODC or other UN agencies, will create an **early warning system** (including protocols and guidelines) for the BLO's and its related networks and relevant institutions in the country and overseas for effective follow-up of controlled delivery or suspect cases and create a **database of criminals and suspects** that will be systematically shared with concerned partners, both within Cambodia and globally.

### 3.4.4. Control of precursors and psychotropic substances

- 3.4.4. a) The NACD Secretariat, in collaboration with competent authorities (MoH, CDC, Ministry of Industry, Royal Cambodian Armed Forces (RCAF), BLO officers, customs, Camcontrol, and relevant UNODC regional project(s)) will **intensify the control of precursor chemicals** produced, imported, exported, used, stored, sold or distributed by different firms or companies. This activity has no connection with the import licensing for any company that is the responsibility of a separate body.
- 3.4.4. b) Specific **training on precursor chemical control** will be organized for all law enforcement officials in all at-risk areas.

### 3.4.5. Strengthening the capacity of the NACD laboratory officers

- 3.4.5. a) NACD, with the support of UNODC, will **seek funds to support** the enhancement of the **capacity of the laboratory technicians of the NACD Secretariat** through external and on-the-job training.
- 3.4.5 b) NACD, with the support of UNODC, will seek **funds to upgrade the existing NACD laboratory** facilities and equipment. Safety, and the possible health hazards, will be addressed as a priority.
- 3.4.5 c) UNODC will provide a full range of **reference sample substances** to the NACD laboratory.

- 3.4.5. d) NACD, with the support of UNODC, will try to establish **mini-laboratory** units in priority areas of Cambodia. Such mini-laboratories will work in close consultation with the central NACD Laboratory.
- 3.4.6. Encourage the participation of the public regarding the disclosure of information relating to production, smuggling and trafficking of illicit drugs.
- 3.4.6. a) The NACD Secretariat, in collaboration with relevant authorities, will encourage the **participation of the public regarding the disclosure** of information related to illicit drug trafficking, production, storing and use. Anonymity and confidentiality will be strictly adopted in order to ensure the safety of people disclosing such information.
- 3.4.6. b) The NACD Secretariat will **follow-up closely with judicial authorities, including courts**, on all cases brought to them for trial. The drug information centre of the NACD Secretariat will have the responsibility for reporting and recording the outcome of the follow-up activities case-by-case. The NACD Secretariat, in collaboration with the Ministry of Justice and relevant ministries, will provide capacity building for the judicial system and law enforcement agencies (judges, customs officers, prosecutors, police, Camcontrol, etc.) to enable them to use the drug control law properly and effectively.
- 3.4.7. NACD, with the support of UNODC and donor agencies, will **provide law enforcement agencies** with necessary **investigative tools to enhance their interdiction capacity**.
- 3.4.8. NACD will improve collaboration with other countries, especially neighboring countries, regarding the fight against illicit drugs.

### 3.5. Legislation

- 3.5.1. The Ministry of Justice, in collaboration with the NACD Secretariat, will urge the **amendment of the drug control law** and raise awareness of relevant ministries, institutions, NGO's, drug control commission at all levels and law enforcement agencies about the drug control law and the three International Drug Control Conventions through a **national seminar** in order to ensure good understanding and effective application of the law. Specific provisions concerning treatment and rehabilitation of addicts will also be clarified in the seminar so as to ensure that human rights aspects of addicts are well respected. UNODC and donor agencies are the main partners necessary for the implementation of this activity.
- 3.5.2. Once the three International Drug Control Conventions are ratified, the NACD Secretariat will ensure that all articles of the three international drug control Conventions **are effectively adhered to by all concerned**

Government entities. NACD will report to the Royal Government of Cambodia and to the International Narcotics Control Board (INCB) concerning the progress made in this regard.

3.5.3. The NACD Secretariat will consult with relevant ministries and institutions so that the following draft sub-decrees and prakas on drug control become effective:

- a. the sub-decree on the establishment of a commission dealing with a money laundering law (money obtained from the illicit drug trade);
- b. the **sub-decree concerning seized assets and a national fund for drug control** with the Ministry of Economy and Finance (MoEF);
- c. the **sub-decree concerning mutual legal assistance** with the Ministry of Justice (MoJ);
- d. the **controlled delivery Prakas** with the Ministry of Justice (MoJ).

3.5.4. The NACD, in collaboration with the Ministry of Justice (MoJ), the Ministry of Interior (Mol) and other law enforcement agencies will consider **using the current Cambodian law to deal with crimes** related to illicit drugs.

### 3. 6. Treatment, rehabilitation and reintegration of Drug Addicts

3.6.1. The NACD Secretariat, in close collaboration with the Ministry of Health (MoH) and the Ministry of Social Affairs, Labour, Vocational Training and Youth Rehabilitation (MoSALVYR) and relevant institutions will develop a drug abuse **treatment, rehabilitation and reintegration draft policy** for Government approval. The budget for treatment, rehabilitation and reintegration of drug addicts will be proposed to the Government by those concerned institutions. NACD in collaboration with UNODC, will appeal to the international community for their additional budget support needed for the operation of the above process.

3.6.2. Structure of the treatment, rehabilitation and reintegration centre(s):

3.6.2. a) NACD will **seek official approval** from the Government for the establishment of national centers in Phnom Penh and priority provinces. In provinces, the centers will be under the responsibility of the respective Provincial Drug Control Committee.

3.6.2. b) Such establishment(s) in Phnom Penh and the provinces will focus on **setting up the structure of the treatment, rehabilitation and reintegration centers, staff recruitment and preparing necessary rules and procedures** needed for the operation of the center(s). This

activity should involve the NACD Secretariat, in close collaboration with the MoH, MoSALVYR, Ministry of Justice, UNODC and concerned institutions.

3.6.2. c) As a first step, the NACD Secretariat will work in conjunction with the MoH, MoSALVYR, UNODC and local authorities and international organizations to **construct, or renovate, suitable infrastructure for such services in Phnom Penh and priority provinces.**

3.6.2. d) The NACD Secretariat, in close collaboration with the MoH, MoSALVYR, NAA, NGO's, UNODC and relevant professionals, will organize **trainings** on various subjects such as pre-admission, first aid, counseling, detoxification, treatment protocol, drugs and HIV/AIDS, harm reduction, psychotherapy, life skills building, reintegration into society, etc., for the center(s) staff.

3.6.2. e) **Working groups to deal with technical subjects** such as treatment protocols, detoxification, etc., will be convened by NACD with the support of UNODC. A series of discussions and consultations with professionals within the country and the region will be made by such working groups in order to reach a **national consensus** that will be applied by the center(s) and their networks in the future.

3.6.3. Establishment of a counseling team

3.6.3 a) The NACD Secretariat, in close collaboration with the MoH, MoSALVYR, NGO's and local authorities, will create a **counseling team** for follow-up of addicts at the community and family levels.

3.6.3. b) With the support of local authorities, counseling teams will ensure the involvement of the **community, family, former drug abusers** and NGO's in the treatment, rehabilitation and reintegration follow-up of patients. The involvement of the **community, family and former drug abusers** should be seen as an integral part of the treatment, rehabilitation and reintegration mechanism.

3.6.4. Strengthening of treatment and rehabilitation capacity of the centers

3.6.4. a) With the assistance of NACD and UNODC, the center(s) will establish close **connections with other similar centers** in the region and globally in order to upgrade the technical capacity of the centre staff.

3.6.4. b) **Study tours** or visits to similar centers – for upgrading the knowledge and capacity of staff -- in the region will be organized by the center(s) with the support of UNODC, NACD and international communities.

## **Chapter 4: Resource Requirements and Financing**

### **4.1. Human resource requirements**

The capacity development of key staff of the NACD Secretariat remains one of the most important issues that needs much focus and attention if Cambodia is to ensure that illicit drug control activities are well managed and coordinated. It appears that the NACD Secretariat possesses sufficient numbers of staff in each department and office. The majority of the staff of the NACD Secretariat need considerable investment in basic tasks such as English, computer training and basic management as well as more progressive capacity building in technical areas such as project design and implementation, project management, communication skills, report writing, fundraising, advocacy and monitoring and evaluation, etc.

In addition, there is a need to clarify the role and responsibility of each post and department of the NACD Secretariat and to ensure that all staff follow the job description assigned to their respective post in a professional and cost-effective manner. To this end, the NACD Secretariat will conduct one participatory workshop.

The major importance is the strengthening of interaction and communication between the NACD Secretariat and various ministries and institutions. In this regard, the main issues to be focused upon include joint cooperation, communication, information sharing and reporting. Furthermore, the capacity of all members that constitute the NACD (meaning all ministry members, police, Camcontrol and other law enforcement agencies) requires similar strengthening. Specific training, such as that applied through the CBT mechanism, whether undertaken within the country or overseas, will help to improve the efficiency of the NACD Secretariat. External assistance is still very much required for all of the above steps.

### **4.2. Facility and equipment requirements**

The current NACD Secretariat building is not large enough to accommodate all the staff required to fulfill its mandate adequately and consequently the NACD Secretariat has already envisaged the expansion of its existing building.

Refurbishment of each office and department so as to have sufficient computer equipment and work desks/chairs needs to be addressed. NACD also requires sufficient telephone and fax lines for its day-to-day operations as well as access to reliable e-mail and internet services to help to speed up its work.

### **4.3. Indicative total budget requirements**

See Annex I.

#### **4.4 Priority areas and related budget requirements**

See Annex I.

#### **4.5 Detailed annual action plan and related budget requirements**

It is expected that once the National Plan on Drug Control (2005-2010) is approved, a detailed annual action plan will be developed by the NACD Secretariat outlining:

- a) Key outputs;
- b) Detailed activities;
- c) The department(s)/office(s) and/or people responsible for carrying out specific activities;
- d) The estimated cost;
- e) The timeframe.

As with the development of the National Plan, a truly participatory approach involving concerned departments/offices and key staff will be followed. Internal meetings and workshops will be needed in order to formulate each annual action plan.

Once finalized, the detailed annual action plan will be submitted to the Chairman of the NACD for approval. The approved annual action plan will then be implemented. The availability and accessibility of funds from the national budget will be the final, but most crucial, enabling factor for any activities to commence.

Each annual action plan is subject to modification, in particular after the second or third year (2007-2008) as a result of a mid-term review and possible modification of the National Plan.

The effectiveness in achieving what has been planned each year largely depends upon the:

- a) clear assignment of task(s) to department(s), office(s) and individual(s);
- b) availability of relevant staff;
- c) capacity of those staff;
- d) Availability of sufficient budget.

Based on the best estimates of the first National Plan (2005-2010) it is expected that approximately USD7million is required for the implementation of the entire plan (this excludes direct and indirect costs brought about by various UN or international donor agencies; please see Annex I for more details). This total cost could be significantly changed as a result of establishing a treatment and rehabilitation center in Phnom Penh and in a number of provinces (including

possible expansion in many other provinces) as already envisaged by NACD and UNODC.

The UNODC project in Phnom Penh, Cambodia, has played a key role in supporting the NACD Secretariat in the National Plan implementation. In the worse case scenario whereby the Government budget is not approved on time or is still inaccessible, the UNODC project in Cambodia will work jointly with NACD in searching for ways to start the top priority components of the National Plan.

It is the responsibility of the Royal Government to approve the National Plan and allocate the budget necessary for the realization of the plan.

## **Chapter 5: The implementation of priority projects in Regional and International Cooperation**

### **5.1 Project Number: AD/CMB/01/F14**

**Title:** **Strengthening the Secretariat of the National Authority for Combating Drugs (NACD) and the National Drug Control Programme of Cambodia.**

**Executing Agency:** United Nations Office on Drugs and Crime (UNODC)

**Duration:** 51 months, from April 2001 to June 2005

**Total Budget:** \$2,101,736 (a budget of \$400,000 being searched)

**Objective:** To establish national capacity for the development, coordination and successful implementation of a comprehensive and sustainable drug control programme in Cambodia. To strengthen the NACD Secretariat in a sustainable manner as an effective body which, based on the principles of professionalism and integrity, will serve as the Government's primary institution for national drug control policy(planning, coordination and operations) and as the country's competent representative in the area of regional and international drug control cooperation.

#### **Outputs:**

- Output 1** Project Team recruited and operational.
- Output 2** Functional NACD Secretariat organisational structure strengthened and basic managerial and operational procedures in place.
- Output 3** Functional physical infrastructure of the NACD Secretariat strengthened.
- Output 4** Secretariat staff qualified to meet basic job responsibilities.
- Output 5** Basic coordination mechanisms with national partner institutions and international organisations strengthened.
- Output 6** Basic Plan of Action for priority national drug control efforts developed and implementation started.
- Output 7** Basic law enforcement/supply reduction information systems in place at the Secretariat and in priority provinces (project C 46).

Output 8	Basic demand reduction data collection and analysis systems in place at the Secretariat and nationwide and operational activities started (project F 97).
Output 9	Phase I project activities reviewed and detailed project plan for Phase II developed.
Output 10	The NACD Secretariat's operational systems and activities strengthened to a level that meets national and international requirements.
Output 11	A system for skills and specialized training for staff of the NACD Secretariat and key cooperating partners operational.
Output 12	Systems for sustainable Secretariat financing and personnel management in place.
Output 13	A National Drug Control Plan developed and under implementation.

## 5.2 Project Number: AD/RAS/99/D91

Title:	<b>Development of Cross-Border Law Enforcement Cooperation in East Asia</b>
Executing Agency:	United Nations Office on Drugs and Crime (UNODC)
Duration:	4 years starting July 1999 to December 2003 – extended to 31 December 2005
Total Budget:	US\$2,808,968 covering all 6 MOU countries, including Cambodia.
Objectives:	To improve cross border cooperation and drug law enforcement's performance in targeted and prioritised border areas of Southeast Asia by: 1) Strengthening and promoting cross-border cooperation through setting up of liaison structures for regular and continuous operational cooperation; 2) Enhancing capacity of law enforcement officers at border crossings and/or inland checkpoints to a) use of risk assessment, profiling and selectivity techniques for control of road vehicles, river crafts and foot travellers; b) detect illicit drugs and suspect consignments of money and precursors concealed in cargo, road vehicles, river craft and foot travelers; and 3) Setting up National training capacity for

providing training in drug and precursor identification and testing.

**Outputs:**

Output 1 Cross border liaison structures of law enforcement officials established and used at selected high risk locations.

Output 2 Computer Based Training programme deployed to border locations.

Output 3 Drug Law Enforcement front line staff in selected areas technically trained.

Output 4 Cooperative networks established.

Output 5 Project lessons identified, recorded and disseminated.

Note: 16 BLO have been established in 2004, and 4-10 BLOs will be established in 2005 among MoU Countries focusing on Mekong River.

**5.3 Project Number: AD/RAS/01/F34**

Title: **Precursor Control in East Asia**

Executing Agency: United Nations Office on Drugs and Crime (UNODC)

Duration: 4 years starting November 2001 to October 2005

Total Budget: \$1,793,700 covering all 6 MOU countries, including Cambodia as well as the Philippines and Indonesia.

Objective: **a)** Intensified control of licit trade and suppression of illicit trafficking in MOU countries; **b)** strengthened capacity of vulnerable countries neighbouring the MOU countries to prevent domestic and regional diversion and trafficking of precursors; **c)** enhanced cooperation among countries in East and Southeast Asia to prevent diversion and trafficking of precursors used by clandestine laboratories.

Outputs: **a)** Report containing actions required to increase interdiction of precursors at the common borders of China, Myanmar, Thailand and Laos with a focus on the Mekong area and southern China, completed and submitted to the national drug authorities of these countries.

- b) A National Action Plan formulated by each MOU country.
- c) Key personnel in regulatory agencies in the Philippines and Indonesia have acquired sufficient knowledge for preventing diversion of precursors from legitimate trade in chemicals into illicit markets;
- d) Influential members and policy makers of the chemical industry in the Philippines, Indonesia and Malaysia educated on precursor control;
- e) National system set up in the Philippines and Indonesia for compiling and sharing information among regulatory and law enforcement agencies;
- f) Instructors in the Philippines and Indonesia trained on precursors and interdiction and investigation of precursor diversion and trafficking;
- g) A regional plan developed for cooperation among countries in East and Southeast Asia.

#### 5.4 Project Number: AD/RAS/00/F73

Title: **Regional Cooperative Mechanism to Monitor and Execute the ACCORD Plan of Action**

Executing Agency: United Nations Office on Drugs and Crime (UNODC)

Duration: 3 years starting April 2002

Total Budget: \$1,333,600 covering all 6 MOU countries, including China, as well as the other countries of ASEAN.

Objective: The immediate objective is to establish and maintain a flexible and suitable coordination mechanism to facilitate the execution of the ACCORD Plan of Action amongst participating states; to monitor progress; to exchange information and in depth analysis on drug control trends in the region and to align the national drug control strategies of the eleven partner countries more closely to the Plan of Action.

**Outputs:**

Output 1: An information gathering and processing system is established.

Output 2: ACCORD Plan Task Forces with specific Terms of Reference (TOR) are in place and are proactive in all the participating countries.

Output 3: An effective progress monitoring, reporting, documentation and dissemination system facilitating the ACCORD Plan of Action is operational.

Output 4: Increase sub-regional and national capacities for cooperation, coordination, information sharing and networking as well as dialogue, action and mutual support amongst the national and regional drug control bodies.

### **5.5 Project Number: AD/RAS/01/F97**

Title: **Taking Action against Amphetamine-Type Stimulant (ATS) Abuse: Improving ATS Data and Information Systems.**

Executing Agency: United Nations Office on Drugs and Crime (UNODC)

Duration: 2 years from January 2002 to December 2004

Total Budget: \$400,000 covering all 6 MOU countries

Objective: Institutions in selected countries in East Asia and the Pacific will adopt effective measures for the prevention and reduction of amphetamine-type stimulant (ATS) abuse. Infrastructure established for better understanding patterns of ATS in the region and for exchanging data pertinent to ATS abuse prevention and control.

#### **Outputs:**

Output 1 Review of ATS abuse prevention work in project region, including prevention, treatment, and best practices.

Output 2 Prioritization of national and regional data collection and information sharing needs on ATS abuse prevention.

Output 3 Standardized methodology for regional ATS data reporting and sharing elaborated.

Output 4 ATS regional clearinghouse established and operational.

### **5.6 Project Number: AD/RAS/02/G22**

Title: **Reducing HIV Vulnerability From Drug Abuse**

Executing Agency: United Nations Office on Drugs and Crime (UNODC)

Duration: 2 years from April 2002 to March 2004

Total Budget: \$1.4m. Covering all 6 MOU countries

Objective: Institutions of selected countries in East Asia will adopt effective measures for the prevention and reduction of drug abuse and to strengthen government and non government responses in South East Asia to the drug abuse related transmission of HIV/AIDS.

**Outputs:**

Output 1 Preliminary review of critical geographic areas and organization capacities completed. Interdepartmental mechanisms established and operational. HIV prevention and care activities incorporated within drug abuse treatment and rehabilitation strategies.

Output 2 Drug abuse related HIV prevention strategies and activities expanded. Regional best practices identified and accessible.

**5.7 Title: Regional Technical Cooperation Promotion Programme (RTCPP)**

Executing Agency: Japan International Cooperation Agency (JICA)

Duration: 3 years starting June, 2002

Objective: Accurate drug analysis (qualitative, quantitative, impurity profiling) will be used practically to strengthen law enforcement capabilities in CLMVT countries.

**Outputs:**

Output 1 Core staff of laboratories in CLMVT countries will acquire the knowledge and technique on qualitative and quantitative analysis.

Output 2 At least one drug analyst in each CLMVT country will acquire the knowledge and technique on impurity analysis.

**5.8 Project Number: CMB/03/006/A/RC/34**

Title: **Nationwide assessment of high-risk behaviour and institutional opportunities for intervention and intervention design among selected sub-populations**

Executing Agency: United Nations Office on Drugs and Crime (UNODC)

Duration: 1.5 years starting December 2002

Total Budget: \$65,000 (from US CDC through UNAIDS)

Objective: To strengthen national capacity for monitoring, evaluation and research through the identification of emerging vulnerability factors and populations at risk of HIV/AIDS transmission through illicit drug use and to develop evidence-based and community centered interventions designed for selected sub-populations considered as being at higher risk of HIV infection.

**Outputs:**

Output 1 Analytical descriptions of the patterns and determinants of risky behaviour amongst the selected sub-populations (i.e. workers at beer-gardens, workers at casinos, garment factory workers, and the partners of all the above).

Output 2 Identified structures for intervention.

Output 3 Better understanding of the links between drug use and HIV/AIDS transmission amongst the selected sub-populations.

Output 4 Intervention(s) designed for each sub-population.

Output 5 Involvement and readiness of various partners to participate in the intervention.

**5.9 Title: Building national capacity for, and conducting rapid assessment of, drug use to design interventions amongst selected sub-populations.**

Executing Agency: World Health Organisation (WHO)

Duration: 1 year starting January 2003 to December 2003

Total Budget: \$65,000 from US CDC through UNAIDS.

Objective: To strengthen national capacity to conduct rapid assessments relating to risk behaviour for HIV/AIDS.

**Outputs:**

- Output 1: To examine the nature and extent of current drug use risk behaviors, including networks of use and sharing, from the perspective of the drug user.
- Output 2. To explore the factors that influence sexual and drug related risk behaviors and protective factors related to HIV/AIDS vulnerability; to understand the services available or not to drug users.
- Output 3. To understand the feasibility and obstacles to introducing interventions to help prevent HIV/AIDS amongst drug using populations.
- Output 4. to provide recommendations for introducing, scaling-up and sustaining interventions designed to reach drug using populations especially vulnerable to HIV/AIDS.

## **Chapter 6: Monitoring and Evaluation**

### **6.1 Mechanism and tools for monitoring and evaluation**

Monitoring of drug control activities will be the responsibility of the Department of Planning and Training of the NACD Secretariat. There is a need to organize a number of meetings amongst key NACD staff with local experts in order to reach a consensus upon a list of output indicators that will be used for monitoring progress made in the implementation of the National Plan.

Equipped with both the output indicators and the detailed annual action plan, the unit responsible for this task will follow-up and monitor the implementation of the yearly plan. A systematic report to alert what has, or has not, happened on time will help to speed up and steer the implementation of the plan. Additional training for those who will be responsible for carrying out such tasks will be required.

### **6.2 Timeframe for evaluation**

A mid-term evaluation is foreseen by mid-2007 and a final evaluation by 2010. An evaluation expert recruited by the NACD Secretariat with the assistance of UNODC will conduct such evaluations.

For both evaluations, a comprehensive and clear 'Terms of Reference' (TOR) will be developed by the NACD Secretariat with the assistance of UNODC. It is at the discretion of the evaluator to 'evaluate' and draft a report that will include key recommendations for submission to the NACD Secretariat for review and endorsement.

The NACD Secretariat and related partners will make every effort to ensure that all the recommendations – from both evaluations – will be implemented strictly and in a timely manner. The recommendations from both evaluation activities, in particular the final evaluation, will be used as key elements for the development of the next cycle of drug control programming in Cambodia.

### **6.3 Amendment of the National Plan**

It is foreseen that the current National Plan can be altered through the following mechanisms:

- a) Recommendations made by the mid-term evaluation in 2007;
- b) The lack of sufficient funding needed for the implementation of the entire plan;
- c) The confirmed severity of the drug abuse situation in Cambodia, such as through a national survey (expected in late 2004 or early 2005) or similar surveys (especially the CDC/UNAIDS sponsored Project Acceleration Fund (PAF) survey).

- d) The rapid increase in the number of drug abusers, in particular amongst youth and the explosion of the HIV epidemic amongst intravenous drug users (IDU's).

The NACD Secretariat, with the support of UNODC office in Cambodia, will have the responsibility to ensure that such amendments will be appropriately reflected in the National Plan. A participatory approach involving close consultations with key partners and stakeholders is essential in this regard.

It is more convenient to modify the plan at its mid point, i.e. by means of the mid-term evaluation, unless there is a crucial issue and sufficient associated budget to carry out that issue. Such a modification should be jointly pursued with the recommendations of the mid-term evaluation. An official workshop to endorse the revised National Plan is necessary as this will help to ensure that every partner will be informed about the modifications being proposed and to elicit their full agreement. Those responsible for following up and implementing subsequent activities will also be alerted through the holding of a workshop.

An alternative is to develop a stand-alone project to tackle a specific new issue that was not foreseen in the original National Plan, as such a modification to the existing National Plan will take considerable time and effort of staff and agencies involved. Several stand-alone projects or initiatives could be developed prior to the mid-term evaluation. In mid-2007, all stand-alone projects or initiatives could be included at the same time into the revised National Plan. As stated above, an official workshop to endorse the revised National Plan will be required.

**Indicative Budget of the Drug Control National Plan, 2005-2010**

<b>Activities</b>	<b>First Priority</b>	<b>Second Priority</b>	<b>Total</b>
<b>1) Strengthen the structure of NACD &amp; relevant institutions</b>			
1.1. a) Strengthen capacity of NACD, its secretariat & related networks	600,000		600,000
1.1. b) Strengthen the drug control commission structures	400,000		400,000
1.1. c) Strengthen the working groups	10,000		10,000
1.1. d) Produce list of relevant companies, firms and establishments		10,000	10,000
1.1. e) Review and formulate various regulations and guides		10,000	10,000
1.1. f) Regular monitoring of companies, firms and establishments		20,000	20,000
1.2. Establish & activate two new working groups	20,000		20,000
1.3. Establish a drug information centre	50,000		50,000
1.4. Strengthen NACD cooperation with donors, bilateral etc.	100,000		100,000
<b>2) Reduction of drug demand – prevention</b>			
2.1. a) Increase public awareness on drugs	100,000		100,000
2.1. b) Assessment of the impact of public awareness activities	40,000		40,000
2.2. Mobile campaign team to run regular awareness sessions	250,000		250,000
2.3. Negotiate with the private sectors		2,000	2,000
2.4. a) Integration drug education into all levels of schools	50,000		50,000
2.4. b) Innovative approaches to be used to attract the public		60,000	60,000
2.5 Set up mechanism for monitoring/evaluation of prevention activities	20,000		20,000
2.6. Document and share information		40,000	40,000
<b>3) Reduction of drug supply</b>			
3.1. a) Develop an effective alternative development plan	50,000		50,000
3.1. b) Develop an alternative development guides and manuals	40,000		40,000
3.1. c) Find local and international markets		40,000	40,000
3.1. d) Develop a monitoring and evaluation mechanism		40,000	40,000
3.2. Intensify the eradication campaign	80,000		80,000
3.3. Incorporate drug law into the public awareness programmes	80,000		80,000
3.4. a) Search in internets/documents about alternative cultivations		4,000	4,000
3.4. b) Study tour to see the experience of other countries	60,000		60,000
<b>4) Control of illicit trafficking</b>			
4.1. a) Improve NACD cooperation with Police/competent authorities	60,000		60,000
4.1. b) Develop common report form	10,000		10,000
4.2. a) Continue to use CBT to strengthen the capacity of relevant staff	100,000		100,000
4.2. b) Need assessment of law enforcement & anti-drug police	10,000		10,000
4.2. c) Assess the impact of the training	20,000		20,000
4.3. Expand CBT network to other institutions and provinces	100,000		100,000
4.4. a) Strengthen the current Border Liaison Offices (BLO)	60,000		60,000
4.4. b) Create an early warning system mechanism	50,000		50,000
4.5. Intensify the control of precursors and psychotropic substances	50,000		50,000
4.6. a) Look for funds to support the lab technician capacity		8,000	8,000
4.6. b) Look for funds to upgrade the current lab		8,000	8,000
4.6. c) UNODC to provide drug samples		4,000	4,000
4.6. d) Establish mini-laboratories		250,000	250,000
4.6. e) Provide sufficient coverage of test kits and supply	100,000		100,000
4.7. Encourage the participation of the public regarding disclosure	100,000		100,000

4.8. Follow up with the court on all cases brought to them for trial	20,000		20,000
4.9. Provide relevant institutions with necessary investigation tools	50,000		50,000
<b>5) Legislation and law enforcement</b>			
5.1. Follow up the amendment of the drug law and national seminar	40,000		40,000
5.2. a) Follow up the accession to the three international conventions	4,000		4,000
5.2. b) Conventions will be adhered to by concerned government entities	10,000		10,000
5.3. Seminars with companies on the 3 international drug conventions	40,000		40,000
5.4. Develop & submit various sub-decrees re implementation of drug law		10,000	10,000
5.5. Follow up and activate the existing (4) sub-decrees and prakas		20,000	20,000
5.6. Consider using the Cambodian law to cope with crimes		20,000	20,000
5.7. Taking identified court cases to appeal	10,000		10,000
<b>6) Treatment and rehabilitation</b>			
6.1. Develop a drug treatment and rehabilitation policy	20,000		20,000
6.2. a) Set up a treatment and rehabilitation centre (including operation costs)	3,000,000		3,000,000
6.2. b) Works toward officially the centre as a government hospital		2,000	2,000
6.2. c) Arrange appropriate staffing for the centre	20,000		20,000
6.2. d) Organize necessary training on various subjects	500,000		500,000
6.3. Create a counseling team	40,000		40,000
6.4. Ensure the involvement of the community and family		40,000	40,000
6.5. Create an electronic database of all patients treated		20,000	20,000
6.6. a) Establish connections with other similar centers in the region		20,000	20,000
6.6. b) Study tour or visit to similar centers	60,000		60,000
6.7. a) Create a funding committee to look for more funds		10,000	10,000
6.7. b) Apply cost recovery approach		10,000	10,000
<b>7. Evaluation</b>			
7.1. Mid term evaluation		20,000	20,000
7.2. Final evaluation		20,000	20,000
	6,424,000	688,000	<b>7,112,000</b>

## Acronyms

NACD	National Authority for Combating Drugs
UNODC	United Nations Office on Drugs and Crime
JICA	Japan International Cooperation Agency
CLMVT	Cambodia, Lao, Myanmar, Vietnam and Thailand
UNAIDS	United Nations AIDS
US CDC	United States Centre for Disease Control and Prevention
IO	International Organization
WHO	World Health Organization
NGO	Non Government Organization
PAF	Project Accelerated Fund
BLO	Border Liaison Office
ATS	Amphetamine Type Stimulant
MOU	Memorandum of Understanding
ACCORD	ASEAN China Cooperative Operation in Response to Dangerous Drugs
CBT	Computer Based Training

## Definitions of Technical Words

Cannabis	Type of plant belonging to <i>sativa</i> or <i>indica</i> which contains three types of additive substances namely tetra hydro cannabidiol (THC), cannabiniol (CNB), and cannabidiol (CND). These substances mainly present at the top of the cannabis tree or in cannabis' leaves or flowers.
Drug Abuse	The improper use of addictive substances.
Harm Reduction	Reduction of pains and impacts caused by drug use. Suggested definition: Comprehensive approaches aiming to prevent the spread of HIV through drug use in particular via intravenous injections.
Treatment and rehabilitation	Detoxification of addictive substances and provision of health support, education and vocational training to drug addicts to enable them to enjoy normal lives.
Money laundering	Money transaction aiming to turn illegal money into legal money.
Drug Demand Reduction	Reduction of drug abuse through the increase of public awareness such as running workshop, distribution of leaflets, TV, radio etc. as well as treatment and rehabilitation of drug addicts.
Control Delivery	A technique of investigating procedure, which permitted for delivering, selling, passing, exporting, primarily, of illicit drugs in order to identify a person who is involved in commission of narcotic offenses. The controlling delivery procedure shall be decided by proclamation (Prokas) of the minister of justice or of a delegate assigned by the Ministry of Justice for each case.
Drug Supply Reduction	Measures used to prevent the production, the plantation, the distribution, the trafficking and the storage of illegal drugs.
Counseling Group	Group of skilled people whose roles are to provide advice and moral support to community, family and drug users.
Cocaine	A type of drug produces from the extract of coca's leaves.
Priority provinces	Provinces heavily affected by drug problems.
Synthetic drugs	Types of drug synthesized from precursors (not from natural

substances). These include amphetamine, methamphetamine, ecstasy and known as ATS.

Golden triangle	A vast poppy plantation area located between Myanmar, Thailand and Lao PDR.
Life-skill	A particular skill trained to drug addicts who had been treated and recovered.
Target group	Specific group of people vulnerable to drugs.
Treatment protocol	Procedures outlining the way to treat and support drug addicts from the professional and medical points of view.
Integration	Assimilation of treated drug addicts back into the community.
Precursors	Chemical substances which are not additive substances (hard substance and liquid) listed in table IV of the Cambodian drug control law used for the production of drugs.
Psychotropic substances	Substances that could affect the central nervous system of human being and animal.
Heroin	Addictive substance extracted from opium.
Golden Crescent	Poppy plantation area having a crescent shape located between Afghanistan, Pakistan, and Iran.
Opium	A type of natural addictive substance made of the poppy fruit's resin and used for the production of heroine.