Professor Hamid Ghodse
President of the International Narcotics Control Board
Vienna International Centre
Vienna, Austria

Vienna, 10 October 2005

Dear Professor Ghodse,

Thank you for your letters of 10, 22 June and 6 September 2005 to the Minister of Foreign Affairs and the Minister of Health, Welfare and Sport about various cannabis-related developments in Dutch drugs policy. I am pleased to update you on these and other drug policy related issues.

## Cannabis policy

In my letter of 9 December 2004, I informed you about the Dutch government's paper setting out its policy on cannabis. It provides a basis for national interventions against cannabis-related crime — more specifically, strategies to deal with hemp cultivation and trade in cannabis — and coffee shop tourism. The municipality of Maastricht, which is in the south of the country on the internal EU border with Belgium and Germany, will soon be launching a pilot project to deny access to coffee shops to non-residents of the Kingdom of the Netherlands. The Dutch government and our neighbours both consider drug tourism undesirable and want to curb it.

Experience in dealing with the cannabis problem has taught us that, in addition to action taken under the criminal law against trade in and cultivation of this illegal drug, administrative measures are also effective. This means that not only the

police and the criminal justice authorities take action but also the local authorities, working closely with other law enforcement agencies and parties adversely affected by these practices. These include the tax administration (because of undeclared income), landlords (because of damage to property as a result of hemp cultivation) and power companies (because of electricity theft). The Dutch government will introduce a statutory framework giving the local authorities wider powers to shut down premises where illicit drugs are being sold.

To deal with organised criminal networks involved in large-scale hemp cultivation, concrete agreements have been entered into with the Public Prosecution Service and the police. Evidence of the success of this more intensive approach is the fact that last year 2,261 hemp nurseries were closed, up from 1,867 the year before. More than 1.1 million hemp plants were confiscated.

In respect of the cross-border components of the problem, we reinforced our effort to work with law enforcement agencies in our neighbouring countries. The recent agreements entered into with Germany, Belgium and Luxembourg on extensive transborder cooperation between the police and the criminal justice authorities form the basis.

## Medicinal cannabis

As regards the issue of medicinal cannabis, I can inform you that in March of this year, the Dutch Parliament asked the Minister of Health, Welfare and Sport to evaluate the work of the Office of Medicinal Cannabis. The evaluation will begin before the end of this year and you will receive a copy of the findings as soon as possible.

## Illicit Drug smuggling through Schiphol airport

Turning to the special controls set up at Schiphol international airport, I can inform you that the list containing information about smugglers was entered into the Schengen Information System at the end of July for use by our EU partners. Upon request, non-EU member states like the United States and Surinam can receive regular updates of the list on a reciprocal basis for the purpose of tackling illicit drugs and drug-related crime. The agencies involved continually monitor which areas of the world with air services to Amsterdam represent so great a risk that

every passenger on every incoming flight must be thoroughly checked. At present, these labour-intensive but extremely effective controls are carried out on every flight from Suriname, the Netherlands Antilles, Aruba and Venezuela. Dutch customs officials and Royal Military Constabulary officers have now been stationed in the Netherlands Antilles and are working with local officials to carry out controls. Similar controls are now being carried out on a random basis on flights from other high-risk areas.

As previously indicated, a focused approach is used at Schiphol which aims to seize all illicit drugs on board a flight and to prevent couriers from travelling again. This has proved to be an effective strategy, since the average number of drug couriers per flight has dropped from 30 to 40 in 2001, to 2 today.

In your letter, you refer to reports that the policy not to prosecute persons apprehended trafficking only a small quantity of illicit drugs, will be expanded to the rest of the country. This is not true. The policy of the Dutch government and the Public Prosecution Service, within the framework of available capacity and on the basis of a focused approach, is that in principle no exceptions will be made to the prosecution of violations of the criminal law. Accordingly, in the first six months of this year, 940 cases of Opium Act violations were prosecuted by the public prosecution branch at Schiphol airport. In addition, the possibility of withholding drug couriers' passports for perhaps two to three years is now being looked into. This measure has already been successfully implemented in the Netherlands Antilles, where, to date, more than 700 Dutch passports have been withdrawn or refused.

## Medical co-prescription of heroin

In respect of medical co-prescription of heroin, you were sent the additional study of the Central Committee on the Treatment of Heroin Addicts, *Information about the State of Play in Research into Heroin on Medical Prescription*.

There has been some delay in reporting the study's findings on the effects of psychosocial treatment in addition to heroin prescription, but I expect the report to be completed by the end of the autumn. However, a scientific article on the cost utility of co-prescribed heroin has been published recently and I have enclosed a

copy. The Dutch government will also send the results of these studies to the World Health Organisation.

Progress in implementing the policy on medical co-prescription of heroin can be summarised as follows. A total of 17 municipalities, including five of the six municipalities already participating in medical co-prescription, have submitted proposals for extending or developing treatment capacity. The Ministry of Health, Welfare and Sport plans to complete its decision-making procedure by the end of October.

I shall send a copy of this letter to Mr. Koli Kouame, Secretary of the International Nacrotics Control Board

Ines Coppoolse,

Chargé d'Affaires a.i.