



Turkmenistan

DRUG SITUATION AND DRUG POLICY

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Co-operation Group to Combat Drug Abuse and Illicit trafficking in Drugs



Preface

The Pompidou Group is publishing a series of “Country Profiles” to describe the current drug situation and policy of its Member States and States and countries of the European neighbourhood, including Central Asia. The aim is to provide an overview on the issues and developments related to illicit drugs and provide information about the policies, laws and practical responses in place. It is hoped that the Country Profiles will become a useful source of information and reference for policy makers, practitioners and other interested audiences.

This publication examines the state of affairs and drugs policy in Turkmenistan and provides a descriptive analysis for an interested audience on drug related developments in the country, existing policies and legislation, as well as information on prevention and treatment measures and law enforcement activities. Furthermore, the role of substitution treatment and harm reduction programmes as well as treatment options available in prisons are described. In addition, it provides an overview of the various international commitments and relations with neighbouring countries in the areas of demand and supply reduction. Overall, the publication provides an overview on the state of implementation of the national drug policy in Turkmenistan.

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Mr Jan MALINOWSKI
Executive Secretary of the Pompidou Group

AIDS	Acquired immunodeficiency syndrome
CARICC	Central Asian Regional Information and Coordination Centre
EU	European Union
HIV	Human immunodeficiency virus
NGO	Non-governmental organization
OSCE	Organization for Security and Cooperation in Europe
OST	Opioid substitution therapy
UN	United Nations Organization
UNDAF	UN Development Assistance Framework
UNDCP	United Nations Drug Control Programme
UNDP	United Nations Development Programme
UNODC	United Nations Office for Drugs and Crime
UNRCCA	UN Regional Centre for Preventive Diplomacy for Central Asia
USAID	US Agency for International Development

Notes on terminology:

"friendly rooms" are offices or spaces organized within AIDS centres and dermatovenerologic institutions to provide medical services to vulnerable groups on issues related to HIV/AIDS and STIs.

"narcomania" is a term commonly used in former Soviet countries for a condition of psychological addiction and physical dependence on a drug. It continues to be used in Uzbek practice and legislation.

"prison" in the context of this text for simplicity the term means pre- and post-trial facilities

"prisoner" in the context of this text for simplicity the term means people in pre- and post-trial facilities

"toxicomania" is a term commonly used in former Soviet countries for a condition of psychological addiction and physical dependence on psychoactive substances and also non-medicinal substances of synthetic or natural origin, similar to narcotic drugs in their psychoactive effects. It continues to be used in Uzbek practice and legislation.

"trust points" are offices or spaces organized within AIDS centres or health care institutions to provide free access for vulnerable groups, including IDUs, to anonymous and confidential health services. They provide information, training and counselling, desinfectants, needles and syringes as part of needle and syringe exchange programmes and also co-ordinate outreach activities with vulnerable groups.

"valeology" is a term referring to a "general theory of health" claiming to have a holistic approach to physical, moral and spiritual health of an individual.

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Figure 1. Map of the Republic of Turkmenistan

Introduction

Country overview

Turkmenistan, one of the 5 countries in Central Asia, is located in the southwestern part of the region in an area of deserts, to the north of the Kopet Dag Range of the Turkmen-Horasan mountain system, between the Caspian Sea in the west and the Amu Darya river in the east. Turkmenistan borders in the north with the Republic of Kazakhstan, in the north-east and in the east – with the Republic of Uzbekistan, in the south-east – with Afghanistan, in the south – with the Islamic Republic of Iran, in the west the border runs through the Caspian Sea. The area of Turkmenistan is 491.21 thousand square kilometers. The length from north to south is 650 km, from west to east – 1 100 km.¹ The local currency is the manat (1 € = approximately 4 manat).

State governance has the form of a presidential republic. The state power is divided into legislative, executive and judicial powers, which are meant to act independently. The highest state power and governance in Turkmenistan is held by the President of Turkmenistan, Mejlis, the Cabinet of Ministers, the Supreme Kazyet.

Turkmenistan is a multinational country. Over 100 nations and nationalities live in it.² Most of the population are Turkmen. The state language is Turkmen which belongs to the Turk language group. Learning of 3 languages – Turkmen, English, and Russian is mandatory by law.

There are (as of 1 January 2014) 24 towns, belonging to 3 administrative categories, 77 settlements, and 1,901 villages in Turkmenistan.³

The basis for industrial development of Turkmenistan is a rich mineral and raw material base, in particular, hydrocarbon resources, such as oil and gas. The

¹ *The State Committee of Statistics of Turkmenistan. Available at: <http://www.stat.gov.tm>*

² *The Ministry of Foreign Affairs of Turkmenistan: <http://www.mfa.gov.tm/ru/turkmenistan-ru/genral>*

³ *The administrative division of Turkmenistan: <https://en.wikipedia.org/wiki/Turkmenistan>*

subsurface resources of Turkmenistan possess valuable natural resources, such as sulfur, lead, iodine, bromine. In recent years processing industries also underwent a swift development: oil-refining, chemical, petrochemical, heavy engineering and metal-working, light (especially textile) and food industries etc.

The strategic branches of the agricultural sector are cotton and grain growing. During the years of its independence, Turkmenistan ensured its food and economic security.

In 2013, Turkmenistan had trading partners from 106 countries. The highest specific weight in the foreign trade turnover was taken by countries of Asia (64.7%) and Europe (31.1%). The foreign trade turnover in 2013 was 34,944.2 million US dollars. Export was 18,854.2, import was 16,090.0. Turkmenistan retains a sufficiently high level of investment into the social and economic development of the country and its regions. Quite high growth rates of the GDP can be observed. The GDP was 79,976 million manat in 2011 (in 2010 – 59,000).⁴

The standards of living, including income, continues to grow. The average monthly salary in 2011 was 795,9 manat. The average monthly salary in 2013 was 1,047.0 manat.⁵

In the light of the Millennium Development Goals Declaration, new tasks have been formulated and set in the National Socio-Economic Development Programme of Turkmenistan for 2011-2030.⁶ The main aim of the National Development Programme of the country for 2011-2030 is to significantly increase the life level of the people and to join the number of economically developed countries with a high human development index.

⁴ *Foreign trade of Turkmenistan: trends, problems and prospects. Working paper No.11, 2012. Ishanguly Jumayev. P.5-6. Available at: <http://www.ucecentralasia.org/downloads/UCA-IPPA-WP11-Turkmenistan-Eng.pdf>*

⁵ *The key macroeconomic indicators for Turkmenistan in 2007-2013. The State Committee of Statistics of Turkmenistan: <http://www.stat.gov.tm>*

⁶ *At the UN Millennium Summit in 2000, the leaders of over 180 countries, including Turkmenistan, adopted the UN Millennium Declaration, and defined the Millennium Development Goals, aimed at increasing the well-being of people in the world. What is characteristic of this agreement, is that there are 8 specific goals and deadlines for these them to be reached by 2015. According to these goals, Turkmenistan identified social and economic priorities, and the UN Development Assistance Framework (UNDAF) in Turkmenistan for 2010-2015 was signed between the Government of Turkmenistan and the UN in August 2009. This document defines key areas of co-operation between the Government of Turkmenistan and the UN agencies.*

General demographic statistics

The population of Turkmenistan in 2013 was 5,240,000 people.⁷

From 1990 to 2010 the population of Turkmenistan grew by a factor of 1.4. For the same period the number of people born grew by 11.2%. The proportion of people at the age of over 65 rose from 3.8% in 1990 to 3.9% in 2010, with a higher proportion of women (4.5%).⁸

In Turkmenistan's structure of the population the proportion of women as of 1 January 2014 was 50.2%, being practically the same both among the urban and rural population. Turkmenistan belongs to countries with an average level of urbanization – the proportion of urban population being 52.3% (2013).⁹

The index of general mortality has significantly improved in Turkmenistan from 1990. According to the Ministry of Health and Medical Industry of Turkmenistan, infant mortality dropped by a factor of 2.8 from 1990 to 2010: from 45.1 deaths per 1,000 live births in 1990 to 15.8 in 2010. Maternal mortality dropped almost by a factor of 16.2 between 1990 and 2010: from 111.7 deaths per 100,000 life births in 1990 to 6.9 deaths in 2010.¹⁰

According to the State Committee on Statistics of Turkmenistan, the average life expectancy in the country in 2011 was 70.6 years (for both sexes) with a difference of 5.8 years between men (67.7 years) and women (73.5 years). This index was by 4.2 years higher than in 1990 (66.4 years).¹¹

⁷ *Paris pact report 2014. UNODC, P.166. Available at: <https://www.paris-pact.net/upload/6eaea53ad96285902e6267865d913051.pdf>*

⁸ *Strengthening the response to noncommunicable diseases in Turkmenistan. WHO, 2013. P.2. Available at: http://www.euro.who.int/__data/assets/pdf_file/0004/235894/Strengthening-the-response-to-NCDs-in-Turkmenistan.pdf?ua=1*

⁹ *About Turkmenistan. The State Committee of Statistics of Turkmenistan. Available at: <http://www.stat.gov.tm>*

¹⁰ *Strengthening the response to noncommunicable diseases in Turkmenistan. WHO, 2013. P.2.*

¹¹ *Ibid., P.3.*

Drug situation in the Republic of Turkmenistan

General drug situation

Turkmenistan remains one of the key links in the chain of Afghan drug trafficking. According to the data from the World Drug Report, opium production in Afghanistan, the world's leader in production of illicit opiates, was 3.6 thousand tons in 2013. Most of heroin trafficking ("The Northern Route") is done through the states of Central Asia: Kazakhstan, Tajikistan, Uzbekistan, Turkmenistan, and Kyrgyzstan. The controls of Turkmen border with Afghanistan are still easily circumvented by drug traffickers. Turkmen drug traffickers send drugs over to Russia and other countries. The network of drug dealers keeps growing in Turkmenistan; the country consumes Afghan opium and heroin. No recent reliable information on cannabis and cocaine prevalence levels could be obtained.

Drug use

As for the number of drug users, 32,000 people were diagnosed with drug addiction as of December 2007, according to the data from the National Narcological Service.¹² The number of drug users, identified at that period, was 32.2 per 100,000 people.¹³ There were 11,160 injecting drug users (IDUs) in 2007.¹⁴ In 2007, 197 people were treated in state narcological institutions (1.7%) of

¹² *Paris pact report 2014*. UNODC. P.167.

¹³ *Compendium of Drug-Related Statistics 1997-2008*. UNODC (Regional Office for Central Asia), P.29. Available at: https://www.unodc.org/images/uzbekistan/pubs/Compendium08_final.pdf

¹⁴ *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan*. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.76. Available at: https://www.unodc.org/documents/centralasia/Accessibility_of_HIV_prevention_treatment_and_care_eng.pdf

the total number of narcological patients. in 2008, 1,500 people underwent compulsory treatment in the specialised institutions of the Ministry of Internal Affairs.¹⁵

There were 26,000 people registered with narcological services in 2010, the latest year of which reliable information could be obtained, which hints at a decreasing number of detected drug users from 2006 to 2010.¹⁶

Table 1. Total number of drug abusers registered in dispensaries

	2006	2007	2008	2009	2010
Total number	33,697	32,000 (est.)	31,000 (est.)	29,000 (est.)	26,000 (est.)
Including:					
Heroin users (%)	93	n/a	n/a	n/a	98 (est.)
Opium users (%)	4	n/a	n/a	n/a	1 (est.)
Cannabinoid users (%)	3	n/a	n/a	n/a	1 (est.)
IDUs (%)	25	26 (est.)	26 (est.)	27 (est.)	27 (est.)

In 2010 the number of newly registered drug users was 1,500 people. There were 16,189 people in treatment in 2010.¹⁷

Table 2. Newly registered drug abusers and drug treatment

	2006	2007	2008	2009	2010
Newly registered DUs	1,980	1,900 (est.)	1,750 (est.)	1,600 (est.)	1,500 (est.)
IDUs (%)	26	25	24	24	21
Treated drug abusers:					
In-patient	32,986	30,698	20,301	18,745	16,189
Anonymous	1,817	1,751	1,295	839	764
Compulsory	6,546	5,980	4,324	3,767	3,101

¹⁵ *Ibid.*, P.76.

¹⁶ *Paris pact report 2014. UNODC. P.167.*

¹⁷ *Ibid.*, P.167.

Data for the narcological register is collected and processed according to Decree of the President of 2008.¹⁸ One of the most important tasks for the State Drug Service of Turkmenistan is “to set up a single data base containing the information about the drug situation in the country on the whole and on the number of people registered as drug users”.

Mortality among drug users

In 2010 there were 270 registered drug-related deaths in Turkmenistan equalling 5.2 drug-related deaths per 100,000 population. There are estimations that the number of drug-related deaths dropped more than by a factor of 2 from 2006 to 2010.

Table 3. Drug-related deaths¹⁹

	2006	2007	2008	2009	2010
Deaths	600 (est.)	n/a	400 (est.)	300 (est.)	270 (est.)
including among IDUs (%)	44	40	32	30	30

Drug-related crime

According to the Central Asian Regional Information and Coordination Centre (CARICC) bulletin No.137 (of 29 August 2014), after the first 6 months of 2014, Turkmenistan demonstrated a reduction in the number of drug-related crimes by 1.2% as compared to the analogous period of 2013 (from 414 to 409). For the first 6 months of 2013 – 414 drug-related crimes, for the first 6 months of 2014 – 409 drug-related crimes were registered.²⁰

¹⁸ *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.70.*

¹⁹ *Paris pact report 2014. UNODC. P.169.*

²⁰ *CARICC Bulletin No.137. Drug situation in CARICC member-states for the first 6 months of 2014. 29 August 2014.*

Table 4. Drug-related offences ²¹

	Jan-June 2009	2010	2011	2012	2013
Criminal cases initiated	1,354	2,384	1,654	1,070	905
Rate (per 100,000)	50 (est.)	47	32	21	17
Including offences: With intent to sell (%)	>60	69	68	=65	=60
Smuggling (%)	n/a	6	11	-17	n/a

Table 5. Drug-related crime in Turkmenistan in 2010–2013 (per 100,000 population) ²²

2010	2011	2012	9months 2013
48.5	33.3	21.3	12

For the first 6 months of 2014, the number of people arrested for drug-related crimes, as compared to the first 6 months of 2013, declined by 11.52% (from 512 to 453). All in all, 1,157 people were arrested in 2013, of them 44 were citizens from other countries. ²³

Table 6. People arrested in the country

	Jan-June 2009	2010	2011	2012	2013
Total arrestees	3,168	2,515	1,969	1,384	1,157
National citizens	3,141	n/a	1,917	1,322	1,113
Non-citizens	27	n/a	52	62	44
Afghanistan	6	15	13	9	5
I.R. of Iran	10	n/a	28	37	34
Turkey	3	n/a	4	12	3
Uzbekistan	8	16	7	4	2

²¹ *Paris pact report 2014. UNODC. P.167.*

²² Обзор наркоситуации в Республике Туркменистан за 2013 год. Агентство по контролю за наркотиками Республики Туркменистан. P.8.

²³ *Paris pact report 2014. UNODC. P.167.*

In total, 101,403 kg of drugs were seized in the first 6 months of 2014, which is over 2 times less than in the same period of 2013. The volumes of seized heroin rose from 0.373 to 0.557 kg, whereas the volumes of seized opium declined from 209.336 to 78.334 kg.

Table 7. Total volumes of seized drugs (in kg) ²⁴

	6 months 2013	6 months 2014
Total volume of seized drugs	218.259	101.403
+/- (in %)	by 2.15 times less	
Opium group	209.71	78.892
+/- (in %)	by 2.65 times less	
Heroin	0.373	0.557
+/- (in %)	+49.32	
Raw opium	209.336	78.334
+/- (in %)	by 2.67 times less	
Cannabis group	8.549	22.51
	by 2.63 times less	
Hashish	0.015	0.044
+/- (in %)	by 2.9 times less	
Marijuana	8.534	22.465
	by 2.63 times less	

In Turkmenistan there were almost no hashish seizures (44 grams in 2014 against 15 grams in 2013).

There was a reduction in volumes of seized drugs of all types by a factor of 2.15 in Turkmenistan for the said period of 2014. At the same time, the seized volumes of opium declined by a factor of 2.67. There were practically no seizures of heroin and hashish – 0.557 kg and 0.044 kg respectively. At the same time, there was a rise in marijuana seizures by a factor of 2.63.

²⁴ CARICC Bulletin No.137. Drug situation in CARICC member-states for the first 6 months of 2014. 29 August 2014.

Prices for drugs in 2012 varied from 16 to 316 US dollars per gram. The most expensive psychoactive substance was heroin, the price for which was from 175 to 316 US dollars per gram in 2012.²⁵

Table 8. Average wholesale prices (US dollars per kg)

	2009	2010	2011	2012	2013
Heroin	43,000-84,500	57,000-85,000	87,700-175,400	122,800-254,000	n/a
Opium	9,250-14,700	9,800-14,900	800-31,600	33,000-52,600	38,600-60,526
Cannabis	1,890-5,600	1,900-5,700	5,000-9,600	9,600-12,000	9,650-18,400

Table 9. Average retail prices (US dollars per gram)

	2009 ²⁶	2010	2011	2012	2013
Heroin	45.6-95.0	73-103	149-275	175-316	n/a
Opium	9.6-13.2	16-20	23-32	51-81	60-92
Cannabis	3.3-9.7	5-10	8-16	16-26	16-28

Situation in prisons

Turkmenistan has 22 correctional institutions, of them 12 prison colonies with various regimes, 6 remand centres, 2 treatment and labour facilities, 1 in-patient hospital for prisoners, and 1 disciplinary battalion for soldiers. Every police station also has a centre for temporary isolation, of which there are 53.²⁷

Colonies and prisons in the country (excluding the disciplinary battalion) can contain up to 8,100 prisoners. In 2009, there were 26,720 people there.²⁸

In Turkmenistan correctional institutions are subordinated to the Ministry of Internal Affairs. People sentenced for medium severity drug-related crimes mainly serve their sentences in general security colonies. According to the statistical data from

²⁵ Paris pact report 2014. UNODC. P.167.

²⁶ As of 1 July 2009.

²⁷ Пенитенциарные учреждения Туркменистана. Ассоциация Независимых Адвокатов Туркменистана и Туркменская Инициатива по Правам Человека. 2010. P.7.

²⁸ Ibid., P.7.

the Expert Group on Turkmenistan, in 2006 in correctional institutions there were 2,999 cases of drug addiction registered.²⁹

According to the data from national experts, the proportion of people serving sentences for drug-related crimes in 2007 was 19%: in general security colonies serve their sentences 3.12% of people, in strict security colonies – 9.41%, in prisons – 4.2%, in colonies with a special security – 2.27%.³⁰ According to the Expert Group on Turkmenistan, there are allegedly no narcotics in any of the correctional institutions.³¹

Epidemiological situation

Turkmenistan belongs to countries with a low level of HIV prevalence. According to the official data, by the end of 2007 there were only 2 cases of HIV infection identified in the country.³²

HIV/AIDS remains the most “invisible” of all diseases in Turkmenistan. The principal position of the authorities is that there is no HIV epidemic in the country.³³

The approximate tuberculosis prevalence rate (including all forms) for 2007 were 75 per 100,000 population.³⁴

²⁹ *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.390.*

³⁰ *Ibid.*, P.389.

³¹ *Ibid.*, P.389.

³² *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.372.*

³³ *Turkmenistan's opaque health system. 2008. MSF. P.12:*
<http://archive.chrono-tm.org/uploaded/1271126892.pdf>

³⁴ *Ibid.*, P.7.

Drug policy in the Republic of Turkmenistan

National drug strategy

“The National Programme of Activities for 2006-2010 to combat illicit trafficking of drugs and providing assistance to people addicted to narcotic drugs and psychotropic substances” was implemented in Turkmenistan from 2006 to 2010.³⁵ Harm reduction measures were not foreseen in the National Programme, thus, such programmes as opiates substitution therapy, or needle and syringe exchange were not available. The provisions of the Programme were mainly oriented towards the reduction in drug trafficking and demand reduction. As a preventative measure, the National Programme envisaged testing workers at workplace to identify people who use drugs. A decision was also taken to set up new treatment and rehabilitation centres; and hotlines in remote towns and districts.

Since 2011, Turkmenistan is implementing “the National Programme of combating illicit trafficking of drugs, providing assistance to people addicted to narcotic drugs and psychotropic substances for 2011-2015”, which includes a broad range of prevention measures and programmes.

The objectives of the Programme are to reduce proliferation of drugs, to combat illicit import and trafficking, and also to prevent drug use, to identify and treat people likely to use narcotic substances.

³⁵ *The Programme was approved by Decree of the President of Turkmenistan No.7856 “On approving the National Programme of counteracting illicit trafficking of drugs and providing assistance to people addicted to narcotic drugs and psychotropic substances for 2006-2010” of 24 April 2006.*

Drug-related legislation

Turkmenistan adhered to the 3 international UN Conventions on combating illicit trafficking of narcotic drugs and psychotropic substances:

- The Single UN Convention on narcotic drugs of 1961,
- The UN Convention on psychotropic substances of 1971,
- The UN Convention on combating illicit trafficking of narcotic drugs and psychotropic substances of 1988.

Law No.238-II “On narcotic drugs, psychotropic substances, precursors and counteractive measures to their illicit trafficking” of 9 October 2004 (amended and supplemented as of 22 December 2012) defines the legal basis of the state policy in the sphere of control over trafficking of narcotic drugs, psychotropic substances, precursors, and also establishes measures to counteract their illicit trafficking.

According to Article 4 of this Law, the state policy in the sphere of trafficking of narcotic drugs, psychotropic substances, and precursors, and in the sphere of combating their illicit trafficking and use, are aimed at:

- State regulation of trafficking of narcotic drugs, psychotropic substances, and precursors, and combating their illicit trafficking and use;
- Performing functions of state control over activities in the sphere of trafficking of narcotic drugs, psychotropic substances, and precursors;
- Licensing activities in the sphere of trafficking of narcotic drugs, psychotropic substances, and precursors;
- Conducting state registration of narcotic drugs and psychotropic substances, trafficking of which is allowed in Turkmenistan;
- Interagency and intra-agency co-ordination of activities of enterprises (institutions) in the sphere of trafficking of narcotic drugs, psychotropic substances, and precursors;
- Integral solutions to organizing work directed at combating illicit trafficking and use of narcotic drugs, psychotropic substances, and precursors;
- Improving the work of agencies that perform operative and search activities to detect and combat crimes related to illicit trafficking and use of narcotic drugs, psychotropic substances, and precursors;
- Promoting and affirming healthy life styles, conducting integrated activities on prevention and combating drug addiction;
- Involving NGOs, religious organizations and people of Turkmenistan to combat proliferation of drug addiction and the related crimes;

- Strengthening international co-operation on a multilateral and bilateral basis in the sphere of control over trafficking of narcotic drugs, psychotropic substances, and precursors, and implementing measures to prevent their illicit trafficking and use.

Also, according to this Law, the substances to be controlled in the country are included in a list, approved of by the President of Turkmenistan. This Law prohibits the use of narcotic drugs and psychotropic substances without doctor's prescription.³⁶ This Law does not establish the responsibility for storage of equipment for using drugs, but prescribes the confiscation of tools and equipment used for illegal manufacturing of narcotic drugs and their use.³⁷ People are to be medically examined, if there is official information that he or she illegally uses narcotic drugs or if there are reasonable grounds to assume that a person is under the influence of drugs.³⁸

Treatment of people with drug addiction in Turkmenistan is carried out according to Law No.285-IV "On measures related to the treatment of people suffering from alcoholism, narcomania or addiction to psychoactive substances" of 31 March 2012 (amended and supplemented as of 3 May 2014) and Law No.869-XII "On psychiatric assistance" of 1 October 1993.

According to the Turkmenistan's Code of Administrative Offences, administrative liability is foreseen for the following drug-related offences :³⁹

1. Illegal purchase, storage of narcotic drugs and psychotropic substances in small amount without the aim to sell, as well as their use entail a fine or an administrative arrest of up to 15 days (Article 82). Anybody, who has voluntarily handed in narcotic drugs or psychotropic substances of a small amount, having been held without the aim to sell, is freed from administrative responsibility.
2. Violation of rules to ensure the protection of drug-containing crops and failure to take measures to destroy the remains and waste of the production, containing narcotic drugs, entail a fine (Article 172).
3. Violation of planting and cultivation rules of poppies, cannabis and other plants, containing narcotic drugs with violation of the rules, established by legislation of Turkmenistan, entails a warning or fine (Article 173).

³⁶ Law No.238-II "On narcotic drugs, psychotropic substances, precursors and counteractive measures to their illicit trafficking" of 9 October 2004, Article 49.

³⁷ *Ibid.*, Article 45.

³⁸ *Ibid.*, Article 50.

³⁹ Code of Administrative Offences, approved by Law No.422-IV of 29 August 2013.

The Article 96 para 1 of Criminal Code sets out types of compulsory medical measures that can be prescribed by the courts: ⁴⁰

- Out-patient compulsory supervision and treatment;
- Compulsory treatment in an in-patient psychiatric hospital of a general type;
- Compulsory treatment in an in-patient psychiatric hospital of a specialized type;
- Compulsory treatment in an in-patient psychiatric hospital of a specialized type with intensive supervision.

Anyone, sentenced for criminal actions, committed in the full possession of his or her mental faculties, but requiring treatment for alcoholism, "narcomania" or "toxicomania", courts can apply a compulsory medical measure in the form of out-patient compulsory supervision and treatment in addition to the sentence (para 2 Article 96).

Criminal Code of Turkmenistan foresees criminal liability for the following drug-related actions:

- Illicit manufacture, processing, purchase, storage, transportation, sending of narcotic drugs or psychotropic substances with the aim to sell (Article 292).
- Illicit manufacture, processing, purchase, storage, transportation or sending of narcotic drugs or psychotropic substances without the aim to sell (Article 293).
- Theft or extortion of narcotic drugs or psychotropic substances (Article 294).
- Illicit cultivation of drug-containing plants prohibited for cultivation (Article 295).
- Inducement to use of narcotic drugs or psychotropic substances (Article 296).
- Organization or maintaining narcotic dens for use of narcotic drugs or psychotropic substances (Article 297).
- Violation of rules for production, purchase, storage, stock-taking, delivery, transportation or sending of narcotic drugs or psychotropic substances (Article 299).
- Illicit delivery or forgery of prescriptions or other documents entitling to obtain narcotic drugs or psychotropic substances (Article 300).
- Organization of use of narcotic drugs or psychotropic substances while conducting mass activities (Article 301).

⁴⁰ *Criminal Code of Turkmenistan, approved by Law No.222-1 of 12 June 1997 (read with Law of Turkmenistan No.315-IV of 4 August 2012, 9 November 2013, 1 March 2014, 3 May 2014, 8 November 2014).*

Combatting illicit drug trafficking

In January 2008, with a view to implement the state policy aimed at combating illicit drug trafficking more effectively, a separate agency was set up – the State Drug Control Service, which in August 2012 was transformed into the State Service for Protection of Safety of a Healthy Society. The main tasks for the Service are preventing illicit sales of narcotic drugs, combating their illegal import and trafficking, establishing effective trans-frontier co-operation, and also implementing international obligations of Turkmenistan.

The activities of the State Service for Protection of Safety of a Healthy Society are regulated by Law No.354-IV “On the service to protect the safety of healthy society” of 22 December 2012.

This Law defines the organizational basis, principles and tasks for the activities of the Service for Protection of Safety of a Healthy Society, establishes guarantees of legal and social protection of the personnel, and also their rights and obligations.

Article 5 defines the main tasks of the Service for Protection of Safety of a Healthy Society:

1. to implement the state policy in the sphere of counteraction to illicit trafficking of narcotic drugs and intoxicating substances;
2. to prevent and interdict crimes and administrative offences, related to illicit trafficking of narcotic drugs and intoxicating substances;
3. to detect and solve crimes, related to illicit trafficking of narcotic drugs and intoxicating substances by means of criminal investigation, inquiry and preparatory inquiry;
4. to deter and prevent harmful consequences of the prevalence and use of narcotic drugs and intoxicating substances;
5. to set up a unified information data centre on the people, accessorial to illicit trafficking of narcotic drugs and intoxicating substances;
6. to interact with state agencies and public associations, law enforcement and military agencies of Turkmenistan to combat illicit trafficking of narcotic drugs and intoxicating substances.

From 1 March to 1 November 2013 the authorities of Turkmenistan conducted “Goknar” (“Poppy”), a specialized anti-drug operation, to detect plots of land with

illegal crops of opium poppy, cannabis and other drug-containing drugs in the oasis zone and the Karakum desert. As part of the operation, the staff of the State Service for Protection of Safety of a Healthy Society together with the representatives of the Ministry for National Security, Police, Prosecutor's office conducted operations to detect and destroy illegal crops of opium poppy. Poppies are usually cultivated on private land or wastelands, and also on movable carts under shepherd's open sheds in the Karakum desert. In rural areas, poppies and cannabis are cultivated among the crops of white durra or corn, which makes the detection complicated.⁴¹

Such campaigns to destroy narcotic drugs seized by law enforcement agencies of Turkmenistana are conducted annually. These campaigns are conducted at a place called Kasamly Dzhulge near Ashgabat with participation of heads of military and law enforcement agencies, public associations, representatives of international diplomatic representations and missions, and mass media.

According to official data from Turkmen sources, in the course of demonstrative campaigns to incinerate narcotic drugs in 2007 the country destroyed over 1.5 tons of drugs, in 2008 – over 2.3 tons, in 2009 – 2.2 tons, in 2010 – about 1.4 tons, in 2011 – over 830 kg, in 2012 – 828 kg, in 2013 – 435 kg.⁴² This statistics demonstrates positive changes achieved in combating illicit trafficking and smuggling of narcotic drugs.

Co-ordination activities

A State Co-ordination Commission to combat drug addiction was set up under the Cabinet of Ministers of Turkmenistan. This interagency body to combat illicit trafficking of narcotic drugs, psychotropic substances, and precursors, that facilitates interaction and co-ordination of activities of ministries, agencies and services to combat illicit trafficking narcotic drugs, psychotropic substances, and precursors.⁴³

The bodies authorized to exercise control over trafficking of narcotic drugs, psychotropic substances, and precursors, and their use are: the Ministry of Internal Affairs of Turkmenistan, the Ministry of National Security of Turkmenistan,

⁴¹ Further information at: <http://regnum.ru>

⁴² The Embassy of Turkmenistan in Tajikistan: <http://www.turkmenembassy.tj/>

⁴³ Article 6: "Interagency body on combating illicit trafficking of narcotic drugs, psychotropic substances, and precursors" of Law of Turkmenistan No.238-II "On narcotic drugs, psychotropic substances, and precursors, and measures to combat their illicit trafficking" of 9 October 2004.

the Ministry of Health and Medical Industry of Turkmenistan, the State Customs Service of Turkmenistan, the State Border Service of Turkmenistan, the Prosecutor General's Office of Turkmenistan, the Ministry of Justice of Turkmenistan and other competent bodies and institutions within their terms of reference. ⁴⁴

Drug prevention

Since November 2009, Turkmenistan with the support from UNODC, has been implementing a training programme for building family life skills. The aim of the "Family and School: working together" programme is the prevention of drug abuse, HIV/AIDS and offences among young people by means of capacity building for families in educating their children. The programme was translated and localized. Professionals implementing this programme underwent training beforehand.

Authorities attach a lot of attention to wide awareness raising campaigns directed at the population at large, including young people. As part of education efforts information on the harms of drug use and the need to give up harmful habits is provided.

All agencies, including law enforcement, health and education authorities, public organizations and wider community consolidate their efforts in this field. The afore-mentioned agencies periodically prepare and publish brochures, information booklets, articles; and organize round tables with respectable elders. TV companies prepare special programmes to promote healthy society and the activities of the State Service for Protection of Safety of a Healthy Society of Turkmenistan.

In December 2007 The Ministry of Health and Medical Industry of Turkmenistan and the BOMCA Programme (CADAP) signed a Memorandum on implementing a campaign for drug prevention in the mass media. The implementation of this campaign was assigned to the Information Centre of the Ministry of Health and Medical Industry. ⁴⁵

⁴⁴ Article 42: "Bodies authorized to exercise control over trafficking of narcotic drugs, psychotropic substances, and precursors" of Law of Turkmenistan No.238-II "On narcotic drugs, psychotropic substances, and precursors, and measures to combat their illicit trafficking" of 9 October 2004.

⁴⁵ "Turkmenistan – prevention of drug and other addictions", available at the Turkmen Medikal website: <https://yytm.wordpress.com/2009/03/30/туркменистан-профилактика-наркоман/>

This campaign entailed a number of activities:

- A series of 12 2-day drug prevention training seminars for 180 family doctors and 180 teachers of comprehensive schools in Turkmenabat, and Ahal, Maryi, Dashoguz regions and in Ashgabat;
- A 3-day seminar for 25 journalists from the mass media of Turkmenistan;
- Setting up of an Information Service on drugs and alcohol prevention.

There was also a drug prevention information campaign implemented among soldiers in 12 military units of Turkmenistan which targetted 7,200 people. This campaign was aimed at promoting healthy lifestyle and information on drug prevention measures. An information campaign among students of higher education institutions and vocational technical schools of Turkmenistan reached out to 5,087 people.

Thanks to the CADAP MEDISSA project, that was started in spring 2008,⁴⁶ the creative group of the LUKMAN studio at the Information Centre of health and medical industry of Turkmenistan produced a series of social advertising videos for drug prevention among young people. Popular theatre and cinema actors of Turkmenistan were filmed in the videos.

The staff of the State Service for Protection of Safety of a Healthy Society of Turkmenistan together with the State Committee of Turkmenistan on Sports and the “Mahtumkuli” Youth Organization constantly organize various sports activities for young people with a view to prevent addictions, promote healthy lifestyle and various sports: rowing and canoeing, rock-climbing, power lifting etc.

Drug treatment

Treatment of people with drug addiction in Turkmenistan is carried out within Law No.285-IV “On measures related to the treatment of people suffering from alcoholism, drug addiction and addiction to psychoactive substances” of 31 March 2012 (amended and supplemented as of 3 May 2014). According to Law No.869-XII “On psychiatric assistance” of 1 October 1993, “the treatment of patients with alcoholism, narcomania and toxicomania is included into psychiatric assistance and comprises examination of the mental health of people, diagnostic of psychic disorders, treatment, care and medical and social rehabilitation of people suffering from psychic disorders”. The treatment of drug addiction includes detoxification with medical substances, outpatient treatment and rehabilitation activities.

⁴⁶ The MEDISSA project is funded by BOMCA/CADAP.

Out-patient medical assistance to people, depending on indications, is rendered in the form of consultative and treatment assistance or dispensary supervision. Dispensary supervision can be implemented through regular examinations by doctors and through providing out-patient medical and social assistance.⁴⁷

The country provides free medical services in the network of state medical institutions for citizens of Turkmenistan, non-citizens, people without citizenship, and refugees. People who have no registration receive medical services in accordance with the usual procedure in place of referral.

The treatment of people with drug addiction is carried out in specialized rehabilitation centres of the responsible ministries and agencies that make up the structure of the state healthcare system. The country has a network of inpatient narcological institutions. There are some specialized treatment facilities for people with drug addiction that are subordinate to the Ministry of Internal Affairs.

Upon violation of law and public order and refusal to undergo voluntary treatment, a person with drug addiction can be referred for compulsory treatment to a rehabilitation centre for a term from 6 months up to 1 year upon court order. This type of treatment in Turkmenistan is applied compulsorily to 6-13% of all people receiving treatment from drug addiction outside prison.⁴⁸ People sent for compulsory treatment from drug addiction, automatically receive free legal assistance.

A medical certificate on finding a person suffering from alcoholism, drug addiction or addiction to psychoactive substances is issued by a commission of doctors specializing in psychiatry and narcology, set up in the institutions of the Ministry of Health and Medical Industry of Turkmenistan in a manner established by normative legal acts of Turkmenistan.

A person who voluntarily seeks help from a narcological institution for treatment course is granted confidentiality. At the same time, in response to an official enquiry, the information about a person undergoing treatment for drug addiction,

⁴⁷ Article 24 "Types of out-patient psychiatric assistance" of Law of Turkmenistan No.869-XII "On psychiatric assistance" of 1 October 1993.

⁴⁸ *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.16.*

can be made available to law enforcement agencies.⁴⁹ Medical workers are also obliged to inform law enforcement agencies about cases of overdosing.⁵⁰

A person suffering from alcohol addiction, drug addiction and addiction to psychoactive substances, of more than 2 times within 6 months is informed by the authorized authorities of their intent to bring a petition to court seeking his or her referral for treatment to a rehabilitation centre.⁵¹

The state provides funds to support people undergoing treatment in a rehabilitation centre (clothes, food, bedding, medication etc.).

A person who undergoes treatment for alcoholism, drug addiction and addiction to psychoactive substances, released from a rehabilitation centre, correctional or residential colonies, is under supervision of medical institutions of the Ministry of Health and Medical Industry of Turkmenistan at a place of his permanent residence within a period, established by normative legal acts of Turkmenistan.

Opioid substitution therapy

In Turkmenistan OST is not available. Never the less, there are no legal barriers to implement OST programmes in the country. International treaties on control over narcotic drugs, ratified by Turkmenistan, do not prohibit the use of such substances as methadone and buprenorphine for medical purposes for OST.⁵² There are also some provisions in the legislation of Turkmenistan that provide an opportunity to implement OST programmes. The main substances (buprenorphine and methadone) are allowed for use for medical purposes and are subject to strict control.⁵³

⁴⁹ *Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.383.*

⁵⁰ *Order of the Minister of Health of Turkmenistan of 14 October 2000. The reference to this legal document appears in "Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.385".*

⁵¹ *Law of Turkmenistan No.285-IV "On measures related to the treatment of people who suffer from alcoholism, narcomania or addiction to psychoactive substances" of 31 March 2012.*

⁵² *UNDCP. Flexibility of treaty provisions as regards harm reduction approaches. Decision 74/10 E/ International Narcotics Control Board of 30 September 2002. <http://www.communityinsite.ca/INCB-HarmReduction.pdf>*

⁵³ *Decree of the President of Turkmenistan No.9192 "On approving the schedule of narcotic drugs, psychotropic substances and precursors" of 13 November 2009. The reference to this legal document appears in "Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.384".*

In particular, methadone is included in the Schedule of narcotic drugs and psychotropic substances, used as medical substances, trafficking of which is restricted and regulated by Order of the President of Turkmenistan No.9192 “On approving of the schedules of narcotic drugs, psychotropic substances and precursors” of 13 November 2007. Appendix No.2 (Quoted in the report of the Canadian HIV/AIDS Legal Network, UNODC, 2010).

Methadone can be used for medical purposes on the basis of a prescription, written out on special forms, only by a specialist from a state medical institution and regulated by Law of Turkmenistan “On narcotic drugs, psychotropic substances, precursors and counteractive measures to their illicit trafficking”, Article 33 “Delivery of narcotic drugs and psychotropic substances to physical persons for medical purposes”.⁵⁴ Issuing prescriptions for narcotic drugs and psychotropic substances, including substances used for OST, by medical workers from the private sector of healthcare is prohibited.

Treatment of people with drug addiction in correctional institutions

According to Law “On protecting citizen’s health”, prisoners who serve their sentences in correctional institutions and detainees who are in remand centres have a right to medical assistance including in institutions of the state healthcare system.

Medical examination for drug addiction is mandatory for prisoners. Prisoners with drug addiction undergo treatment in medical units of correctional institutions.⁵⁵ People suffering from drug addiction and serving their sentences for committing administrative offences are referred to treatment and labour centres.

People over 16 who suffer from drug addiction and evade treatment, are subject, upon court order, to compulsory treatment in treatment and education centres for a period

⁵⁴ *Опиоидная заместительная терапия: Обзор ситуации в 29 странах и углубленный анализ ситуации в 15 странах Центральной и Восточной Европы и Центральной Азии. Евразийская сеть снижения вреда. P.67.*

⁵⁵ *Treatment of prisoners for drug addiction is governed by Corrective-Labour Code of Turkmenistan and Orders: Order of Ministry of Internal Affairs of Turkmenistan No.118 “On medical provision for people contained in remand centres, correctional institutions and hospital of Department of Corrections of the Ministry of Internal Affairs of Turkmenistan” of 17 July 2002 and Order of the Ministry of Health and Medical Industry of Turkmenistan No.300 “Treatment and supervision of alcoholics and narcomaniacs” of 5 June 2000. The reference to this legal document appears in “Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.390”.*

from 6 months to 2 years.⁵⁶ These centres in the regime of isolation facilitate special treatment and professional and vocational training.

Prisoners with drug addiction in compulsory treatment take up an initial course of no less than 60 days, receive outpatient treatment in combination with “labour therapy”. During the first year of treatment, prisoners are examined by psychiatrists and narcologists no less than 1 time a month, during the second year – no less than 1 time every 2 months. Maintenance outpatient treatment, which includes regular examinations by doctors and providing out-patient medical and social assistance, is conducted 3 to 4 weeks in every 3 months.

In 3 months before release, the staff of the correctional institution notifies the Ministry of Internal Affairs agencies according to the place of residence of the prisoner and indicates the end of his sentence to assist with employment and housing.⁵⁷

Risk and harm reduction

In 2009, with the support of UNODC and the “Potential” project funded by the US agency for International Development (USAID), a Communication Centre for people with drug addiction, providing medical, socio-psychological and legal assistance was opened in Ashgabat. The opening ceremony was conducted on the International Day of combating use of narcotic drugs and their illicit trafficking.

There has been a national HIV centre and regional HIV centres with waiting rooms for counseling and HIV testing in Turkmenistan since 1989. Basically, HIV prevention measures include awareness raising campaigns for people, including young people, as well as distribution of condoms by state bodies and non-governmental organizations (NGOs).⁵⁸

⁵⁶ Decree of the Supreme Council of Turkmen SSR No.918-XI “On making amendments and supplements into some legislative acts of Turkmen SSR and approving of Regulations on treatment and educational centre for drug addicted people” of 18 August 1987. The reference to this legal document appears in “Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.390”.

⁵⁷ Order of the Ministry of Internal Affairs of Turkmenistan No. 79 “On approving Instructions to assist people who have served their sentences or after release from treatment and labour centres with employment and housing, and on ways to inform agencies of internal affairs about them” of 23 April 2003.

⁵⁸ Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Legislative and Policy Analysis and Recommendations for Reforms. UNODC. P.385.

Turkmenistan lacks programmes to provide clean needles and syringes. Naloxone, used in other countries for assistance in cases of overdose, is not a certified medication in Turkmenistan and consequently not available for medical purposes.

International cooperation

Turkmenistan cooperates with major international organizations: the United Nations Organization (UN), the Organization for Security and Cooperation in Europe (OSCE), the European Union (EU) and other international structures.

Since the start of cooperation between UNODC and Turkmenistan, the country has implemented over 35 global, regional and national programmes and projects with a total budget of about 10 million US dollars, of which the budget for only national projects was 4,720,000 US dollars.⁵⁹

In April 2011 Turkmenistan was included into the UN Commission on Narcotic Drugs for 2012-2015. This gives the country an opportunity to monitor the implementation of international conventions related to narcotic drugs and psychotropic substances.⁶⁰

Turkmenistan jointly with UNODC and other states from Central Asia has signed a Memorandum of Understanding on Subregional Drug Control Cooperation in the Central Asian region.

In Turkmenistan, with a view to consolidate efforts to ensure universal security and stability, with a view to confront the drug threat, the UN Regional Centre for Preventive Diplomacy for Central Asia (UNRCCA) was open in Ashgabat. UNRCCA supports Central Asian countries in their combat against transfrontier challenges: terrorism, extremism and drug trafficking.

The UNODC Project Office in Turkmenistan, jointly with the ministries and agencies of the country, has implemented a regional project "Control over precursors in Central Asia". The aims of this project were to analyze the current situation on control measures; to identify problems of leakage of precursors from the sphere of

⁵⁹ *The Ministry of Foreign Affairs of Turkmenistan*: <http://www.mfa.gov.tm/en/turkmenistan-int-en>

⁶⁰ *Electronic newspaper "Turkmenistan, the Golden Age"*: <http://turkmenistan.gov.tm/?id=1780>

international trade, production and local distribution, development of proposals to set up working mechanisms and procedures to prevent the leakage of precursors.

Turkmenistan has also adhered to international legal instruments in the sphere of combating illicit drugs: the International Convention on combating the funding of terrorism, the UN Convention against transnational organized crime.

In 2005 – 2010 the United Nations Development Programme (UNDP) provided technical support to the Government of Turkmenistan to implement national HIV/AIDS prevention programme in the following directions: setting up a national system of monitoring and evaluation, providing services of voluntary and everyday counselling, testing and conducting prevention work with high risk groups. In 2007 statistical data on drug addiction and illicit drug trafficking were published for the first time. UNDP assisted Turkmenistan in preparing the Annual report and the Country Essay on drugs (2007 – 2008).⁶¹

Turkmenistan has also engaged in a partnership with the EU Programme to facilitate the management of borders in Central Asia (BOMCA) and the EU Programme on preventing the proliferation of drugs in Central Asia (CADAP).

In July 2007 an Agreement between Turkmenistan, Azerbaijan, Kazakhstan, Kyrgyzstan, Russia, Tajikistan, and Uzbekistan was signed to set up the Central Asian Regional Information and Coordination Centre (CARICC) to combat illicit trafficking of narcotic drugs, psychotropic substances and precursors.

Turkmenistan has actively cooperated with the programmes of the Dublin Group to exchange opinions and information on combating illicit drug trafficking.

Turkmenistan also participates in the cooperation of the Caspian Region countries to combat illicit trafficking by sea transport. Under this initiative, cooperation among administrations of ports and law enforcement agencies was set up.

In June 2010 Turkmenistan and the USA prolonged the Agreement on drug control and promoting law order signed in September 2001 between the governments of the 2 countries.⁶²

⁶¹ *Country programme action plan for 2010-2015. The Government of Turkmenistan and the United Nations Population Fund (UNFPA). Ashgabat, 2010. P.6.*
<http://www.unfpa.org.tm/site/assets/files/1158/cpap-2010-2015-unfpa-final-signed-en.pdf>

⁶² *Сотрудничество Туркменистана и ООН в борьбе с наркоугрозой. Новости Туркменистана.*
<http://infoabad.com/novosti-turkmenistana/sotrudnichestvo-turkmenistana-i-on-v-borbe-s-narkougrozoi.html>

In October 2011 during the pentilateral international summit of heads of competent bodies to combat illicit drug trafficking in the countries of the Caspian Region (Russia, Azerbaijan, Iran, Kazakhstan, and Turkmenistan) a decision was made to set up “Anti-drug Caspian Five”. This cooperation under “The Caspian Sea – free from Afghan drug trafficking” initiative allows to raise the level of cooperation with law enforcement agencies and special services of adjacent states in combating transnational crime groups.

In May 2012 an interagency agreement between Turkmenistan and Iran on mutual cooperation in combating illicit drug trafficking was signed in Ashgabat by heads of State Drug Control Service of Turkmenistan and the Drug Control Staff of the Ministry of Internal Affairs of Iran. This Agreement envisages cooperation at regional and international levels to combat illicit trafficking of drugs and hallucinogens and includes the exchange of criminal investigation data and other necessary activities.⁶³

In September 2012 Ashgabat hosted a Regional Seminar devoted to coordination of international efforts on combating illicit drug trafficking. This activity was attended by delegations from Afghanistan, Iran, Pakistan, Kyrgyzstan, Tajikistan, Kazakhstan, Uzbekistan, Russia, Turkey, the USA, and the representatives of the UNODC Project Office in Turkmenistan. This seminar reviewed issues of improving methods of personnel training for the concerned agencies, developing standardized training programmes at a national level.

In 2013 an agreement on cooperation to combat terrorism, organized crime, illicit trafficking of narcotic drugs between Turkmenistan and the Republic of Latvia was signed.

⁶³ Electronic newspaper “Turkmenistan, the Golden Age”: <http://turkmenistan.gov.tm/?id=1780>

Conclusions

At the moment, Turkmenistan remains one of the countries in the world where it is most difficult to obtain reliable information in view of the drugs situation. Much of the epidemiological information remains classified as state secret. According to available information, there are no regular population surveys or other epidemiological monitoring measures undertaken in the country.

Figures provided by government authorities on the number of people officially registered with drug addiction suggest a declining trend over the previous decade, as does the official statistics on drug related crimes. The officially reported mortality rate on drug related deaths also showed a steady decline over the same period. However, it was not possible to obtain information on the criteria for drug related deaths, nor the data collection process. Seizure rates show that opiates and cannabis based drugs make up the highest proportion of seizures. Officially available data on seizures from the recent two years show a sharp decline in the seizure quantities of opioids but a significant increase in the seized quantities of cannabis products. It remains unclear, however, to which factors these developments are attributable.

Turkmenistan has adopted a four year National Programme of Activities in 2006 to combat illicit trafficking of drugs and provide assistance to people addicted to drugs and psychotropic substances. Together with the adoption of the national programme a state coordinating body was set up at ministerial level.

In terms of prevention, the Turkmen authorities regularly conduct awareness raising campaigns directed at the population at large targeting primarily young people. The emphasis of the campaigns is on highlighting the dangers and adverse effects of drug use. On the level of local authorities, there are capacity building programmes for families to educate their children on drugs and HIV/AIDS.

Treatment of people with drug addiction is conducted in special rehabilitation centres of the health care system and is based primarily on the narcology concept

from the Soviet times, being primarily based on detoxification as the main medical intervention. This is supplemented by out-patient counseling and social rehabilitation programmes. Details on the nature and concepts of these programmes were not available. Upon violation of law or public order, offenders considered addicted are subjected to compulsory treatment in case they are not seeking treatment themselves. Compulsory treatment includes medical detoxification followed by compulsory labour as a perceived measure of rehabilitation. Information about patients in voluntary or compulsory treatment is made available to law enforcement agencies.

Substitution treatment is not available in Turkmenistan even though it is not prohibited by the law. On the other hand, Naloxone cannot be provided in case of overdose since it is not permitted. Harm reduction measures only include awareness raising activities and distribution of condoms. Turkmenistan does not have needle or syringe exchange programmes. This is attributable to the fact that officially the country does not have an HIV epidemic.

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