

New Psychoactive Substance Use in Georgia: Research Results

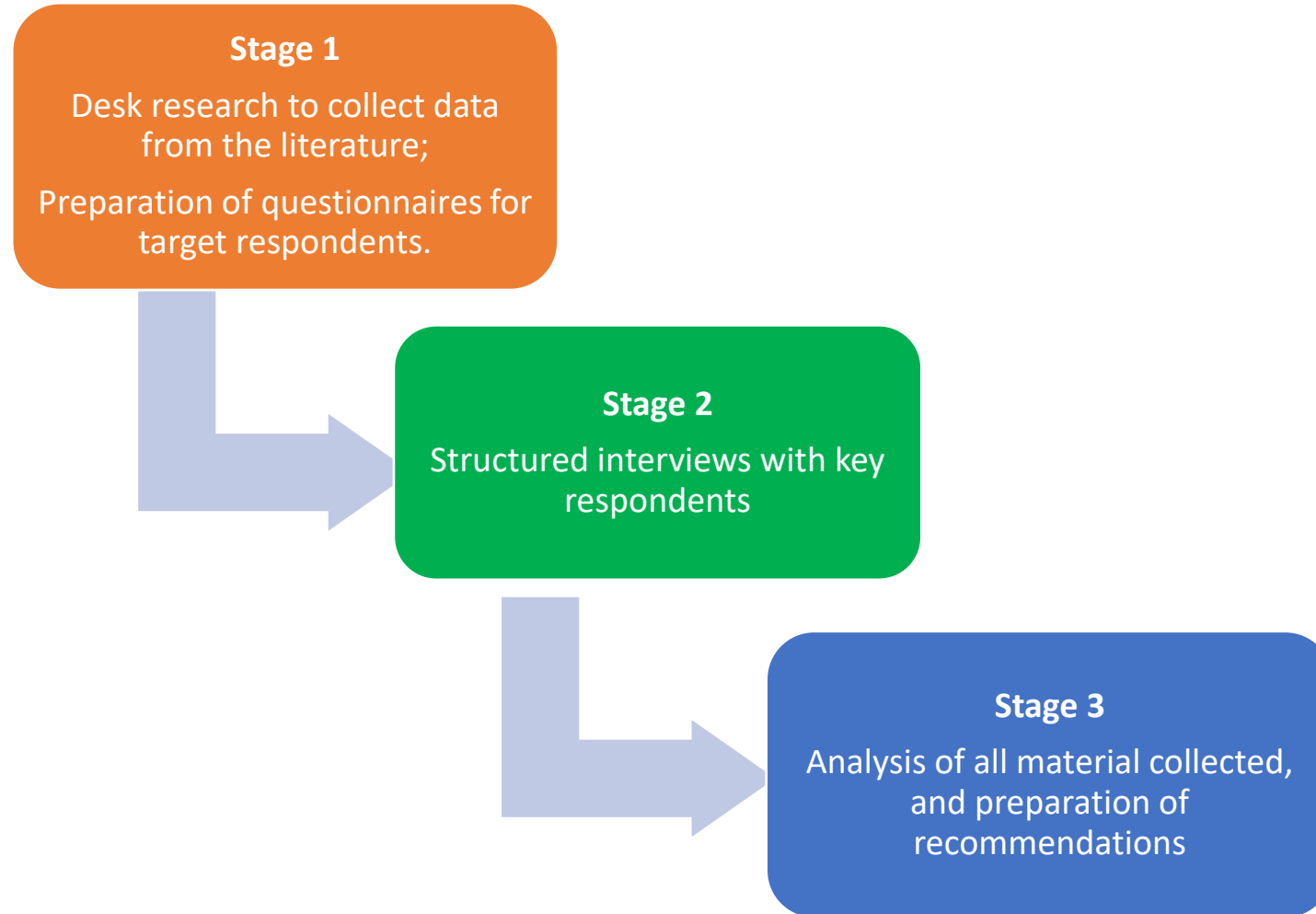
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**School of Law, Swansea University &
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Methodology



Organization of the interviews

Study timeline: Jan. – June, 2020
Data Collection: Apr. - May, 2020

Respondent Group	Number of Interviews/Participants
Representatives of harm reduction services working with PWUD, MSM, sex workers (social/outreach workers, advocacy officers, directors/founders, psychologist)	9
Representatives of medical/treatment services (narcologists, ambulance doctor)	3
Representative of State Agency (National Drug Monitoring Center)	1
PWID (including GeNPUD members)	8
PWUNPS (young partygoers, MSM, sex workers)	15

Law enforcement institution did not respond to our official request to participate in the research and share their information.

Ethical considerations

- The Ethical Review Committee of the School of Law at Swansea University Study reviewed and approved the research methodology.
- All study participants were aged 18 years or older and voluntarily agreed to take part.
- **Informed consents** were received from all participants.

Key topics

- NPS characteristics;
- Usage patterns;
- Purchasing methods of NPS;
- Price of NPS;
- Impact, risks and consequences of use of NPS;
- Harm reduction services and NPS;
- Medical services for people who use NPS;
- Overdoses and possible responses;
- Difficulties and problems associated with NPS; and
- Possible ways to overcome difficulties and problems with NPS.

Results

NPS groups:

- **Synthetic cathinones** (amphetamine-type substances - Alpha-PVP, speed, mephedrone)
- **Hallucinogens** (LSD-type substances - NBOMe)
- **Synthetic cannabinoids** (marijuana-type smoking substances - spice)
- Other substances named by the majority of participants are **fentanyl** (opioid-type NPS) and **ketamine** (dissociative anesthetic).

Slang names of NPS

Synthetic Cathinones	Bath salts; Salts; Crystals; Alpha-PVP (or PVP); Muka (meaning "flour" in Russian); Speed; Flakka; Mephedrone (or Mephe).
Hallucinogens	Mark; Blotter; NBOMe; Gin; Acid.
Synthetic Cannabinoids	Bio; Bio-marijuana; Bio-smoke; Bio-hashish; Spice; Chocolate; Cherry; Tea; Green; Black; White; Yellow.
Opioid-type NPS	Fentanyl
Ketamine	Special K, Keta, K

Patterns of Use

Poly-drug use, with the practice of mixing several drugs together, was common.

Smoking
Sniffing
Swallowing
Injecting
Sticking “blotters” under or on top of the tongue
Putting drops in the eyes

Widespread combinations

- Ketamine + Speed + Amphetamine (*“Trinity of Berlin”*)
- Alpha-PVP + Bio-marijuana
- Alpha-PVP + Ketamine
- Speed + Ketamine
- Amphetamine + Bio-marijuana
- Ecstasy/MDMA + Bio-marijuana
- Ecstasy/MDMA + Speed
- LSD/NBOMe + Mushrooms + Bio-marijuana (*“Candy Flip”*)

Reasons for making combinations:

- To prolong or intensify the drugs’ effect;
- To change one drug’s effect by adding another (e.g. a stimulant’s effect with a hallucinogen’s effect or vice versa);
- To reach drug kick-in level sooner, and
- To handle with “atkhadniak” (drug hangover/coming down);
- NPS help SWs with work performance: to feel more free and less nervous.

Reasons for choosing NPS

- Lower cost (2-3 times cheaper)
- More potency than traditional illicit drugs
- Easier access and more availability on the markets

Ways to purchase NPS

- Online drug markets: **Matanga** and **Party Doc**
- Social media apps such as **Telegram, Viber, Whatsapp**
- The practice of direct (hand-to-hand) buying from dealers is also common. In this case mediators (“legs”) play the main role.

Key risks and consequences

- Overdose
- Impossibility to identify the majority of NPS;

Mental health risks:

- Paranoia;
- Hallucinations;
- Flashbacks;
- Nightmares;
- Panic attacks;
- Psychosis;
- Schizophrenia;
- Losing one's mind;
- Inadequacy; and
- Aggressiveness.

Health professionals, as well as the community of PWUD, lack knowledge on responding to specifically NPS overdoses.

The ambulance doctor notes that there is only a general protocol for overdose response, which is categorized by drug groups which don't include NPS.

Medical Services

NPS are categorized in any of five groups: psycho-stimulants, hallucinogens, opioids, cannabinoids or sedatives.

There is no specific treatment in place for NPS use.

During medical examinations, cases involving NPS with other drug(s) are often labeled as “poly-drug” use.

Harm Reduction Services

Existing harm reduction services do not correspond to the new drug trends and related needs in Georgia.

Suggested services:

- Provision of pipes (for smoking);
- Provision of foils (for smoking or inhaling);
- Provision of paper tubes and cards (to create smooth surfaces and lines for snorting);
- Drug checking services;
- Peer-based interventions/programs;
- Development and distribution of information materials;
- Training programs for employees of harm reduction programs.

Challenges of the study

- Availability of consolidated information – information is scattered and not integrated;
- The existing information is not enough to draw significant conclusions about NPS use trends and patterns in the country;
- Inability to conduct interviews with key respondents from law enforcement;
- Difficulty in gathering the necessary number of focus group participants online.

Recommendations

- Need for consolidated and integrated data in regards to NPS use
- Future studies are essential
- Development of tailored interventions that respond to the needs of people who use NPS
- Elaboration of prevention and harm reduction strategies
- Development of clinical protocols
- Implementation of novel harm reduction approaches/services
- Development of education materials to raise awareness
- To produce accurate and transparent data on overdose from state agencies

Thank you



Report can be found:

- English: https://harmreductioneurasia.org/wp-content/uploads/2020/09/2020_8_20_EHRA_NPS-Report_Georgia_EN-1.pdf
- Russian: https://harmreductioneurasia.org/wp-content/uploads/2020/09/2020_8_20_EHRA_NPS-Report_Georgia_RUS.pdf