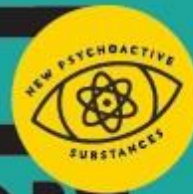


Daan van der Gouwe

NEW PSYCHOACTIVE SUBSTANCE USE IN EASTERN EUROPE AND CENTRAL ASIA: REGIONAL REPORT



July 2021



The research

- This report draws on a study conducted by the School of Law, Swansea University, in collaboration with the Eurasian Harm Reduction Association (EHRA).
- Within the framework of this project, **8 country** reports were drafted, targeting the use of new psychoactive substances (NPS) in Belarus, Estonia, Georgia, Kazakhstan, Kyrgyzstan, Lithuania, Moldova and Serbia (2019-2021).
- The assignment was undertaken to generate a more accurate picture of the use of NPS in these countries.
- For this study, two sources were used: (1) desk research of available literature and (2) additional structured interviews and focus groups with key respondents.
- <https://harmreductioneurasia.org/harm-reduction/new-psychoactive-substances/>

Regional report

- **Focus** is on interviews and focus groups held with stakeholders (PWUD and (other) professionals).
- **Aims** to address the health and social consequences related to the use of NPS in the EECA region.
- The **goal** is for this report to be used as an *advocacy and agenda setting tool* for use by local, regional, and national stakeholders to improve the structured and systematic monitoring of trends in drug use, drug use patterns, and drug markets, as well as to meet the needs of people who use NPS.

EECA region-specific understanding and use of NPS

- **No common understanding** (e.g. all new substances entering the market, including MDMA/ ecstasy, LSD, fentanyl etc.)
- **Reliable data on prevalence of use of NPS are absent** (seizure data exist, but no drug checking or WWA data)
- Result: **hampered** discussions on NPS' relevance in the EECA region, subregions, and countries, thus affecting **evidence-based decision-making**.

EECA Region-specific understanding and use of NPS

- **No adequate Early Warning System** in place, not at country level nor regional.
- **No mechanism for risk assessments** in place.
- **No structured and systematic monitoring** of NPS, nor of data sharing.
- **No reliable information** on what NPS are actually present in consumer markets, nor about the content of those NPS.



Use of NPS according to interviewed stakeholders

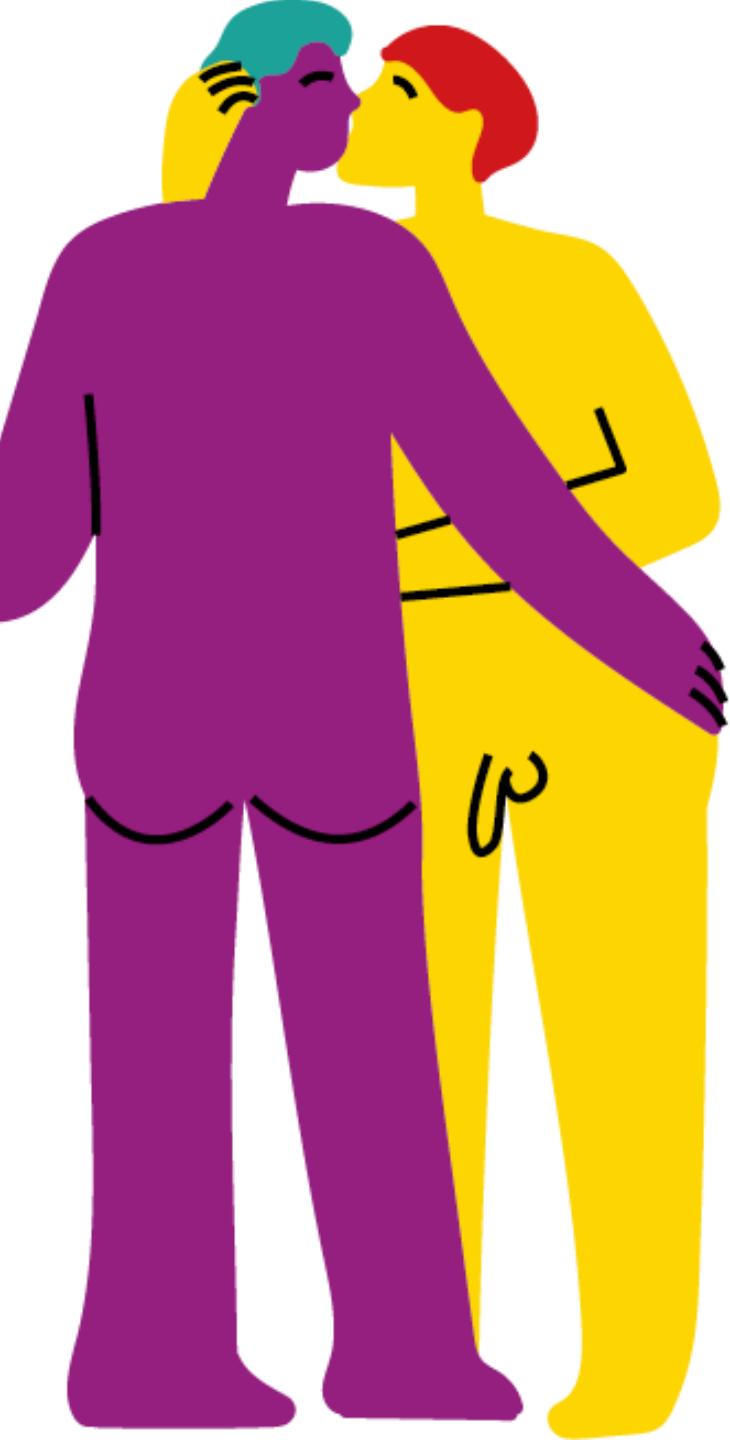
- **Prevalence of use varies** largely between countries in the region: considered low in Serbia, but predominant in Belarus.
- Mainly **cannabinoids** ('spice') and **cathinones** ('sol' | 'salts'), while EST and LT stakeholders mention **synthetic opioids** ('fenta') as main category of NPS used.

Main communities of people who use NPS in the EECA region



Two predominant groups:

- **Young** people (15-30 years of age) with no prior history of drug consumption. This group uses NPS occasionally and in recreational settings.
- **Experienced** (and often older) people who have used traditional drugs (mainly opioids, such as heroin, fentanyl, or homemade opioid derivatives).



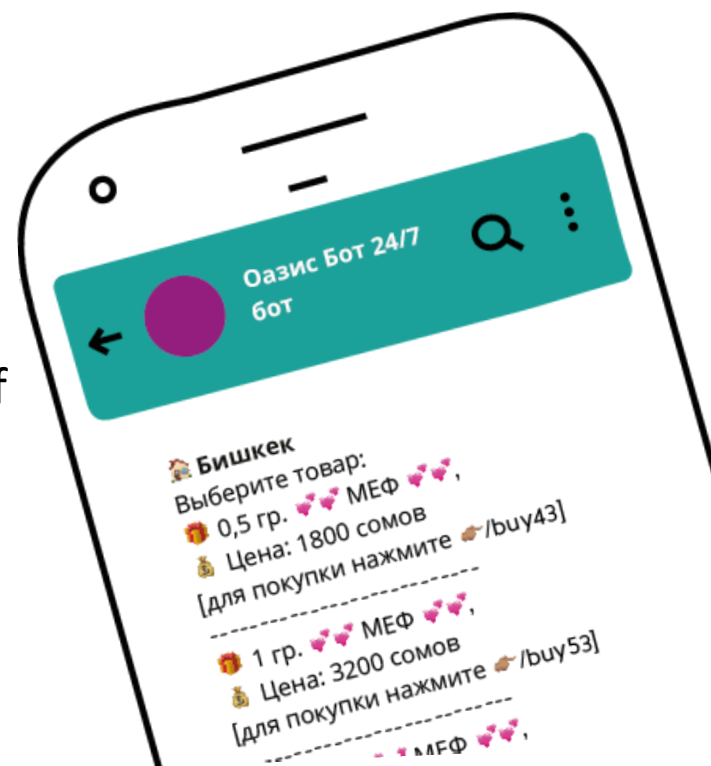
Main communities of people who use NPS in the EECA region

Other communities:

- People engaging in **long episodes of sex**
- **Sex workers** to better perform and cope
- **Incarcerated** persons

Drivers for use of NPS in the EECA region

- Unavailability, bad quality, or high price of drug of choice
- Unintended use
- Context-driven motives (NPS difficult to detect in blood or urine)
- Consumer benefits, aggressive marketing, and innocent reputation of NPS
- Intentional use of NPS to enhance (sexual) performance
- Youth subculture (rebellling against traditions and other generations)

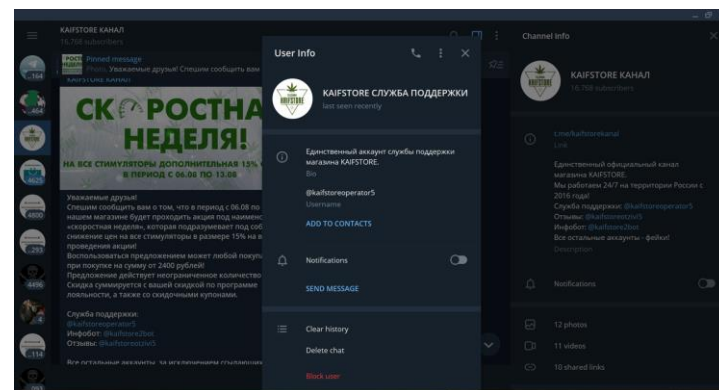


NPS Market in the EECA Region

[Characteristic for the region] QR-codes and links to internet platforms (Hydra/ Telegram) painted on walls of public buildings

Aggressive marketing in social media channels (Whatsapp, Telegram, Viber)

Street-level dealers (considered less risky in some countries, compared to internet sourcing)



Risks and consequences of NPS use

- Unknown content of the substance (e.g. risk of overdosing, 'mismatch' with medication or medical conditions, or experiencing unexpected effects)
- Mental health issues (e.g. feelings of paranoia and depression, and psychotic episodes during and after consumption)
- Increased risk of transmission of HIV and HCV caused by multiple and unsafe injection practices
- Increased risk for contracting an STD caused by unsafe or unprotected sex



Available treatment and harm reduction services for people who use NPS

- In the EECA region, no specific drug treatment is available for people with dependency issues from NPS use
- Existing treatment and harm reduction services remain focused on treatment of dependencies related to traditional substances (opioids)
- Clinical protocols exist in some countries, but not known whether they are used
- Registration in Narcological Register barrier in access to treatment



Identified
gaps in
treatment
and harm
reduction
and needs by
communities
of people
who use NPS

- Need for low-threshold possibilities to analyse substances, to know the content
- Need for harm reduction services to provide services related to use of NPS
- Need for evidence-based information on NPS

Concerns of NPS use in the EECA region

- No reliable data on nature and extent of NPS use
- No reliable monitoring at all
- General lack of evidence-based, comprehensive info on NPS (e.g. risk profiles)
- Young people with no prior drug experience turn to NPS (easy access, low cost)
- Many adverse health events are reported (e.g. NPS overdose, while a perspective for action is lacking)

Overall recommendations

- Support, don't punish!
Decriminalisation of use and possession of drugs, including NPS, is a prerequisite to all efforts addressing the emergence of use of NPS in the EECA region
- Acknowledgement and ownership of the phenomenon by national and local stakeholders and of need to act immediately



Data collecting and monitoring

SET-UP OF A REGIONAL (AND NATIONAL) EARLY WARNING SYSTEM

- monitoring of substances appearing on the market;
- risk analysis or assessment of substances entering the market;
- dissemination and communication of evidence-based information on those new substances, and
- capability to respond in cases when there is a need (e.g. issuing warning campaigns for extra risky substances on the market)

Data collecting and monitoring



PILOT DRUG CHECKING SERVICES THROUGHOUT THE REGION:

- To confront the many adverse health events (e.g. OD)
- To monitor drug markets
- To reach hard-to-reach groups
- To communicate results to target audience (providing valuable info and possible advice not to take the testes substances)
- To refer to treatment (if needed and available)
- Preferably chemical analysis such as GS/MS, FT-IR
- If not: Handheld FT-IR or
- colorimetric tests (Marquis reagents, e.g. to detect fentanyl)

Action needed from national governments, including national and local stakeholders and regional organizations .

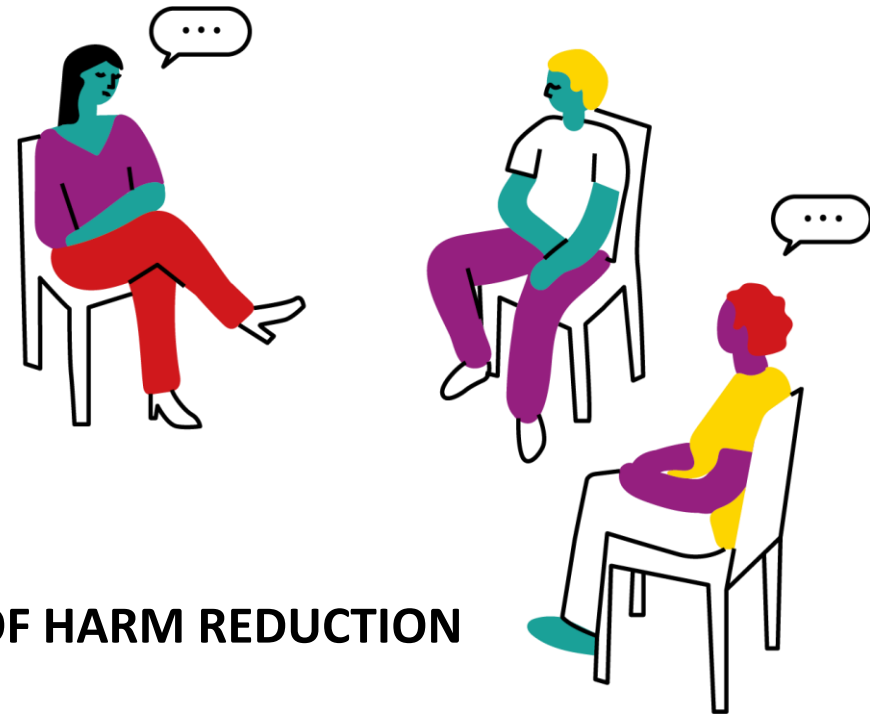
Action needed from national governments, including national and local stakeholders, regional organizations, donors.

Information, education and communication

- To develop and distribute evidence-based and comprehensive information on NPS
- Make use of existing and increasing number of information materials and literature available, e.g.:
- www.nps-info.org
- <https://www.emcdda.europa.eu/topics/nps>
- Make use of existing risk assessments and clinical protocols (e.g. alpha-PVP, mephedrone, cannabinoids, synthetic opioids)

Action needed from regional
NGOs, national governments,
local NGOs, and local authorities.

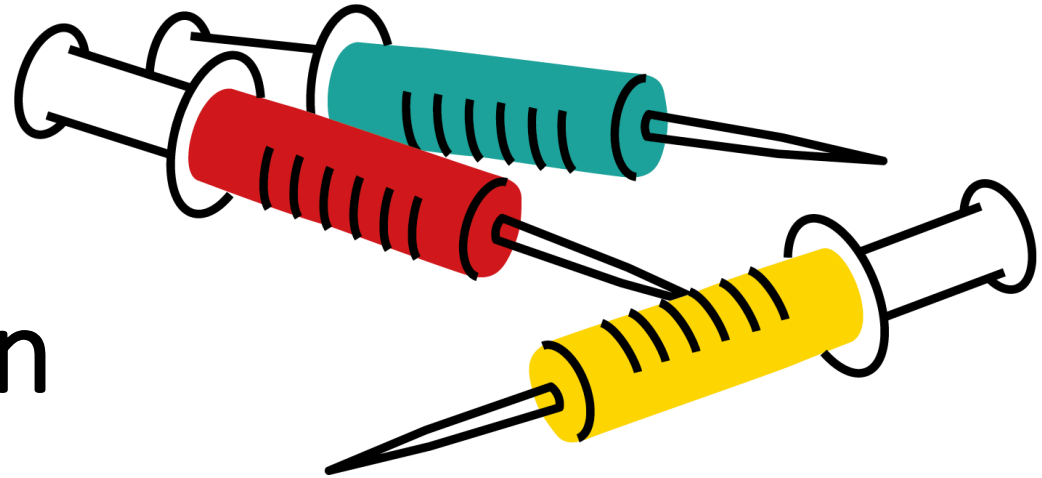
Harm reduction



- **SCALE-UP AND BROADEN THE SCOPE OF HARM REDUCTION SERVICES:**

- Provision of safer use materials, e.g. more diversity in needles, but also snorting tubes, smoking pipes, mouthpieces
- Development of safer use toolkits (e.g. Novosibirsk toolkit)
- Provision of blood pressure control programs
- Provision of psychosocial support/ integration of mental health services in harm reduction services
- Considering piloting stimulant substitute treatment programs

Harm reduction



- Scale-up and broaden the scope of harm reduction services
- **ADDRESS THE EMERGENCE OF CHEMSEX, INCLUDING UNSAFE SEX AND UNSAFE INJECTION PRACTICES**
 - Training for professionals and PWUD to address very risky practices of combining multiple injections of cathinones with unsafe sex
 - Increase access to and coverage of safe injection equipment, as well as non-injection equipment
 - Provide (peer) interventions to prevent people (especially young people) to engage in chemsex

Harm reduction

- Scale-up and broaden the scope of harm reduction services
- Address the emergence of chemsex, including unsafe sex and unsafe injection practices
- Address aggressive marketing of NPS
 - Re-painting of walls
 - Direct contact with online shops that sell NPS (e.g. by NGOs).

Case study: N-ethylpentylone and N-ethylhexedrone

Van: orangechemicals [<mailto:orangechemicals@protonmail.com>]

Verzonden: donderdag 6 september 2018 12:00

Aan: Daan van der Gouwe <dgouwe@trimbos.nl>

Onderwerp: Re: extra risky substances in powders sold as 4-FA

Dear mr Van der Gouwe,

first of all thank you very much for your kind email.

let me be perfectly clear, ALL our compounds are definitely NOT for human consumption.

we strongly advise and recommend everyone NOT to consume any of our compounds.

never the less we have checked our stock and discontinued all of our current stock, till further notice.

all our products are within the confines of the Dutch regularoty system.

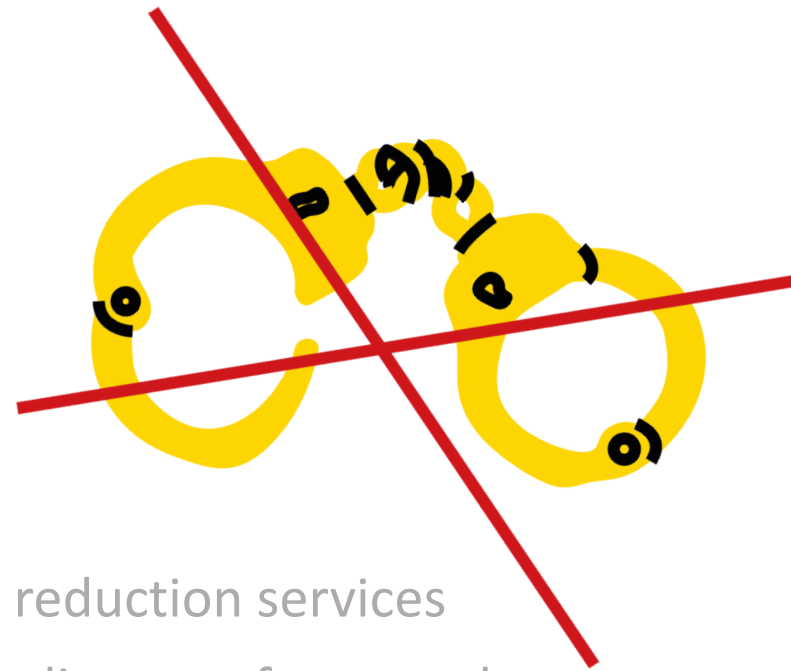
4-FA is currently illegal in the Netherlands we replaced this compound and notified our customers about this.

We never ever intend to sell illegal products for research purposes to our clients.

As soon as we have any indication that 1 of our customers is misusing our products we directly take action. Amongst other things, refuse any future sales.

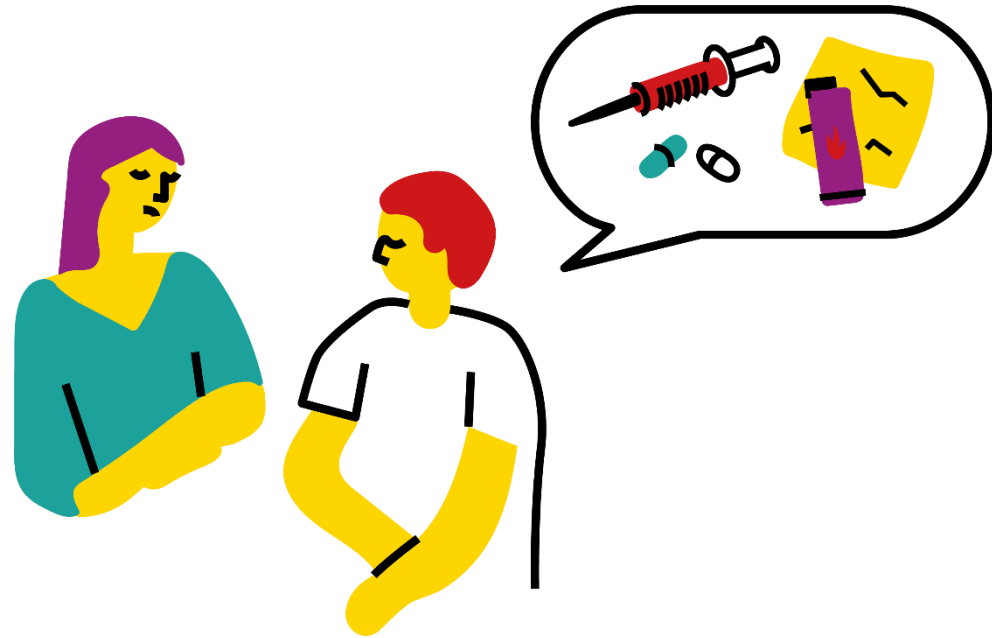
Thank you once again for your email, we are always more then happy to cooperate with different institutions and especially one as renowned as the Trimbos institute. Gr, Jeff

Harm reduction



- Scale-up and broaden the scope of harm reduction services
- Address the emergence of chemsex, including unsafe sex and unsafe injection practices
- Address aggressive marketing of NPS
 - Re-painting of walls
 - Direct contact with online shops that sell NPS (e.g. by NGOs).
 - Law enforcement action is needed, but one should be aware that as long as there is demand, the supply will follow

Harm reduction



- Scale-up and broaden the scope of harm reduction services
- Address the emergence of chemsex, including unsafe sex and unsafe injection practices
- Address aggressive marketing of NPS
- Promote less risky routes of administration
- Learn from experiences from e.g. Germany and Czechia (provision of alternatives for injection, e.g smoking on foil)

Harm reduction

- Scale-up and broaden the scope of harm reduction services
- Address the emergence of chemsex, including unsafe sex and unsafe injection practices
- Address aggressive marketing of NPS
- Promote less risky routes of administration
- NGOs to update outreach work by “going online” (*internet outreach work*)



Changes in Online Psychoactive Substance Trade via Telegram during the COVID-19 Pandemic

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Factsheet



Netherlands Institute of Mental Health and Addiction

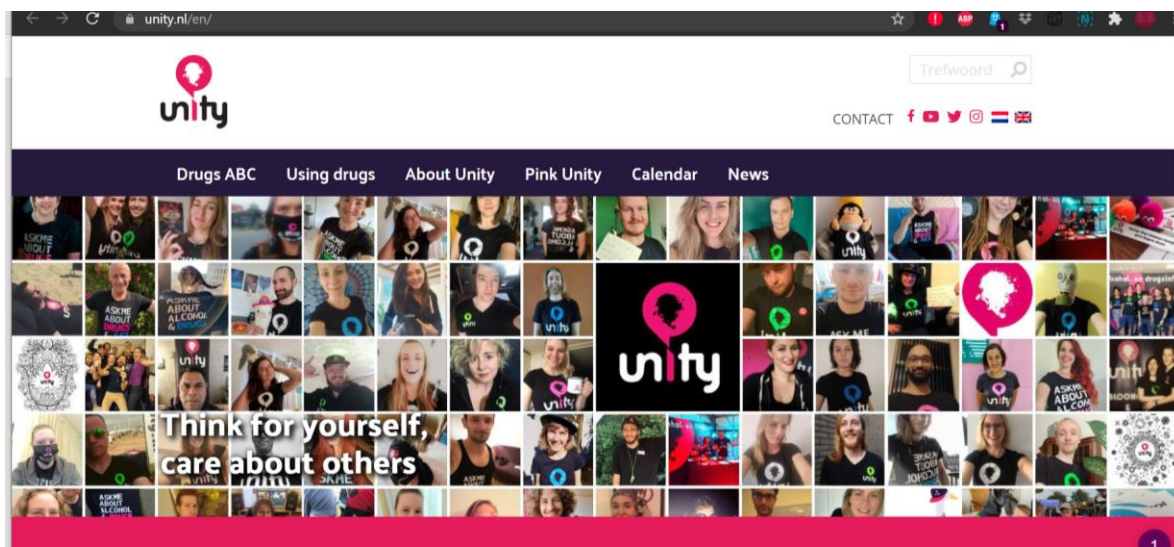
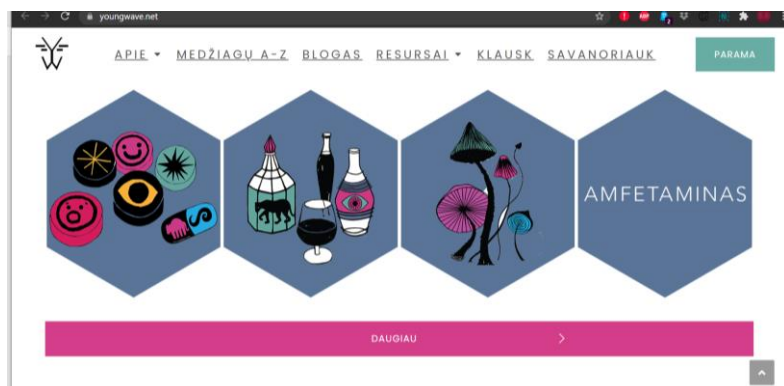
Online drug monitoring



Рекомендации «Веб-аутрич для людей, употребляющих наркотики»

Harm reduction

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- Address aggressive marketing of NPS
- Promote less risky routes of administration
- NGOs to update outreach work by “going online” (*internet outreach work*)
- Promote peer-based interventions among people who use NPS



Action needed from national stakeholders, national and local harm reduction services, and peer-based groups.

Action needed from regional NGOs, local authorities, local NGOs, and communities who use drugs.

Harm reduction

Action needed from regional organisations, national law enforcement agencies, local authorities, and local NGOs.

Action needed from regional NGOs and local authorities.

Action needed from governments, local NGOs, and communities of people who use drugs.

- Scale-up and broaden the scope of harm reduction services
- Address the emergence of chemsex, including unsafe sex and unsafe injection practices
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- Promote peer-based interventions among people who use NPS

Treatment

- Access to and coverage of treatment facilities is low
- Mandatory registration in the Narcological Register in many countries in EECA region



• **ADJUST TREATMENT FACILITIES TO RESPOND TO THE NEEDS OF PEOPLE WHO USE DRUGS**

- Reform of drug treatment recommended and modernise according to e.g. European and International Standards of Treatment of Drug Use Disorders
- Treatment programs should extend their treatment modalities to allow for effective and evidence-based responses to the needs of people who use noninjected NPS, especially for disorders related to the use of synthetic cannabinoids and/or synthetic cathinones.
- Adapt and implement existing NPS- treatment guidelines

Reports can be found here:

- In ENGLISH:

<https://harmreductioneurasia.org/harm-reduction/new-psychoactive-substances/nps-ee-and-ca/>

- In RUSSIAN:

<https://harmreductioneurasia.org/ru/harm-reduction/new-psychoactive-substances/nps-ee-and-ca/>

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