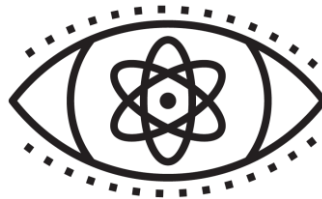


**NEW PSYCHOACTIVE SUBSTANCE USE IN MOLDOVA AND
BELARUS:
RESEARCH RESULTS
FROM THE REPUBLIC OF BELARUS**



School of Law, Swansea University & Eurasian Harm Reduction Association
2019

Contributions

- The School of Law, Swansea University, founded in 1920, is a public research university located in Swansea, Wales. The Swansea University School of Law brings together the disciplines of Law and Criminology in a thriving academic environment, supported by staff with extensive real-world experience. More information is available on the website: <https://www.swansea.ac.uk>
- Eurasian Harm Reduction Association (EHRA) is a non-for-profit public membership-based organisation, registered by the initiative of harm reduction activists and organisations from Central and Eastern Europe and Central Asia (CEECA) in 2017. EHRA's mission is the creation of a favorable environment for sustainable harm reduction programs and decent lives of people who use drugs. More information is on the website: <https://harmreductioneurasia.org/> (Eurasian Harm Reduction Association (EHRA) ©, 2019).
- The Principal Investigator for the overall project was Dr. Rick Lines of the School of Law, and the research methodology was reviewed and approved by the Ethical Review Committee at Swansea University. This report was prepared by Eliza Kurcevič, Senior Program Officer from EHRA.

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- The text of the report in Russian and in English is available on the website: <https://harmreductioneurasia.org/>

Disclosure

- The views and opinion of the author presented in this report may not represent the view and opinion of EHRA and the School of Law, Swansea University.

¹ <https://www.ukri.org/research/global-challenges-research-fund/>

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LIST OF ABBREVIATIONS

Abbreviation	Definition
Administrative Code	The Code of Administrative Offenses of the Republic of Belarus
BYN	Belarus ruble
Criminal Code	The Criminal Code of the Republic of Belarus
EHRA	Eurasian Harm Reduction Association
EUR	Euro
HIV	Human immunodeficiency virus
NPS	New psychoactive substances
OST	Opioid substitution therapy
PWID	People who inject drugs
PWUD	People who use drugs
USD	US dollars

SUMMARY

“New Psychoactive Substance Use in Moldova and Belarus” was undertaken to analyze and determine the presence of new psychoactive substances (NPS) in Belarus and Moldova. Results from this project will supplement scarce international data on the use of NPS in these countries, present a more accurate picture of its use, and provide information to national civil society organizations for political advocacy.

The present report provides research results from Belarus. The study was conducted in partnership between the Eurasian Harm Reduction Association (EHRA) and the School of Law, Swansea University and funded by the Global Challenges Research Fund. The Principal Investigator for the overall project was Dr. Rick Lines of the School of Law, and the research methodology was reviewed and approved by the Ethical Review Committee at Swansea University. This report was prepared by Eliza Kurcevič, Senior Program Officer from EHRA.

The study in Belarus was implemented in two stages:

1. Stage 1:

- Desk research to collect data from the literature. Data sources included official reports, mass media, peer-reviewed publications, literature not indexed in medical databases, and documents from national government and regional/international organizations.
- Preparation of questionnaires for respondents. Respondents included both individuals from the professional environment/state bodies based on the desk research and people who use drugs (PWUD).

2. Stage 2:

- Conducting structured interviews and focus groups with key respondents.

COUNTRY OVERVIEW

The Republic of Belarus is located in Eastern Europe and covers an area of 207,560 km², which is bordered by the Russian Federation, Ukraine, Lithuania, Latvia, and Poland. The population is 9.5 million people, with 1.9 million people located in the capital of Minsk. Belarus's Democracy Index rating² is one of the lowest in Europe, and for the last 25 years Belarus has been run by the same president—Alexander Lukashenko, who is known for his authoritarian style of government. Belarus is divided into six regions: Brest, Gomel, Grodno, Minsk, Mogilev, and Vitebsk. Minsk city has status of special administrative district. Belarus does not have a visa program with the Russian Federation (that is, there is no border and customs control at the border), which makes Belarus attractive for the

² <https://www.eiu.com/topic/democracy-index>

transit of the psychoactive substances from Europe to Russia and from Central Asia through Russia and Belarus to Europe. According to the Ministry of Internal Affairs, the illegal import of the psychoactive substances and its precursors continues to expand into Belarus from the central and north-western regions of Russia.³

The Republic of Belarus has about 7700 people officially registered with drug dependence.⁴ However, estimates show that the number of people who inject drugs (PWID) is much greater, at 66,500.⁵ Since 2007, opioid substitution therapy (OST) programs have been available in the Republic of Belarus. As of January 1, 2019, only 728 patients were on OST,⁶ showing that OST coverage is very low—not reaching even 10%. Among the PWID population, the prevalence of human immunodeficiency virus (HIV) is 30.8%.⁷

The State Narcological Service of the Ministry of Health of the Republic of Belarus includes 28 stationary departments and 26 day-care departments with 437 doctors-psychiatrists-narcologists for adult patients and 82 doctors-psychiatrists-narcologists for adolescent patients.⁸ Non-medical rehabilitation in the country is provided by various public associations, religious denominations, and rehabilitation centers. In Belarus, there are approximately 270 places for the rehabilitation of people with drug dependence.

1. INTRODUCTION

Until 2008, the main psychoactive substances consumed in Belarus have been opiates, made from poppy seeds and poppy straws. During 2008 to 2009, Belarus became flooded with the so-called designer drugs or NPS, such as spices and smoking mixtures. Artificial cannabinoids with various rapidly changing formulas were advertised as legal substances and were freely sold in markets and kiosks. It took some time to add these and their precursors to the official list of narcotic and psychotropic substances in the Republic of Belarus, thus placing them under state control. Other types of NPS and synthetic cathinones later appeared in the drug market, such as “salts,” “crystals,” and “bath salts.” However, the main psychoactive substance used by PWUD remained poppy seeds. After the Decree of the President of the Republic of Belarus No. 1 “On Certain Issues of State

³ <https://www.mvd.gov.by/ru/page/guniptl/narkokontrol/obzor-narkosituacii-v-respublike-za-2018-god>

⁴ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

⁵ https://www.aidsdatahub.org/sites/default/files/publication/UNAIDS_Data_2018.pdf

⁶ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

⁷ https://www.aidsdatahub.org/sites/default/files/publication/UNAIDS_Data_2018.pdf

⁸ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

Regulation of Poppy Seed Traffic” was released in January 2014, poppy products ceased to be as accessible, and 70% of the drug market in 2014 became occupied with NPS. By eliminating “classical” psychoactive substances, the Republic of Belarus opened the “gates” for NPS; NPS became to be perceived as a safer alternative to the regulated illegal psychoactive substances.

NPS became a widespread issue, with almost no response from state and health institutions or harm reduction services. Factors that led to this phenomenon included the following:

- Repressive drug policies: although ‘classic drugs’ (e.g., heroin, opium) became legally prosecuted, NPS has an undefined legal status;
- Low cost: NPS is inexpensive and easily accessible via Darknet and social networks;
- Location of Belarus: its location allows Belarus to be a “transit” country between Europe and Asia, providing a favorable route for NPS into Europe;
- Expansion of research in the field of synthesis of psychoactive substances.

Although NPS have been accessible in the Belarus drug market for more than 10 years, a big gap exists in both empirical research results and scientific literature on NPS. In this study, our goal was to conduct a rapid assessment of the use of NPS, patterns of use, the associated risks, and response measures. This study aims to be the first step in developing a set of measures and interventions to reduce the risks of using NPS, starting with documenting the situation and adapting existing interventions to help people who already use NPS.

For our assessment, we used empirical evidence (Stage 2) and evidence gathered from published and unpublished reports (Stage 1) on epidemiological, sociological, and criminological NPS data. Most of the data gathered on the use of NPS in Belarus was found on the Internet. Government agencies were not eager to cooperate and share data on NPS use in Belarus, and this information is not available on the Internet. Obtained information was thus supplemented with data from national and international specialized literature on drug and NPS use and from specialists and experts in this field, including information gathered directly from people who use NPS.

Thus, this report provides an overview of the phenomenon of drugs and NPS in the Republic of Belarus, trends in NPS use from 2017 to 2019, how NPS is distributed in Belarus, and how Belarus has responded to the harms associated with NPS use, at both a policy level and level of services provided. We conclude this report with recommendations for decision makers and specialists in this field, including recommendations for members of the general public concerned about this issue.

2. THE LEGAL FRAMEWORK FOR THE USE AND TRAFFICKING OF PSYCHOACTIVE SUBSTANCES IN THE REPUBLIC OF BELARUS

In the Republic of Belarus, the main documents that regulate use and trafficking of psychoactive substances (including NPS that have been identified and included in the list of narcotic drugs, psychotropic substances, and their precursors and thus subject to state control) are as follows:

- Decree of the President of the Republic of Belarus, dated December 28, 2014: No. 6 “On urgent measures to counteract drug trafficking”⁹;
- The Code of Administrative Offenses of the Republic of Belarus (Administrative Code);
- The Criminal Code of the Republic of Belarus (Criminal Code);
- The Law of the Republic of Belarus dated July 13, 2012: No. 408-Z “On Narcotic Drugs, Psychotropic Substances, Their Precursors and Analogues”¹⁰;
- Decree of the Ministry of Health of the Republic of Belarus dated February 11, 2015: No. 19 “On the establishment of the republican list of narcotic drugs, psychotropic substances and their precursors subject to state control in the Republic of Belarus.”¹¹

2.1. Administrative Code

The **Administrative Code**¹² includes two related chapters: chapter 16 (administrative offences against population health) and chapter 17 (administrative offenses against public order and public morality). These are applied according to the person who is administratively liable:

- **16.1:** Sowing or growing or cultivation of forbidden plants or mushrooms containing narcotic drugs or psychotropic substances, which can entail a warning or a fine of up to 20 basic units;¹³
- **17.3:** Drinking alcoholic, low alcohol drinks or beer, consumption of narcotic drugs, psychotropic substances or their analogues in a public place or at work while intoxicated, which can entail fine up to 15 basic units.

⁹ http://president.gov.by/ru/official_documents_ru/view/dekret-10535/

¹⁰ https://belzakon.net/Законодательство/Закон_РБ/2012/98

¹¹ <https://do2.vsmu.by/mod/resource/view.php?id=36577>

¹² <http://www.pravo.by/document/?guid=3871&p0=Hk0300194>

¹³ The basic unit is an economic indicator that defines the abstract value of cash purchasing power, which is not associated with the assessment of any specific intangible or tangible goods. As for January 1, 2019, the basic unit is 25.5 Belarusian rubles. 1 Belarusian ruble = 0.48 USD or 0.43 Euro.

For repeated commission of any of above-mentioned actions during the year, a criminal liability can be imposed. Additionally, it should be mentioned that the legal age to apply administrative liability is 16 years old.

2.2. Criminal Code

The Criminal Code¹⁴ Articles 327 to 332 regulate the manufacture, processing, acquisition, storage, transportation, or transfer of psychoactive substances.

In accordance with part 1 of Article 328 of the Criminal Code, “Illegal trafficking of narcotic drugs, psychotropic substances, their precursors and analogues” states that the manufacture, processing, acquisition, storage, transportation, or transfer of narcotic drugs, psychotropic substances, or their precursors or analogues without intent to sell it is punishable by restriction of liberty for a term of up to 5 years or imprisonment for a period of 2 to 5 years.

For illegal manufacture, processing, acquisition, storage, transportation or transfer, or illegal sale of narcotic drugs, psychotropic substances, or their precursors or analogues with intent to sell it, an imprisonment of 3 to 8 years can be imposed (part 2 of Article 328 of the Criminal Code).

On July 23, 2019, President Lukashenko signed the Law “On Amending the Criminal Code of the Republic of Belarus.”¹⁵ This document, *inter alia*, provides for reduced lower limit of punishment for drug trafficking (Article 328 of the Criminal Code). Moreover, the term of imprisonment in part 2 of this Article is set from 3 to 8 years and in part 3 from 6 to 15 years (which were from 5 to 8 and from 8 to 15 years, respectively, before the adoption of the Law). As noted in the President’s press release, “adjustment of the Criminal Code will allow the courts in each case to take a more selective approach to sentencing for crimes related to drug trafficking, taking into account all the circumstances.”¹⁶

The sale of drugs whose consumption resulted in the death of a person is punishable by imprisonment for a term of 12 to 25 years (part 5 of Article 328 of the Criminal Code). This part of the Criminal Code is often applied to people who called an ambulance in cases of fatal overdose. Basically, the only criterion needed to apply this article is drug intoxication of the person who called the ambulance. This is because that person is considered to be the one who sold or shared drugs during the fatal overdose.

¹⁴ <http://etalonline.by/document/?regnum=HK9900275>

¹⁵ http://president.gov.by/ru/news_ru/view/aleksandr-lukashenko-podpisal-zakon-ob-izmenenii-ugolovnogo-kodeksa-21616/

¹⁶ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

The legal age to apply criminal liability can start at 14 years of age for crimes related to theft of narcotic drugs, psychotropic substances, and their precursors and analogues (Article 327 of the Criminal Code). For the crimes mentioned in Articles 328-332, the legal age for criminal liability is 16 years old.

3. ANALYSIS OF DESK RESEARCH ON TRENDS ON USE OF NPS IN THE REPUBLIC OF BELARUS

3.1. Data Related to Drug Law Offences Related to NPS

According to the Ministry of Internal Affairs of the Republic of Belarus, between 2012 and 2014, Belarus experienced a significant increase in drug crimes, an increase in the number of PWUD (primarily spices), and a rejuvenation in NPS use among PWUD. In 2014, drug crimes increased by 46%.¹⁷

After Decree No. 6 “On urgent measures to combat drug trafficking” was signed by the Head of State on December 28, 2014, the situation had stabilized. An integrated approach to solving the drug problem brought tangible results. As reported by the Ministry of Internal Affairs, registered drug crimes from 2014 to 2018 decreased by 1.5 times (from 7300 in 2014 to 4900 in 2018), with crimes committed by minors or with their participation decreasing by almost 5 times (from 466 in 2014 to 97 in 2018). The proportion of drug crimes among statistics of ordinary crimes decreased from 7.8% in 2014 to 5.9% in 2018.¹⁸ However, it should be said that this decrease could have occurred because “classical” drugs (such as heroin and opiates) were eliminated and because NPS then became a legal alternative to illegal drugs.

During the first 9 months of 2019, there were more than 3500 registered drug crimes.¹⁹ This resulted in 541 administrative protocols drawn up for committing administrative offenses in the field of drug law offences (provided in parts 4-6 of Article 17.3 of the Administrative Code). During this time, 22 criminal cases were opened for repeated use of drugs in a public place or appearing in a public place or being at work in a state of drug intoxication (part 2 of Article 328 of the Criminal Code).²⁰

Interior Ministry spokesman Gennady Kazakevich, at a round table discussion at the Sputnik Belarus press center, noted that at the beginning of 2019 there were 5984 people in prison who were convicted for drug trafficking, with 93 committing these crimes

¹⁷ Ibid.

¹⁸ Ibid.

¹⁹ <https://www.mvd.gov.by/ru/page/guniptl/narkokontrol>

²⁰ Ibid.

as minors. According to the Ministry of Internal Affairs, 20% of convicted people serve imprisonment for possession of drugs without a purpose to sell it (part 1 of Article 328 of the Criminal Code).²¹

The General Prosecutor's Office of the Republic of Belarus reported that, in 2018, seized drugs totaled 883 kg. The largest share was hash (59%), marijuana (33%), and poppy straw (7%). During the first 9 months of 2019, 330 kg of narcotic drugs and 60 kg of psychotropic substances were seized.²² However, these data did not include information on NPS, presumably because NPS are hard to identify and confiscate.

Other statistics showed that 20 drug supply channels to the Republic from abroad, as well as transit traffic, were identified and closed. During this time, 47 crimes related to the movement of drugs and psychotropics across the state border of the Republic of Belarus were registered (part 1 of Article 328 of the Criminal Code).²³

Information on the structure of the drug market (according to the General Directorate for Drug Control and Anti-Trafficking in Persons of the Ministry of Internal Affairs of Belarus) for 2017 is available on the SPUTNIK website.²⁴ The following rates of drugs on the market are shown:

- **NPS = 40%**
- Marijuana = 30%
- Opiates = 10%
- Other = 20%

3.2. Data Related to the Use of Psychoactive Substances, Including NPS

In 2018, the total number of registered patients with drug dependence, people with substance use disorder, and people who use psychoactive substances amounted to about 13,700 people. The largest number of patients was in Minsk (about 5300 people), and the smallest was in the Mogilev region (about 900 people). The total number of people with drug dependence amounted to 7700 people. According to reports from operational departments, as of July 1, 2019, 7600 patients with drug dependence and 5100 patients under preventive supervision in connection with the use of psychoactive substances, which have harmful consequences, were under dispensary observation of narcological

²¹ <https://news.tut.by/society/639765.html>

²² Ibid.

<http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

²³ <https://www.mvd.gov.by/ru/page/guniptl/narkokontrol>

²⁴ <https://sputnik.by/society/20171128/1032154122/narkokontrol-otvetil-materiyam-328.html>

services, although these patients did not display clinical manifestations of drug use disorders.

With the raising issue of NPS, in 2018 less patients were registered as having substance use disorder, than in 2016 (in 2016 – 679 new patients, in 2018 – 439 new patients).²⁵ This can be related to the issue that people started to use NPS but NPS use itself is accompanied by clinical manifestations that are not identified in Clinical Protocols in Belarus. Thus, from one point of view, it appears that the number of new patients has decreased; however, from another point of view, we do not know how many people are seeking help because of NPS use.

With regard to demographic factors, among registered patients with substance use disorder, women make up 17.38% (2400 women). Most people who used psychoactive substances were from 26 to 30 years old (3200 people; 23.07%), 31 to 35 years old (22%), and 21 to 25 years old (20%).²⁶ These numbers show rejuvenation of the key group. Of these patients, 34% had criminal records related to the drug law offences.²⁷

As of January 1, 2019, there were 7700 people with substance use disorder in the Republic of Belarus, with 4740 (61.6%) being opiate users. The other 38.4% presumably could have also included those with NPS use disorder.

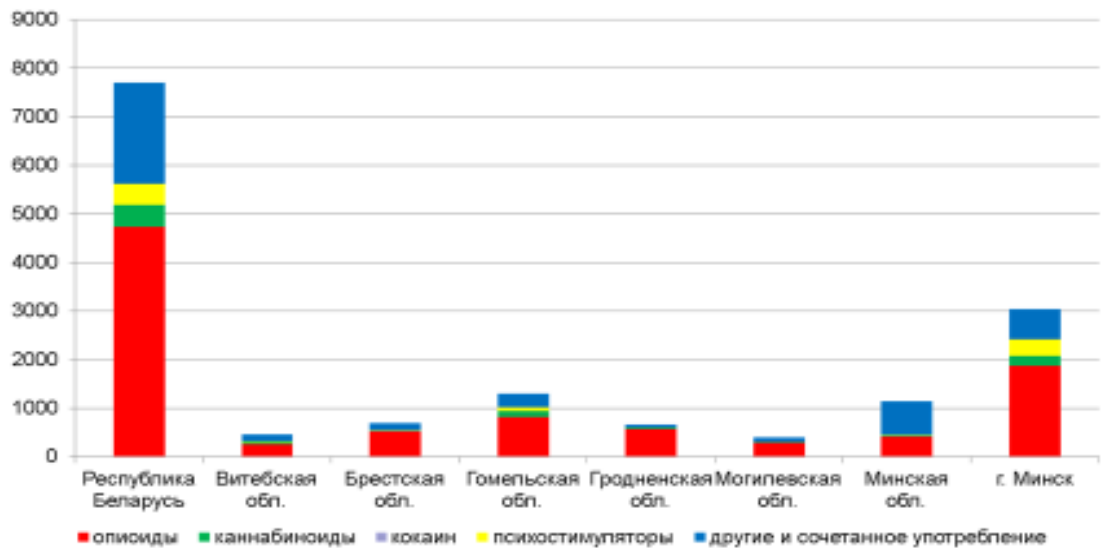
In their analysis, the Republican Scientific-Practical Center of Mental Health has divided psychoactive substances into 5 categories for patients under dispensary observation: opioids, cannabinoids, cocaine, psychostimulants, and other drugs and their combinations. As shown in **Figure 1**, most of the psychoactive substances identified were opiates, with the second and third categories being psychostimulants and cannabinoids. NPS can fall under these two categories, as there are no tests to identify NPS and because of their effect (that is, either as a psychostimulant or cannabinoid). Other drugs and their combinations, the fourth greatest category, could have also included NPS.

²⁵ <http://minzdrav.gov.by/ru/dlya-spetsialistov/statisticheskaya-otchetnost/formy-gosudarstvennoy-statisticheskoy-otchetnosti.php>

²⁶ Ibid.

²⁷ Ibid.

Figure 1. Use of Psychoactive Substances Among People Under the Dispensary Observation as of January 1, 2019



Data from Republican Scientific-Practical Center of Mental Health). Cannabinoids = green; Cocaine = purple; Opiates = red; Other drugs and their combinations = blue; Psychostimulants = yellow.

One of few resources accessible on NPS use in the Republic of Belarus is the 2017 report, “Behavioral Features and Level of Knowledge on HIV/AIDS Among People Who Inject Drugs.” This study was conducted jointly by the Global Fund Principal Grant Recipient-the Republican Scientific and Practical Center of Medical Technologies, Information, Management and Economics of Public Health and non-governmental organizations and health organizations that provide harm reduction programs for PWUD.

The study was conducted in 6 cities (Gomel, Minsk, Pinsk, Polotsk, Sviatlahorsk, and Salihorsk), As shown in **Table 1**, the most commonly used drugs among PWID in the last 30 days were as follows:

- Home-made opiates (from poppy seeds and brew of poppy straws): used by an average of 77% of respondents in the last 30 days;
- Psychostimulants (**including salts**): used by average of 34% of respondents;
- Cannabis: used by average of 21% of respondents;
- Heroin: used by average of 13% of respondents;
- Smoking mixtures (**spices**): used by average of 11% of respondents;
- Street methadone: used by average 9.3% of respondents.

Table 1. Which Drugs Did You Use in the Last 30 Days?

City	Number of Respondents	Percent	95% Confidence Interval	
			Lower Limit (%)	Upper Limit (%)
Gomel (N = 360)				
Home-made opiates (from poppy seeds and brew of poppy straws)	301	82.6	77.6	87.5
Heroin	44	11.4	8.2	14.7
Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	123	33.0	27.4	38.6
Street methadone	32	9.0	5.3	12.8
Smoking mixtures (spices)	87	23.2	18.5	27.9
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	154	42.5	37.0	47.9
Other	7	1.7	0.5	2.9
Minsk (N = 400)				
Home-made opiates (from poppy seeds and brew of poppy straws)	288	70.3	63.4	77.2
Heroin	71	16.5	12.0	21.0
Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	196	45.8	39.5	52.1
Street methadone	82	18.0	13.3	22.8
Smoking mixtures (spices)	84	25.5	19.4	31.7
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	123	35.7	28.8	42.6
Other	23	6.4	3.3	9.6
Pinsk (N = 290)				
Home-made opiates (from poppy seeds and brew of poppy straws)	283	98.6	97.3	99.8
Heroin	3	0.8	0.0	1.7

Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	26	7.4	4.1	10.6
Street methadone	1	0.1	0.0	0.2
Smoking mixtures (spices)	3	0.4	0.0	0.9
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	11	3.4	1.5	5.3
Other	1	0.1	0.0	0.2
Polotsk (N = 215)				
Home-made opiates (from poppy seeds and brew of poppy straws)	127	57.8	50.7	65.0
Heroin	4	1.1	0.2	2.1
Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	108	52.2	44.1	60.4
Street methadone	-	-	-	-
Smoking mixtures (spices)	-	-	-	-
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	-	-	-	-
Other	-	-	-	-
Svietlahorsk (N = 160)				
Home-made opiates (from poppy seeds and brew of poppy straws)	154	96.3	93.5	99.1
Heroin	77	46.8	39.3	54.3
Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	46	27.1	19.8	34.3
Street methadone	16	8.9	4.4	13.4
Smoking mixtures (spices)	21	13.9	7.9	19.9
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	72	45.3	37.7	52.9
Other	1	0.5	0.0	1.5
Salihorsk (N = 235)				

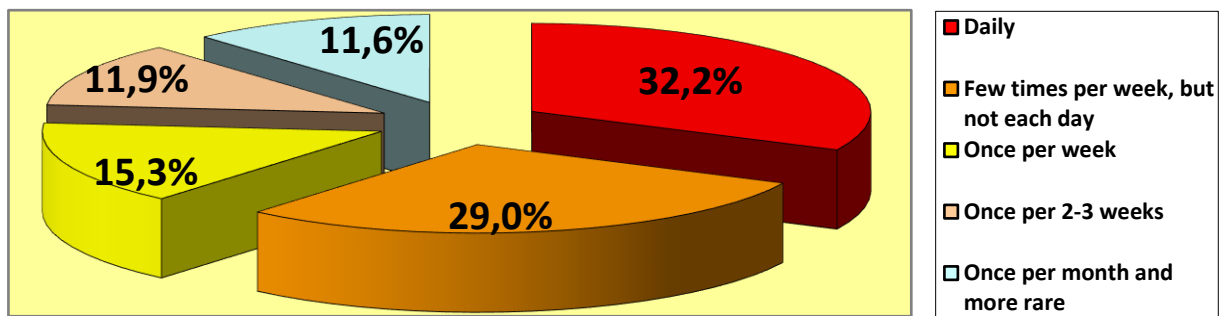
Home-made opiates (from poppy seeds and brew of poppy straws)	125	53.7	46.4	61.1
Heroin	11	4.1	1.3	6.9
Psychostimulants (“jeff,” “ephedrine,” “speed,” “vint,” “ice,” “salts,” “crystals”)	92	40.3	32.4	48.1
Street methadone	48	19.8	14.2	25.4
Smoking mixtures (spices)	-	-	-	-
Smoked cannabis plants (anasha, hashish, marijuana, “plan,” “weed,” “drape,” “shmal,” “cone”)	7	2.0	0,3	3.6
Other	-	-	-	-

From the 2017 report on the study “Behavioral Features and Level of Knowledge on HIV / AIDS Among People Who Inject Drugs.”

The same study analyzed the frequency of injected drugs (

Figure 2), which was shown to vary across cities. The greatest number of PWID on a daily basis was reported in the city of Gomel (49.6%), the city of Pinsk (39.2%), and the city of Minsk (37.9%). In Polotsk, daily use was only reported in 2 PWID (0.7%); however, use of several times per week was reported in 96% of PWID (see Appendix 1 to the report).

Figure 2. Frequency of Injected Drugs in 6 Cities of Belarus



From “Behavioral Features and Level of Knowledge on HIV/AIDS Among People Who Inject Drugs”; 2017 report.

3.3. July 2019 Survey on NPS in the Republic of Belarus

The newest information on NPS use in the Republic of Belarus is from a July 2019 survey of stationary and mobile clients and employees involved in drug use (see Appendix 2). The survey, which was conducted in 8 cities, showed that, among stationary and mobile clients, NPS is a widespread issue and that people who were using opiates are increasing their use of NPS. The survey also showed that rates of use of NPS versus opiates were season dependent. During the poppy growth season, when opiates are more plentiful, people prefer to use opiates. Of note, during the off-season of poppy growth, people who were using opiates started to consume alcohol and to mix different psychoactive substances. NPS are mostly used in groups of 3 to 5 people, and the dosage per day varies from 2 or 3 to 30 dosages (per person).

In terms of drug paraphernalia, the most requested tools were 1- to 5-mL syringes, in amounts of 10 to 20 to allow sharing among groups. Also requested were needles of different sizes and alcohol wipes. Data from the report are summarized below.

3.3.1. *Svietlahorsk (results from the stationary point)*

The survey showed that the predominant psychoactive substances were synthetic drugs (salts, speed, and “*sabaka*” [dog in English]), which made up more than 90% of drugs used in Svetlahorsk city. Poppy and street methadone were not common and mainly used by people who had long-term use of psychoactive substances. Syringes distributed were 1- to 5-mL capacity and, according to respondents, met the needs of PWUD. Salts were used by groups of 3 or 4 to 10 people, mainly because of cost, especially among younger ages. People who have experience in drug use most often use psychoactive substances alone or in smaller groups.

3.3.2. *Svietlahorsk (results from the mobile point)*

The psychoactive substances used depended on the season. However, most psychoactive substances used included synthetic drugs and their analogues (90%). The most common were the so-called “salts,” in particular “alpha-PVP” and its more expensive analogue “mephedrone.” Svetlahorsk city is close to the border of Russia, where drugs are smuggled in. Currently, there were some issues with supply of drugs in Svetlahorsk, which is why people travel to Gomel, Rechytsa, and Zhlobin to buy salts. According to the survey, if a person cannot afford to travel to another city to buy drugs, that individual will start to use alcohol. This leads to the mixing of drugs (that is, along with the use of “illegal” psychoactive substances, the person also drinks alcohol). As stated in Appendix No. 2 to the report, “The popularity of synthetic drugs is caused by high tolerance. The maximum dose of concentration is characteristic of “salts,” after which a smaller dose does not affect the client and does not bring him/her into a state of euphoria, which is confirmed by the frequency of injections.” The report showed that approximately 10 to 30 injections per day

were made, with the average age of people who use salts of 22 years old and older. In general, more and more people who were using opiates had started to use salts.

According to respondents who were outreach workers, only around 10% to 15% of the total number of PWUD use opiates. During the opium growing season, the number of people who use multiple drugs has increased.

3.3.3. Salihorsk (results from the stationary point)

Synthetic psychoactive substances predominate in Salihorsk; more than 90% of people who use these substances use synthetic psychostimulants. “Salts” and “speed” were the most mentioned substances in the survey. It is easy to access these (on the Darknet and through local drug dealers), and people prefer these because of the speed of the onset of drug intoxication. Respondents stated that people use these drugs in groups, either in apartments or in summer houses.

Of note, salts were not popular among people with drug dependence or who have long experience of drug use. It was found that this population preferred to use plant-based drugs, such as poppy seeds and poppy straws. The most requested drug paraphernalia in the stationary point were small capacity syringes (1 to 5 mL).

3.3.4. Lida (results from the stationary point)

The most consumed psychoactive substances in the city of Lida and Lida region included synthetic drugs (“alpha-PVP,” “mephedrone,” “salts,” “speed,” and “crystal”). These substances were mainly purchased in Minsk, Grodno, or via the Darknet (through “bookmarks”). Approximately 70% of consumed drugs were synthetic drugs; however, use was season dependent, with lower use in the summer because of greater availability of poppies. These numbers could increase in other seasons because of impossibility to obtain poppies. Among respondents, drugs were consumed from 2 to 15 times per day. The prevalence of HIV infection was greater among those who used salts. Salts can increase sexual desire and activity, resulting in unprotected sex. Thus, in Lida, there were increased cases of HIV transmission through sexual behaviors because of use of salts.

Most respondents expressed the need for an additional amounts of alcohol wipes (currently 1 package per syringe is distributed).

It is noted that, of all PWID, 10% to 15% were those who use opioids. During the poppy season, people who use opioids use home-made opiates, which they can get for free (collecting poppy milk in gardens). After the poppy season, most people start to consume alcohol. Recently, there have been more people who are polydrug users because people who use opioids have started to use salts together with opium.

3.3.5. Baranavichy (results from the stationary point)

In the city of Baranavichy and its district, the most consumed psychoactive substances were synthetic drugs (60%), primarily “alpha-PVP.” The survey showed that these

substances were purchased in Minsk and via the Internet (through bookmarks). The survey showed that 5 to 7 people use synthetic drugs at the same time.

The rate of opiate use was 40% (poppy seeds and straws), with predominant use during the poppy season (from June to end of October) and with groups of up to 5 people using opiates together. After poppy season, synthetic drugs predominated; however, many people who used opiates consumed alcohol or other accessible, inexpensive opiates.

3.3.6. Pinsk-Drahichyn (results from the stationary and mobile points)

The most consumed psychoactive substances in the cities of Pinsk and Drahichyn were synthetic drugs (such as “alpha-PVP” and “mephedrone”) at 70%.

The remaining percent (30%) were people who use opiates, although this again depended on the season, with the rate of 30% becoming less when the season ended. Other results showed polydrug use among people who use psychoactive substances, and people used drugs in groups of 4 or 5 because of lower cost and technical ease.

3.3.7. Polotsk (results from the stationary point)

The report showed that 80% of synthetic drug use occurred after poppy season, with opioid use greatly increasing during the season. These results were also dependent on supplies in the local drug market (mostly with regard to availability of poppy and poppy derivatives). Other results showed that people used drugs in groups of 3 to 5 because of lower cost and technical ease. In the micro-districts of Polotsk (Gromy, Novka, Lazovka), there are many Roma community groups. This particular group was shown to use drugs in group of 10 to 15 people.

3.3.8. Mazyr (results from the stationary and mobile points)

The structure of psychoactive substances that were used in this region was determined by market supply. In Mazyr, drug use is mainly represented by synthetic drugs (“alpha-PVP” and “mephedrone”) at 60% and opioids at 40%. Drugs are sold through the Internet (bookmarks). Use of synthetic substances was mainly by young people because of the low price and its availability through the Darknet. People who had longer drug use mostly used opiates.

3.3.9. Gomel (results from the stationary and mobile points)

According to the survey, synthetic drug consumption equaled 50% and opioids equaled 50%. However, there was a tendency for increased use of synthetic amphetamine-type stimulants in Gomel (mainly “mephedrone” and its derivatives and “alpha-PVP”). The study reported polydrug use among PWUD and drug use in groups of 2 to 5 people. Synthetic drugs took over the drug market because they became more available and much harder to detect with regard to medical or law enforcement investigations. More people who were users of opiates were now starting to use synthetic drugs.

4. STRUCTURED INTERVIEWS WITH SPECIALISTS WORKING IN MEDICAL INSTITUTIONS AND ORGANIZATIONS PROVIDING HARM REDUCTION SERVICES FOR PWUD AND FOCUS GROUPS WITH PWUD ON DISTRIBUTION AND PATTERNS OF NPS USE

Stage 2 of the research involved gathering data and additional information to fill in gaps identified in the desk study (Stage 1) through structured interviews, organized with health sector representatives, including a psychologist from a Minsk health institution and a doctor from Mogilev. In addition, one interview was conducted with a harm reduction service provider from the organization “Positive Movement.” Furthermore, 11 interviews were organized with PWUD community representatives, including people who use NPS.

The approach used in Stage 2 was designed to guarantee a high level of participation of all important parties; therefore, we paid special attention to ethical issues such as confidentiality and voluntary participation. Representatives from law enforcement institutions, as well from government, did not agree to participate in the research and share their information. Before interviews were conducted, consultants received written informed consent from respondents to ensure their voluntary participation. Stage 2 was conducted from September 3 to September 16, 2019.

Key topics explored in the interviews and focus groups included the following:

- NPS characteristics;
- Usage patterns;
- Impact, risks, and consequences of use of NPS;
- Harm reduction services and NPS;
- Overdoses and possible responses;
- Law enforcement and NPS;
- Difficulties and problems associated with NPS; and
- Possible ways to overcome difficulties and problems with NPS.

All interviews and focus groups were conducted in Russian language.

4.1. Key Data Collected

Most participants in Stage 2 were familiar with the use of NPS in Belarus. Focus group participants, representing the PWUD community, were active users of NPS at the time the research was done and/or knew people who use NPS. As the most relevant topic, all participants mentioned risks and consequences of use of NPS, including overdoses and

fear to call the ambulance during overdoses because of repressive drug policies. The NPS used in Belarus are mainly divided into two groups with the following slang names: salts and spices.

The most common slang names of salts are as follows:

- Alpha-PVP (available various colors);
- “Sabaka” (which means “dog” in English);
- Mephedrone (also called “Mefer”);
- “Black mamba”; and
- “Dosia,” “Daska,” “Kedy,” “Krasofki,” “Skorost,” and “Speed” (names for amphetamine-type substances).

The most common slang names of spices are as follows:

- Smoking mixtures,
- “Ligalka” and “Liga,” and
- “Ximlo.”

According to results gathered from focus group discussions and interviews, the use of NPS in Belarus has been increasing and is becoming a primary challenge in the health care area. After they first appeared in 2008 to 2009, synthetic drugs started to spread massively, taking over and transforming the drug market. The first spice products that appeared in Belarus were different types of powder mixed with herbs. One participant noted that, 10 years ago, it was possible to make 7 grams of spice from 1 gram of reagent; however, presently, the same 1 gram of reagent can make approximately 30 to 40 grams of spice. This proves that reagents are strong and that more mixed substances can be made, which also poses health concerns (such as overdoses) and a fast-growing tolerance for spice.

Although the special decree in 2014 (No. 6 “On urgent measures to combat drug trafficking”) was signed by the Head of Government, no significant decrease of NPS in Belarus occurred. New chemical formulas were created and spread via the Darknet, and people continued to use NPS with more unknown and more dangerous formulas.

The low price of NPS has been a main factor to attract people to use NPS, especially among young people, who financially cannot buy “classic” drugs, which are sometimes 5 to 10 times more expensive than NPS. These new chemicals are also easy to access, and they are less likely to be detected during analyses/examinations, implying a less likely chance of applying penalties for their use. Ten years ago, it was easy to buy NPS in markets and kiosks; now people can obtain them easily on the Darknet through social media connections. Almost all focus group participants representing the PWUD and health professionals mentioned that the main reason for the growing number of people who use NPS is that “classical” drugs (such as heroin, opium, hashish, and

cannabis) have been banned and eliminated from the drug market and almost impossible to obtain. However, respondents who were PWUD mentioned that they would prefer to use “classical” drugs, with NPS used as a temporary substitute for illicit or inaccessible drugs.

When asked whether users of NPS are new users or whether they have switched from use of other substances, most respondents said that they are used equally by people who have never used any substances and people who already use drugs, especially with regard to younger users and people who use spice. With regard to PWID, salts are becoming the primary injected drugs due to its accessibility and low price. However, injection of NPS is more likely to occur among PWID who have previously injected other opioids. Most participants confirmed that NPS are used together with some other drugs; that is, polydrug use is common among people who use NPS.

Because we did not conduct an interview with a narcologist, it is hard to evaluate whether NPS are listed according their clinical manifestations as a separate category of drugs or whether they are assigned to the cannabis or amphetamine group (as done in the Republic of Moldova). However, an analysis from the Republican Scientific and Practical Center for Mental Health of the Republic of Belarus showed that substances for people who are on the narcology registry were divided into five types: opiates, cannabinoids, cocaine, psychostimulants, and other psychoactive substances. This infers that, if NPS was identified, it would be categorized under one of these five types. Approximately 2000 people who are under the medical supervision are using “other psychoactive substances,” which possibly can include NPS.

4.2. Ways to Purchase NPS

According to the information received from Stage 2 participants, in particular from the community of PWUD, NPS in Belarus are mainly sold through Darknet drug markets (e.g., “Hydra,” “Koncern Kalashnikov,” and “Zubr”). The “offers” show a list of substances, and prices are published there. Focus group participants mentioned that they sometimes randomly receive messages on social media and may be added into temporary working groups/pages. Furthermore, websites are promoted in the streets of Belarus, by painting website addresses on walls.

Focus group participants unanimously agreed that the number of new Darknet platforms has increased each day. Some participants said that, in the “Telegram” application, they are receiving Listservs from Darknet shops, even though they are not members of it. This information contains details on where and what kind of substances can be purchased.

Respondents noted that it takes an average of 1 to 5 hours to get and use purchased psychoactive substance. A person simply chooses a substance and desired quantity and places an order. Afterward, the person needs to transfer the amount of

money to the administrator's bank account. Usually money is transferred via ATMs. After payment is made, a photo of the terminal screen or a check serves as a confirmation of payment. Shortly after payment, the person receives an address with a photo of the place (a "bookmark") where the requested drug can be collected. Some online store administrators send coordinates with location and picture indicating the placement of the drug. Bookmarks are usually prepared not by the administrator but by the hired person, who is called a "miner."

Along with the ability to buy NPS via the Darknet, it is also possible to buy the so-called "constructors," which are legal chemical components from which users can make some potent and toxic NPS by using step-by-step instruction provided by the seller.

The newest circumvention of laws is the availability of pre-workout supplements and fat-burning tablets from online sport shops, which have a strong effect similar to alpha-PVP. The cost for 44 capsules ranges from 25 to 50 US dollars (USD).

Buying NPS via the Darknet can pose some risks from law enforcement:

1. Law enforcement agencies can create fake Darknet pages and arrest a person who is looking for the NPS. Some interviewees noted that police use violence against people during arrest.
2. If a person is stopped and searched in the street and the police find a bank receipt with confirmation of payment, they can interpret it as justification for arrest of purchasing NPS.
3. After a person has paid for the "bookmark" in the electronic wallet, he/she can be taken into investigation by law enforcement agencies, with further persecution to obtain access to dealers. If a person refuses to give testimony, she/he can be beaten by the police.

According to the Ministry of Information of the Republic of Belarus, in 2015 to 2019, upon notification of the Ministry of Internal Affairs, 558 information resources on the Internet were banned or closed because of dissemination of information with the purpose to sell drugs.²⁸ From January to September 2019, the Ministry of Information of the Republic of Belarus received requests to ban or close 399 websites and 4 videos on YouTube that contained messages or materials related to drug trafficking.²⁹

²⁸ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

²⁹ <https://mvd.gov.by/ru/page/guniptl/narkokontrol>

4.3. NPS Prices

- 1 gram of salts such as “Sabaka” or “alpha-PVP” costs approximately 100 Belarus ruble (BYN), which is approximately 50 USD or 45 Euros (EUR). The more is purchased, the cheaper it is.
- 1 gram of salts such as “mephedrone” is more expensive. It can cost from 100 to 200 BYN, which is approximately 50 to 100 USD or 45 to 90 EUR.
- 1 gram of spice costs 20 to 24 BYN, which is approximately 10 to 12 USD or 9 to 11 EUR.

4.4. Dosages

Focus group participants shared their experience about dosages of NPS. Depending on the drug and its quality, daily dosage can vary greatly. The used dosage can also vary depending on the level of tolerance developed for the particular drug.

For example, from 1 gram of salts such as “alpha-PVP” and “Sabaka,” an average of 20 to 25 injections can be made per night. Usually two or more people use together; therefore, the total varies from 10 to 15 injections per night/per person.

From 1 gram of “mephedrone,” it is possible to prepare 3 to 4 injections. The effects of mephedrone are short; therefore, greater and higher frequencies of injections are desired.

“Toler” is a term used to describe growing tolerance of NPS use in 5 days. That is, if 0.5 gram of NPS was used on the first day, 2.5 grams would be needed on the fifth day.

4.5. Ways to Use NPS

The most common ways that people use NPS include the following:

- Injecting (both intravenous and intermuscular),
- Smoking,
- Sniffing,
- Inhaling,
- Rubbing over the gums, and
- Swallowing.

Salts such as “alpha-PVP” and “Sabaka” are mostly used by intravenous injection and rarely by intermuscular injection. Some respondents stated that these substances can also be smoked, sniffed, inhaled, rubbed over the gums, and swallowed (usually by mixing with alcohol). Some participants stated that people start to use salts by sniffing it or rubbing over the gums. Once the person understands the effect, they start to inject it, as the effects are stronger with injections.

Sabaka and “mephedrone” can also be smoked. In Belarus, there are no safe smoking kits with pipes; people may use light bulbs from housing staircases as pipes to smoke substances.

Use of spices is only by smoking.

4.6. Key Risks and Consequences Associated With NPS

According to respondents, most risks and consequences associated with use of NPS are of a psychological nature:

- Paranoia (more than half of interviewees mentioned police as an object of paranoia),
- Hallucinations (seeing scary non-existent beings and creatures),
- Panic attacks,
- Psychosis,
- Schizophrenia,
- Losing mind,
- Inadequacy,
- Suicidal thoughts, and
- Aggressiveness.

Focus group participants stated that they knew cases of people jumping out of windows because they thought they could fly. There have been several cases of people who use NPS who killed their partners because they thought that their partners were unfaithful.

Physiological risks and consequences were also mentioned by focus groups participants:

- Eye-gouging;
- Motor disorders (i.e., one leg is walking, another is dragging and shaking);
- Overdoses;
- Clogged veins, causing rotting fingers and body;
- Heart attacks and strokes;
- Pulmonary fibrosis;
- Kidney failure;
- High blood pressure;
- Toxic endocarditis; and
- Tiredness and lack of sleep.

Almost all interviewees mentioned an increase in unprotected sexual contacts, usually with more than one partner at the same time (including swinger-type sex, as well

having sex with a same-sex partner, even though this type of sex was not practiced previously).

Hepatitis C and HIV were also mentioned among the risks related to NPS. Usually, during a night-long drug use marathon, people can inject from 10 to 15 injections per night per person, inferring the risk of shared needles and syringes and increased risk of HIV and hepatitis C infections. Furthermore, unprotected sex can put person in risks of getting infected with HIV.

One focus group participant mentioned physical violence and psychological pressure as a risk related to attitudes of police toward people who use drugs.

4.7. NPS Overdose and First Aid

According to the State Judicial Expertise Committee of the Republic of Belarus, in 2018, poisoning with narcotic drugs and psychotropic substances caused 30 deaths (with 15 deaths in the first half of 2019).³⁰ The total number of drug overdoses increased from 141 in 2018 to 166 during the first half of 2019. Overdoses in adolescents decreased by 2 times: from 6 drug overdoses in 2018 to 3 overdoses in the first half of 2019.³¹

The focus group identified the following symptoms of NPS overdose:

- Hard to breath (lung failure),
- Increased heart rate,
- Heart stops functioning,
- Choking,
- Sweating,
- Veins are “coming out,”
- Blood pressure is rising,
- Skin is getting gray,
- Body temperature has increased,
- Panic attacks, and
- Dilated pupils.

With regard to overdose, most respondents answered that they would like to call an ambulance but in most of the cases they do not. This is because of repressive drug policies in Belarus, where, in cases of fatal overdose, a person who calls the ambulance can be prosecuted from 12 to 25 years of imprisonment. Article 328 (5) of the Criminal Code states, “The actions provided for in paragraphs 2–4 of this article (*authors note: selling, distributing*), which, through negligence, entailed the death of a person as a result

³⁰ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

³¹ <http://brest-region.gov.by/index.php/obshchestvo/k-edinomu-dnyu-informirovaniya/9875-avgust-2019-profilaktika-narkomanii-v-respublike-belarus>

of the use of narcotic drugs, psychotropic substances or their analogues, shall be punishable by deprivation of liberty for a term of twelve to twenty-five years with or without a fine.”³² Therefore, for a person who calls an ambulance and who has not been distributing drugs, Belarus police can interpret the presence of that person at the incident site as fact that the person is related to the crime (for cases when the caller is intoxicated with psychoactive substances).

The most common responses used by the community of PWUD for overdoses include the following:

- Artificial respiration,
- Mixing sugar with water and giving to drink,
- In case of psychosis – to calm down person (even to tie down for some time),
- To stay with the person in case of panic attack or paranoia,
- To sprinkle with water, and
- To open (cut) veins and let the blood get out to lower blood pressure.

For this question, all respondents unanimously expressed their misgivings that they do not have any medically tested information on what to do in case of overdose of NPS. What is more, respondents from the health institutions also could not give any information on what should be done in cases of NPS overdose, aside from calling an ambulance and doing artificial respiration. Health professionals, as well as the community of PWUD, had lack of knowledge on responding to overdoses on NPS. Psychologist from one of the Minsk hospitals stated that there are no trainings for NPS overdoses.

4.8. Harm Reduction and Support Services for People Who Use NPS

Focus group participants agreed that existing harm reduction services do not correspond to the new drugs trends in Belarus. It is not enough just to get clean needles and syringes and distribute condoms. There should be a more complex approach to the NPS phenomenon. Participant suggestions for the full spectrum of harm reduction for NPS users included the following:

- Needle and syringe exchange (different size needles);
- Condoms distribution;
- Syringes of different colors (in case few people are using in the same place, so everybody will know which syringe belongs to the user);
- Disinfectants;
- Wound care kits;
- More alcohol swabs;
- Vending machines with safe injection kits;

³² <http://etalonline.by/document/?regnum=HK9900275> (Art. 328(5))

- Laser to detect veins;
- More information (leaflets, booklets on different NPS, risks and safer use, as well information on overdose and treatment);
- Pipes for smoking;
- Psychological help and support;
- Organization of training methods for narcologists and emergency doctors on NPS (overdose, treatment, etc.); and
- More strong cooperation among NGOs and health services.

Some focus group participants mentioned that narcologists lack knowledge on how to treat NPS use disorders and prescribed the same medications as for people who use opioids.

Some participants stated that they are not using harm reduction services because they believe there is lack of anonymity and confidentiality and that their names can end up in the hands of law enforcement agencies. In these cases, people are going to pharmacies and buying injection equipment themselves.

4.9. Challenges With the Study

The study was conducted according to the methodology developed by the EHRA and the Principal Investigator from the School of Law, Swansea University. The main difficulties were related to the availability of information. First, it was difficult to find any scientific information on NPS in the Republic of Belarus from open sources (Internet or literature searches). Second, few data have been gathered on NPS issues. What is more, such information to a large extent does not exist or is not reflected in statistics due to the undefined status of these substances.

Data from various sources that are currently available in the Republic of Belarus have differences in content and thus are not always comparable.

One of the biggest challenges was the inability to conduct interviews with key respondents from law enforcement and health care institutions. Law enforcement agencies did not give consent to interviews even though an official request was sent to the agencies. Only two interviews with health care professionals were conducted. However, these two specialists were not closely familiar with NPS issues. Other health care professionals (such as narcologists and psychiatrists), who were invited to participate in the interviews, refused to participate in the research and share their insights.

5. GENERAL CONCLUSIONS AND RECOMMENDATIONS

- The main factors that have driven the emergence of NPS include repressive drug policies, which ban “classic drugs”; lower cost and easier access to NPS; and the fact that Belarus is a transit country between Europe and Asia, from where many

psychoactive substances are transferred. It is necessary to review existing drug policies and redesign these based on human rights, health, and evidence-based research.

- Existing drug laws and policies are not proportional; that is, legal age to apply criminal liability starts at 14 years for crimes related to theft of narcotic drugs, psychotropic substances, and their precursors and analogues but start at 16 years for crimes mentioned in Articles 328-332. Imprisonment is an inherently severe sentence and should be used in exceptional cases, especially with regard to children and with respect to their vulnerabilities. In cases of drug law offences, health-based approaches should be used and not lengthy prison terms.
- With the increased presence of NPS each year in Belarus, less and less people are registered as having substance use disorder. This can be related to the issue that people started to use NPS but use of NPS itself was not accompanied by clinical manifestations identified in clinical protocols in Belarus. A revision of the clinical protocols for treatment of addiction to NPS is necessary, taking into account the changing drug scene and the new International Standards for the treatment of disorders associated with the use of NPS (the previous protocol in the Republic of Belarus was approved in 2010).
- The most numerous age groups using psychoactive substances are those 26 to 30 years old (3200 people or 23.07%), 31 to 35 years old (22%), and 21 to 25 years old (20%). This shows the rejuvenation of the key group. According to our respondents, young people start to use spices by smoking it or to use salts by sniffing it. Thus, specific harm reduction services are needed to respond to the needs of people who do not inject psychoactive substances. In the harm reduction programs existing in Belarus, there is no drug paraphernalia for users who do not inject drugs. Drug paraphernalia (such as pipes, sniffing kits, etc.) should be available at harm reduction services but also in the recreational settings where young people gather.
- The most common substances used in the Republic of Belarus (according to answers gathered during interviews) include salts (such as alpha-PVP and mephedrone) and smoking mixtures (spices).
- NPS are used by injecting (both intravenously and intermuscularly), smoking, sniffing, inhaling, rubbing over the gums, and swallowing.
- Most data, surveys, and research analyzed and gathered in this report showed a tendency in growth of NPS (salts and spices). Official government data on NPS use were not accessible and presumably non-existent, making it impossible to monitor trends in NPS use. For the assessment of NPS in Belarus and to prepare a response to existing issues, law enforcement and health institutions data should be open to the public. More scientific research should also be conducted to assess NPS trends.
- In harm reduction programs, there are no specific services for NPS users. There is a pressing need for long thin needles with a transparent cannula, water for injection,

cotton pads instead of alcohol wipes, and informational leaflets on NPS, risks related to it, and first aid information in cases of overdose. There is an inadequate supply of disposable sterile syringes and long thin needles for people who use NPS in the harm reduction programs. People who use NPS mostly require repeated injections over a short period of time (10-15 or more injections per night/per person), which increases the risk of HIV and hepatitis C. It is necessary to improve access to sterile syringes (with, for 2019, having a plan for 150 syringes per 1 harm reduction program client/per year). Syringes of different colors are also needed for people who use NPS because NPS are usually used by 2 to 5 people in one place; after a few injections, people can mix their syringes and take another person's syringe, increasing risks of HIV and hepatitis C. What is more, some users of NPS smoke it. In Belarus, there are no safe smoking kits with pipes, and people use light bulbs as pipes to smoke substances. There is a high demand for pipes for smoking NPS.

- Consultations with psychologists and psychotherapists in harm reduction programs are in demand because of increased and dangerous psychological effects resulting from use of NPS.
- The community of PWUD and health care professionals lack information, materials, and training on prevention of NPS overdoses. There is a huge gap in knowledge on how to provide first aid in cases of NPS overdose. The symptoms of overdose are hard to breath (lung failure); increased heart rate; heart stops functioning; choking; sweating; veins are "coming out"; increased blood pressure; skin getting gray; increased body temperature; panic attacks; and dilated pupils.
- According to Belarus laws, the sale of drugs whose consumption resulted in the death of a person is punishable by imprisonment for 12 to 25 years. This part of the Criminal Code is often applied to people who have called an ambulance in cases of fatal overdoses. Basically, the only criterion needed to apply this article is drug intoxication in the person who called the ambulance because that person is considered as the one who sold/shared drugs when the person fatally overdosed. This Criminal Code article almost makes it impossible for people to call the ambulance in cases of overdose because people are afraid to be imprisoned for such a long term. Thus, in most cases of overdoses, people do not call the ambulance and simply try to help person themselves.
- The only possible first aid to overdose, calling the ambulance, was mentioned by all respondents. Unfortunately, it is rarely used in practice because of the above-mentioned laws. There are no training methods or instructions on NPS overdoses.
- Psychiatrists working in psychiatric units, toxicologists, and psychologists of narcological and psychiatric hospitals do not receive training on management of cases of patients who use NPS.
- NPS in Belarus are mainly sold through Darknet drug markets ("Hydra," "Koncern Kalashnikov", "Zubr," "Telegram," etc.) The "offers" provide a list of substances, and

prices are published there. It is necessary to ensure dissemination of information about harm reduction programs, NPS use, and its risks on Darknet pages.

- There are some risks to buying NPS through the Darknet: (1) law enforcement agencies can create fake Darknet pages and arrest someone who is seeking NPS; (2) if a person is stopped and searched in the street and police find a bank receipt with confirmation of payment, they can interpret it as justification for arrest of purchasing NPS; (3) after a person has paid for the "bookmark" in the electronic wallet, he/she can be taken into investigation by law enforcement agencies, with further persecution to obtain access to dealers. If a person refuses to give testimony, she/he can be beaten by the police.
- Users of NPS are afraid and sometimes paranoid to use harm reduction services because is needed registration for these services. This registration is perceived as a vulnerability to be prosecuted by law enforcement. The vending machine with drug paraphernalia kits could be a resort. However, even this approach would be risky because law enforcement could check through cameras and persecute the user. To stop these kinds of actions, changes in laws are needed in which health-oriented and human rights-based approaches are promoted.