



UNITED NATIONS
Office on Drugs and Crime

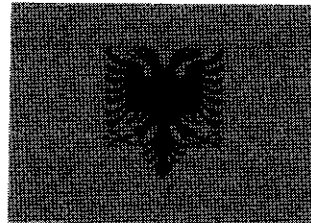
**UNODC-WHO Programme on
Drug Dependence Treatment and Care
Regional chapter for the Balkans**

**Strengthening comprehensive
drug dependence treatment and care systems
and national coordination**

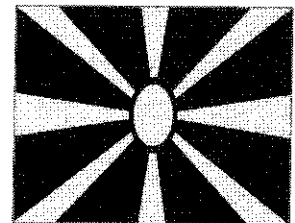
Proposal

Countries

Albania



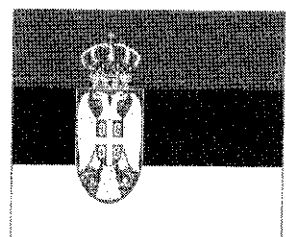
**the Former Yugoslav Republic of
Macedonia**



Montenegro



Serbia



Background information

About the project

During the High level segment of the 52nd Commission on Narcotic Drugs in 2009, representatives of UNODC and WHO officially launched the UNODC-WHO Programme on Drug Dependence Treatment and Care. The Italian government was among the first supporters of this integrated approach to drug dependence treatment and care.

Through the Programme, UNODC and WHO collaborate closely and work on improving drug dependence treatment and care at the global, regional and country levels, sharing their networks of intervention and interacting with Member States and the other intergovernmental organizations on a common basis. In

particular, this joint programme permits to start or facilitate a dialogue with Member States through their Ministry of Health, National Drug Secretariat, Ministry of Interior, Ministry of Justice and other relevant ministries. Such inter-ministerial approach in the framework of the programme facilitates the promotion of multidisciplinary-integrated policies, including both demand reduction/health strategies and supply-reduction/security/sustainable livelihood interventions.

The UNODC-WHO Programme on Drug Dependence Treatment and care (GLOK32) is being implemented in South East Europe since 2010, mainly thanks to the support of the Italian government. The implementation of activities has mainly focused on Albania and Serbia and to the extent possible (e.g. regional trainings) other countries from the region have also been invited. In addition, synergies could be identified with an UNODC regional programme for South East Europe, which allowed expanding the support, methodology and technical support of the UNODC-WHO programme on Drug Dependence Treatment and care even further.

In line with its goal to provide evidence-based and ethical treatment policies, strategies and interventions to reduce the health and social burden caused by drug use and dependence, the current achievements of the UNOC-WHO Programme, indicate the potential for consolidation of activities in existing countries Albania and Serbia and an expansion of the programme to include new countries in the region, the Former Yugoslav Republic of Macedonia and Montenegro.

Regional background

The Balkan region has a population of approximately 70 million people. This part of Europe is strongly subdivided culturally and linguistically and in recent years has experienced political, social and economic upheaval and transition, as well as major conflicts. According to UNODC data, the majority of Afghan heroin trafficked into Western and Central Europe comes through the “Balkan route”. Of the 75-80 tons of heroin trafficked to Western and Central Europe in 2009, some 60 tons were estimated to have been trafficked from countries of South Eastern Europe (via the Balkan route). The Balkan route originates in Afghanistan, passes through the Islamic Republic of Iran, then Turkey and reaches the Balkans via Bulgaria, with a smaller flow through Greece. As the Balkan region is the premiere transit zone for heroin destined for Western Europe, challenges on both the demand reduction and supply reduction side have emerged in countries along this major trafficking route.

Epidemiological situation regarding drug use and drug treatment services available in Albania, the Former Yugoslav Republic of Macedonia, Montenegro and Serbia

Albania

An estimated 10,000 people use drugs in Albania, for most of whom the drug of choice is heroin. The annual prevalence of opiate abuse (WDR 2010 - UNODC) as percentage of the population aged 15-64 is 0.45, cocaine abuse 0.8, cannabis - 1.8, amphetamines less than 0.1, ecstasy – 1.0. The data also suggest that there is a tendency toward an increase of injecting drug use, and more than two third of injectors share needles/syringes.

Drug dependence treatment is available in a specialized public drug treatment centre in Albania, namely the Clinical Toxicology and Addictology Service of Tirana University Hospital Centre ‘Mother Theresa’ – TUHC for the entire country and deals mainly with detoxifications and overdose treatment. Beside this governmental institution, which has received support through the UNODC-WHO programme on drug Dependence Treatment and care (GLOK32) in the past, treatment is also available in two other treatment centres, both of which are non-public and non-profit organisations: the Emanuel Community, a therapeutic treatment centre that offers residential treatment, and Aksion Plus, an NGO offering methadone maintenance

treatment also in cities outside of Tirana. Linkages with mental health and primary health care facilities are still weak.

Data on treatment demand and treatment coverage are not fully available for Albania. According to available data from the TUHC from 1995 indicate the trends over time. The total number of treatment demands (or the number of treatment visits) in the Clinical Toxicology Service increased significantly from 672 in 2000 to 1 057 in 2001 and 1 702 in 2002, remaining nearly constant in the following years at 1 855 (2003), 1 805 (2004), and 1 735 (2005), with a further increase above 2 000 treatment visits per year in 2006 (2 352), 2007 (2 070), 2008 (2 185) and 2009 (2 149). In 2009, the Clinical Toxicology Service registered (1) 218 new (or first-time) clients (FTD) (2) entering treatment (according to the TDI Standard Protocol 2) out of a total of 789 all treatment demand (ATD) (2), mostly self-referred, while 3.6 % were referred by other health service agencies, police, and prisons. In total 676 clients (85.6 %) out of the total of 789 ATD were problem drug users (PDUs) (3). They represented almost all the regions of Albania, half of them were from Tirana, however a slight increase in comparison with the previous years is observed in proportion of clients coming from small urban areas of the country. In comparison, in 2008 – 115 FTD out of 769 ATD, but in 2007 – 108 FTD out of 856 ATD, entered the treatment.

The Former Yugoslav Republic of Macedonia

The estimated number of drug users in Macedonia is 6.000 – 8.000, mostly heroin IDU's, that means a rate of 1.5 per 1,000 inhabitants aged 15-64. According to data of the NGO HOPS, the number of injecting drug users in Skopje is estimated to be 3,000. The previous studies conducted among group of IDUs were done using non-probability sampling methods (combination of snowball and venue based sampling). 4,101 drug users were registered at the end of 2007 in Skopje. 3,589 are male and 512 are female. Regarding their nationality, 3,150 are Macedonians, 619 Albanians and 332 are of other nationalities. The age structure is as follows: one person under 15 years old, 72 between 15 and 18 years old, 1,357 between 19 and 25 and 2,670 are older than 26. The largest proportion of drug users reported consumption of marijuana – 2,435, whereas the remaining uses reported heroin and other drugs.

Between 1990 and 2004 the number of registered drug users increased from 314 to 6.583 and in 2005, 549 new drug users were registered. Inhabitants of the urban areas are presented in this registration, most of all those in the city of Skopje (51% of the total number of the registered). The age group of 19-30 year old represents 82% of the registered users, while 18 year olds represent 3.8% of the registered users.

According to the Ministry of Interior of the Former Yugoslav Republic of Macedonia, there were 457 registered drug users in 1993, while at the end of 2009, the number of registered drug users was 8 778, of which 5 108 used cannabis, 3 682 used heroin and 349 used other drugs. In another bio-behavioural study, the estimated number of IDUs in the Former Yugoslav Republic of Macedonia in 2010 ranged from 7450 – 14150, of which 2950 (from 2150 to 4100) were in the capital.

According to the EMCDDA, treatment is available in several institutions: outpatient treatment centres (11 units from across the country), the Clinic for Toxicology, Department for Detoxification of Drug Abuse and drug treatment units in prison. In 2008, according to information from 10 treatment centres 1212 clients were in treatment, of which 344 were first-time clients (325 male and 19 female). Some 91.1 % of all clients entering treatment reported opioids as their primary drug, 7 % reported cannabis and 1.3 % cocaine. Among first-time treatment clients, 95 % reported opioids as their main problem substance, followed by 5 % for cannabis and 1 % for benzodiazepines. Some 70 % of first-time treatment clients were in the age group 20–34. In 2009, a total of 1277 patients were in treatment in departments of the General Hospitals, based on data received from the Institute for Public Health. Five patients were in the age group under 15 years, 39 clients

on treatment were in the age group up to 15–19 years of age, 963 clients were in the age group 20–34 years of age and 270 clients were older than 35 years.

Montenegro

Governmental authorities estimate that Montenegro has between 2500-3000 persons affected by drug dependence, but the actual number may be higher. According to the most recent EU survey of high school-age respondents on the use of alcohol and other drugs, the most frequently-used illicit drugs were marijuana and inhalants, followed by tranquilizers and sedatives. Local surveys showed a lifetime prevalence of drug use among secondary school students to be 7.8 percent in 1999-2000 compared to 6.9 percent in 2006-2007, while the age of first use fell from 16 years in 1999-2000 to 14 years in 2006-2007. In 2004, the Public Health Institute of Montenegro conducted a national survey with a sample of 3964 pupils from the fifth grade of primary school to the fourth grade of secondary school (11-14 years). This analysis shows an increase in drug use — 5.8 % of respondents had ever used a drug in their lifetime, more specifically 2.3 % of primary schools pupils and 10.1 % of secondary school students. Some 77.6 % of students who had experimented with drugs were from secondary school, with the highest percentage in the second grade (30.6 %). Most children first tried drugs in the upper classes of secondary school (third grade of secondary school 28.7 %, and fourth grade of secondary school 24.6 %), but 1.6 % of children first took drugs in the fifth grade of primary school. Drugs were most used in the southern region (4.7 %), somewhat less in the northern region (4.1 %), and least in the central region of the country (3.8 %). Treatment is available on an outpatient basis in 18 health centers across the country and on an inpatient basis in general hospitals, as well as the special psychiatric hospital in Kotor. Hospital treatment for drug overdoses is provided by the Clinical Centre of Montenegro and seven general hospitals across the country. Three outpatient centres provide methadone substitution therapy for people affected by opioid dependence.

Serbia

An estimated 60000-80000 people use drugs in Serbia. The annual prevalence of opiate abuse (WDR 2010 - UNODC) as percentage of the population aged 15-64 is 0.28, cocaine abuse 0.5, cannabis 4.1, amphetamines 0.2 and ecstasy 0.6. In 2011, the second national ESPAD study was conducted with the support of Implementation of the National Strategy of Drug Abuse (INSADA) project funded by the EU. According to the preliminary results, 16.5 % of students reported having consumed some illegal substance at least once in their lifetime, which is not significantly different when compared with the 2008 results (15.1 %). Some 7 % of respondents reported having tried marijuana at least once in their lifetime. Similar to the previous ESPAD surveys, boys report higher prevalence of trying marijuana at least once in the lifetime than girls (9.8 % and 4.7 % respectively). Some 5.6 % of respondents reported marijuana use in the past year and 3.0 % have used cannabis in the last 30 days (4.9 % of boys and 1.5 % of girls). Some 12.8 % of first-grade students reported use of other psychoactive substance than marijuana or hashish. These include the use of sedatives or tranquillisers without doctor's prescription (7.5 % in 2011, 7.6 % in 2008), inhalants (5.3 % in 2011 and 2.9 % in 2008) and combined use of alcohol and pills (2.4 % in 2011, 2.7 % in 2008). Other drugs are used by less than 2 % of students. Drug dependence treatment is available through the network of health care institutions centralised through four regional centres (Belgrade, Nis, Novi Sad and Kragujevac). Each of the regions has secondary or tertiary health care institutions (eg. Belgrade with special hospital for addiction) and is responsible for the coordination of primary health care institutions in their respective regions. Though treatment at the primary health care level is not widely available, the number of cases diagnosed/registered in primary healthcare was 9 63 in 2009, 8454 in 2008 and 8002 in 2007.

UNODC-WHO Programme achievements and UNODC interventions in the Balkan region

Activities in Albania and Serbia were supported since 2010, mainly in the area of capacity development, service support, policy/advocacy and data collection.

In terms of capacity building, through training of relevant experts and practitioners, using the UNODC TREATNET training package and a train the trainers approach, as a result, 300 practitioners were trained in Albania so far and approximately 850 in Serbia.

Support to drug dependence service development is provided through the financial and technical support to services in the health care system in each of the respective countries. A primary health care center in Serbia (Belgrade) received support through the UNODC-WHO programme and the first specialized drug treatment service was supported in Albania, both cases with a view to a more comprehensive treatment service delivery.

With regards to coordination and policy support, specifically tailored policy workshops on topics identified by the national counterparts were held and in some cases resulted in significant policy changes, e.g. the new national drug strategy for Albania or the commitment to provide drug dependence treatment at the primary health care level in Serbia.

Drug dependence treatment and care assessments were conducted in Bosnia and Herzegovina and the Former Yugoslav Republic of Macedonia in collaboration with the UNODC regional programme for South East Europe. Participants from Montenegro, the Former Yugoslav Republic of Macedonia and Bosnia and Herzegovina were already involved in TREATNET trainings conducted in the region. The health care system in Montenegro received multimedia equipment to support the delivery of local training on drug dependence treatment and care and the drafting of the national drug strategy and related action plan was supported technically as well.

National coordination system in Montenegro has been supported by the UNODC assistance in drafting the new national drug strategy framework and related action plan. The lack of a multisectoral /interministerial coordinative working body has been acknowledge and identified as future objective to be achieved. The situation in the Former Yugoslav Republic of Macedonia could be understood as more organized: The Government has already established the Inter-ministerial Commission for Narcotic Drugs with the Bureau of Medicines, Ministry of Health, carrying out the secretarial and national related administrative duties.

The Treatnet quality standards were introduced to participants from 5 South East European countries (Albania, Bosnia and Herzegovina, Montenegro, The Former Yugoslav Republic of Macedonia, and Serbia). The tool will help each country to identify gaps and areas for improvement in the national drug dependence treatment system to enhance the treatment quality.

With clear overview of the needs of the Balkan region, it is important to say that the needs for further improvement are very welcome, especially in the aspect of expansion of treatment services to more comprehensive approach from current pharmacotherapy approach, also, assistance in more efficient coordination of national response to drugs is needed both through strengthening respective coordinative bodies and it's related policies.

Project goal

The UNODC project GLOK32 (UNODC-WHO Programme on Drug Dependence Treatment and Care) segment for the Balkans is **to increase the country's capacity to improve the development of a comprehensive drug dependence treatment and care system and to strengthen the national coordination mechanisms.**

Available information on countries in South East Europe indicates that an approach of integrated and coordinated service delivery is still weak. All countries have established health care institutions where persons affected by drug use could receive elements of drug dependence treatment, but in many cases without additional psychosocial services or continuous support, though drug dependence is a chronic disorder.

A continuum of comprehensive treatment and rehabilitation services for people affected by drug use and dependence, recognizing their individual needs is an effective approach and promoted by UNODC and WHO. Drug dependence cannot be treated in an acute care approach as it is a chronic, biopsychosocial disorder that needs a multisectorial response, including psychological and pharmacological treatment as well as other supportive services such as housing support, vocational training or legal support - all with the ultimate goal of recovery. UNODC is advocating for a one-stop-shop as an integrated model of community-based service delivery that can provide all the service a person affected by drug use and dependence needs in one facility or well-coordinated service network.

National Drug Strategies, relevant coordinating bodies and adoption of technical drug protocols all demonstrate the commitment of a country to seriously address drug demand reduction in a coherent manner, balancing political, systematical and expertise efforts. Strategic documents and protocols for drug dependence treatment, especially when adopted on a national level, can be important ensure the quality of drug treatment and define a goal to which to work towards. The UNODC Treatnet Quality Standards for Drug Dependence Treatment have been developed to support such processes at the national level.

In order to enhance and strengthen the existing systems, all institutions and services working on drug dependence treatment and related areas will need to come together to define a continuum of care approach for each country, supported by activities such as capacity building, establishment of partnerships with the community, public institutions, service partners and people affected by drug use and dependence.

The country level of this proposal is mainly on new programme countries such as Montenegro and The Former Yugoslav Republic of Macedonia, but programme countries Albania and Serbia will be linked with and some activities in these countries still can to be consolidated.

Objectives

With the aim of the project to support the expansion of the comprehensive drug dependence treatment and care and strengthen national coordination system, the following activities for this proposal derive:

1. Advocacy related activities and the coordination and development of evidence based policies on drug dependence treatment and care supported

2. Drug dependence treatment service development and evidence based service delivery supported

3. Capacity building on evidence based drug dependence treatment and care

4. Drug treatment related assessment, data collection, monitoring and evaluation as well as research and the development of technical tools supported

Activities

1. Advocacy related activities and the coordination and development of evidence based policies on drug dependence treatment and care supported

1.1. Establishment of (or support for) a national coordination and expert group

The government of Montenegro with the support of UNODC recently developed a new National Drug Strategy (2013-2020) and Action Plan (2013-2016). Recognizing the needs to have a multisectoral/interministerial approach to the national response to drugs, it is important to have an established coordinative body/mechanism which will enable efficient and sustainable operating mechanism of the respective country. Montenegro has already established a National Office on Drugs within the Ministry of Health, which could receive technical support in the framework of the UNODC-WHO Programme on Drug Dependence Treatment and Care, also to facilitate the discussion towards achieving a balanced approach between supply reduction and demand reduction.

1.2. Development of National Guidelines and Protocols for Comprehensive drug dependence treatment in Montenegro

Standardization and enhancement of the delivery of drug treatment and rehabilitation services is a qualitative contribution to the provision of high-quality, evidence-based drug treatment services for people affected by drug dependence. The development of national treatment protocols will be supported, including through help of international experts and in close cooperation with the new national coordination and expert group. A situation analysis will serve as the baseline for the development of future recommendation. The standards will be closely linked with the standards represented in the region respecting the EU directives.

2. Drug dependence treatment service development and evidence based service delivery supported

2.1 Piloting of evidence-based approaches to improve comprehensive drug dependence treatment and care services

To address current limitations of treatment service delivery in Montenegro and the Former Yugoslav Republic of Macedonia, and with a view to provide a comprehensive package of drug dependence treatment services (including basic social assistance, contingency management, housing, vocational trainings) proposals will be developed at the national and local level and selected proposals will be supported in the framework of the UNODC-WHO Programmed on Drug Dependence Treatment and Care.

3. Capacity building on evidence based drug dependence treatment and care

3.1. Support to implementation of local educational TREATNET trainings in the Albania, Former Yugoslav Republic of Macedonia and Serbia

Using the UNODC TREATNET training package on drug dependence treatment and care, regional experts and practitioners (e.g. staff from polyclinics, hospitals, primary health care professionals and others) will be partners in transferring the knowledge on evidence-based methods and approaches in drug dependence treatment. Trainings will cover the full content of the UNODC Treat net training package (A: Screening and Brief Interventions, B: Psychosocial Treatment, C: Pharmacological Treatment) as well as additional materials from WHO as adequate and feasible. The exact number of trainings will be defined with national counterparts, but during the project implementation no less than 6 trainings per each trainer are envisaged, with minimum of 10 participants per training.

Depending from the national needs and related to the quality assurance and distribution of material and knowledge, national TREATNET experts could be asked to support the “peer review” of the performed local cascade training with the aim to use the findings of the review to enhance the quality of knowledge transfer and distributed material and information.

4. Drug treatment related assessment, data collection, monitoring and evaluation as well as research and the development of technical tools supported

4.1. Assessment of treatment quality standards in Albania, the Former Yugoslav Republic of Macedonia, Montenegro, Serbia

In 2012 UNODC launched the “Treatment quality standards for drug dependence treatment and care services”, suggesting a list of standards for the improvement of quality in drug dependence treatment and care services, as well as provision of an assessment tool for implementation of these quality standards.

Starting with a mapping of the available drug treatment services and a detailed treatment system analysis informed by the Treatnet Quality Standards and other relevant assessment tools, a final report will be produced recognizing the challenges and best practices at country level.

Recommendations will be produced to improve the treatment system and influence coordination of treatment services on a national and local level.

This activity envisaged four countries to be involved in the assessment of treatment quality standards, out of which Serbia has already performed the assessment of two regional treatment centers. This activity will cover all remaining health care centers in Serbia thus the report will present the national valid strategic oriented data, related to the quality of treatment.

Other countries shall be assessed using the assessment methodology presented in the “Treatment quality standards for drug dependence treatment and care services” material, by assessing the treatment (TREATNET) centers or/and available services of the comprehensive drug dependence system.

Treatment quality assessment will be performed with the support of an international expert in close collaboration with local treatment service providers.

5. Monitoring and evaluation and programme support

With the fact that programme is being implemented together with the WHO , great support from the WHO Headquarters and local offices has been provided so far. For the matters where main counterpart is Ministry of Health, WHO is playing a crucial role in providing the quality contacts, experts and facilitating the communication and exchange of information. Together, with UNODC’s roster of experts, this strategic approach presents an excellent support for programme development, evaluation and its implementation.

This project will be evaluated in line with UNODC's evaluation policy and handbook. The evaluation will be managed by UNODC and will be conducted by external evaluators. The type and scope of the evaluation and the resulting types of baseline will be determined according to the objectives of the framework and to the specific objectives.

Partners

UNODC and WHO will be the main implementing agencies of this project, working in close coordination and collaboration with the Governments of the Former Yugoslav Republic of Macedonia, Montenegro, Serbia and Albania, including the Ministry of Health, Ministry of Justice, local community health departments, therapeutic communities, and NGOs.

GLOK32 is the UNODC-WHO Programme on Drug Dependence Treatment and Care and therefore the World Health Organization will be an implementing partner of UNODC and will be involved in some key activities, especially with a view to the mapping of services, policy support, capacity building and the development of technical tools and guidelines.

7. Proposed Budget

Strengthening the comprehensive drug dependence treatment and care system and supporting national coordination							
Objectives	Activity	Country	Description	Unit	Amount	Subtotal	total
1. Advocacy related activities and the coordination and development of evidence based policies on drug dependence treatment and care supported	1.1 Establishment of national coordination and expert group	MNG	Support for the establishment of intersectoral /interministerial Republican drug committee (3 meetings, work plan development, setting the institutional mechanism and ToR, consultant)	lump sum	\$7,000.00	\$7,000.00	\$7,000.00
	1.2 Development of National Guidelines and Protocols for Comprehensive drug dependence treatment		Organisation of the meetings with relevant professionals to discuss /develop treatment protocols	3	\$1,000.00	\$3,000.00	\$10,500.00

			international consultant	1	\$5,000.00	\$5,000.00	
			promotion of standards	1	\$2,500.00	\$2,500.00	
2. Drug dependence treatment service development and evidence based service delivery supported	2.1. Piloting of innovative approach to improve drug dependence treatment and care	MKD, MNG	Open call proposal will be announced for the Governmental institution and NGO where best proposal will be granted for the implementation	2	\$30,000.00	\$60,000.00	\$60,000.00
3. Capacity building on evidence based drug dependence treatment and care	3.1. Support to implementation of local educational TREATNET training	MKD, ALB, SRB	Organisation of the local TREATNET cascade training or peer revision of the material and training performed	3	\$5,000.00	\$15,000.00	\$15,000.00



4. Drug treatment related assessment, data collection, monitoring and evaluation as well as research and the development of technical tools supported	4.1. Assessment of treatment quality standards	MNG, MKD, ALB, SRB	Organisation of meetings , discussion panels, round tables	4	\$3,000.00	\$12,000.00	\$41,600.00	
			Local implementation support	4	\$2,400.00	\$9,600.00		
			International consultants	4	\$5,000.00	\$20,000.00		
5. Monitoring and evaluation	Monitoring and evaluation	Programme management	Independent evaluation of the programme	1	\$4,000.00	\$4,000.00	\$87,138.94	
			Internal monitoring and data collection strategy.	1	\$3,000.00	\$3,000.00		
			NPO Albania	3	\$5,500.00	\$16,500.00		
	programme support		UNODC staff Regional Project officer and project Associate	7	\$7,000.00	\$49,000.00		
			Office costs	6	\$1,100.00	\$6,600.00		
			Travel	lump sum		\$8,038.94		\$8,038.94
			SUBTOTAL				\$221,238.94	
			PSC 13%				\$28,761.06	
			TOTAL				\$250,000.00	
							\$250,000.00	

