

IRAN'S COUNTRY PROFILES OF DRUG ABUSE

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## Iran's Country Profiles of Drug Abuse

### Introduction

The persistent demand for opiate drugs coupled with their undiminishing supply constitutes one of Iran's most pressing public health problem. Opium remains the dominant drug of abuse but the steadily increasing abuse of heroin is a cause for great anxiety.

In view of the gravity of the situation, Iranian government has become increasingly concerned in evolving a more effective, comprehensive and better co-ordinated drug abuse program. The overall policy and strategy of Iranian government emphasises the underlying philosophy for the need to achieve a balanced program.

As will be shown later, a most significant increase has taken place in the nation's treatment capabilities, over the past four years. Concurrently, greater reinforcement efforts have resulted in more seizures but had not diminished the availability of illicit drugs. Demand in Iran is largely met by the continued illegal and uncontrolled production of opium beyond the country's eastern frontier.

Consequently, as supported by empirical data there has been no drop in the extent of drug abuse. At the same time, the emergence of new patterns of drug abuse namely alcohol and psychotropics are creating greater complications.

The nature, extent and patterns of drug abuse will be discussed separately and in detail in three papers that are part of this Profile.

### Administrative Arrangements

The Ministry of Health and Welfare has the overall policy-making and co-ordination responsibility. However, owing to the involvement of several ministries and agencies in the multipronged national program, the development of policies, strategies and coordination since 1976 has been achieved through a cabinet-level Drug Abuse Co-ordinating Council (DACC).

The DACC which is presided over by the Minister of Health and Welfare consists of the Ministers of Agriculture, Education, Information, Labour, Science and Higher Education, Arts and Culture, together with the Commanding Generals of the Imperial Iranian Police and Imperial Iranian Gendarmerie. Heads of the Iranian Customs Administration, National Iranian Society for Rehabilitation of the Disabled (NISRD), and The Narcotics Center Administration are also Members of the DACC. Prominent personalities in the history of Iran's fight against drug dependence are also invited on this Council.

The DACC comprises three Committees 1- Enforcement, 2- Prevention, and 3- Treatment and Rehabilitation, which meet separately to discuss these different aspects of the problem. The Narcotics Control Administration (NCA) acts as the Secretariat of the Council.

NCA which is affiliated to the Ministry of Health and Welfare is responsible for international liaison, overseeing Iran's international treaty obligations and co-ordination among national agencies

NCA is currently undergoing organizational changes and engaged in a program of strengthening its provincial offices by utilizing the resources which are becoming available through the decentralization of health services. With a view to

achieving greater co-operation and to accelerate prosecution of offenders, NCA has established 5 new Provincial Narcotics Control Laboratories. Five other laboratories are at various stages of being established.

#### Enforcement

The principal responsibility in drug enforcement lies: 1- in urban areas with the Imperial Iranian Police (IIP) and 2- in rural areas with the Imperial Iranian Gendarmerie (IIG); 3- A Special Narcotics Unit has also been established within the Iranian Customs Administration and anti-narcotics activities of this organization have been upgraded. IIP has a Special Drug Enforcement Department and it should be mentioned that the anti-narcotic forces within the Police have increased five-fold in the past three years.

The Gendarmerie continues to combat illicit drug trafficking through its 113 anti-smuggling units with the help or support units and also the Highway Police.

#### Prevention

Prevention which is the joint responsibility of the Ministries of Health, Education and Information, is the least developed of the current programs. The existing policy calls for community development together with drug information and education programs.

Recent changes including the merger of the National Iranian Radio and Television into the Ministry of Information offer great promise. Ideas, films and campaigns which have been developed can now be launched with a greater guarantee of continuity. Simultaneously, studies are being carried in the area of drug education

### Treatment and Rehabilitation

The Ministry of Health and Welfare's National Iranian Society for Rehabilitation of the Disabled (NISRD) continues to act as the lead agency for treatment and rehabilitation of drug-dependent persons. However, following the establishment of the fully autonomous provincial health organizations, the actual delivery of services has become decentralized. NISRD acts as the Central body responsible for providing guidelines, standardization, co-ordination, research and training.

### International Obligations

1. Iran has signed and formally ratified the 1961 Single Convention on Narcotic Drugs.
2. Iran is a signatory to the 1971 Convention on Psychotropic Substances and the 1972 Protocol amending the 1961 Single Convention for Narcotic Drugs, and is taking steps towards formal ratification.
3. Iran has been an active member of the United Nations Commission on Narcotic Drugs and the UN Sub-Commission on Illicit Traffic and related matters in the Near and Middle East since its inception.

### The Narcotic Laws and Regulations of the Iranian Government

Until 1955, there existed no special legislation governing the cultivation of the opium poppy nor were there any laws against the use of opium or their narcotic agents. The absence of limiting laws and regulations had led to widespread use of opium (1) causing national concern. Thus, in 1955 a major

internationally acclaimed law was enacted banning both the cultivation of the poppy and the use of opium. This law was amended and further strengthened 4 years later.

A summary lists of Laws and Regulations that have been enacted since 1955 is provided below.

1. Law Banning Poppy Cultivation and Prohibition of Opium Use, 1955.
2. Amendment of the 1955 Law Banning Poppy Cultivation and Prohibition of Opium Use, 1959.
3. Law Permitting Limited Cultivation of Poppy and Export of Opium, March 1969.
4. Amendment to the Executive Code of Article 1 of the Law Permitting Limited Poppy Cultivation and Export of Opium, 25 May 1969.
5. Executive Code under Article 3 of the Law on Limited Poppy Cultivation and Export of Opium, 11 September 1969.
6. Executive Code under Article 4,5,6 and 7 of the Law Permitting Limited Cultivation of Poppy and Export of Opium, 11 September 1969.
7. Regulations framed under Article 9 of the Law on the Limited Cultivation of Poppy and the Export of Opium concerning the Authority for the Diagnosis of Addiction, 11 September 1969.
8. The Law on Reclamation of Coded Lands from Farmers Addicted to Narcotics, 30 December 1968.
9. Executive Code of the law on Reclamation of Coded Lands from Farmers Addicted to Narcotics, 4 May 1969.
10. The Law intensifying punishment of main perpetrators of the crimes mentioned in the amending law of the law banning poppy cultivation and permitting abolition of the prosecution and punishment of other perpetrators of the said crimes, 21 June 1969.
11. The Act allowing dealing in opium and rendering assistance of addicts, 28 June 1970.
12. The executive Statute of note 3 of the Law allowing dealing in opium and rendering assistance for treatment of the addicts, 24 December 1970.
13. The Law of Psychotropic Substance, 1975.

Those interested in obtaining informations about the above Laws and

and Regulations, may contact B. Shahandeh c/o Narcotics Control Administration, Ministry of Health and Welfare, Takhte-Jamshid Street, Corner of Jahan Ave., Tehran, Iran.

#### Manpower Training

A.) Training of manpower for law enforcement. In Iran, Multi-spectral Drug Abuse Program individual agencies have traditionally been responsible for their own manpower development. In the area of enforcement, this training has taken place both on National and International levels.

The Police and the Gendarmerie have incorporated training in the Drug Field into their Officer Corps Training Curricula. In addition, specialized training has been organized abroad specially in the United States

Training opportunities have also been provided for selected personnel through the United Nations Central Training Unit.

On-the-job Training and local workshops and seminars are regularly provided for the Law Enforcement personnel and supplemented by Regional Seminars and Observation Tours such as those arranged by the Colombo Plan.

B.) Training of manpower for treatment and rehabilitation. In the past 3 years, more than 60 physicians, 150 social workers and 200 psychologists have been provided with intensive short training course (1-3 months) to work in the hospitals, clinics and rehabilitation centers that serve drug abusers. On-the-job training for more than 1,000 support personnel has also been provided. As a result, in more than 30 in-patient and outpatient units that are operating in the country at present, the standard of service is gratifyingly high and with aid of continuing of education programs, seminars and circulation of educational material,

it is hoped that both the quality and quantity of services will continue to improve.

Seizure of Narcotic Drugs in Iran

The two tables that are presented provide a summary of the seizure of the narcotic drugs in Iran. The details about the location of the seizure and the original sources of the drug can be obtained by contacting B. Shahandeh, Director General, Narcotic Control Administration, Ministry of Health and Welfare, Fakhte-Jamshid Street, Corner of Jahan Ave., Tehran, Iran.



Table 1

Seizures of Narcotic Drugs in Iran.

	1973	1974	1975	1976	1977	First 6 months 1978
Opium (kg)	20423	9849	5312	5966	6467	2147
Heroin "	94	33	52	39	91	38.300
Morphine "	107	3	5.200	7.770	65	73.700
Heroin Laboratory	6	2	6	3	3	1
Carbabis (kg)	5054	2542	4735	1214	1271	2249
Cocaine (kg)	-	-	-	63.0	-	130

Table 2

Comparison of Seizures in 3 main areas  
in the first six months of 1977 & 1978.

( Grammes )

PROVINCE	OPIUM	COCAINE	HEROIN	First six months of:
1. Khorassan	2,793.252	102,740 <sup>1</sup>	725	1977
{ Bordering } { Afghanistan }	1,146,201.20	255,056.30	1,578.32	1978
2. Mazandaran & Gorgan	1,786,519	600	3.6	1977
{ Caspian } { Region }	192,695.59	602.50	733.33	1978
3. Sistan & Baluchistan	55,703.50	317.5	1,100	1977
{ Bordering } { Afghanistan }	5,000.00	100.00	43.20	1978