



European Monitoring Centre
for Drugs and Drug Addiction

BULGARIA
NFP

НАЦИОНАЛЕН ФОКУСЕН ЦЕНТЪР
ЗА НАРКОТИЦИ И НАРКОМАНИИ

**2007 NATIONAL REPORT (2006 data) TO THE EMCDDA
by the Reitox National Focal Point**

BULGARIA
**New Development, Trends and in-depth information on
selected issues**

REITOX

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Summary

A bill to amend the Penal Code was passed. The amendments in the Penal Code refer to all corpora delicti related to drugs and they have been completely revised. With these changes the Bulgarian Penal Code is **in conformity with the regulations of the Framework Decision of the Council of the EC 2004/757/PVR of fixing the minimal regulations referring to the elements of crime and the sanctions imposed in the sphere of drug trafficking**.

In May 2006 a Bill to amend the Drugs and Precursors Control Act was prepared. Passing this bill is necessitated by the need to provide **conditions for the direct implementation of the regulations of the European Union, regulating the control of the activities with precursors and drugs** - Regulation № 273/2004/EC on drug precursors, Regulation № 111/2005/EC on the rules to monitor the trade with drug precursors between the Community and third parties and Regulation № 1277/2005/EC on the rules of implementing Regulation № 273/2004/EC and Regulation № 111/2005/EC. The three regulations settle completely the matters related to precursors, and contain detailed regulations referring to the control measures on the activities with precursors, the requirements for import and export and the obligations of the operators. After the accession of Bulgaria to the European Union the regulations have a direct effect, but their implementation has to be provided by the national legislation.

By a Resolution № 30 of the Council of Ministers an Updated Action Plan for the period 2006-2008 for implementing the National Anti-Drug Strategy 2003-2008 was adopted. The updated Action Plan has been prepared in compliance with a Report Decision of the Council of Ministers from 20th October 2005 referring to a List of Measures under Chapter 24 "Justice and Internal Affairs" – section "Combating Drugs", Volume 13 /section 30/.

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For the year 2006 the employees of **Criminal Police in the Ministry of Interior** checked on the territory of the country a total of 1 091 signals about the production and dealing with drugs and precursors (for 2005 – 1 138). The persons dealing with drugs numbered 1 020 and 438 of them deal with cannabis, 346 with heroin, 39 with cocaine and 197 are synthetic drug dealers. The persons both drug users and drug dealers numbered 941 (444 of them being under aged).

The data from the inquisitorial procedures at the **National and Regional Departments of Investigation** for drugs smuggling and trafficking show that in 2006 the number of preliminary proceedings investigated was 947. 875 of them were completed for trial.

In 2006 the **public prosecutors** monitored, guided and supervised a total of 4 767 pretrial proceedings for crimes under Art. 354a, 354b, and 354c of the PC and for customs smuggling under Art. 242, Par.2,3,4 and 9 from the PC - 153 pretrial proceedings. The newly instituted in 2006 pretrial proceedings for crimes under Art. 354a, 354b and 354c numbered 3 214, and 1 553 proceedings had remained from the preceding period.

On the information provided by the **Ministry of Justice** at all the **courts** in the country the proceedings are instituted and the defendants are sentenced under the respective texts of the Penal Code - Art.242 and from Art.354a to Art.354c. The information on the activity of the courts of first instance in the country shows that in 2006 at the district, regional and martial courts there were a total of 2 866 cases for hearing which were related to drugs. Of them 1 213 cases were closed by pronouncing a sentence, and the total number of the persons convicted was 1 971. The penalty most often imposed was imprisonment for up to 3 years.

* * *

The estimate that 5.2 % of the adult population aged 18 - 60 in the country have used some drug at least once in their lifetimes remains. At least **315 000-330 000 Bulgarian citizens aged 15 to 60 years have at least once in their lifetimes used some drug. The young people aged 15 to 34 represent around 88-90 % of all the people in the age group 15-60 who at least once in their lifetimes have used some drug.**

Issuing from data from survey 35.2 % (or around 75,000) of the university students in the country have at least once in their lifetimes used some drug. Besides 9.2 % (or nearly 20,000) of the students have used some drug in the last 30 days before the poll. Cannabis (and especially marijuana) is the most widely used illicit drug.

Comparing data from an International Study (within ECAD Project) among school students 15-16 years old from 9 cities in Europe, the students from Sofia come first according to the indicator "getting drunk at least once for the last 30 days" (33.8 % out of them confirm it).

A summarized profile of the people who have at least once used drugs in their life can be represented in the following way: They are more often men than women; almost all of them young; more often well-off; more often living in big cities than in small towns and in villages.

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The frame of the approaches reviewed for the prevention of drug use contains three categories: universal, selective and indicative prevention. Each specific category represents specific target population in respect to the risk of starting drug use, and from this point of view, the level of intensity of the interventional practices.

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A brief review of the existing data shows that the available data and the long-term observations show that in Bulgaria **the heroin is the substance that is the most strongly connected with the problem drug use** (over 90 % of the persons who searched for treatment in the specialized units have indicated it as the primary substance).

Based on the available data a general estimation could be made that **the number of the problem heroin users in the last few years remains relatively constant and stable, even with slight indications for onset of decrease.** Unfortunately, this is not the case for the problem drug users as a whole as long as in the same time indications for increasing the number of the problem amphetamine and "ecstasy" type substances users can be observed.

The bigger part of the problem heroin users **injecting their drugs.** Indications of gradual **decrease of used needles and syringes sharing** among drug users continue to be observed; this is a good prerequisite for the reduction of health harms due to drug use.

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In 2006 the monitoring system of treatment demand covered 1766 persons, starting therapy in 5 inpatient and 12 outpatient units and centers in 6 of the most significant Bulgarian cities (regarding treatment possibilities). More than 1/4 of the country's population is concentrated there and approximately 4/5 of the residential patients in Bulgaria are there.

Some of the outlined trends in the treatment demands are: the heroin remains the primary problem drug, for which a treatment is searched for, the injecting continues to be the most prevalent pattern of drug use among the persons demanding treatment, the treatment demand for the first time ever increased for cannabis and amphetamine users.

* * *

According to the data from the National Service "Police" at the Ministry of Interior in 2006 the divisions of the national police have registered in the country a total number of 3 792 drug users (only users + users and dealers). Nearly ¼ of the registered persons (1 543 persons or 40,7 %) were minors or under-aged, which seriously directs the attention towards the question of the drug use among teenagers in Bulgaria.

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On the data of the National Health Statistics for 2006 at the specialized inpatient healthcare establishments in the country 1971 patients diagnosed as suffering from psychic and behavioral disorders caused by the use of other psychoactive substances have been treated. For the period 1990-2006 when observations were made this is the greatest number of patients hospitalized. The trend of increasing the number of hospitalized patients still holds. The greatest number of patients hospitalized was registered at the Regional Dispensaries of Psychiatric Diseases with clinics - 879, followed by the psychiatric clinics and the state psychiatric hospitals. Under dispensary observation are the following groups of patients: diagnosed as suffering from "Psychic and behavioral disorders caused by the use of other psychoactive substances" – 916.

The total number of beds in the health establishments for psychiatric treatment is 5 439 and 201 out of them are set for patients with addictions. In the process of the program implementation 7 programs for substitution and maintenance treatment with methadone were started – 5 in Sofia, 1 in the town of Varna and 1 in the town of Plovdiv, with a total number of patients included – 1555.

* * *

In 2006 the drug-related deaths number 29 cases. The number of men is 26 and it is significantly greater than the number of women - 3 cases. After the increase of the indicator **intensity of deaths** for the previous year, in 2006 its overall value for the country was 0.38 per 100 000 persons of the population. The indicator is significantly higher for men (0.70 per 100 000 men) compared to the one for women (0.08 per 100 000 women). More than 80% of all the drug related deaths are men and women aged 20 to 34 years. The mean age of the deceased persons continues to rise and from a mean age of 27.8 in 2004 it rose to 28.8 in 2006.

On the data from a cohort study in Sofia the difference in mortality rates between the outpatients who were treated at home and the inpatients admitted for hospital treatment is impressive (132.89 and 103.09 per 1000 respectively) and on the other hand, there is a difference in mortality rates between these two groups of patients and the group included in methadone programme (35.14 per 1000). The mean age of the patients who have got in the sample is 22.45 years. For comparison, the mortality rate for the same age among the general population is 0.5 – 2.0 per 1000 (for the patients from the sample the respective figure is 92.81 per 1000).

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The level of the HIV infection is low, compared to the prevalence in other countries from the region, but **for the last 2 years it has marked a trend of rising for the injecting drug users**.

The level of hepatitis B infection remains at about 5 % (6.10 %), and this value has remained constant for the last 10 years; it is comparable to the general hepatitis B morbidity in the country.

The level of infection with the **hepatitis C virus** for all the IDUs tested at the NCA is **53.63 %**. It can be noted that **there is a trend for the level of infection to remain constant**, which may be due to the better work of the needle and syringe exchange programs.

The number of persons among the IDUs co-infected with 2 and more infections is growing.

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Study showed that or 2.1 % out of the PDUs were homeless (had not a home for permanent residence). In two of the big cities (Sofia and Varna) the respective number of the

homeless people in the samples was undoubtedly the largest (respectively around 37 % and around 42 %). Besides some specific ways of life in the groups of the population studied, this was probably due to the greater number of homeless people among the general population in the big cities.

On the data of the National System for monitoring drug related treatment demand 43,4 % of all those who began treatment because of drug use in Bulgaria for 2006 were unemployed (in the preceding year - 42,4 %).

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On the data of the Chief Directorate „Penalties Enforcement” at the Ministry of Justice in 2006 at prisons and at prison hostels there were 2 013 persons imprisoned who were addicted to drugs. For 2006 the prisoners awaiting trial numbered 819 addicted persons in detention. Of them the men numbered 771 and the women numbered 48. Over 50 % of the persons in detention were over 25 years of age.

* * *

As a result of the activities of the offices and the agencies in the structure of the Ministry of the Interior and the Ministry of Finance in 2006 on the territory of the country a total of **4 234 545 kg, 110 102 tablets, 73.47 liters, 200 ampoules and 112 doses of drugs and their precursors were seized.**

Part A: New Developments and Trends

1. National Policies and Context

Within the frames of this section the following main topics will be reviewed:

- Social reintegration of the problem drug users and addicted persons;
- Crime prevention.

On reviewing the topic of social reintegration attention has been focused on information and issues related to finding homes for persons with problems and at risk, as well as on finding work, on the vocational training and on the preparation to begin work of the problem drug users who also have problems coping with unemployment. On presenting these issues information has been mainly used provided by the Ministry of Labour and Social Policy and by the State Agency for Child Protection.

In this report the topic of crime prevention is presented by information referring to the assistance for the drug users in prison (namely prevention, harm reduction and drug related treatment). On presenting these issues information and analyses have been used of the “Penalties Enforcement” Chief Directorate at the Ministry of Justice.

Legal Framework

Acts, Regulations, Directives or Guidelines in the Sphere of Addictions and Drugs (Supply and Demand)

In 2006 a number of changes were made in the regulations of the Republic of Bulgaria concerning issues and topics related to drugs.

➤ A bill to amend the Penal Code was passed. It was promulgated in State Gazette, issue 75 from 2006 and it became effective on 13th October the same year. The amendments in the Penal Code refer to all corpora delicti related to drugs and they have been completely revised. With these changes the Bulgarian Penal Code is **in conformity with the regulations of the Framework Decision of the Council of the EC 2004/757/PVR of fixing the minimal regulations referring to the elements of crime and the sanctions imposed in the sphere of drug trafficking.**

➤ The deeds listed in Art. 2 of the Decision, are criminalized in Art. 242, Para. 2 and 3 (transferring across the border of the country drugs and/or their analogues and precursors without proper authorization), as well as in Art. 354a (production, processing, acquisition, keeping with the aim of dealing or dealing with drugs and their analogues or precursors) and in Art. 354b (growing opiate poppy, cocaine bush or plants of the type of hemp) of the Penal Code (PC).

➤ The regulation to penalize the participation in crime, the attempt and the solicitation to perpetrate drug-related crimes, under Art. 3 of the Decision shall be executed respectively under the regulations of Art. 21 (participation in crime), Art. 18 (attempt) and Art. 242, Para. 2 (preparation for perpetration of the acts under Art. 242, Para. 2 and 3) of the PC.

The penalties provided in the PC for the above mentioned crimes are effective, proportional and preventive in compliance with the regulation of Art. 4, Para. 1 of the Decision.

The criminal offences under Art. 242, Para. 2 and 3 and under Art. 354a of the PC are aggravated offences in the cases when the drugs or their analogues are in large quantities and/or the case is extremely grave and also when high-risk or risk drugs are the case in point-Art. 242, Para.4 and Art.354a, Para.2 of the PC. In these hypotheses the penalties provided are more severe in compliance with Art 4, Para.2 of the Decision.

More severely punishable are also the cases when the deeds under Art.242, Para.2 and 3 and under Art. 354a and 354b from the PC are perpetrated on the order of or as executing a decision of an organized criminal group– Art.242, Para.1, section. g), Art.354a, Para. 2, section 1 and Art. 354b, Para. 2 and 3. These texts from the PC correspond to the obligations under Art. 4, Para. 3 and 4 of the Framework Decision.

The object and the vehicle used for the smuggling under Art.242, shall be seized on behalf of the state under Para. 7 and 8 of this article. The object and the instrument of crime under Art. 354a shall also be seized on behalf of the state, under Para. 6 of this article. What has been acquired under the terms of these articles, if not subject to reversion or restoration, shall be seized on behalf of the state under the terms of Art. 53, Para. 2, section b) of the PC. In case of lack or alienation of what has been acquired its equal value shall be adjudged. These norms are in compliance with the regulations of Art. 4, Para. 5 of the Decision.

Art. 354b, Para. 4 provides not penalizing the member of an organized criminal group who has voluntarily informed the authorities of all the facts and circumstances known to him about the acts of the criminal group, as is the recommendation of Art. 5 of the Framework Decision.

The responsibility of the legal entities for crimes committed by their leaders or employees under Art. 242 and Art. 345a – 345b of the PC through which the legal entity got enriched, is provided by Art. 83a of the Administrative Infringements and Penalties Act. The sanction for the legal entities is a penalty payment amounting to BGN 1, 000,000 but not less than the equivalence of the profit, when it is a pecuniary advantage, and when the profit is not a pecuniary advantage, or its amount cannot be determined, the sanction shall amount from BGN 5,000 to BFN 100,000. It shall be imposed irrespective of imposing criminal responsibility on the perpetrator of the crime. The profit or its equal value shall be seized on behalf of the state, if it is not subject to reversion or restoration, or of seizure as provided by the PC. This regulation is in compliance with the regulations of Art. 7 of the Decision.

Pursuant to Art. 8, Para. 1 of the Framework Decision the Bulgarian Penal Law provides that the PC shall be enforced: for all the crimes committed on the territory of the Republic of Bulgaria – Art. 3, Para. 1 of the PC; for all the Bulgarian citizens for crimes committed by them abroad – Art. 4, Para. 1 PC; for foreigners having committed indictable offence, by which the interests of the Republic of Bulgaria or of the Bulgarian citizens are affected – Art. 5 from the PC, as well as for crimes committed by foreigners abroad, when this has been provided by an international agreement, in which the Republic of Bulgaria has participated- Art. 6, Para. 2 of the PC.

Pursuant to Art. 8, Para. 3 of the Decision the crimes under Art. 242, 354a and 354b of the PC are major crimes and are grounds for extraditing the perpetrator or this is done on the requisition of another member country. Besides, the Republic of Bulgaria after the amendments made in 2005 of Art. 25, Para. 4 of the Constitution and after the Act on the Extradition and the European arrest warrant in its part referring to the execution of the European arrest warrant came in effect on January 1st 2007, delivers its own citizens on the petition of another member country of the European Union.

➤ In May 2006 a Bill to amend the Drugs and Precursors Control Act was prepared. The Bill was introduced on 16th January 2007 by the Council of Ministers in the National Assembly and is under discussion. Passing the Bill to amend the Drugs and Precursors Control Act is necessitated by the need to provide **conditions for the direct implementation of the regulations of the European Union, regulating the control of the activities with precursors and drugs**- Regulation № 273/2004/EC on drug precursors, Regulation № 111/2005/EC on the rules to monitor the trade with drug precursors between the Community and third parties and Regulation № 1277/2005/EC on the rules of implementing Regulation № 273/2004/EC and Regulation № 111/2005/EC. The three regulations settle completely the matters related to precursors, and contain detailed regulations referring to the control measures on the activities with precursors, the requirements for import and export and the obligations of the operators. After the accession of Bulgaria to the European Union the regulations have a direct effect, but their implementation has to be provided by the national legislation. Because of their legal essence they are not subject to transposition or to the national regulations duplicating them, and they have to be dropped out, but with the bill suggested all the provisions included in the regulations are nullified.

In relation to these amendments the interdepartmental work group prepared an amendment to the Drugs and Precursors Control Regulation passed by Decree № 105 from 4th May 2006 of the Council of Ministers come into force on 16th May 2006. The amendments to the regulation are aimed at introducing Regulation (EU) № 111/2005 on the rules of monitoring the trade with drug precursors between the Community and third parties and Regulation (EU) N2 1277/2005 for implementing the procedures introduced by Regulation (EU) № 2731/2004 and Regulation (EU) 111/2005 in the national legislation.

➤ On 5th June 2006 a Decree of the Council of Ministers of the Republic of Bulgaria was adopted (DCM 136 from 5th June 2006) to amend the Statute on the organization and the activity of the National Drugs Board. It was promulgated in the State Gazette, issue 49/16th June 2006 .

The amendment to the Statute on the organization and the activity of the National Council on Drugs was prepared in compliance with the Bill to amend the Drugs and Precursors Control Act passed (promulgated in the State Gazette, issue 79 from 4th October 2005). By this Act Art. 15 was amended and a new Art. 15a was passed, which regulates the establishment of the Regional Councils on Drugs at the municipalities, the administrative centers of which are also administrative centers of regions. It also regulates the option for the rest of the municipalities to establish their own Municipal Councils on Drugs should the case arise and if there is a financial resource available.

For better thoroughness and precision when establishing the Regional Councils on Drugs, in the Decree to amend the Statute on the organization and activity of the National Council on Drugs their members, the way of approval, the organization of their activity and their functions and interrelation with other bodies of the local and state authorities are specified. ¹

➤ By Decree № 105 dated 4th May 2006, come into force on 16th May 2006, of the Council of Ministers of the Republic of Bulgaria the Amendment to the Drugs and Precursors Control Regulation was passed. ²

➤ Regulation to amend Regulation № 3/2001 to destroy legally produced, acquired and stored narcotic substances and their preparations which have become unfit for use was passed (promulgated in State Gazette issue 5/17th January 2006).

The amendment has been prepared in compliance with the requirements of the Bill to amend the Drugs and Precursors Control Act (AADPCA) – promulgated in the State Gazette issue 79 from 4th October 2005 .

Under Ruling № 3, then into effect, an order to destroy the substances could be issued to producers and wholesale traders licensed under the order of the Drugs and Precursors Control Act and to natural persons and legal entities having received authorization for activities with narcotic substances under Art. 73 of the Drugs and Precursors Control Act. Through the amendment of the regulation the opportunity is given to issue an order to destroy legally produced, acquired and stored drugs which have become unfit for use, to other natural persons and legal entities.

The amendment to Regulation № 3 was necessitated because of other legislative changes in the normative acts of other spheres. For the purpose of destruction the regulation remitted to the Limiting the Noxious Effects of Refuse on the Environment Act. In accordance with § 8 of the Preceding and Concluding Regulations of the Limiting the Noxious Effects of Refuse on the Environment Act (promulgated in the State gazette, issue 86/2003), the Limiting the Noxious Effects of Refuse on the Environment Act is nullified by the Refuse Management Act. In the amendment to Regulation № 3 the legislative change is reflected referring to persons who have obtained authorization under Art. 37 of the Refuse Management Act.

¹ In more detail about the essence and the changes in the Institutional Framework, strategies and policies in the same Chapter.

² See above in the same Chapter.

➤ A Regulation to amend Regulation № 4/2001 for the conditions and the order of prescribing and selling pharmaceutical products was prepared (promulgated in the State Gazette, issue 34/25th April 2006).

Under the terms of Art. 5 of the Drugs and Precursors Control Act (DPCA) the products containing narcotic substances used for medical purposes can be exempt from some control measures, in cases when the pharmaceutical product is so compounded that there is no risk run of abusing it, or the risk is insignificant and the narcotic substance cannot be extracted in quantities sufficient for abuse.

Pursuant to Art. 15 of Regulation № 4/2001 pharmaceutical products containing narcotic substances in quantities of up to 50 mg per dose unit, in combination with other pharmaceutical substances, shall be prescribed on a general prescription form. In accordance with Art. 11, Para. 2 of the same Regulation pharmaceutical products, containing narcotic substances in combination, shall be prescribed on a green prescription form- Annex № 7. For the products listed in Annex № 7 more strict measures of control shall be applied, since when the Drugs and Precursors Control Act and the subdelegated legislation to it were being written, there were data for abuse with these substances.

Over the last years there have been no data for these pharmaceutical products abuse. Moreover, their prescribing and selling under a special regime- on a special green prescription form, embarrasses both patients and doctors.

In view of the above stated, from Annex № 7 to Regulation № 4/2001 the pharmaceutical products containing 1 narcotic substance in a quantity of up to 50 mg per dose unit in combination with other non-narcotic pharmaceutical products, are nullified from the Regulation, and their prescription shall be under the terms of Art. 15 of the same Regulation. In the Annex remain the combined pharmaceutical products containing more than 1 narcotic substance.

➤ By a Report- Resolution № 30 of the Council of Ministers an Updated Action Plan for the period 2006-2008 for implementing the National Strategy to Combat Drugs was adopted 2003-2008.

The updated Action Plan for the period 2006 - 2008 for the National Strategy to Combat Drugs (2003-2008) has been prepared in compliance with a Report Decision of the Council of Ministers from 20th October 2005 referring to a List of Measures under Chapter 24 "Justice and Internal Affairs" – section "Combating Drugs", Volume 13 /section 30/.

The activities, stipulated in the updated Action Plan are consistent with the strategic goals and tasks, provided for by the National Strategy to Combat Drugs 2003-2008 and with the basic priorities of the EU Drugs Strategy (2005-2012) and the Action Plan under it.

In the updated Action Plan for the period 2006 - 2008 tasks are planned which represent the continuation of specific activities already begun in the sphere of reducing drug supply and demand. Definite deadlines are set to these activities, and responsible institutions and partners for the implementation of the strategic tasks are pointed.³

Law Enforcement

With the aim of prevention, proving and documenting criminal activity in accordance with Art. 354-a, Art. 354-b, Art. 354-c from the PC for the year 2006 the employees of **Criminal Police under the MI** checked on the territory of the country a total of 1,091 notifications about the production and dealing with drugs and precursors (for 2005 – 1,138).

The persons dealing with drugs numbered 1,020 and 438 of them deal with cannabis, 346 with heroin, 39 with cocaine and 197 are synthetic drug dealers. The persons both drug users and drug dealers numbered 941, 444 of them being under aged.

³ For more details of the updated Action Plan see the Institutional Framework, Strategies and Policy in the same Chapter.

The number of persons detained with drugs on them was 2,524 (in 2005 they numbered 2,633), of whom 2,498 were Bulgarians (in 2005 the Bulgarians numbered 2,613) and the number of foreign citizens was 26 (in 2005 they numbered 20).

After 260 lawsuits have been realized (in 2005 their number was 258) in the country 2,773 persons were detained for drug production and dealing (in 2005 the number of persons detained for such reasons numbered 2,634).

In 2006 there were 2,397 claim files for instituting preliminary proceedings (in 2005 their number was 2,445), of which 1,892 were against persons using and dealing with drugs (in 2005 their number was 1,959) and 505 of them were against persons dealing with drugs (in 2005 their number was 486).

On carrying out the instructions of the effective normative acts checks of the open drug scenes, of public sites visited by under aged are done monthly, the school regions, computer clubs, play halls and recreational sites are also checked- namely: 6,133 open drug scene, clubs and recreational sites have been checked and preventive measures were applied there, and the respective figure for the same period of 2005 was 6,639.

228 new open drug scenes and sites for drugs sale were discovered (in 2005 the respective number was 289).

2,704 specialized police operations were performed (in 2005 – 2352) and 3,831 school regions have been checked (in 2005 the number of school regions checked was 5,514).

Their aim was to observe the regulations of Art. 193 and Art. 354-a, Art. 354-b, Art. 354-c from the PC, Art. 56 and Art. 58, Para. 3, of the Public Health Act, and Art. 73, Para. 1, section 1 of the gambling Act, the regulations of Municipality Ordinance № 1 of the municipality of Sofia, mapping concrete measures to prevent drug-related crime and sanctioning detected offence or criminal activity. [Criminal Police Department, 2007, 1-2]

The data from the inquisitorial procedures at the **National and Regional Departments of Investigation** for drugs smuggling and trafficking show that in 2006 the number of preliminary proceedings investigated was 947. 875 of them were completed for trial. The defendants numbered a total of 493 persons, 42 of whom were retrained in custody, 10 were foreigners and 124 were under aged (see *Table 1-1*).

Table 1-1

INQUISITORIAL PROCEDURES AT THE NATIONAL AND REGIONAL DEPARTMENTS OF INVESTIGATION FOR DRUGS SMUGGLING AND TRAFFICKING IN 2006

1. Total number of preliminary proceedings investigated	947
2. All completed,	875
Incl. for trial	493
3. Defendants	643
Of them:	
- retrained in custody	42
- foreigners	10
- under aged /only Bulgarian citizens	124
- Bulgarian citizens of age	457

Source: National Department of Investigation

In 2006 the **public prosecutors** monitored, guided and supervised a total of 4,767 pretrial proceedings for crimes under Art. 354a, 354b, and 354c of the PC and for customs smuggling under Art. 242, Par.2,3,4 and 9 from the PC - 153 pretrial proceedings.

The newly instituted in 2006 pretrial proceedings for crimes under Art. 354a, 354b and 354c numbered 3,214, and 1,553 proceedings had remained from the preceding period.

Of the 4,650 proceedings instituted and monitored under Art. 354a of the PC 9 proceedings had as criminal offence *production and processing*. Under Art.354a with criminal offence *acquisition, keeping /storing included/* (State Gazette issue 75/2006) the pretrial

proceedings numbered 4,223. Under Art.354a with criminal offence *dealing* the pretrial proceedings numbered 204. The pretrial proceedings under Art.354b of the PC with main criminal offence *persuasion to use narcotic substances or their precursors* numbered 13. The pretrial proceedings under Art.354c *crimes related to plants containing narcotic substances* numbered 104.

The total number of the defendants in the proceedings instituted and monitored under Section III – Crimes against Public Health, in the part referring to drug related crime - was 4,734 persons. For crimes under Art.354a the defendants numbered a total of 4,647 persons, for crimes under Art.354a – production and processing- the persons accused numbered 8, for acquisition, keeping and storing – 4,233 persons and for dealing- 234 persons. For crimes under Art.354b of the PC the number of the defendants was 12. For crimes under Art.354c from the PC the number of the defendants was 75. The total number of the defendants sentenced under these articles was 1,824, and 1,388 persons of them had a sentence enforced. The persons with acquittal numbered 346, for 201 persons of them the acquittal had an effective date set.

Pretrial Proceedings Related to Drug and Precursor Smuggling

The total number of the pretrial proceedings under Art.242, Para. 2, 3, 4 and 9 of the PC was 153. Of them under Art.242, Para.2 the proceedings numbered 67, under Art.242 Para.3 – the proceedings numbered 16, and under Art.242, Para.4 – the proceedings numbered 70. Under Art.242, Para.9 there are no there were no proceedings instituted and monitored in 2006.

The total number of the defendants was 210. Of them for crimes under Art.242, Par. 2 the defendants numbered 72 persons, for crimes under Art.242, Par.3 the defendants numbered 22 persons and for crimes under Art. 242, Para.4 the defendants were 116. The total number of the persons sentenced was 25. 13 persons had a sentence come into force. 3 persons were acquitted but there was no acquittal with an effective date set.

For a total of 2,918 pretrial proceedings drugs have been seized. Of them heroin was 737.27 kg, cocaine - 59.85 kg, marijuana - 2921.09 kg and other - 1248.91 kg.

Precursors seized – 570.70kg and plants - 96.01kg. The total amount of the substances brought to the Customs Agency to be destroyed was 2461.87 kg, and the quantity used for expertise was 68.06 kg. [Group for Coordination and Analysis 2007, 34-35]

On the information provided by the **Ministry of Justice** at all the **courts** in the country the proceedings are instituted and the defendants are sentenced under the respective texts of the Penal Code - Art.242 and from Art.354a to Art.354c. These are texts referring to illegal drug trafficking, (Art.242), as well as to the acquisition, production, processing, storing of drugs or their analogues (Art.354a – 354c).

A number of the sentences pronounced by courts of first instance in 2006 were appealed and the proceedings have not been closed. For this reason it is not practically possible to compare the definitely concluded in 2005 proceedings and to delineate the trends of this type of crime.

The information on the activity of the courts of first instance in the country shows that in 2006 at the district, regional and martial courts there were a total of 2,866 cases for hearing which were related to drugs (see *Table 1-2*). Of them 1,213 cases were closed by pronouncing a sentence, and the total number of the persons convicted was 1,971. The penalty most often imposed was imprisonment for up to 3 years. For comparison - in 2005 the cases numbered 2,464, and of them 1,406 were closed by pronouncing a sentence and the total number of the persons convicted was 1,315.

Table 1-2

**FIRST INSTANCE CASES WHICH WERE UNDER WAY AT DISTRICT, REGIONAL AND
MARTIAL COURTS IN BULGARIA IN 2006**

(in absolute number)

COURTS	REGIONAL	DISTRICT	MARTIAL
Crimes under the Penal Code	Art. 242/2,3, Art.354a,b, 354c/2-4)	Art. 242/2,3, 354, 354a/5, 354c/1	Art. 354, 354a,b, c
INFORMATION ON THE CASES			
Cases not closed at the time the report is written	883	46	11
Total number of cases brought to court	1,723	167	36
Incl.: Newly instituted	1,589	159	32
Of them summary proceedings	-	8	-
Cases for hearing	2,606	213	47
Cases closed			
Solved by a sentence	1,169	21	23
Discontinued - Total	219	88	13
By agreement, Art. 381-384 Criminal Procedure Code/CPC/	823	70	10
Summary proceedings - discontinued	-	7	-
Cases not closed at the end of the report	395	104	10
Duration of hearing the cases			
Up to 3 months	1,276	71	29
Longer than 3 months	935	38	8
Cases appealed	242	16	6
INFORMATION ON THE PERSONS CONVICTED			
Persons sentenced - total	2,347	125	43
Incl. acquitted	412	6	2
Total number of persons convicted	1,820	114	37
Incl. minors	68	8	-
Penalties imposed			
Imprisonment for up to 3 years			
Total	1,532	62	36
Suspended sentence	1,116	47	34
Imprisonment for 3-10 r.	142	17 *	1
Imprisonment for 10-30 years	21	-	-
Fine	-	7	-
Probation	-	22	-
Other penalties	125	6	1
Penalty imposed under Art. 381-384 CPC	909	76	14

Source: Ministry of Justice.

* Imprisonment for 3-15 years

On the information of the Ministry of Justice there data are collected only about the cases heard and the number of persons convicted only by the first instance courts. The National Institute of Statistics should have the information about the number of persons with sentences come into force. In fact it is the data provided by the National Institute of Statistics showing that in 2006 the number of drug-related crimes penalized (smuggling of drugs, preparation, acquisition, keeping, trafficking, and persuasion to use drugs) - from 866 in 2005 increased to 1,485 in 2006 or there was a 71 % increase. 1,587 persons were convicted, the increase was by 72 % in comparison to 2005 (see *Table 1-3*)⁴.

Table 1-3

CONVICTIONS AND CONVICTED PERSONS FOR DRUG-RELATED CRIMES IN BULGARIA OVER THE PERIOD 2000-2006

Drug-related crimes	2000	2001	2002	2003	2004	2005	2006
For which a sentence was pronounced	222	150	287	505	698	866	1,485
Persons convicted	232	169	293	525	743	921	1,587

Source: National Institute of Statistics

Institutional Framework, Strategies and Policy

Coordination

The **National Council on Drugs**, established in 2001, is a body under the Council of the Ministers of the Republic of Bulgaria, which implements the national policy against drug abuse and for combating drug trafficking. It is a collective body, consisting of a chairperson (the Minister of Health), of two deputy chairpersons (the Chief Secretary of the Minister of the Interior and the Deputy Minister of Justice), a secretary and members. The members of the council are representatives of the concerned ministries, of the President of the Republic of Bulgaria and of the Supreme Court of Cassation, of the Supreme Administrative Court, of the National Investigation Department and of other offices. The council shapes and coordinates the national policy in the sphere of drugs and precursors and adopts the national strategy for combating drug abuse and the illegal traffic of drugs. It is authorized to suggest the draft budget for implementing the national policy in this sphere, and the bills of normative acts referring to drugs and precursors, to voice opinion on bills to conclude and access international treaties and programs, to name and approve the national coordinators for international programs and projects. For implementing its functions and policy it establishes councils on drugs at local level.

In 2006 a Decree of the Council of Ministers of the Republic of Bulgaria was passed, (DCM № 136 dated 5th June 2006) to amend the Statute of the organization and the activity of the National Council on Drugs. The amendment to the Statute has been prepared in compliance with the Bill to amend the Drugs and Precursors Control Act (promulgated in the State Gazette, issue 79 from 4th October 2005). By this Act Art.15 was amended and a new Art.15a was passed, regulating the establishment of the **Regional Councils on Drugs** at the municipalities whose administrative centers are also administrative centers of regions, and the option for the rest of the municipalities to establish **Municipal Councils on Drugs**, should the case arise, and if there is the respective source of funding is also regulated.

In order to achieve a better thoroughness and precision in the organization of the Regional Councils on Drugs, in the Decree to amend the Statute of the organizations and the activity of the National Council on Drugs, the structure, the way of confirming, the organization of their activity and their function and interaction with other bodies of the local and state authorities have been indicated.

For the recognition of the role of the Regional Councils on Drugs in the sphere of combating drug abuse at local level the option has been provided for the chairpersons of the Municipal

⁴ Source: National Institute of Statistics, <http://www.nsi.bg/SocialActivities/Crime.htm>

Councils on Drugs of the municipalities in the respective region to participate in the meetings of the councils. It has been stipulated that the Regional Councils on Drugs provide the methodological guidance of the Municipal Councils on Drugs with the aim of achieving a better coordination when implementing the programs to combat drug abuse.

In the Decree to amend the Statute of the organization and the activity of the National Council on Drugs the basic rules for the work of the Regional Councils on Drugs are regulated and in view of the specific necessities to preserve the independence in organizing their activity, the option is presented for working up their own rules of work.

In order to provide the funding, the cadres and the activity of the Regional Councils on Drugs, their funding from the republican budget has been stipulated in the Bill to amend the Drugs and Precursors Act.

By the text of the preceding and concluding regulation it has been stated that the Municipal Councils on Drugs at the municipalities whose administrative centers are also the administrative centers of regions, shall continue to implement their activity and shall be renamed to "Regional Councils on Drugs". This is aimed at preserving the current structure of the Municipal Councils on Drugs established at the regional centers, at preserving the organization, the work done and results achieved as well as at providing the continuity in their activity.

The National Center on Addictions /NCA/ has been established by virtue of a Decree of the Council of Ministers № 14/1st February 1994 on the basis of the existing at that time "Prostor" clinic on addictions under the State Faculty Hospital. Under the Decree of the Council of Ministers № 69/19th March 2001 the NCA has been transformed under the same name and a new Statute of its functions, tasks and structure has been adopted. By a Decree of the Council of Ministers № 363/29th December 2004 on the structural changes in the system of healthcare, the National center was again restructured, and from it the activities of realizing the prophylaxis, diagnostics, treatment and rehabilitation of the drug abusers and drug addicts were set apart.

Nowadays the National Center on Addictions realizes mainly the functions of a body to coordinate and methodologically guide the problems arising from drug abuse and drug addiction (including the activities related to drug abuse prevention, treatment, harm reduction and the rehabilitation of drug abusing persons or of drug addicts), it is a body of specialized control of the treatment activity in respect to drug abusing persons or drug addicts, and in a more general sense it is an expert body in the sphere of drug addictions.

In 2006 a project was prepared to amend the Statute of the functions, the tasks and the structure of the National Center on Addictions, which was adopted by the Council of Ministers of the Republic of Bulgaria by a Decree № 120 from 26th May 2006 (promulgated in the State Gazette issue 46 from 6th June 2006). The amendments passed are texts referring to the place, the functions and the tasks of the National Focal Point.

The National Focal Point on Drugs and Drug Addictions is a unit established by a Decision of the National Council on Drugs and by an Order of the Minister of Health, as a part of implementing the National Strategy to Combat Drugs 2003 - 2008.

The NFP has been based on the National Center for Drug Addictions. The group carries out informational, analytical, science and research, expert and consulting and publishing activity and is the formal partner of the European Monitoring Center on Drugs and Drug Addictions (EMCDDA) on the part of the Republic of Bulgaria. It is a participant in the European network of information in the sphere of drug addictions (REITOX).

In October 2004 was established and has already been functioning for a few years the **National Drugs Intelligence Unit (NDIU)**. In it all the institutions involved in detecting and preventing crimes related to drug and precursors trafficking and dealing, including the competent services of the Ministry of the Interior - Chief Directorate for Combating Organized Crime /CDCOC/, Chief Directorate for Antisocial Deeds and Public Order Preservation and Prevention /CDASDPOPP/, the National Investigation Service /NIS/, National Service Border Police /NSBP/, as well as the Customs Agency and the Agency for Financial Intelligence at the Ministry of Finance are represented. 8 employees from the respective services and agencies have been commissioned to NDIU, and their manager has been appointed by an order of the Minister of the Interior. The national group has been introduced to the participants in the mini-Dublin group and to

the officers for contact from the member countries of the EU. Rules for the work of the national Group have been worked out.

The Coordination and Analysis Unit (CAU) established at the Directorate for Control of the Informational and Administrative Activity (DCIAA) at the Ministry of Interior (MI), involved in the monitoring and coordination of the implementation of the National Strategy for Combating Drugs 2003-2008 also functions effectively.

National Strategy

In 2006 the **Updated Action Plan for the period 2006-2008** was adopted for the implementation of the tasks set by the National Strategy to Combat Drugs 2003-2008. It has been prepared in compliance with an Official Decision of the Council of Ministers from 20th October 2005 and refers to A List of Measures under Chapter 24 "Justice and Internal Affairs"- "Combating Drugs" section Volume 13 /section 30/.

For the activities provided by the Updated Action Plan the strategic goals and tasks, provided by the National Strategy to Combat Drugs 2003-2008 have been taken in consideration. The main priorities of the EU Drug Strategy (2005-2012) and the Action Plan under it have also been taken in consideration. The updated Action Plan for the period 2006 - 2008 provides tasks which are a continuation and expansion of concrete activities already started in the sphere of reducing drug demand and supply, and for these activities there are deadlines set, responsible institutions named and partners selected for implementing the strategic tasks.

The effective implementation of the National Strategy to Combat Drugs (2003-2008) and the Updated Action Plan for the period 2006 - 2008 will contribute to applying the principles and standards of the European Union in the sphere of combating drugs. The drug problem is a complex one and the isolated activities of the specific institutions are not enough to cure it. Combined efforts of the state institutions, of the civil society and of the NGOs and the international partners are necessary.

In the Updated Action Plan for the period 2006 - 2008 what is highlighted in respect to the strategic task of reducing drug demand is:

- broadening the options for acquiring systematic health education in the sphere of secondary education;
- developing models and standards of education in the sphere of addictions to be introduced in the university education in medicine after programs applied for other similar professions;
- implementing programs to assist parents for coping with drug-related problems;
- enhancing the public awareness on the problems of addictions through the mass media;
- working up programs for drug use prevention by exercising sport and tourism;
- implementing preventive activities oriented to high risk target groups;
- enhancing the effectiveness of control on the activities with narcotic substances and their preparations used for medical purposes and improving the coordination among the groups involved with the control;
- overcoming the social deprivation and deprivation of the high risk groups by organizing therapeutic modules in the places of detention;
- providing effective social rehabilitation and integration of the drug- addicted persons who have successfully completed a course of treatment;
- setting up a network of programs and services for treatment of addictions at national and municipal level, as well as offering an easier access to them;
- introducing the good European and world practices for prevention, treatment, rehabilitation and reduction of drug-related harm.

In the Updated Action Plan for the period 2006 - 2008 the focus of the strategic tasks of demand reduction is on:

- effective counteraction to drug dealing inside the country and to drug-related crime;
- bettering and perfecting border control, perfecting the effectiveness of customs control to prevent and detect the illegal drugs and precursors trafficking, with focus on the borders of the republic of Bulgaria, which since January 1st 2007 have become the outer borders of the European Union;
- increasing the effectiveness in counteracting drug-related crime and organized crime, aimed at increasing the number of drug-related crimes solved and respectively the number of the persons with penalties imposed;
- improving the cooperation among the law-enforcing organs in the sphere of drugs;
- optimizing the legal frame for drug-related issues.

Policy Enforcement and Strategy Implementation

Reducing the psychoactive substances dealing and abuse and the prevention of addictions among the population was a main task and goal set in our plans for the work of the Regional and Municipal Councils on Drugs in 2006. To implement this new Information and Preventive Centers /IPC/ have been established. The work of the IPC in the preventive and information activity to reduce the harm related to drug use and abuse among students and youths, in their work with teachers and parents and with groups at risk and for preventive awareness of the public and for creating intolerance to addictions is realized through:

- Developing and implementing programs to assist the parents and to work with high risk groups;
- Organizing and conducting media campaigns to combat drugs and drug addictions;
- Implementing sports and tourism programs, organizing youth concerts and alternative activities for making the best of leisure time and creating intolerance to addictions;
- Educating multidisciplinary teams for the implementation of broad public prevention and evaluating the awareness of and the attitudes to the psychoactive drugs;
- Training of the people involved in the preventive programs, events and campaigns with the aim of building up networks of trained people.

At the end of 2006 the number of IPC at the Regional Councils on Drugs was 21. There were newly established centers in the towns of Veliko Tarnovo, Gabrovo, Kyustendil, Kurdzali, Razgrad, Haskovo, Shumen and Jambol.

The regional Councils on Drugs/IPC have done their preventive work in close cooperation with state, municipal and non-government organizations and institutions like: The Regional and Municipal Boards, the Regional Directorates of internal affairs and the divisions specialized in the prevention of addictions, the Regional Inspectorates on Preservation and Control of Public Health, Youth Councils on Drugs, the Local Committees for combating the antisocial deeds of minors and under aged, the Bulgarian Red Cross and the local media.

At the beginning of December 2006 under the guidance of the National Program for implementing the Action Plan of the National Strategy to Combat Drugs (2003-2008), of the secretariat of the National Board on Drugs and of the National Center on Addictions two educational seminars were held on topic:

- “Interrelations in the team and effective communication” – for team leaders of the IPC/RBD;
- “Work with the target groups - training communicative skills” for team members of the IPC/RBD.

The lectures and seminars were conducted by representatives of ‘KETEA’ – Greece - Mr. Phedon Kalotherakis, deputy executive manager of “KETEA” and Mrs. Yoanna Kiritsi - manager of the “Prevention” department of “KETEA” - conducted intensive and successful training.

Policy and Strategy Evaluation

There are no updated data on the policy and strategy evaluation.

Budget and Public Expenditure

In the sphere of law enforcement, social care and healthcare, research, international activities, coordination and national strategy

Under the National Program for implementing the Action Plan of the National Strategy to Combat Drugs for 2006 with BGN 150,000 planned for it, only BGN 93,000 were allotted to the National Center on Addictions. According to the account BGN 84,943 of them have been spent, and the rest of the sum has been granted to the Directorate of the National Service on Narcotic Substances to spend. As per paragraphs the sum of BGN 84,943 has been spent as follows:

Remuneration and payments to part-time staff hired under non-labour legal relations	27,938
Insurance payments by the employers	3,128
Materials	99
Water supply, fuel, energy	3,155
Expenses for external services	43,120
Business trips in the country	36
Short business trips abroad	7,372
Expenses on insurance	85
Other financial services	1

The account for the expenses spent on the realization of the activities of the National Program for the development of the system of methadone maintenance treatment programs in the Republic of Bulgaria in 2006 is rendered in the Report on the cash budget payments done by the NFP according to paragraphs , for the “National Programs” Activity 467 as follows:

Remuneration and payments to part-time staff hired under non-labour legal relations	4,060
Insurance payments by the employers	375
Expenses for external services	5,018
Business trips in the country	547
TOTAL:	10,000

The main sum under this National Program – BGN 230,200 has been spent by the Ministry of Health for purchasing methadone-hydrchloride for the methadone maintenance treatment programs run in the country.

For the implementation of the policy of great importance is the funding of the National Center on Addictions.

The National Center on Addictions is a self-dependent corporate body under the Ministry of Health funded by the state budget, as a second-rank administrator of budget grants. Like all the budget establishments the NCA executes its financial activity observing a set of principles, procedures, regulations and norms. The ultimate goal is to prepare and present periodical information on the financial state of the NCA by a definite date and on the financial results on the activity done.

The state budget planned for 2006 amounted to BGN 240,512. Of them the NCA has spent BGN 234,641. For the implementation of the activities and tasks planned the NCA has been assisted financially by the National Program for the implementation of the Action Plan of the National Strategy to Combat drugs 2003 – 2008 and by the National Program to develop a system of methadone maintenance treatment programs in the Republic of Bulgaria /2006 – 2008/.

Order of funding

There are no updated data on the order of funding.

Social and Cultural Context

There are no updated data on the social and cultural context.

2. Drug use in the General Population and Specific Sub-groups

Within the frames of this section the following main topics will be reviewed:

- Drug use among the population;
- Drug use among students and youths;
- Drug use among specific subgroups of the population.

On reviewing the two main topics the attention will be focused on the drug dealing and the ways of use, as well as on the main characteristics of the psychoactive substance users among the general and the young population. The source of information used was epidemiologic survey on a national and local level.

The third topic covers current data from the survey and routine sources of the drug use among the representatives of two specific groups of the population- those of the military and of the prisoners.

Drug Use among the General Population

In 2005 a representative national survey was conducted among the general population of Bulgaria⁵ about the use of and the attitudes to different psychoactive substances. It was funded by the National Strategy to Combat Drugs 2003-2008 and was conducted by the National Focal Point on Drugs and Drug Addictions, the National Center for Public Opinion Research and the Social Strategies and Initiatives Center in the months of February and March 2005. 1037 persons aged 18-60 from 86 settlements throughout the country were polled. The method of direct individual home inquiry was used to collect empirical information. This survey gave information about the drug use among the population. (See *Annual Report of Bulgaria 2006*).

There are no new data available about the drug use among the general population. At the end of 2007 a pilot study was conducted, and the next national representative survey is scheduled for the spring of 2008.

Drug Dealing and Drug Use

There are no new data available about drug dealing and drug use among the general population.

If we go back to the data from the last survey, we can see that 5.2 % of the adult population aged 18 - 60 in the country have used some drug at least once in their lifetimes. This means that around 225 000-235 000 persons have at least once in their lifetimes used some illicit drug. If we add to this the students, we can summarize that at least **315 000-330 000 Bulgarian citizens aged 15 to 60 years have at least once in their lifetimes used some drug** (see *Annual Report of Bulgaria 2006*).

In addition it can be assumed that around **280 000-295 000 Bulgarian citizens aged 15 to 34 years have at least once in their lifetimes used some drug**. It can be easily deduced that **the young people aged 15 to 34 represent around 88-90 % of all the people in the age group 15-60 who at least once in their lifetimes have used some drug**.

⁵ The national representative survey among the general population on the use of psychoactive substances, National Focal Point on Drugs and Addictions, National Center for Public Opinion Research and National Center for Social Strategies and Initiatives, February- March 2005 1037 persons aged 18-60 from 86 settlements throughout the country were polled.

In Sofia the part of those who have used some drug is more numerous than in the cities-regional centers and in the other towns and villages. Marijuana is the most widely used illicit drug. It is assumed that around 4,500-5,000 persons use it in some type of intensive manner - more than 5 times during the last 30 days. The second most numerous in respect to the illicit drugs is the group of the persons who have used synthetic stimulants. The groups of the persons who have used at least once in their lifetimes heroin or other opiates, cocaine, hallucinogens volatile substances (glues, bronze, etc.) are nearly equal in number - each of them around 1 % of the population aged 18-60 years. Also impressive is the relatively wide use of hypnotics and tranquilizers among the general (and mainly among the adult) population. These are medications which are not on the list of the illicit drugs, but they are often sold over the counter, in seeking a definite effect (see *Annual Report of Bulgaria 2006*).

Characteristics of the Drug Users

There are no new data available about the characteristics of the drug users among the general population.

When summarizing the data from the survey it can be seen that the men aged 18-60 who have used some illicit drug at least once in their lifetimes are thrice as many as the women. The ratio for the hypnotics and the tranquilizers is the opposite - among the women, especially among the elder, the number of those who have used some of these drugs at least once in their lifetimes is thrice as many as that of the men.

Attitudes

There are no new data available about the attitudes of the general population about drug use.

The data from the recent survey show that a great number of the people aged 18 to 60 are of the opinion that in order to cope with the "drug" problem we need to have strict laws enforced against the drug producers and drug dealers. Half as many are those who insist on strict laws against the drug users or on the establishment of more medical centers for treatment.

Drug use among the Students and Youths

Drug Use Incidence

Among Students at Universities

On a National Level

In the spring of 2006 a representative national survey among the university students in Bulgaria was carried out ⁶ about the use of and the attitudes toward different psychoactive substances. It was funded through the National Strategy to Combat Drugs 2003-2008 and was conducted by the National Focal Point on Drugs and Drug Addictions and by the Fact Market Agency in the months of May and June 2006. 3220 university students from I to IV year from 24 universities in 7 towns in the country were polled. Keeping in line with the topic of this section of the report, in the analysis are included the data about 3065 of them, who at the time they were polled were aged from 18 to 29 years. When collecting the empirical information the method of direct group anonymous inquiry was applied. This survey presented information about the awareness, the use of and the attitudes toward the psychoactive substances among university students. Part of this survey has already been presented ⁷.

⁶ "University students and psychoactive substances", national representative survey among the university students in Bulgaria, National Focal Point on Drugs and Drug Addictions and Fact Marketing Agency May- June 2006, 3220 students from 24 universities in 7 Bulgarian towns have been polled

⁷ See Annual report on the drug-related problems in Bulgaria '2006

On the data of the survey 35.2 % (or around 75,000) of the university students in the country have at least once in their lifetimes used some drug. Besides 9.2 % (or nearly 20,000) of the students have used some drug in the last 30 days before the poll. We can define them as “active users”.

The data show quite clearly that cannabis (and especially marijuana) is the most widely used illicit drug. At least once in their lifetimes 32.9 % of those polled have used it or around 70,000 university students, and for the last 30 days it was used by 8.6 % of those polled, which means 18 000 students. Nearly 1/3 of them or 2.6 % of all the persons polled (around 5,000-6,000 students) reported some kind of intensive use – more than 5 times for the last 30 days. Most probably the predominant part of them smoke marijuana on a daily routine.

The second biggest in respect to the illicit drug use is the group of the synthetic stimulant users⁸ - the word is mainly about amphetamine and substances of the type of ecstasy. Those who have at least once in their lifetimes used ecstasy are 8.4 %, and 1.5 % have done this in the last 30 days; in respect to amphetamine the respective rates are 6.5 % and 1.3 %. Summarizing this we can show that 10.5 % of those polled have at least once in their lifetimes used amphetamine and/or ecstasy (nearly 22-23,000 students). Still, according to the data from the survey those who have used synthetic stimulants more than 5 times during the last 30 days (which according to the working definition of the EMCDDA may be assumed as a sign of problem drug use) make up for only 0.3 % of those polled, respectively not more than 1,000 university students in the country.

The growing use of cocaine can be noted. A survey among the young people in the town of Sofia conducted in 1999⁹, targeted at nearly the same age group, showed some kind of cocaine use by 2.6 %, and for the last 30 days - by 0.7 % of those polled. The survey conducted in 2006 showed respectively 4.9 % and 1.2 %.

Still another trend is of interest, which was detected in the survey - contrary to the growing age (and respectively with every successive course) of the number and the part of the people with some kind of experience in drug use, i.e. “at least once in their lifetimes” with every successive course the relative part of the university students who have used some kind of drug for the last 30 days is diminishing, i.e. the active drug use is diminishing. Both the diverging tendencies seem normal, although interpreted in a different way. In short, with growing age and with graduation approaching more and more students have used drugs, but fewer and fewer of them continue doing so. The proof for this is the decrease in the number of those who have used some kind of drug during the last 30 days before the survey – in the I year at the university those are more than 11.0 % of those polled, in the II year – 9.1 %, in the III year – 8.5 %, in the IV year – 7.8 %, and in the V-VI year – 4.8 %.

On a Local Level

*In the spring of 2005 in the third biggest town in Bulgaria – Varna, a representative sociological survey was conducted, namely “Students and Psychoactive Substances-Varna 2005”. This was the first representative survey among the students of Varna. It was conducted by the team of the Prevention Department at the MFS Directorate in the municipality of Varna, under the methodological guidance of the National Focal Point on Drugs and Drug Addictions.*¹⁰

⁸ We have to bear in mind that in reality there are no big groups of “pure” drug users, who use only a definite substance; in most of the cases there is a combination of substances that are used or concomitant use of more substances.

⁹ Survey of psychoactive substance use among the young people aged 14 to 30 years, living in Sofia (within the frames of the “Alcohol, tobacco and drug use prevention among the young people in the countries from the Central and Eastern Europe” project) July- August 1999, National Center on Drug Addictions and Fact Marketing Agency, 1127 persons aged 14-30 years included.

¹⁰ “University students and psychoactive substances- Varna 2005”, a representative sociological survey among the students in the town of Varna, Prevention Department - the Municipality of Varna, May- June 2005, 1025 students from the 3 city universities have been polled.

The survey was aimed at assessing the extent of drug dealing and the models of drug use among the university students, the characteristics of behaviour of the drug users and the attitudes among the different groups toward the psychoactive substances use.

The survey was conducted through direct, group, anonymous inquiry, in which 1025 full-time students were included (bachelor degree) from the Technical University, from the University of Economics and from the Medical University.

An inquiry card was used, developed by the National Focal Point on Drugs and Drug Addictions, based on the standards of the EMCDDA and on the European practice of research.

Around 40 % of all the persons polled reported that **at least once in their lifetimes** they have used some kind of drug. In more than 90 % of the cases (around 34 % of those polled) cannabis was the drug used (marijuana and hashish), **marijuana being the most widely spread narcotic substance**. Synthetic drugs (amphetamine, ecstasy, "pico") rank second among the most frequently used substances after cannabis– 10% - 12% of those who have reported some kind of use in their lifetimes (or around 4-5 % of those polled). Cocaine comes third, used by around 8 % from the persons in this group (or around 3-3.5 % of those polled). Around 5 % of the polled report having used inhalants (glues, bronze) or anabolic steroids (around 2 % of those polled).

3 % - 4 % have at least once used heroin or some other kind of opiate (morphine, codeine, etc.), and in this way the representatives of this group "rank" fifth in number (around 1-1.5 % of those polled).

According to the conclusions drawn by the researchers, **marijuana is the most widely used drug** among the university students in the town of Varna. Around 3,000 university students (34 %) have smoked marijuana at least once in their lifetimes. Nearly 1,500 university students (15.9 %) have smoked marijuana at least once during the last year. Approximately 600 - 650 university students (7.1 %) are active marijuana users (at least once during the last month). Around 150 - 200 university students (2.24 %) use marijuana on a regular basis (more than 5 times during the last month).

The new trend is **the growing use of synthetic drugs** (amphetamine and ecstasy). 350 - 400 university students (3.9 – 4.2 %) have used amphetamine and/or ecstasy at least once in their lifetimes. 150 - 200 university students (2.0 %) have most probably used synthetic drugs at least once during the last year. 80 - 100 university students (0.9 %) are active synthetic drug users (at least once during the last month). Amphetamine and/or ecstasy use on a regular basis (more than 5 times during the last month) among the university students is 0.5 %.

Cocaine is still being qualified as **hardly available**. Around 200 - 250 university students (2.7 %) have used cocaine at least once in their lifetimes. Nearly 150 university students (1.4 %) have used cocaine at least once during the last year. Around 50 – 60 university students (0.7 %) are probably active drug users (at least once during the last month). Cocaine use on a regular basis (more than 5 times during the last month) among the university students is below 0.5 %.

One of the assumptions of the survey authors was that **heroin is available, but probably unwanted** among the university students in Varna. Nearly 150 students (1.5 %) have used heroin at least once in their lifetimes. Around 50 university students (0.4 %) have used heroin at least once during the last year. Around 50 students (0.4 %) are probably active heroin users (at least once during the last month). Heroin use on a regular basis (more than 5 times during the last month) among the university students is below 0.2 %. [The municipality of Varna 2006, p. 5-6; The municipality of Varna 2007, p. 3-4]

Among the Students

On a National Level

There are no new data available about the drug use among students on a national level.

On a Local Level

At the end of 2006 in Sofia was conducted a survey among the students titled "A Study of Life and the Conditions of Life among the Young People in Europe". It was a part of the international program "European Youth" within the frames of the "European cities against drugs" (ECAD) project. In the survey the cities of Vilnius, Kaunas Klaipeda (Lithuania), Oslo (Norway), Reykjavik (Iceland), St. Petersburg (Russia), Sofia (Bulgaria) and Helsinki (Finland) were included. In Sofia the collection of data was done in the period 8-19th November 2006. A total of 5,181 students from the secondary schools were included, from 9-13 grade, from 262 classes in 99 schools. The survey was conducted by the Preventive and Informational Center on the Problems of Drug Addictions - Sofia with the help of the National Focal Point on Drugs and Drug Addictions and of partners from several metropolitan municipalities.

The first analyses from an international survey marked several conclusions which are indicative in a comparative plan:

- ✓ When compared to the students from 9 other towns in the country, the students from Sofia come first according to the symptom of "getting drunk at least once for the last 30 days" (33.8 %);
- ✓ Among the 9 towns compared the students from Sofia occupy the second place according to the symptom "daily cigarette smoking" (32.6 %);
- ✓ Among the 9 towns compared the students from Sofia occupy the second place according to the symptom "cannabis use at least once in their lifetimes" (27.3 %);
- ✓ The most often mentioned sites for alcohol drinking sometimes or often among the students in Sofia are: homes of other people (48.1 %), at clubs/bars/discos (44.0 %) or somewhere else in the open (41.2 %);
- ✓ Among the 9 towns compared the students from Sofia are the fewest to claim that they rarely or never spend their leisure time on weekdays (23.9 %) or in the weekends (17.2 %) together with their parents.¹¹

In the month of November 2006 in the third largest town in Bulgaria – Varna, a representative sociological survey was conducted "Students and Psychoactive Substances – Varna 2006". It was conducted by the team of the Prevention Department – MDS Directorate, the municipality of Varna.

In the survey were included 2011 students from VIII and IX grade from 13 secondary schools included in the "Public Program to Prevent Drug use at School". The means age of the students polled was 14.5 years.

The survey was conducted using a direct, group and anonymous inquiry, the questionnaire being worked out on the basis of the ESPAD questionnaire (European School Poll on Alcohol and other Drug Use) and the questionnaire of the National Focal Point on Drugs and Drug Addictions to assess the level of psychoactive use prevalence among the teen-agers.

The survey was only to assess the illicit drug use prevalence (heroin, other opioids, cocaine, amphetamine, ecstasy, marijuana, hashish, "magic mushrooms" and LSD).¹²

Nearly ½ of the persons inquired report that they have close friends or acquaintances about whom they know to be drug users; 1/4 of the persons inquired have been present at **parties** where drugs were being used, and for 8 % of the persons inquired this was a regular experience;

¹¹ "Survey of life and the conditions of life for the young people in Europe", representative international comparative sociological research within the frames of the „European Cities against Drugs" (ECAD) project; in Sofia the survey was representative for the students from the secondary schools (9-13grade), as well as for the students born in 1990 . Preventive and Informational Center on the Problems of Addictions – Sofia, November 2006, 5, 181 students have been polled from 262 classes in 99 schools in the city.

¹² "Students and Psychoactive Substances – Varna 2006", representative sociological survey among the students from VIII and IX grade in the town of Varna, Prevention Department – the municipality of Varna, November 2006, 2011 students have been polled from 13 secondary schools in the town.

1/4 of those polled were at a **disco** in the last year where they saw drugs being used, and every tenth person reports that this happened often; 1/3 of the persons polled report that they have been personally **offered drugs** and on rare occasions this was forced.

Approximately 18 % of all the students polled have used some illicit drug at least once in their lifetimes. More than 2/3 indicate as a cause for the first use the knowledge of and the willingness to experience some pleasure. For every tenth person the use was forced, and for every eighth person the use was an attempt to solve some, most often emotional problem. There was not a single injecting drug use registered.

Every sixth of the persons polled used some illicit drug in the last year, which as a group represents 92 % of those who have reported about drug use at least once in their lifetimes. Every tenth of the persons polled used some kind of illicit drug in the last month, which as a group represents 57 % of those who have reported drug use at least once in their lifetimes. Active drug use on a regular basis (more than 5 times over the last month) is rarely observed among the persons polled except for marijuana (3 %), for all the rest of the substances practically there is no such use.

Marijuana is the most widely spread illicit drug in the group under research. This covers more than 90 % of the cases, where some kind of use has been reported- ever in life, in the last year, in the last month.

Hashish – the other representative of cannabis (apart from marijuana), comes second in prevalence for a 1/4 of the persons who have used some illicit drug.

Synthetic drugs (amphetamines – 16 % and ecstasy – 13 %) are the second most widely used group of substances among the persons who have reported some kind of use during the periods under research- ever in life, in the last year, in the last month.

Cocaine is the third **most** widely spread drug after cannabis and the synthetic drugs–5,5 % of the persons who have reported use at least once in their life.

The trend still holds of rare **heroin and other opioids** use among the students.

The use of **hallucinogens** (“magic mushrooms” and LSD) is only incidental and of isolated character. [Municipality of Varna 2006, p. 2-3; Municipality of Varna 2007, p. 7-8

Patterns of Use

The first drug use in life usually occurs at a party. This fact has already been registered and described many times.¹³ The data from the last surveys among the general population of Bulgaria confirm this once again. The representative surveys among the general population aged 18 - 60 years in 2005¹⁴, and among the university students in 2006¹⁵ revealed rather a similar picture. Most often the first drug use happens at a party – among the general population these are 34.4 % of those who have ever used some kind of drug, and among the university students - 32.5 % of those who have used some kind of drugs. From a psychological point of view this fact corresponds to the quite opposite case of using the drug “alone at home” which is one of the rarest. This applies especially for the students where the specific way of recreation and spending the leisure time is of special importance.

Among the students what impresses is the fact that the first drug use usually occurs more seldom “at the disco” and it happens more often “in the street, in the park, etc.” Both tendencies are complementing each other and probably they are affected by the time the surveys were conducted, as well as with the more rigorous control over the recreational sites recently imposed, including discos.

¹³ See: The public opinion of drugs and the combat against their use, MBMD and Spasenie Foundation, Analysis, March 2004; Annual reports on drugs and addictions in Bulgaria for 2004 and 2005, National Focal Point on Drugs and Drug Addictions, National Council on Drugs

¹⁴ National representative survey among the general population on the use of psychoactive substances, National Focal Point on Drugs and Drug Addictions, National Center of Public Opinion Research and the center of Social Strategies and Initiatives, February-March 2005, 1037 persons polled aged 18-60 years from 86 settlements throughout the country.

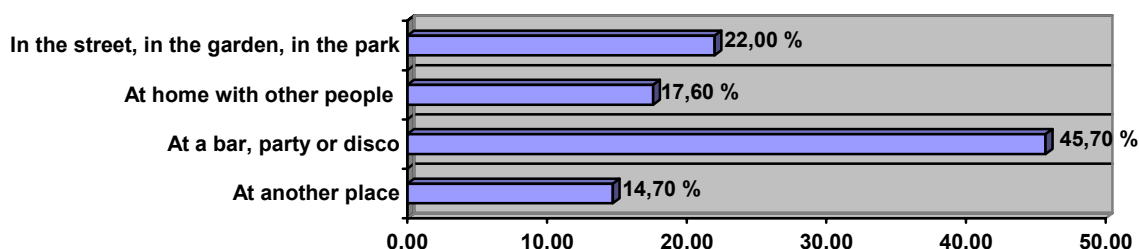
¹⁵ “University students and psychoactive substances’06”, national representative survey among the university students in Bulgaria, National Focal Point on Drugs and Drug Addictions, and Fact Marketing Agency, May-June 2006, 3220 university students have been polled from 24 universities in 7 towns in Bulgaria.

It seems as if the young people do not use drugs at the recreational sites, but before they go there. As if the clubs and discos have turned from a place to use into a motive to use drugs¹⁶.

The survey among the university students in Varna again showed (see *Figure 2-1*), that the sites where drugs are most often used for the first time are the recreational sites- discos, clubs, or at parties. Then come the paces in the open- in the street, in the garden, in the park, and last comes “at home with friends”. [Municipality of Varna 2006, p. 5]

Figure 2-1

SITES WHERE THE STUDENTS FROM VARNA USED DRUGS FOR THE FIRST TIME
(%)



Source: Municipality of Varna, Preventive and Informational Center on Drugs, “Students and Psychoactive substances” sociological survey - Varna 2005

A similar tendency can be seen from the data of a survey conducted among the students in the town of Varna in 2006 this time in respect to the most common place to use synthetic drugs in the last 30 days. Usually this happened at a disco or at a party. (see *Figure 2-1*).

Table 2-1

USUAL PLACE FOR SYNTHETIC DRUG USE IN THE LAST MONTH AMONG THE STUDENTS IN VARNA

	(%)
	Amphetamines / Ecstasy
<i>At home, alone</i>	5.9
<i>At home, with friends</i>	11.8
<i>At a party, visiting s.o.</i>	27.9
<i>Bars, cafes, clubs</i>	11.0
<i>At a disco</i>	26.5
<i>In the street, in the park, on the beach</i>	16.9

Source: Municipality of Varna, Preventive and Informational center on Drugs, “Students and Psychoactive Substances “sociological survey – Varna 2006

Additionally we have to mention that according to the same survey among the students in Varna marijuana was most often used when with friends in the street, in the park, on the beach, at home or at a party.

Characteristic Features of the Drug Users

On the data from a representative survey among the general population in Bulgaria¹⁷ the summarized profile of the people who have at least once used drugs in their life can be represented in the following way:

¹⁶ See also Annual report on the drug-related problems in Bulgaria - 2006

¹⁷ National representative survey among the general population on the psychoactive substance use, National Focal point on Drugs and Drug Addictions, National Center for Public Opinion research, and Center for Social Strategies and

- *They are more often men than women;*
(7.8 % from the men and 2.5 % from the women)
- *Almost invariably young;*
(12.5 % of the persons aged 18-29, 3.9 % of the persons aged 30-39 and 1.0 % over 39 years of age)
- *More often well-off;*
(13.9 % of the persons who say they are not destitute, 4.1 % of those who say they are to some extent destitute and 2.4 % of those who are severely destitute)
- *More often living in the big towns than in the small ones and in the villages.*
(6.7 % of the population of the big towns; 3.0 % of the population of small towns / villages)

There are reasons to believe that the family status, the education completed and the ethnic belonging do not significantly affect the summarized profile of the people who have used drugs at some time in their life.¹⁸

On the data from the survey among the students in Varna¹⁹ some of the social and demographic characteristics of the persons who have at least once in their lifetimes used some of the following substances: heroin, methadone, other opioids, cocaine, amphetamines, ecstasy, “pico”, marijuana, hashish, inhalants (glues, bronze, etc.) anabolic steroids and LSD, are:

- 2/3 are under 21 years;
- 40 % live in rented accommodations or at boarding houses and the rest own their homes or live in their parents’ home;
- Nearly 40 % were under 18 when for the first time they used some kind of illicit drug;
- As a rule this group are not married;
- 1/2 of them report having people in their circle who are known to use drugs;
- More than half of them have been to parties in the last year where drugs were used and for every fourth person of this group this was a frequent experience;
- Around 40 % have been in the last year to a disco where they saw drugs being used and every sixth of them reports that this was a frequent phenomenon;
- Nearly 2/3 report that they have been personally being offered drugs and on rare occasions this was forced.

The data from the survey among the students in Varna²⁰ also add to the portrait of the people who at least once in their life have used drugs:

- The mean age of the people using drugs for the first time is 13.9 years;
- Single-parent families are twice as many in the group of the people who have at least once in their life used drugs than in the group of the people who have never used drugs.

Drug use among some specific groups of the population

There are no updated data on drug use among specific groups of population.

Initiatives, February-March 2005, 1037 persons have been polled aged 18-60 from 86 settlements throughout the country.

¹⁸ See also Report on the drug-related problems in Bulgaria - 2006

¹⁹ “Students and Psychoactive Substances Varna 2005”, representative sociological survey among the students in the town of Varna, Prevention Department – Municipality of Varna, May-June 2005, 1025 university students polled from 3 universities in the town

²⁰ “Students and Psychoactive Substances - Varna 2006”, representative sociological research among the students from VIII and IX grade in the town of Varna, Prevention Department - the Municipality of Varna, November 2006, 2011 students polled from 13 secondary schools in the town.

3. Prevention

In this chapter are reviewed the activities directed to drug use prevention which were done in the country in 2006. The focus will be mainly on:

- The general prevention at school,
- Prevention at municipality level,
- Prevention in the family.

The most popular projects on prevention, which are being implemented in the country, will be shortly described. In the chapter is also presented the selective and indicative work on prevention, done in specific towns in the country.

The frame of the approaches reviewed for the prevention of drug use contains three categories: universal, selective and indicative prevention. Each specific category represents specific target population in respect to the risk of starting drug use, and from this point of view, the level of intensity of the interventional practices. The universal prevention is addressed to three whole groups from the population- national, municipal and school group. The purpose of the universal prevention is to prevent the initiation of drug use. The selective prevention focuses the attention on a more specific part of the population, which is at risk of initiating drug use. An example of selective prevention is the psycho-social assistance rendered to chronically ill people. The indicative prevention is targeted at a group of individuals greatly at risk of becoming drug – addicted, but who still do not meet the criteria of DSM-IV for addiction. Such types of programs demand initial screening to determine the level of risk.

General prevention

School

The state educational requirements for educational content are based on the integrated approach to health education. The basic knowledge, skills and aptitudes to be developed in the students are described. The approaches, based solely on the health education, are also limited only to their impact on the cognitive processes and often lack the particular components of the behavioral training and of the training in social relations. The most important cognitive element, on which prevention can have an effect, is the wrong concept of drug use as something normal and socially acceptable among the population of the same social status. The programs implemented at school environment are already directed to acquiring a large range of skills. Most of them are aimed at introducing into practice **life skills training and peer education** ²¹.

In November 2006 the **Ministry of Education and Science** started a **national awareness campaign** for the prevention of drug use by minors. For a month the national TV and radio programs in Bulgaria broadcast a clip informing about the social problem and appealing to the public to unite their efforts in preventing the Bulgarian children from the risk of becoming drug addicted. “If you begin, life ends” is the message of the campaign. Apart from the electronic media, the schools also disseminated the message to the adolescent. At schools the Ministry of Education and Science disseminates brochures presenting the problem in terms familiar to the teen-agers.

The project “Social program to prevent drug use at school” has been worked out and implemented by the Trimbos Institute- the Kingdom of Netherlands- whose activity is within the sphere of psychic health and addictions. The project is funded by the MATRAKAR program of the Ministry of Foreign Affairs of the Kingdom of Netherlands.

²¹ Source: The Ministry of Education and Science

The project is aimed at working out a clear, effective and consistent social program for the prevention of drug use among students at secondary school and is based on the experience and the standards which have been worked out within the frames of the project "European Schools Promoting Health", funded by the European Committee, and implemented on the territory of the European Union. The main purpose of the project, which was implemented in the period from March 2004 to December 2006, is the introduction of health education curriculum, applicable at the secondary schools in the country, and using the most successful European practices. In the long run the project is aimed at amending the hazardous behaviour of the young people and alerting the public's consciousness on the necessity of turning the school and the territory around it into environment promoting the principles of healthy lifestyle.

The main activity of executing the social program for drug use prevention and promotion of healthy lifestyle among the young people at school level is the implementation of health education curriculum. It is based on the **personality-centered approach** – the focus on the educational process is directed to the student's personality.

The main point is the **social skills training** of the students participating in the studies conducted. The social skills training is directed to augmenting the psycho-social skills in a way appropriate to the cultural context and to the level of development of the trainees, contributing to the personal and social development and health and social problem prevention. The interactive method of training is aimed at the active participation of the students in the educational process, and not at the passive acquisition of ready ideas and rules. The individual and group work, discussions, solving cases, role games and debates are the basic methods used within the frames of the health education curriculum. The students from **VIII to XII grade** are the target group of the program presented.

The main objective of the health education curriculum is for the students to acquire knowledge, to form positive attitude and to acquire skills of healthy lifestyle, to avoid risky behaviour, and to acquire socially adaptive conduct. The health education curriculum includes 36 seminars worked out for the VIII, IX, X and XI grade. It is planned the same number of seminars to be conducted in the XII grade. These 36 seminars are structured in three modules which are the same for all the years - "Personality and Health", "Health and Sexuality", "Drugs-Risky Behaviour".

"Prevention and Anti-Aggression I-V Grade" program uses adapted methods and is addressed to the age group- 7-12 years (I-V grade incl.). It consists of 30 lesson plans for each grade, organized in 30-minute lessons, with detailed instructions for the person conducting the lesson and work sheets for the students. The starting point of the method is to teach the students how to identify and understand their feelings, how to share them and how to express their difficult experiences in a safe way, which does not result in aggression or hazardous behaviour.

The topic of the chemical substances is introduced in a delicate way, again closely related to feelings and behaviour, highlighting the fact that there are substances which change the mood and the specific stages of becoming addicted are illustrated by appropriate age group examples or cases. In this respect the topic is introduced of making decisions and the responsibility of the choice made in relation to cigarette smoking, drinking, drugs, and also the risk on the part of the people around them influencing these decisions- i.e. how to resist the pressure of the group and to run only adequate risk. After the topic of running the risk and the consequences of the hazardous behaviour has been introduced, next comes the topic of the family as something very special and important- the different types of families, difficult family situations, the favourite family occupations and the values cultivated by the family. The last section focuses on improving the self assessment and the self esteem of the students as a strong protective factor for a full-value and healthy lifestyle: perceiving the uniqueness and the strong points every child has- his/her gifts and unique endowments.

The Multi-Module Program, after which work the specialists from the Prevention and Information Center on the Problems of Addiction (PICPA) in the capital is targeted at the following groups: school specialists- pedagogic advisors, teachers, class teachers; nurses; school guards, parents, students from the primary and secondary school. The program is applied in its complete form or in the specific modules depending on the needs of the school and on the specific request. The modules included in the program are as follows: educational and information module for teachers, educational and information module for parents, educational and information module for students from the primary and secondary school, program to train the pedagogic advisors, training module for school health specialists, educational and information module for school guards.

The other program, for whose implementation the PICPA is working now in the capital, dispersing its expert activity in the country as well, is **“Prevention of hazardous behaviour after the “Peer Education” approach”**. The team conducting the training is working with an outer consultant and a trainer who works at the UN Fund for the Bulgarian population. The topics included in the training are: self knowledge; making decisions; confident behaviour; HIV/AIDS; sexually transmitted diseases; unwanted pregnancy; psychoactive substances; training to develop skills for team work.

Municipality

In 2006 the Regional Councils on Drugs (RCD) with the help of the Prevention and Information Centers implemented activities in accordance with the strategies approved to combat drugs and the yearly plans confirmed as well as in accordance with the decisions made at the respective sittings of the RCD.

The main part of the work of the Prevention and Information Centers consists in organizing different forums of training to increase the awareness of the students, pedagogic advisors, school psychologists, teachers and other professionals²². Similar types of training have been conducted in Blagoevgrad, Bourgas, Varna, Sofia, Plovdiv, etc. The common goal is to achieve a higher awareness level, broader public impact, initial change of the negative attitude to drug users, to identify and reject the widely spread myths in relation to drugs and drug addictions.

One of the basic emphases in the activities at national level is the working out of programs for sport and tourism for the children and youths as an alternative approach in relation to the behaviour related to use and abuse of psychoactive substances. In 2006 those were:

- *The “Holidays and Sport” Program*, conducted with the organized participation of 28 Regional Inspectorates on Education and 46 servicing sections, with 150,000 children included in it.
- *The “Sports Holidays” Program*, after which the State Youth and Sports Agency (SYSA) has funded 306 projects from 208 municipalities with a total number of participants 361,000 people.
- *The “Sport for disabled children and for underprivileged children” Program* in which 2,080 children from 17 municipalities are included. After the students’ sports competitions, organized and conducted for students of special educational needs, in the final competitions 600 children were included in 7 types of sport.
- *Students’ Games* – joint initiative of the State Youth and Sports Agency, the regional inspectorates on education, the municipal administration and the sports clubs - students from V to XII grade were included. 115,720 students took part in the first stage - 11 % from the total number of students in the country. In the final competitions 516 school teams exercising 9 types of sport with a total number of participants 5,840 were included. In the sports competitions organized for students from the school sports clubs in the regional and final competitions a total of 10,000 children were included for 19 types of sport.

A significant part of the activity at regional and local level for the last years is the organizing of competitions, exhibitions, campaigns and happenings. On the occasion of the World Day to

²² Accounts of the Municipal Councils on drugs and the Prevention and Information Centers to them for the year 2006

Combat Drugs - 26th June-the State Agency for Child Protection (SACP) ²³ organized free shows of the film “Addiction” at the Arena cinema for the students from Sofia. This initiative was also spread in the country.

Another frequently used form of activity at regional and local level is the issuing of different types of information and health-educational materials, including:

- ✓ Manuals with policies and positive practices to prevent addictions, meant for institutions, organizations and professionals;
- ✓ Studies;
- ✓ Information bulletins on the activities to prevent addictions, realized by the specific municipalities or containing addresses of offices and services;
- ✓ Translation in Bulgarian of specialized literature on drugs;
- ✓ Fliers for students and parents;
- ✓ Brochures for students and parents;
- ✓ Posters;
- ✓ Stickers.
- ✓ **Joint project to work out and disseminate information materials for children and parents** in co-operation with the constructing company “Torin-Tonchev and partnership” was carried out during a charity concert “I want to say” in Sofia- State Agency for Child Protection /SACP/.
- ✓ SACP organized the printing of the **Message of the Children’s Council against Addictions** in the students’ notebooks at the beginning of the school year 2006-2007 implemented with the financial assistance of the “Esmeralda Print” company.

Conducting of information and media campaigns is also among the key activities organized by the municipalities. Here are included:

- ✓ Publishing materials in monthly printed editions, TV and radio, reports in the local media on the problems of addiction;
- ✓ Maintaining website;
- ✓ Conducting press conferences;
- ✓ Carrying out research on the problems of drug use;
- Setting up and running database on the problems of addictions at local level;
- ✓ On the occasion of 26 June 2006 – The International Day to Combat Addiction in the town of Rousse **a rally- concert under the motto “Let us be free, not addicted”** was organized by the Rousse Department together with “Healthcare, Social Policy and Sports Activities” Department – the municipality of Rousse, “Education and Youth Activities” Department- the municipality of Rousse, the “Rousse Christmas” Socially Useful Association and by the Prevention and Information Center in the town of Rousse. Children from sports and cultural clubs presented a performance. To all the spectators were given sheets with songs printed on them: “Salvation” by the band B.T.R. and K. Vodenicharov’s song “I haven’t run away” and the spectators and the audience sang together.

Among the important activities at regional and local level is the establishment of network of specialists at the specific sites, including the maintenance of youth networks.

- ✓ **The experts from the SACP in the Plovdiv Department** in 2006 conducted a meeting with the members of the NGO “Mothers against Drugs”, meetings with the representatives of the Regional Probation Service (RPS) – Plovdiv, the center of Social Rehabilitation and Integration at the municipality of Plovdiv, as well as the Regional Inspectorate of the Ministry of Education and Science, on the topic of addiction prevention in the region of Plovdiv.
- ✓ **The experts from SACP in the town of Vratsa** conducted in March 2006 a meeting with the Director of the Regional Dispensary of Psychic Health - Vratsa. The options for the future co-operation in the work to prevent addictions were identified. A meeting was

²³ More information on the activities of the Agency: <http://www.sacp.government.bg>

also conducted with the secretary of the LCCADMUP and a representative of the Prevention and Information Center at the municipality of Vratsa. In June there was a work meeting to discuss the documentary "Addictions" of the "Bitie" foundation and the manual for work with children with behavioral problems and with minor delinquents. At the meeting were present representatives of the Prevention and Information Center of the problems of addictions in the municipality of Vratsa, and a representative of Regional Inspectorates on Environment and Public Health Preservation and Control /RIEPHPC/ – Vratsa, the regional administration, Child Protection Department /CPD/, Regional Directorate for Social Assistance /RDSA/, the regional probation office, LCCADMUP at the municipality of Vratsa, the Regional Dispensary of Psychic Health with clinic - Vratsa, and the chairpersons of the licensed associations from the SACP "Drugs – and – crime – free life" and St. Mina. On the initiative of the experts from SACP, the department of Vratsa, the film "Addictions" was shown at two comprehensive schools in the town of Vratsa. The film was also shown at the Prevention and Information Center on Addictions at the municipality of Vratsa. Representatives of two other schools and of the Municipal Children's Complex for work with children in the town of Kozlodui expressed their desire to be given the disk with the film.

The data show that probably the most widely spread prevention method in the country remains presenting information on drugs and addictions, especially in the form of brochures, fliers, posters, etc. despite some doubts expressed in the specialized literature [Botvin 1999, 2000] about its usefulness in preventing drug use. The contents of the information materials varies to a great extent - from purely informative and not containing direct messages to formidable and dramatic fliers, illustrating drug use in the darkest plan.

The main target groups are the public, as well as the students and their parents. The reason why this approach is the most widely used is that it is accessible and cheap to apply. It does not necessitate the availability of a trained and prepared team, from which relatively continuous and consistent work is expected. Principally the information should be part of a wholesome and completed approach to prevention, but as a single activity fulfilled it seems inadequate. The good will of the teams applying such methods should not be ignored, but in many cases achieving good results demands compliance with the European and world models of efficacy of the prevention activities. Conducting competitions of drawings, exhibitions, concerts and happenings focuses the public's attention on the problem for a short time only, but all these activities can hardly be considered a serious and consistent approach of prevention.

Nevertheless, in many of the municipalities there begin to develop, still yet as pilot ones, prevention programs containing elements of social studies, building up attitudes, acquiring specific skills for social communication; programs containing recommendations for work with parents and teachers. The topics encompassed in such type of programs include making decisions, coping with particular situations, setting goals and pursuing them, communication and expressing commiseration. Most of them, even in the context of a lesson, use interactive components.

The prevention programs, which are applied in the specific municipalities, are:

„Prevention and anti-aggression I-V grade" - "Index" Foundation under the methodological guidance of the NFPDDA – Sofia, Kyustendil, Kurdzali, Pazardzik, Pernik, Silistra, Sliven. Smolyan, Vratsa, Jambol, Pleven, Bourgas, Blagoevgrad ²⁴ ;

The "Youth in Europe- Program for Prevention of Drug Use" project at the European cities against drugs /ECAD/ – Bourgas, Perushtitsa, Plovdiv, Silistra, Sofia, Varna, Vratsa;

The public program to prevent drug use at school and to promote healthy lifestyle among the young people – 8-12 grade, in Sofia, Blagoevgrad, Varna, Vratsa, Kyustendil, Silistra ²⁵;

²⁴ For further information: <http://www.index-bg.org/>

²⁵ For further information: <http://www.drug-free-school.org/>

Program to organize and train youth leader teams “Give me a hand - peer training” prevention of alcohol use, cigarette smoking, and drug use - Sofia, Bourgas, Plovdiv, Silistra ²⁶;

Project of Care International – the town of Pernik;

Other prevention projects, implemented only in some towns of the country are: Teenagers involved in the prevention of hazardous behaviour” – international prevention project- Bulgaria, France, Italy- the town of Montana; Be aware of the drug addiction – USIS/USA, the town of Plovdiv; - Don’t give up MATRA/KAP program-the town of Plovdiv; Work of the police at school- “Children’s Police Academy” – the town of Silistra.

In the town of Bourgas the IV Balkan Conference was held - “Establishing and Development of a Balkan Network to Prevent Drug Use” jointly with the ECAD Project (European Cities against Drugs) ²⁷. Sofia joined the project “**Youth in Europe - Program for Prevention of Drug Use**”. This is a developing program for the prevention of drug use; international project lasting 5 years, aimed at setting Europe free from drugs. The project is being implemented in more than 10 European cities. The aim is to compare strategies of prevention, which are being applied in different European capitals, and to seek the best practices for the prevention of drug use. The honorary patron of the program is the President of Iceland Olafur Ragnar Grimsson. “Actavis Group” is the main sponsor of the project and it will donate for its implementation in Bulgaria EUR 40,000. Several municipalities have expressed their desire to participate in the project.

The project of **Care International** is directed at increasing the capacity of the non-government organizations, in order to increase their capability to effectively and continuously implement programs for general prevention and early community-based intervention. The experts apply the methods of a quick estimation of the needs and plan implementing the projects of community-based universal prevention and early intervention. It has been highlighted that there is an option for the NGOs to work through networks, to improve their organizational and technical skills, to acquire an enhanced ability of exerting an impact on the policy of reducing drug demand at local, national and regional level.

“Together against the drug” exhibition of the museum of the Ministry of Internal Affairs was inaugurated in 1998 and since then it has worked successfully for ten years now. Besides the information on the effect and consequences of drug use, the combat against the spread of drugs and their precursors in the country are shown, including the international operations. The exhibition has been prepared in collaboration with many institutions and organizations which are of great help to the team of the Ministry of Internal Affairs for the overall representation of the topic - the specialized offices of the Ministry of Internal Affairs, the Ministry of Education and Science, the Metropolitan Inspectorate on Education, The Central Committee for combating anti-social acts of minors and under-aged children, the NFPDDA, the Military Medical Academy, the “N. I. Pirogov” National Institute of Emergency Medicine, “Future for Bulgaria” and “Initiative for Health”, “Antidot” Foundations and a lot more.

Up till now the exhibition has been visited by more than 100,000 people (only for 2006 – around 15, 000), mainly students from Sofia and other towns. Up till now there have been worked and exhibited in different settlements of Bulgaria more than 15 copies of the exhibition “Together against the drug” – in Pleven, Pazardzik, Plovdiv, Blagoevgrad, Rousse, Kneza, Jambol, Varna, Kurdzali, Chepelare, Sevlievo (2006). One of the copies is mobile and it has been moved for three years all round the country. The Museum of the Ministry of Internal Affairs is also used as a base to train specialists- students in Pedagogics, students at the Ministry of Internal Affairs School, volunteers, and people working at organizations dealing with the problem (Bulgarian Youth Red Cross, The Metropolitan Center of Drug Addictions, the “Initiative for Health” Foundation, etc.) It is

²⁶ For more information on the work of the Municipal Center for Drug related Prevention and Information in Sofia: <http://www.sofiamca.org/>

²⁷ For further information refer to: <http://www.ecad.hit.bg/nachalo.php>

already the sixth year that the “Antidot” Foundation uses the premises of the museum and the specialists to hold monthly seminars for prevention of drug addiction among the students.

Family

The realization of drug use and abuse prevention directed at the family may be discovered in some activities at regional and local level, implemented by the Regional Councils on drugs and the Information and Prevention Centers Established to them. Their main objective is consulting. In this sense there are consulting programs or offices run in Sofia, Rousse, Plovdiv, Gabrovo, Blagoevgra, V. Turnovo, Pleven, Pazardzik, Sliven, Smolyan.

In relation to the parents’ needs to learn more about the drug and addiction problem the **information brochure**²⁸ has been re-published. It was written in co-operation with “Initiative for Health” foundation, the metropolitan municipal center on addictions and “Free and Democratic Bulgaria” Foundation²⁹ (see Fig. 3-3). It is aimed at increasing the parents’ and teachers’ awareness of the problem and at giving them initial knowledge on how to identify drug use and at making a hint how to react in such cases. The information available is the minimal necessary step to limit drug use and to reduce the number of the addicted persons. The program of the three institutions acts through educational meetings at schools between parents and teachers and through publishing and disseminating of the information brochure.

Fig. 3-3

PAGES OF THE INFORMATION BROCHURE “GUIDEBOOK FOR PARENTS AND TEACHERS. WHAT MUST WE KNOW ABOUT DRUGS”



Source: *Information brochure "Guidebook for parents and teachers. What must we know about drugs"*

Anyhow it has to be summarized that the work with families is still not well enough developed in the frame of the general, universal prevention, the main factor in the majority of cases remaining the conducting of additional lessons with the parents after programs, Implemented at their children’s schools. Running programs for work with the parents and friends of the addicted persons at national and local level is still not adequate.

²⁸ “Guidebook for parents and teachers. What must we know about drugs” “Free and democratic Bulgaria” Foundation, revised and enlarged edition, Sofia, 2003

²⁹ For further information: <http://www.fdbfoundation.org>

Selective prevention

The selective prevention is directed to risk groups in respect to drug use. In the following table are marked the towns and the types of activities undertaken in relation to this type of drug use prevention (see *Table 3-1*).

Table 3-1

MORE IMPORTANT PREVENTION ACTIVITIES IN BULGARIA IN 2006

GROUPS AT RISK	ACTIVITIES	TOWNS
Recreational sites / regular visitors of clubs /discos/ and other recreational sites	Information campaign at youth clubs in the town of Plovdiv: dissemination of fliers and brochures by Bulgarian Youth Red Cross	Plovdiv
Drop-outs from school or children run away from home:	Monthly meetings with pedagogic advisors – measures for and work on the problems –“The increased number of drop-outs from school- ways to solve the problem.”	Pernik
Ethnic groups	“Youths- let’s learn to live safely” project with a target group- children not attending school	Montana
	Selective prevention of groups mostly at risk- the focus is on the prevention of psychoactive substance use by the adolescents and the families at risk- 2,730 persons of Roma origin were included with an additional HIV/AIDS prevention	Varna
	Outreach-mobile surgeries and drop-in centers especially meant for Roma people	Sofia, Plovdiv, Bourgas
Children and minors having difficulties when studying and /or autistic children, children with attention disorders – attention deficit/hyperactivity	20 siblings (brothers and sisters) of disabled children included in the program “Easy-to-access center for social assistance”- prevention of addictions realized by volunteers from the not-for-profit association “A chance for disabled people”	Varna
	Prevention meeting with the aim of disseminating information on the addiction on drugs, alcohol and tobacco and a thematic film was shown to the children from the Day home for children and youths with moderate mental disability	Vidin
	Project “Youths- Let’s learn to Live Safely” with a target group- mentally disabled children	Montana
Vulnerable groups or	HIV/AIDS prevention for 232 sex workers, realized by	Varna

regions	volunteers from the “SOS – families at risk” foundation	
	HIV/AIDS prevention for 53 siblings (brothers and sisters) of IDUs	Varna
	Prevention meeting - discourse on the topic of drug and girl- trafficking with the children from the Temporary Accommodation Home	Vidin
	Prevention measures against drug use at homes for children deprived of parent care after the program of the “Drug-Free Generation” Foundation, after the program MATRA / KAP	Sofia
	Prevention materials distributed at the “Hristo Botev” Home for Raising and Upbringing Children Deprived of Parent Care	Vidin
	Co-operation with the Center of Social Rehabilitation and Integration /CSRI/ when individual plans are made for work with youths with hazardous behaviour	Gabrovo

Source: *Reports of the Regional Councils on drugs and of the Prevention and Information Centers for 2006*

In the country there are being carried out a number of activities, mainly in the big towns, whose target groups are children and young people with behavioural problems and greatly at risk for drug use initiation and addiction.

The “Social Assistance” Departments at the Ministry of Labour and Social Policy and the “Child Protection” sections established are bodies pursuing policy to protect children within the frames of the municipality³⁰. In their direct activity the “Child Protection” sections work with children at risk by providing co-operation, information and consultations, by assisting the children and referring them to the social services in the community, etc. This includes providing pedagogic, psychological and legal assistance to the children as well as to the parents or the persons exercising parental authority and financial support under the terms and conditions of the Regulations for Enforcing the Child Protection Act.

The work done by the “Child Protection” sections on the problem of drug use is related to activities of prevention. The social workers initiate or actively participate in holding lectures and discussions meant to prevent addictions among children. The aim of these undertakings is to promote the students’ awareness of the noxious effect of drug use, of alcohol and of cigarette smoking and to enhance their knowledge of healthy lifestyle and of sexual education, to inform them about their rights and obligations.

The „Child Protection” sections work in co-operation with other institutions at local level, like Children’s Pedagogic Rooms, Regional Healthcare Centers, Regional Education Inspectorates, etc. The “Child Protection” centers are also a welcome partner for the realization of a number of other projects of NGOs, focused on the problem of drug use.

³⁰Source: The Ministry of Labour and Social Policy

Prevention on indications

The target group of prevention on indications includes the persons who have already used narcotic drugs but who do not meet the criteria for addiction and problem drug use.

The Central and Local Committees for combating antisocial deeds of minors and under-aged persons (CCCADMUP and LCCADMUP) go on with their work of disseminating information, doing consulting and research activity, working out projects and programs, working with groups at risk, increasing the awareness of the specialists who work with children having committed anti-social deeds, qualifying the specialists from the system of Combating anti-social deeds of minors and under-aged /CASDMUA/, training in skills for detecting risk factors, hazardous behaviour, risk groups and how to work with them, working with parents to make them aware of this problem as well as teaching them how to detect and cope with drug related problems, writing and disseminating informational printed and audio and video materials on this problem ³¹.

On the request of the Central Committee for CASDMUA, the local committees adopted programs to prevent addictions aimed at implementing prevention activities, including assistance for parents. All the more successfully the LCCADMUP on its own or together with other bodies and NGOs work out projects related above all to the initial prevention, to training of parents and children and to training of peers by peers. The aim of the committees via these programs, projects and concrete activities is to spread knowledge to the adolescents of the essence of the problem, of the hazards of drug use, to develop abilities to resist the pressure, to work out and to introduce good practices of prevention.

The main objectives are **to enhance the children's knowledge of healthy lifestyle, to work with parents, to improve and expand the co-operation among the institutions at municipal level.** In relation to the working out of different activities media campaigns on the problems of drugs are organized and carried out and also biking campaigns, competitions, etc. Some important points from the work are discussing real cases, game strategies and training, achieving confidential communication through associative links, cultivating habits – assistance, readiness for change, a system of activities for the students' leisure time.

The committees also direct their work at **making research to clarify the reasons for and the motives for drug use** so that they can help to estimate the extent of prevalence and the types of drug use among the students and the attitudes of the different groups to drug use. As a part of their activity the LCCADMUP also publish information materials for parents and children on the problems of drugs.

³¹Source: The Central Committee for combating anti-social deeds of minors and of under-aged persons

4. Problem Drug Use

In the frames of this part, the following basic themes will be examined:

- Estimation of the prevalence of the problem drug use;
- The profile of the persons demanding treatment;
- General characteristics of use from non-treatment sources.

Regarding the estimation of the prevalence of the problem drug use there are no new available data for 2006. However a very brief review is provided, built on results obtained through the Multiplier Method Using Treatment Data and a study using the Capture-recapture method, also experts estimations are used and long term observations. The Multiplier Method Using Treatment Data is used for the national estimation ³², and the Capture-recapture method is used for the local assessment in the capital Sofia ³³.

The profile of the persons demanding treatment is based on data from treatment demands regarding the use of narcotic substances in Bulgaria. The data are obtained by the means of monitoring system in which base was the implemented from 1991 until 1998 European project "Multi-city Network on Treatment Demand Data". The project was coordinated from the Pompidou Group to the Council of Europe and more than 20 European cities participated in the project (Stauffacher 1998), including Sofia (from 1994) and Varna (from 1994).

In 2006 the treatment demand monitoring system in Bulgaria covered a total number of 17 inpatient and outpatient units and centers in 6 of the most significant Bulgarian cities (from the viewpoint of the treatment possibilities).

The data regarding the general characteristics and patterns of drug use from non-treatment sources are received from routine source – the information system of the National Police and the Ministry of Interior ³⁴.

Estimation of the Prevalence of the Problem Drug Use

There are no new available data for 2006.

A brief review of the existing data shows that the available data and the long-term observations show that in Bulgaria **the heroin is the substance that is the most strongly connected with the problem drug use** (over 90 % of the persons who searched for treatment in the specialized units have indicated it as the primary substance ³⁵).

Based on the available data a general estimation could be made that **the number of the problem heroin users in the last few years remains relatively constant and stable, even with slight indications for onset of decrease**. Unfortunately, this is not the case for the problem drug users as a whole as long as in the same time indications for increasing the number of the problem amphetamine and "ecstasy" type substances users can be observed ³⁶.

³² See also the Annual Report 2005 of the National Focal Point for the EMCCDA

³³ See the three Standard Tables 8 from 2005

³⁴ Report for the work of the divisions of the National Service "Police" to MI along the line "Drugs" generally for the country for the period 01.01.2006 - 31.12.2006 (unpublished)

³⁵ See Profile of the persons demanding treatment in the same chapter.

³⁶ See the same.

The bigger part of the problem heroin users **injecting their drugs**. Indications of gradual **decrease of used needles and syringes sharing** among drug users continue to be observed; this is a good prerequisite for the reduction of health harms due to drug use.

In the spring of 2005 with the leadership of the National Focal Point the collection of primary data from the first of a kind in Bulgaria **study – estimation of the problem drug use in Sofia using the “Capture-recapture” method** finished. The aim of the study was the formation of the assessment of the number and the profile of the problem drug users (especially heroin) in Sofia. In this way, an estimation of the local prevalence of the problem drug use in the biggest city and the capital of Bulgaria was accomplished.

After using of specific statistical methods and instruments, estimation was formed for **15 748 problem drug users in Sofia**. Applying the Confidence Interval of 95%, we can outline a broader range of the estimation - between 9 548 and 26 924 persons. Having in mind that up to December 31st 2004 the total population of the city was 1 221 157 (National Statistical Institute 2005) the estimation for the relative share of the problem drug users in Sofia is **12 / 1000 persons of population**. The broad range of this estimation (CI 95%) is between 7 and 22 to 1000 persons. Referred to the population aged 15-64 y., which to December 31st 2004 was 888 123 persons this estimate could be 17 / 1000 persons of population, with a broad range between 10 and 30 to 1000 persons³⁷.

By Substance

There are no new available data for 2006.

The total estimation for the **number of problem heroin users in Bulgaria is between 20 000 and 30 000**. One part of this estimate was obtained through the Multiplier Method Using Treatment Data. This method is based on the size (in absolute numbers) of the sub-group of the problem drug users looking for treatment in a given period of time. This number later is multiplied by a relevant multiplier reflecting the approximate proportion between the persons searching for treatment and the whole population of problem drug users³⁸.

After applying the specific statistical methods and instruments, an estimate was formed for **11 993 problem heroin users in Sofia**. Applying the confidence interval of 95%, we can outline a broader range of the estimate – between 9 136 and 15 909 persons. Having in mind that up to December 31st 2004 the total population of the city was 1 221 157 (National Statistical Institute 2005) the estimate for the relevant share of problem heroin users in Sofia is **9 / 1000 persons of population**. The broader range of the estimate (CI 95%) is between 7 and 13 of 1000 persons. Referred to the population aged 15-64 y., which to December 31st 2004 was 888 123 persons, this estimate would be 13 / 1000 persons of population, with a range between 10 and 17 to 1000 persons³⁹.

Unfortunately, due to different reasons sufficiently reliable and valid estimate for problem users of other opiates, cocaine, and other stimulants is still missing. Anyway according to experts estimates the probable number of **problem cocaine users for the whole country is estimated to be around 1 000-2 500, and for those on amphetamines and other stimulants - around 2 000-3 500 persons**⁴⁰.

By Injecting

There are no new available data for 2006.

³⁷ See also Standard Table 8 for problem use from 2005.

³⁸ More details for this estimate are available in the Annual Report 2005 for the situation of the problems regarding drug use, NFP and NDC

³⁹ See also Standard Table 8 for problem use from 2005

⁴⁰ See also the Annual Report 2005 for the situation of the problems regarding drug use, NFP and NDC

After using of specific statistical methods and instruments an estimation was formed for **9 686 injecting drug users in Sofia**. Applying the Confidence Interval of 95%, we can outline a broader range of the estimation - between 6 642 and 14 461 persons. Having in mind that up to December 31st 2004 the total population of the city was 1 221 157 (National Statistical Institute 2005) the estimation for the relative share of the problem drug users in Sofia is **7 / 1000 persons of population**. The broad range of this estimation (CI 95%) is between 5 and 11 to 1000 persons. Referred to the population aged 15-64 y., which to December 31st 2004 was 888 123 persons this estimate could be 10 / 1000 persons of population, with a broad range between 7 and 16 to 1000 persons ⁴¹.

Profile of the Persons Demanding Treatment

In 2006 the monitoring system of treatment demand covered 1766 persons, starting therapy in 5 inpatient and 12 outpatient units and centers in 6 of the most significant Bulgarian cities (regarding treatment possibilities). More than 1/4 of the country's population is concentrated there and approximately 4/5 of the residential patients in Bulgaria are there. The data are collected through a form-questionnaire, which is filled in by persons, working with the patients – medical doctors, nurses, psychologists, social workers, observing all the measures for keeping the data confidential. The number of the persons covered is obtained after accomplishing a procedure for identification and elimination of the double counting (double presence of the same person in the whole data set).

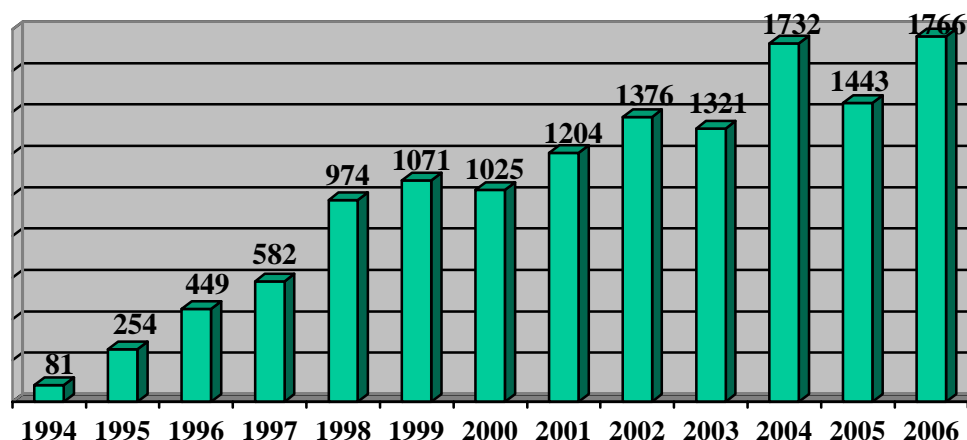
Trends in the General Development of the Treatment Demand System

In 1994 the system was implemented only in one specialized treatment unit in Sofia (the hospital ward of the National Centre for Addictions); after a little more than ten years later (in 2006) the coverage is significantly wider – specialized units and treatment programmes in six Bulgarian cities, including the three biggest – Sofia, Plovdiv, and Varna – are included (see above). Significantly grew the number of covered treatment demand cases in the period – from 81 in 1994 to over 1300 in the last four years (see *Figure 4-1*). This growth probably is due as to the increase of drug treatment demand, as to the widening of the coverage of the monitoring system.

Figure 4-1

NUMBER OF PERSONS, COVERED BY THE TREATMENT DEMAND SYSTEM IN BULGARIA IN THE PERIOD 1994-2006

(absolute numbers)



Source: National Centre for Health Information

⁴¹ See also Standard Table 8 for problem use from 2005

As it is seen on *Figure 4-1* the number of the persons, covered by the treatment demand monitoring system increased with exceptionally fast rates in the period 1994-1999. In the last five years the increase is fluent in the frames of 1300-1800 persons. As though, the reasons however are mostly in the widening of the coverage of the system.

Some of the outlined trends in the treatment demands are:

- The heroin remains the primary problem drug, for which a treatment is searched for;
- The injecting continues to be the most prevalent pattern of drug use among the persons demanding treatment;
- The treatment demand for the first time ever increased for cannabis and amphetamine users;
- A decrease of treatment demand for the first time for opiates use except heroin is observed.

Some New Data and Emerging Trends in Treatment Demand

A) Among all starting treatment in 2006

In this analysis all persons who started treatment related to drug use in 2006 (for the first time or ever in their lifetime) are included (they fall in the scope of the monitoring system).

The data from treatment demand in 2006 show some basic features of the group profile of one part of the problem drug users – these ones that looked for treatment. Some of these features are described below, in some cases complemented by emerging trends (see also *Table 4-1*).

- By the type of the drug

In 2006 98,0 % are with primary problem drug heroin.

Because of a number of reasons and mostly because of the relatively “favourable” ratio effect / price the heroin remains the most widely spread drug among problem drug users. In every of the last 5 years between 95 % and 98 % of the persons looking for treatment in relation with a drug problem in the specialized centers have used heroin and/or other opiates.

- By gender

In 2006 18,4 % of the persons who demanded treatment were women.

In the last decade, the ratio males / females remained always approximately 4:1.

- By age

In 2006 5,0 % of the persons who demanded treatment were up to 19 years of age, and 87,3 % - up to 29 years of age (total mean age 25,5 years).

- By age of first use

In 2006 66,3 % of persons who demanded treatment declared that they have started the use of the primary problem drug by the age of 19 y. included, 10,7 % - up to 14 y. included; total mean age when the first use occurred - 18,5 y. (18,7 in 2002).

Therapists warn, and the monitoring system more and more often “detects” patients with heroin problems aged 12-14 years. As a whole, it could be stated that **the mean age at first use of the problem drug remains low** – for heroin among treatment demands, it is between 18 and 19 years of age, for cannabis - between 16 and 17 years of age. Besides everything else, this is already a signal that the preventive activities must begin at an even earlier age.

- By educational level

In 2006 21,4 % of the persons who demanded treatment had lower than secondary, and 5,5 % - higher degree education.

As a whole it could be noticed a relative increase of the total educational level of the persons who demanded treatment. On the other hand, the share of the students (school and university students) diminished from 13,0 % in 2001 and 14,6 % in 2002 to 9,9 % in 2006.

➤ By occupation

In 2006 a fourth (25,2 %) of the persons who looked for treatment has had a permanent job.

Data shows a significant improvement on this indicator. In the interval of six years, the relative share of the clients with permanent job trebled – from 9,3 % in 2001 to 25,2 % in 2006. On the one hand, this is a good sign because it shows reduction of the social harms and of the marginalization of affected population, but on the other hand this shows the extension of the problem beyond the economically inactive population and in this way suggests of a new type of social problems.

➤ By ethnic groups

In 2006 93,8 % of the persons who looked for treatment were Bulgarians, 5,3 % - of Roma ethnicity, the rest – representatives of other ethnic groups (in 2001 – respectively 89,7 % and 9,6 %).

It is not possible to formulate a definite trend regarding the treatment demanding persons in the last five-six years.

By the characteristics of drug use

➤ Frequency of use

In 2006 81,7 % of the treatment demanding persons have used the primary drug daily.

It is not possible to formulate a definite trend regarding this indicator in the last years.

➤ Pattern of use

In 2006 81,9 % of the treatment demanding persons have injected the primary drug.

This relative share is a little bit higher in comparison with the data from the previous five years, which were within the limits of 75-77 %.

➤ Continuation of use

In 2006 around half (68,8 %) of the treatment demanding persons were with an experience of primary drug use for more than 5 years.

The increase in comparison with 2001 is more than four times – five years ago this share was 20,7 %. Even more significant trend could be noticed among clients with more than 10 years experience in the drug use – their share has grown ten times (from 1,3 % to 13,1 %). This fact could be perceived as a sign of even weaker rejuvenation of the population of the problem drug users in Bulgaria or, in other words, this could be a sign of decrease of the newly appearing problem drug users, at least regarding the heroin.

➤ Risk behaviour

In 2006 more than half of the treatment demanding persons (56,6 %) have shared at least once in their lifetime used needles and/or syringes.

The comparative analysis for the last five years shows that after the increase of this share, which pick was in 2003 (60,2 %) a gradual drop followed in 2005 and the level from 2001 was reached approximately (50,1 %), and we have again small increase.

➤ Social and cultural context

In 2006 14,1 % of the treatment demanding persons have lived with a person / with persons who uses drugs;

There was a relative decrease of this share until 2005 (around 9 %), and in 2006 the value is near to that from 2001, which was 16,4 %.

**COMPARATIVE DATA FOR ALL PERSONS STARTING TREATMENT DURING THE PERIOD
2002 / 2006**

Years	2002	2003	2004	2005	2006
Indicators:					
Relative share of treatment searching persons in regards with heroin / other opiates use	96%	96%	95%	95%	98%
Relative share of the females among treatment searching persons	19%	19%	17%	17%	18%
Mean age of treatment searching persons	23,0	23,1	23,3	24,2	25,5
Mean age at first use of primary drug	18,7	18,4	18,3	18,4	18,5
Relative share of the students among treatment searching persons	15%	15%	14%	11%	10%
Relative share of the persons with a permanent occupation among treatment searching persons	12%	16%	17%	18%	26%
Relative share of the persons who are not of the major ethnicity in the country	14%	9%	11%	9%	8%
Relative share of daily users	87%	83%	84%	83%	79%
Relative share of injecting primary drug	78%	76%	76%	76%	82%
Relative share of the persons with experience in drug use > 5 years	31%	35%	42%	49%	68%
Relative share of persons who shared used needles and syringes	57%	60%	57%	50%	57%
Relative share of persons living with other drug user(s)	16%	12%	10%	13%	14%
Relative share of persons who demanded treatment for the first time in their lifetime	32%	31%	33%	27%	17%

Source: National Focal Point on Drugs and Drug Addictions, Treatment Demand Study in Bulgaria

B) Among persons starting treatment for the first time in their lifetime in 2006

In this analysis are included all persons who started treatment related to drug use in 2006 for the first time in their lifetime (they fall in the scope of the monitoring system).

In 2006 the first treatment demanding persons were 17,0 % of all treatment demands.

The gradual decrease of this relative share from around 50 % in the second half of the 90's to 30 % - 40 % in the last 3 years and around 27 % in 2005 could mean relative "closing" either of the problem drug users group as a whole, or at least of the persons in treatment.

The data from the treatment demand for the first time in 2006 show some basic features of the group profile of the persons demanding treatment for the first time. Below are described some of these features.

➤ By the type of the drug

In 2006 92,3 % are with primary problem drug heroin.

Obviously, among persons demanding treatment for the first time the heroin remains the most widely spread drug. Anyway, the relative share among them is with around 6 points lower

than in all treatment demands. In addition to this the share of the cannabis users is higher and the share of the synthetic stimulants users is also higher among newly emerging in the treatment system persons.

- By gender
In 2006 16,4 % were women.
- By age
In 2006 11,0 % were up to 19 years of age included, and 90,7 % - up to 29 years of age (total mean age 24,4 years).
- By age of first use
In 2006 51,3 % have declared that they had started the use of the primary problem drug at the age of up to 19 included, 6,4 % - up to 14 years of age included; total mean age at first use - 19,7.
- By educational level
In 2006 20,1 % had lower than secondary, and 6,4 % - higher educational level.
- By occupation
In 2006 approximately every fifth (20,1 %) had a permanent occupation.
- By ethnic groups
In 2006 89,3 % were Bulgarians, 9,1 % - of Roma ethnicity, the rest were representatives of other ethnic groups.
- Frequency of use
In 2006 81,6 % used the primary problem drug daily.
- Pattern of use
In 2006 69,6 % mostly injected the primary problem drug.
- Continuation of use
In 2006 approximately two of every five patients (39,9 %) had an experience of more than five years of the use of the primary problem drug.
- Risk behaviour
In 2006 around one third (33,6 %) shared at least once in their lifetime used needles and/or syringes.

General Characteristics and Patterns of Use from Non-Treatment Sources

According to the data from the National Service "Police" at the Ministry of Interior in 2006 the divisions of the national police have registered in the country a total number of 3 792 drug users (only users + users and dealers)⁴². The information comes from a routine police registration system, which covers all the regional offices in the country and is national by coverage. The registered are persons (not cases), and double counting is practically excluded.

A total of 909 from indicated 3 792 persons who use drugs (24,0 %) have also been engaged in dealing drugs. This means that approximately every fourth registered from the police for drug use is in the same time a dealer, too. On its part, this fact speaks for the partial merging between the health and the legal aspect of the problem on social level. Nearly ¼ of the registered

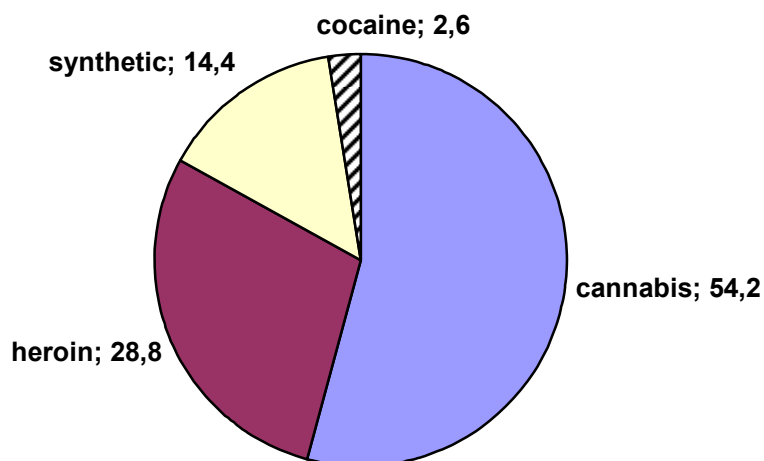
⁴² These and the following data: Report for the work of the divisions of the National Service "Police" at Ministry of Interior in regards of the "Drugs" line for the period January 01, 2006 – December 25, 2006

persons (1 543 persons or 40,7 %) were minors ⁴³ or under-aged ⁴⁴, which seriously directs the attention towards the question of the drug use among teenagers in Bulgaria.

From the viewpoint of the type of drug more than half of the persons (2056 or 54.2 %) are registered in relation with the use of cannabis, 1091 (28,8 %) – in relation with the use of heroin, 547 (14,4 %) – of synthetic drugs, and 98 (2,6 %) – of cocaine (see *Figure 4-2*).

Figure 4-2

RELATIVE SHARES (in %) OF THE PERSONS REGISTERED FROM THE POLICE IN 2006 FOR THE USE OF VARIOUS DRUGS



Source: Report for the work of the organs of the National Service "Police" at MI in regards of the "Drugs" line in general for the country for the period January 01, 2006 – December 25, 2006

⁴³ Under 16 years of age, incl.

⁴⁴ Under 18 years of age, incl.

5. Drug-Related Treatment

In this chapter will be reviewed the prerequisites and the options for treatment in relation to drug use which existed in the country in 2006. Our attention will be focused mainly on:

- The system of treating addictions;
- Drug – free treatment;
- Drug – assisted treatment.

The most widely spread options and forms of treatment of problems related to drug use in Bulgaria will be presented in short.

As an introduction it should be noted that in relation to the implementation of the Strategic Task 6 from the National Strategy of Combating Drugs 2003-2008 („Providing an Easier Access to Effective Treatment Programs”) the National Centre for Addictions (NCA) started working out a system for referring patients. Different types of registers are compiled and kept at the National Centre for Addictions (NCA) so that the co-ordination among the different treatment programs could be improved and the options for information- broadened.

In 2006 the NCA obtained a certificate for an Administrator of the personal data from the Committee on the Personal Data Protection. The program product ensures personal data protection for the patients.

In 2006 the work of the NFPDDA to improve the co-ordination among the treatment programs and to enhance the capacity and the knowledge of those working in the field of prevention, treatment and rehabilitation of addictions, continued.⁴⁵

Treatment System

The diagnosis Drug and Alcohol Addiction is made according to the criteria of the International Classification of Diseases, 10th revision (ICD - 10) and in this sense the ICD-10 addictions are a part of the psychic health.

The medical activities to treat addictions of outpatients are paid for by the NHIF. The funding of the inpatient psychiatric care at this stage is made from the republican budget, via the Ministry of Health and the municipal budgets. Regulation № 40/24th November 2004 for specifying the main package of healthcare activities, guaranteed by the NHIF, provides that among the activities executed by the general practitioner are also the prevention and diagnosing of addictions. Since the addictions are a subject of the specialty Psychiatry, the healthcare activities, included in the package of the Psychiatrist from the outpatient healthcare concern also the patients with addictions. The treatment of the patients addicted is carried out by specialists- Psychiatrists who work in multidisciplinary teams.

In case of emergency /intoxication, etc./, the emergency treatment is done at the Centers of Emergency Treatment and from there the patients are referred to the Departments in Toxicology, or to the Intensive Care Units, or other hospital departments if necessary, depending on the diagnosis.

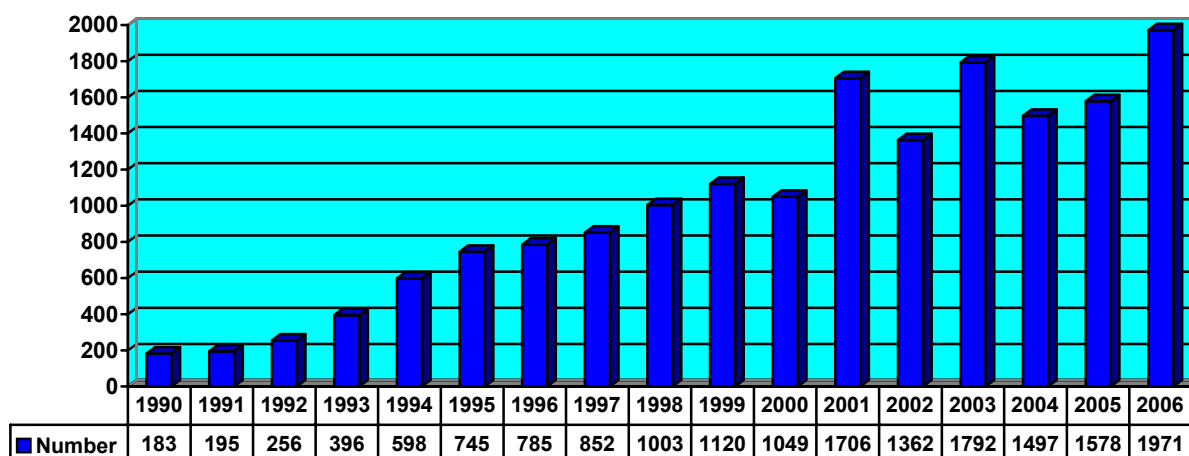
On the data of the National Health Statistics for 2006 at the specialized inpatient healthcare establishments in the country 1971 patients diagnosed as suffering from psychic and behavioral disorders caused by the use of other psychoactive substances (see *Figure 5-1*) have been treated. For the period 1990-2006 when observations were made this is the greatest number of patients

⁴⁵ Source: Report on the implementation of the Action Plan of the national Strategy for Combating Drugs for 2006, Directorate Coordination and informative-analytical activities (CIAA), Ministry of Interior, 2007

hospitalized. The trend of increasing the number of hospitalized patients still holds. The greatest number of patients hospitalized was registered at the Regional Dispensaries of Psychiatric Diseases with clinics - 879, followed by the psychiatric clinics and the state psychiatric hospitals. Under dispensary observation are the following groups of patients: diagnosed as suffering from "Psychic and behavioral disorders caused by the use of other psychoactive substances" – 916.⁴⁶

Figure 5-1

NUMBER OF THE PATIENTS ADMITTED SUFFERING FROM PSYCHIC AND BEHAVIORAL DISORDERS CAUSED BY THE USE OF OTHER PSYCHOACTIVE SUBSTANCES (ICD 10 - CODE F11- F19) AT THE PSYCHIATRIC CLINICS IN THE COUNTRY OVER THE PERIOD 1990-2006



Source: *The National Center of Health Information*

The total number of beds in the health establishments for psychiatric treatment is 5 439 and 201 out of them are set for patients with addictions.

Alongside specialized forms of organization and technologies of treatment are developed: programs for substitution treatment and maintenance treatment with opioid agonists for patients with heroin addiction, rehabilitation programs of the "day care" or "day center" type and therapeutic communities.

The treatment of addicted patients is based on two main principles: drug-free treatment and drug-assisted treatment.

Drug - Free Treatment

Drug - free treatment is a psycho-social therapeutic approach, aimed at full psycho-social recovery and re-integration of the addicted person, whose medicinal treatment is minimal. An important fact is all the greater participation of the NGOs in this process. The main objective of those programs is to help the addicted persons in for ever changing their way of life through the traditional norms and values like mutual help, team work, honesty, care and respect for the other members, responsibility, gratefulness, etc. Another principle is to create safety and security for the participants in the program, which is achieved by observing strict rules.

An important part of the whole rehabilitation program is the re-socialization program. Its main objective is for the changes achieved to be transferred and confirmed in the social context.

⁴⁶ Source: National Center of Health Information

The activities of the re-socialization programs are aimed at supporting social adaptation, helping in the process of finding work, helping in solving problems of emotional and interrelationship nature.

Another important part of the rehabilitation programs are the programs for work with parents and relatives and friends. The aim of these programs is to involve the parents and friends of the addicted person in the process of rehabilitation from the very beginning. The activities are related to providing information on addiction, on the principle and the stages of the treatment, emotional support and re-directing of the parents and relatives to care about themselves. The relationships between the family and the addicted person should be changed into relationships between partners and helpers in his/her process of rehabilitation. The whole rehabilitation program includes the personal change of the addicted person, the social context and his/her adaptation to it, the family milieu as the main supporting factor.

The treatment programs, based on this approach, follow the stage of detoxification and are of two main types:

1. Residential - Therapeutic communities
2. Programs for outpatients - Day centers in the communities

Residential programs

In Bulgaria there are two licensed therapeutic communities - "The Phoenix" house in the village of Brakiovtsi and the "New Start" home in the village of Bunovo. The total number of addicted persons they can house is 30. The "Phoenix" therapeutic community is a rehabilitation program for treating addictions and alcoholism. The sectors in the program are: Admission Center, Therapeutic Communities and a Re-Socialization Center.

Programs for Outpatients

Treatment for outpatients is done at services for treating outpatients at the Regional Dispensaries of Psychiatric Diseases with Clinics. Specialized day centers function in Sofia, Varna, Plovdiv: Day Center at the State Psychiatric Hospital for Treating Addictions and Alcoholism, "Solidarity" Day Center at the group practice "Outpatients' Department of Specialized Medical Aid-Psychic Health Center - Varna" Ltd., rehabilitation and re-integration center for addicted persons of the "Project Butterfly" Association, and "Perspectives" Day Center. The total number of persons they can enroll is 75.

The day center at the SPHTAA is the last stage of the model program for successful treatment and re-socialization of patients who have been subjected to detoxification at hospital and have completed midterm hospital rehabilitation program. The "Solidarity" Day Center works after the program and it is under the supervision of the "Tremplin" therapeutic community. The program is a model of intensive treatment whose aim is to achieve behavioral reconstruction from dysfunctional to a more functional behaviour.

The Day Center of the group practice "Outpatients' Department of Specialized Medical Aid-Psychic Health Center - Varna" Ltd. provides different types of services for the addicted patients in the stage of their emotional and behavioral stabilization.

Providing a protected lodging for patients who have successfully completed the hospital programs for treating addictions represents an important element from the development of the modern system of rehabilitation in the country. "Protected lodging" for the patients from the Day Center of the State Psychiatric Hospital for Treatment of Addictions and Alcoholism has been set up and funded by the National Strategy.

Drug - Assisted Treatment

Abstinence Treatment

Abstinence treatment is the main form of treatment provided to the patients from the country. There is a setting for outpatients and for inpatients. The abstinence treatment of outpatients is done at the Regional Dispensaries of Psychiatric Diseases with Clinics (on the data from the inquiry in 8 out of the 12 RDPDC) and the different outpatient services for specialized psychiatric help. Detoxification of inpatients is done at the state psychiatric hospitals at the departments of Psychiatry at the Multi-profile Hospitals for Active Treatment (on the data from the inquiry, carried out in 7 MHATs) and at the Military Medical Academy.

Substitution Treatment

By adopting the Program of Methadone Maintenance Treatment in 2003 a system of programs for substitution treatment was started which are realized at specialized centers. The main type of substitution treatment is the treatment by methadone hydrochloride and substitol. At the beginning of 2006 a National Program for the Development of a System of Methadone Maintenance Programs in the Republic of Bulgaria for the period 2006-2008 was adopted by the Council of Ministers. The program is based on the experience of the European countries and it is in compliance with the main priorities of the European strategy on drugs for the period 2005-2012. The strategic goal of the program is: reducing drug use and the related health and social risks via the development of a system of effective and accessible programs for methadone maintenance treatment.

Methadone hydrochloride is a registered medicinal product in the country and it is purchased by financial resources from the National Program for the Development of Methadone Maintenance Programs in the republic of Bulgaria for the period 2006-2008.

Another substitution medicine in the country is Substitol, which has been registered in the country and is prescribed on special prescription forms for narcotic substances.

The programs for substitution and maintenance treatment are started by permit of the Minister of Health under the conditions and terms of Regulation № 24 from 31st October 2000 (promulgated in State Gazette, issue 91 from 7th November 2000)

In the process of the program implementation 6 programs for substitution and maintenance treatment with methadone were started – 5 in Sofia, 1 in the town of Varna and 1 in the town of Plovdiv, with a total number of patients included – 1555.

In 2006 for the first time monitoring was carried out on the efficacy and the activity of CPP, in the process of implementing the National Program for the development of a system of methadone maintenance programs in the Republic of Bulgaria for the period 2006-2008.

On the data of the monitoring report the CPP currently functioning are very effective. The patients are in a good general and psychic condition, their social behaviour is improved and their criminal activity is reduced. Their participation in the CPP is a prerequisite for the reduction of the prevalence of the blood-borne infections.

At the end of 2005 the medical product Naltrexon was registered. At some of the dispensaries of psychiatric diseases with clinics programs were started for maintenance treatment with Naltrexon.

6. Health Correlates and Consequences

Drug Related Deaths and Mortality Rate among the Drug Users

The statistical research of the death cases according to causes is based on the medical certificates for death, filled in by the physician who establishes the death. Since the beginning of 2005 in Bulgaria has been applied the Tenth Revision of the International Classification of Diseases /ICD/ and problems related to health of the World Health Organization. The causes for death are coded according to this classification.

When there is only one cause for death indicated, the coding is relatively simple. In most of the cases, however, there are two or three diseases which have caused the death. In accordance with the requirements of the WHO and the guidelines for compiling statistical tables of deaths depending on the causes, the so called *primary cause for the death* is coded. It is defined as “the cause or the trauma which triggered a series of diseases which directly caused the death, or the circumstances of the accident or the violence which caused the lethal trauma.” The Ministry of Health issues instructions on coding the causes for death in accordance with the ICD. The coding of the causes for death is done by physicians working at the Regional Centers of Healthcare and respectively trained to apply the requirements of the ICD. For coding the causes for death the physician uses the medical certificate of death.

When coding the cause for death the three-sign code of the causes is used. This limits the options to analyze the data related to the intoxication by drugs and psychodysleptic (hallucinogenic) or psychoactive medicines.

Drug Related Deaths

National definition

In accordance with the requirements of EMCDDA (The DRD-Standard, version 3.0) the codes of the ICD – 10, which have to be considered in relation to intoxication (accidental, intended or with indefinite intentions) are combined with the T-codes to characterize the type of the substance. In accordance with the recommendations of the WHO for classifying the data for deaths according to the causes since such a combination cannot be made the inclusion only of a single code from the two classes necessitates the choice of the code from class XX - External Causes for Morbidity and Deaths - namely the codes X and Y are preferred.

Under the terms of the DRD-Standard, version 3.0, when a combination is not possible of the codes X- and Y- codes with the T- codes, the alternative procedure is to include the deceased persons in the item of some additional causes, included in the class External Causes for Morbidity and Deaths. The data analysis however shows that the estimation of drug-related deaths, if all these causes are taken into consideration, is grossly overestimated. Considering the total number of deaths caused by intoxication with narcotic or psycholeptic (hallucinogenic) substances (T 40) and intoxication with psychoactive medical substances not classified elsewhere (T43), which does not differ significantly from the number of deaths caused by X41, X42, X61, X62, Y11, Y12, it was assumed that the estimation so done would not significantly differ from the estimation to be made if such a combination with the T-codes is possible.

Having made the analyses we decided that in the tables supplemented to the report and in the present working out of the analysis of the drug-related deaths, the data for the following causes for deaths should also be included (see *Table 6-1*):

NATIONAL DEFINITION OF DRUG RELATED DEATHS – CODES INCLUDED AFTER ICD-10

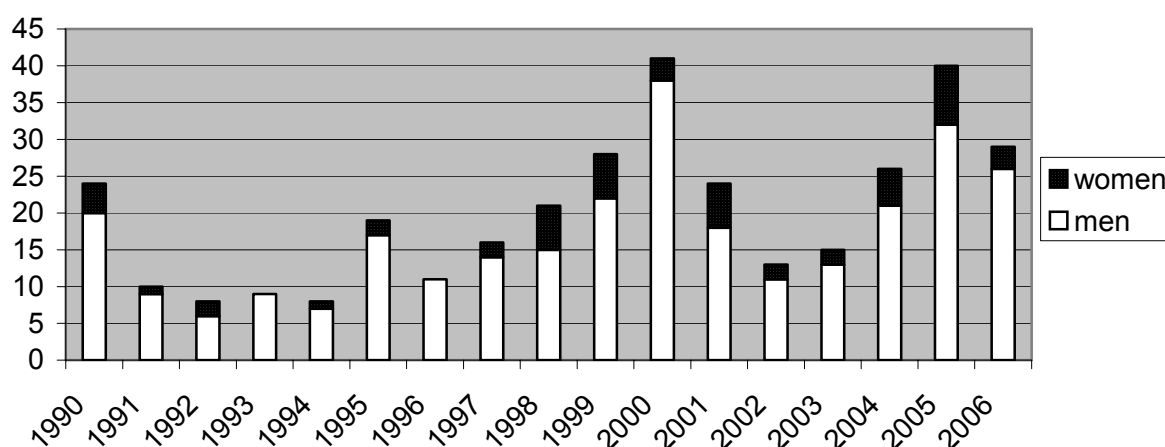
F11-F12, F14-F16, F19	Psychic and behavioral disorders
X41	Accidental intoxication or the effect of anticonvulsive, sedative, hypnotic, antiparkinsonic and psychoactive substances not classified elsewhere
X42	Accidental intoxication and the effect of narcotics and psychodysleptics [hallucinogens], not classified elsewhere
X61	Intended self- induced intoxication and the effect of anticonvulsive, sedative, hypnotic and antiparkinsonic and psychoactive substances not classified elsewhere
X62	Intended self-induced intoxication and the effect of narcotics and psychodysleptics [hallucinogens], not classified elsewhere
Y11	Intoxication and the effect of anticonvulsive, sedative, hypnotic and antiparkinsonic and psychoactive substances, not classified elsewhere, with indefinite intentions
Y12	Intoxication and the effect of narcotics and psychodysleptics [hallucinogens], not classified elsewhere, with indefinite intentions

Source: The National Institute of Statistics

In compliance with the statistics so presented in 2006 the drug-related deaths number 29 cases. The number of men is 26 and it is significantly greater than the number of women - 3 cases. (see Figure 6-1).

Figure 6-1

**DRUG-RELATED DEATHS IN BULGARIA OVER THE PERIOD 1990 - 2006
DISTRIBUTED BY SEX**



Source: National Institute of Statistics

After the increase of the indicator **intensity of deaths** ⁴⁷ for the previous year, in 2006 its overall value for the country was 0.38 per 100 000 persons of the population. The indicator is significantly higher for men (0.70 per 100 000 men) compared to the one for women (0.08 per 100 000 women). For the whole period from 1990 to 2006 the value of the coefficient was the highest in 2005– 0.52 per 100 000 persons from the population. Its lowest value was in 1993– 0.11 per 100 000 persons of the population.

In the structure of deaths when distributed by causes the relative share of the deaths caused by accidental intoxication and by the effect of narcotics and psychodysleptics [hallucinogens], not classified elsewhere (X42), is the greatest. This is the cause of death in 71% of the cases.

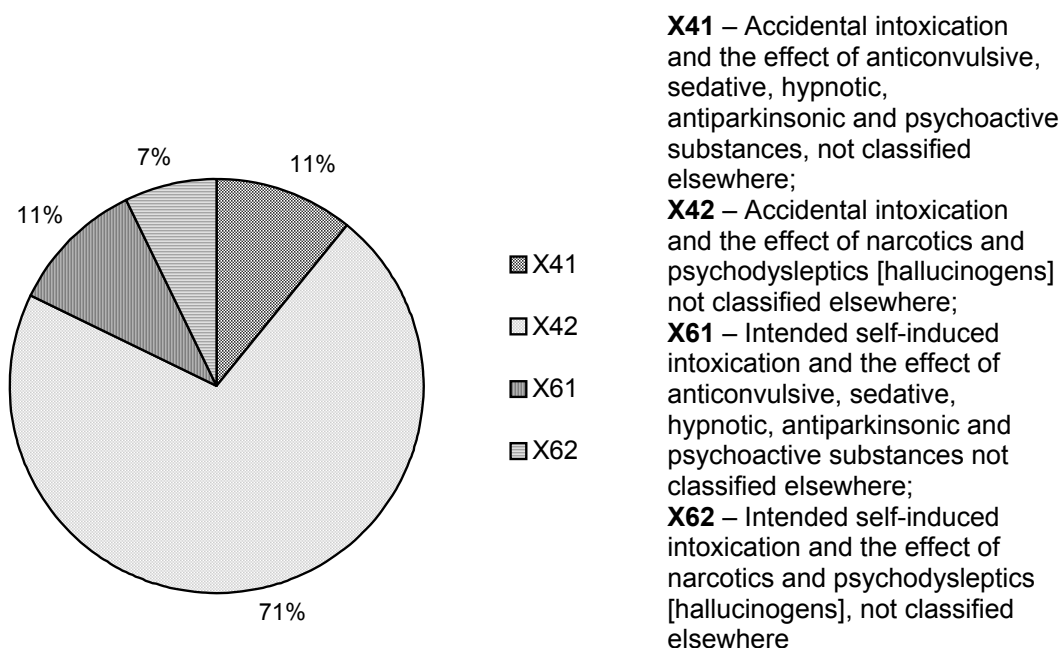
Next come the deaths caused by accidental intoxication and by the effect of anticonvulsive, sedative, hypnotic and antiparkinsonic and psychoactive substances, not classified elsewhere (X41) and the intended self-induced intoxication and the effect of anticonvulsive, sedative, hypnotic, antiparkinsonic and psychoactive drugs, not classified elsewhere (X61) –11% for each.

7% of the deaths in 2006 were caused by intended self-induced intoxication and by the effect of narcotics and psychodysleptics [hallucinogens], not classified elsewhere (X62). In 2006 there are no deaths caused by the greater part of the causes used in the definition.

Unlike the previous one, this year there is not a single death caused by Psychic and Behavioral Disorders ICD – 10 revision (see *Figure 6-2*).

Figure 6-2

STRUCTURE OF DRUG - RELATED DEATHS IN 2006



Source: National Institute of statistics

The distribution of deaths according to age shows that the intensity of deaths is the greatest in the age group 20 - 24 years. The intensity of deaths in this age group is 1.68 per 100 000 persons of the respective population. For the men this value is 3.28 per 100 000 men, and for the women in this age group there are no deaths caused by items included in the definition. The age

⁴⁷ The intensity (frequency) of deaths according to causes is calculated as the ratio of the number of deaths for a definite cause and the average annual number of persons from the respective population. It is usually calculated per 100 000 persons of the population.

group 25-29 years comes second in the intensity of deaths (1.58 per 100 000 persons) followed by the group aged 30 – 34 (1.05 per 100 000 persons) (see *Table 6-2*).

Table 6-2

**DEATH RATE IN 2006 DISTRUBUTED BY SEX AND AGE GROUPS
PER 100 000 PERSONS FROM THE POPULATION**

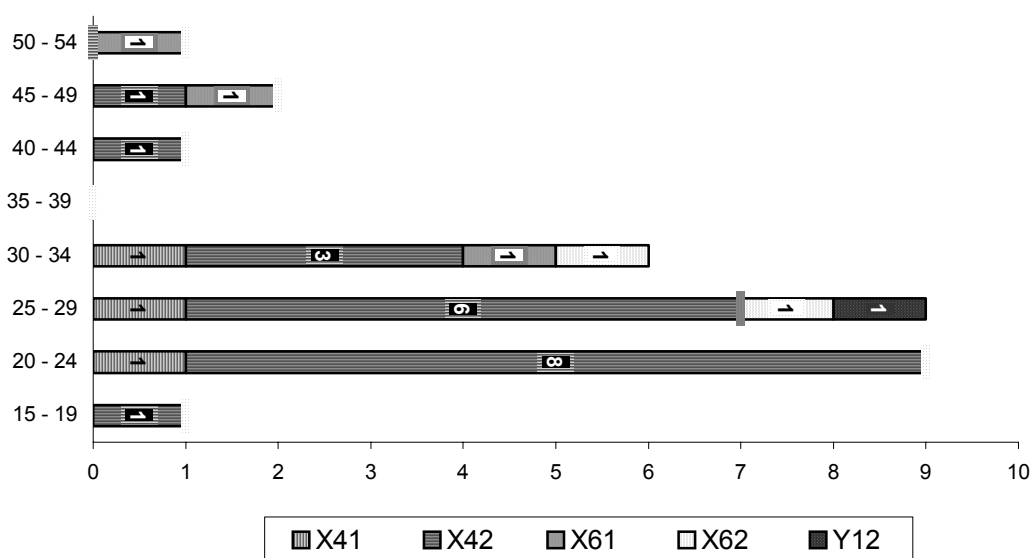
	Total	Age groups									
		<15	5-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	>= 65
Total	0.38	-	0.20	1.68	1.58	1.05	-	0.19	0.37	0.18	
Men	0.70	-	0.39	3.28	3.08	1.38	-	0.39	0.38	0.38	
Women	0.08	-	-	-	-	0.71	-	-	0.37	-	

Source: *The National Institute of Statistics*

More than 80% of all the drug - related deaths are men and women aged 20 to 34 years. The mean age of the deceased persons continues to rise and from a mean age of 27.8 in 2004 it rose to 28.8 in 2006. There are no drug - related deaths in the age group 35 to 39 years, neither in the age group of 55 years and over.

Figure 6-3

DRUG RELATED DEATHS DISTRIBUTED ACCORDING TO AGE GROUPS IN 2006



Source: *National Institute of Statistics*

Mortality Rate among Drug Users

The mortality rate among drug users is still not well enough studied in the country. In relation to the need of improving the information on the problem the National Focal Point on Drugs and Drug Addictions (NFPDDA) organized and carried out a **cohort study on mortality rate among drug abusers** ⁴⁸, which encompassed the geographical region of Sofia - the biggest city in the country, where a considerable part of the population studied is concentrated

⁴⁸ "A Study of the Mortality Rate among the Population of Drug Users – Sofia 2005 " cohort, retrospective, National Focal Point on Drugs and Drug Addictions, 1196 problem drug users included, who were treated in the city of Sofia over a 5-year period (1996 – 1999)

and where there was relatively good archive of documents concerning treatment system. According to data from surveys (f.i. estimated using the capture-recapture method) and expert estimations the proportion of the problem drug users in the capital is probably around the half of all the problem drug users in the country (the estimate of the number of problem heroin users in Bulgaria for the year 2005 was between 20 000 and 30 000 for the capital was between 9 136 and 15 909 when applying the capture-recapture method ⁴⁹).

The objective of the study was to determine the standard of living of the problem drug users included in the sample and to help receive more complete and of a broader range data on the level of mortality rate and the main causes for death of the persons studied. The study was retrospective in respect to data collection. The specific years included in the period from which the persons studied were selected were chosen by the work team. The selection of the persons was made according to criteria chosen in advance. The choice of the criteria was aimed at achieving maximal reliability of the information initially received. The criteria of inclusion are described below.

Criteria for inclusion in the sample

For the study the following criteria for inclusion in the sample were determined:

- **Heroin or other opioid** users;
- **Persons admitted for treatment** in the specialized inpatient facilities or outpatient centers;
- In the city of **Sofia** ;
- At least **once** for the period from the beginning of 1995 to the end of 1999 (a five-year period);
- Those diagnosed **according to the ICD-9** as suffering from – 292 (psychosis caused by narcotic substance use), 304 (narcotic substance addiction) or 305 (abuse without evidence of narcotic substance addiction);
- Their treatment because of drug use must have begun at a specialized treatment center **during the period selected**;
- Availability of **complete data** necessary for the further specifying of their standard of living as well as of exact **information about the date they were admitted** to the treatment center (corresponding to the selected 5-year period);

Spheres of the study

For the aims of the study three different options for treatment were selected which were accessible to the problem drug users during the period indicated:

- 1. Treatment in inpatient units** – at the Hospital for treatment of addictions and alcoholism within the frames of the National Centre for Addictions in Suhodol, Sofia;
- 2. Treatment in outpatient units** – at the Program of Home Detoxification in the National Centre for Addictions in Sofia;
- 3. Substitution treatment** – the Methadone Maintenance Program at the National Centre for Addictions in Sofia.

For each one of these treatment programs a register of the patients is kept, where the necessary information can be found. These three programs encompass more than half of the

⁴⁹ See below in the “Problem Drug Use “ chapter in the Annual Report on the condition of drug - related problems in Bulgaria - 2006

cases of treatment in Sofia during the selected period, especially in respect to the most problematic cases of drug use (heroin and other opioids).

Data collection

Because of the fact that for this study the patients' personal data were needed, the data collection was organized in such a way as to ensure their maximal protection. For this purpose the nurses working for the program were involved, because they have the right to process the patients' personal data. A standard form was worked out so that the necessary information could be collected from the registers (see *Figure 6-4*).

In the blank the following data are filled in:

- The treatment unit where the patient has been admitted (for the 1st time in the period);
- The year when he was admitted (for the first time) (1995 -1999);
- The dates of admission and of discharge (for the first treatment over the period);
- How many days lasted his/her hospital stay (during the first treatment);
- The personal identification number of the patient;
- The patient's sex;
- Age at the time of admission (for the first treatment);
- Place of residence (during the first treatment);
- Employment of the patient (during the first treatment);
- Highest level of education (during the first treatment);
- Occupation (during the first treatment);
- Family status (during the first treatment);
- Reasons for the admission (treatment, tests, etc.);
- Final diagnosis after the ICD - 9;
- Possible co-morbidity;

Figure 6-4

A FORM FOR REGISTERING THE PERSONS STUDIED WHO HAVE BEEN INCLUDED IN THE SAMPLE FOR STUDYING THE DEATH RATE

**A STUDY OF MORTALITY RATE AMONG THE POPULATION OF PDUs
SOFIA 2005**

<p>1. Health establishment/department <input type="checkbox"/></p> <p>Suhodol-1; NFPDDA, MPP-3 NFPDDA- Treatment at home-2; Other-4</p> <p>2. Year of admission <input type="text"/></p> <p>3. Date of admission <input type="text"/></p> <p>4. Date of discharge <input type="text"/></p> <p>5. Days of hospital stay <input type="text"/></p> <p>6. PIN <input type="text"/></p> <p>Personal identification number</p> <p>7. Sex (man-1; woman-2) <input type="checkbox"/></p> <p>8. Age on admission <input type="text"/></p> <p>9. Residence <input type="checkbox"/></p> <p>Sofia-1 Village-3 Another town-2 Other-4</p> <p>10. Occupational status- permanent work <input type="checkbox"/></p> <p>Yes-1; No-2; No data-3</p>	<p>11. Education <input type="checkbox"/></p> <p>Higher than secondary-1; Primary/ has not studied-4; Secondary-2; Currently student at school-5; 8th grade-3; Currently student at the university -6</p> <p>12. Occupation..... <input type="checkbox"/></p> <p>13. Family status <input type="checkbox"/></p> <p>married-1; divorced, widow, widower-3 single-2; live together-4</p> <p>14. Causes for hospitalization <input type="checkbox"/></p> <p>treatment-1 social indications-4 tests-2 other-5 expertise-3</p> <p>15. (Final) diagnosis according to the ICD <input type="text"/></p> <p>.....code</p> <p>16. Co-morbidities <input type="checkbox"/></p> <p>.....</p> <p>.....</p>
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Source: *A study of the National Focal Point on Drugs and Drug Addictions of the death rate among drug users*

The data collected are checked so that double counting can be eliminated (for the different centers and for the different years). Having observed extremely strict measures to preserve the anonymity of the treated persons, a package of data was checked using the register of the National Institute of Statistics for the standard of living of the persons who had gotten into the cohort.

First results

The first results in respect to the standard of living of the patients from the treatment options numbered above who had covered by the sample, are given in *Table 6-3*.

Table 6-3

DEATH RATE AMONG THE PROBLEM DRUG USERS FROM THE STUDY OF DEATH RATE

	Patients from the sample	Number of the deceased	Percent of the deceased	Mortality level
Inpatient treatment at the hospital in Suhodol	301	40	13,2	132.89 per 1000
Outpatient treatment-treatment at home	582	60	10,3	103.90 per 1000
Substitution treatment-Methdone programme at the NFPDDA	313	11	3,5	35.14 per 1000
TOTAL	1196	111	13,3	92.81 per 1000

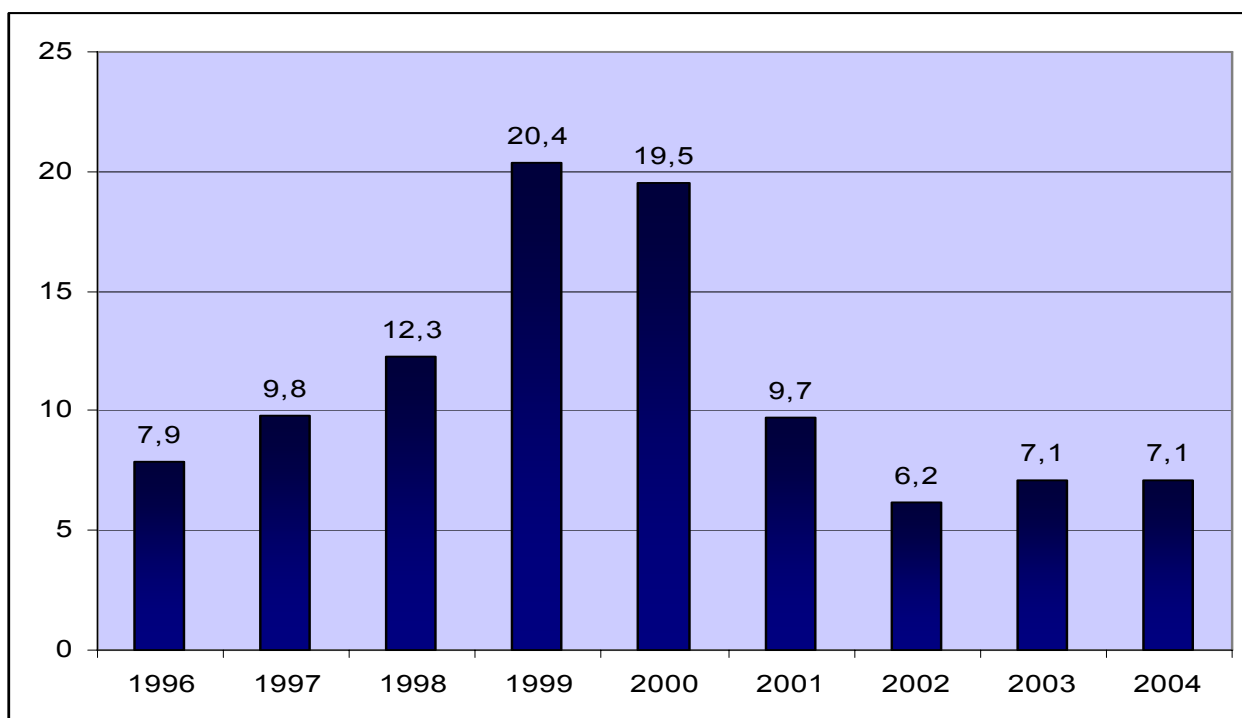
Source: *A study of the National Focal Point on Drugs and Drug Addictions of the mortality rate among drug users, 2005*

The difference in the level of mortality rate between the outpatients who are treated at home and the inpatients admitted for hospital treatment is impressive (132.89 and 103.09 per 1000 respectively) and on the other hand, there is a difference in mortality rate between these two groups of patients on the one hand and the group who are included in the methadone programme (35.14 per 1000). This may be due to the protective factor of the maintenance treatment in principle as well as to certain differences in the profile of the patients studied - in the hospital wards for treatment get severe and difficult to affect patients addicted to narcotic substances. It is till early to make definite estimations in respect to the differences in the level of mortality, because a finer data processing is still to be done. Probably other factors besides the hospital facilities are of importance for the lower death rate among the patients from the methadone programme, but unquestionably the first results showing a death rate among the methadone patients thrice lower than that among the other patients, are impressive.

The mean age of the patients who have got in the sample is 22.45 years. For comparison, the mortality rate for the same age among the general population is 0.5 – 2.0 per 1000 (for the patients from the sample the respective figure is 92.81 per 1000). The great difference existing between the two categories of population is obvious and indicative on its own. Still it is not so surprising (as a trend mostly) having in mind that the addicted patients (especially those addicted to heroin and other opioids) represent a risk group, including in respect to death, for a number of reasons related to the addiction itself and more often - to their hazardous way of life.

In relation to the distribution of deaths according to years (from the beginning of the study to the end of the period in 2004) as percentage they are distributed in the following way (see *Figure 6-5*):

PERCENTAGE DISTRIBUTION OF DEATHS PER YEARS IN THE SAMPLE FROM THE STUDY OF DEATHS (%)



Source: A study of the National Focal Point on Drugs and Drug Addictions of the mortality rate among the drug users, 2005

The highest mortality rate was observed in 1999 (20.4 %) and in 2000 (19.5 %). The rate was lowest in 2002 – 6.2 %.

The study of mortality rate among the drug users is a retrospective one, which, if some changes are made and new treatment programs are included in the database, can turn into a reliable routine source of information. A similar study of mortality rate can be conducted in some of the big cities of the country - Plovdiv, Varna - if there is an access to the necessary data. Similar studies present important information and can be recommended to the Regional Councils on drugs as future projects for work.

Drug Related Infectious Diseases

HIV/AIDS, viral hepatitis, sexually transmitted diseases and tuberculosis

The data presented for 2006 are taken from the laboratory of the National Centre for Addictions which is specialized for work with persons with drug addictions, and from the report of the National Committee for prophylaxis of AIDS and sexually transmitted diseases at the Ministry of Health. The data refer to patients of the National Centre for Addictions and to patients included in programs being implemented in the field in the country, as well as to a group of persons studied serving a term of imprisonment in several prisons in Bulgaria.

Short updated information on the prevalence of HIV/AIDS in Bulgaria over the period 1986 - 2007⁵⁰

By the autumn 2007 officially at the Ministry of Health a total of 803 HIV positive persons have been registered. By October the same year at the laboratories of the regional inspectorates for preserving and control of public health, the Dermatology and Venereology Dispensaries and at the Centers of Hematology and Transfusiology more than 200,000 persons have been tested for HIV.

The sexual way remains the main way of transmission - in around 83% of the cases, and for the last 2 years the number of men having sexual contacts with men has increased, and this way of transmission is followed by the blood transmission in drug users (13%), around 3% through blood and blood products (the last cases were registered in 1996) and the vertical way of transmission (from mother to child) is less than 1%.

The number of newly registered HIV-positive people for 2007 is 114, out of whom 95 are men and 19 are women, so it follows that 83,3% of the newly registered are men and 17,5% are women. For comparison - up to 2006 67% of the infected persons were men and 33% were women, i.e. there can be observed a significant increase in the number of men. 70% of the newly registered for this year HIV-positive persons are from Sofia (36 people) and from the region of Plovdiv (43 people).

Over the period observed the age of the HIV-positive persons registered varied widely - from 16 to 68 years. The mean age for men was 32 years and for women - 34 years. All the age groups are affected, and a critical decline of the lower age limit was observed - as low as 16 years. 35% of the newly registered for this year belong to the age group under 25 years.

As for the way of transmission there are **two especially vulnerable groups**: 36% of the newly registered are injecting drug users and 24% of all the newly registered HIV-positive are men, who have reported having had sexual contacts with men. Another 18% have been diagnosed as inpatients for whom AIDS was one of the possible differential diagnoses. The disturbing tendency still holds of identifying new HIV-positive injecting drug users. From 1986 to 22nd November 2007 their total number has risen to 105 people.

From the middle of 2006 a pilot testing, and from the beginning of 2007 a weekly testing was introduced - anonymous and voluntary - for HIV in all the places of detention. Over a period of 15 months 3 654 persons in imprisonment have been tested and consulted and among them 17 HIV-positive persons were diagnosed.

For the period 1st January – 30th June 2007 19 surgeries for anonymous and free testing and consulting for HIV/AIDS were established (KABKIS), where 19 605 persons were tested and the total number of all the people who were tested at the surgeries since their establishment has reached 59 475 people. 60% of the newly-registered HIV-positive persons for the year 2007 were discovered by the NGOs and by KABKIS.

Data from the tests done to drug users in Sofia

At the laboratory of the National Centre for Addictions the addicted persons are tested for the following markers:

- Antibodies against HIV ½ – to diagnose HIV infection;
- Antibodies against HCV – to diagnose viral hepatitis C;
- HBsAg – to diagnose viral hepatitis B;
- TPHA – to diagnose Syphilis.

Diagnostics of tuberculosis and of the sexually transmitted diseases is not done because of lack of kits.

⁵⁰ Source: "Prevention and Control of HIV/AIDS" Program – Ministry of Health (on-line at: <http://www.aidsprogram.bg/web/hiv-aids/home.nsf/0/E7803A0333E4175CC2256FAC0048A006?OpenDocument>)

Tests and positive results for the year 2006

In Table 6-4 the total number of the tested persons in Sofia for 2006 is given, and also the positive results obtained at the laboratory of the NCA.

Table 6-4

TOTAL NUMBER OF SEROLOGIC TESTS AND POSITIVE RESULTS IN SOFIA

TYPE OF TEST	NUMBER OF TESTS	POSITIVE RESULT	
Antibodies against HIV	1100	4	0.36 %
Antibodies against HCV	1100	359	32.6 %
HbsAg	1100	84	7.6 %
Syphilis	833	67	8.4 %

Source: Laboratory of the National Centre for Addictions

In Table 6-5 is given the total number of the tested injecting drug users at the laboratory of the NCA in the city of Sofia in 2006 and the obtained positive results.

Table 6-5

NUMBER OF INJECTING DRUG USERS TESTED AND POSITIVE RESULTS IN SOFIA

TYPE OF TEST	NUMBER OF TESTS	POSITIVE RESULT	
Antibodies against HIV	487	4	0.87 %
Antibodies against HCV	487	249	51.1 %
HbsAg	487	27	5.54 %
Lues	220	21	9.54 %

Source: Laboratory of the National Centre for Addictions

The injecting drug users tested at the laboratory of the NCA are patients of State Psychiatric Hospital for treatment of Drug and Alcohol Addictions (SPHTDAA) and clients in programs for outreach work with drug users - KARITAS and "Initiative for Health".

In Table 6-6 the total number of the anonymously and voluntarily tested prisoners in 6 prisons in 2006 is given and the positive results obtained from the serologic tests.

Table 6-6

VOLUNTARILY TESTED PERSONS IN IMPRISONMENT IN PRISONS

TYPE OF TEST	NUMBER OF TESTS	POSITIVE RESULT	
Antibodies against HIV	613	0	0.0 %
Antibodies against HCV	613	110	19.0 %
HbsAg	613	57	9.30 %
Lues	613	44	7.18 %

Source: Laboratory of the National Centre for Addictions

1. ANTI HIV (TYPE 1 & TYPE 2)

The total number of tested persons was 1100:

- 450 patients of the laboratory of the NCA from them 4 HIV positive;
- 37 patients of the KARITAS program;
- 613 patients from the prisons.

Four of them were confirmed HIV carriers. It represents 0.36 % out of the total number of tested persons, but 0.87 % out of the number of the injecting drug users (487). Of the 4 confirmed HIV carriers the three injecting drug users have been diagnosed for the first time: 2 of them have been tested because of treatment at SPHTDAA, one of them was tested after he came back from treatment in Spain and 1 case had already been confirmed by the national AIDS laboratory, at the National Center for Contagious and Parasitic Diseases. Over the year a total of 7 cultures have shown primary reactivity, but three of them turned negative.

All the HIV - positive persons who were diagnosed at the laboratory of the NCA are also carriers of the hepatitis C virus.

2. HBsAg

Total number of tested - **1100**, of them 84 positive = **7.6 %**:

- **450** patients of the NCA - **23** positive = **5.1 %**;
- **37** KARITAS patients - **4** positive = **10.81 %**;
- **613** patients from the prisons - **57** positive = **9.3 %**.

We can note that the trend of **low prevalence of hepatitis B viral infection** still remains, which for the injecting drug users is within the limits of the mean rate for the country, and for the patients of the outreach programs the rate is around 50 % higher. The greatest number of HBsAg positive persons was in the prisons, but the persons tested there were anonymous and it is not known what number of them were injecting drug users.

3. ANTI HCV

Total number of persons tested - **1100**, of them positive - **359**:

- ❖ **450** persons from the NCA, positive - **241** = **53.6 %**;
- ❖ **37** clients of KARITAS - **8** positive = **21.6 %**;
- ❖ **613** clients from the prisons - **110** positive = **19 %**.

Table 6-7

LEVEL OF HEPATITIS C VIRUS INFECTION FOR THE PERIOD 1995-2006

YEAR	NUMBER OF TESTS	POSITIVE	RELATIVE PART (IN %)
1995	109	53	49
1996	143	87	61
1997	308	170	55
1998	406	245	60
1999	242	175	72
2000	744	524	70
2001	435	254	58
2002	670	412	61
2003	1148	677	59
2004	1257	710	57
2005	815	385	47
2006	487	249	51*

*These data are only for the injecting drug addicts

Source: *Laboratory of the National Centre for Addictions*

When analyzing the data a trend is outlined of **stabilizing the number of the viral hepatitis C carriers**, but this is due to a more precise reading of the primary testing and of the subsequent tests done.

4. SYPHILIS

The total number of tested was 833, the number of positive was 676 = **8.04 %**, but for the IDUs it was **9.45%**. There is an **extremely lasting trend observed over the last years for the number of the ill with syphilis IDUs to remain around 10% of the tested.**

Of all the 487 persons tested at the NCA 3 IDUs were carriers of both HIV and hepatitis C virus, one was infected with HIV, hepatitis C and syphilis, 16 persons were infected with hepatitis B and hepatitis C viruses; 9 persons were infected with hepatitis C and with syphilis and one person was infected with hepatitis B, hepatitis C and syphilis. It can be seen from the data that **the number of co-infected with two and more infections persons among the injecting drug users is growing.**

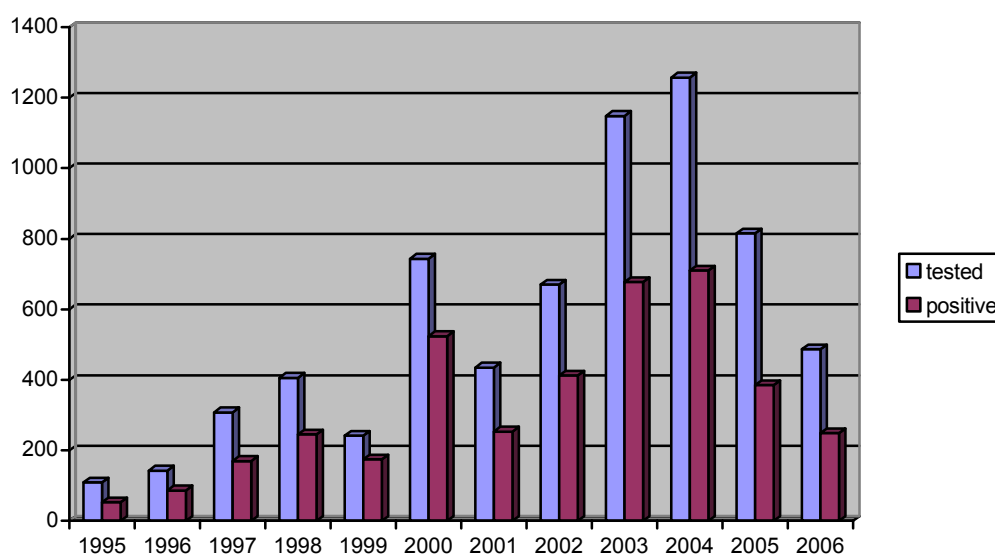
In 2006 3 babies of mothers from the methadone program – carriers of the hepatitis C virus were tested for hepatitis C infection and the results of the test were negative. With these children added the total number of the babies of mothers participating in the methadone programme tested over the last 5 years is 14 and all the results are negative.

From the analysis of the results the following points can be noted:

1. **The level of the HIV infection is low**, compared to the prevalence in other countries from the region, but **for the last 2 years it has marked a trend of rising for the injecting drug users.**
2. **The level of hepatitis B infection remains at about 5 % (6.10%)**, and this value has remained constant for the last 10 years; it is comparable to the general hepatitis B morbidity in the country.
3. The level of infection with the **hepatitis C virus** for all the IDUs tested at the NCA is **53.63 %**. It can be noted that **there is a trend for the level of infection to remain constant**, which may be due to the better work of the needle and syringe exchange programs.
4. From the data it can be seen that **the number of persons among the IDUs co-infected with 2 and more infections is growing.**

Figure 6-6

NUMBER OF PERSONS INFECTED WITH THE HEPATITIS C VIRUS OVER THE PERIOD 1995-2006



Source: *The Laboratory of the National Centre for Addictions*

Psychiatric co-morbidity (double diagnosis)

On the data of the Toxicology Clinic at the “N.I.Pirogov” Multi-Profile Hospital for Active Treatment and Emergency Medicine /MHATEM/ over the period 2004 – 2006 there were treated a total of 537 patients with addictions. 112 of them (22 %) had abscesses at the injection site. Two of all the patients had tuberculosis. No tetanus or botulism was diagnosed. Septic endocarditis was found on the post-mortem of one of the deceased.

In all the inpatients treated there was observed: personality disorders, depression, anxiety, and 10 of them had schizoaffective or bipolar disorder (they were admitted with this diagnosis).

In respect to the somatic co-morbidity the following cases have to be mentioned: 4 patients with heroin addiction had non-traumatic rhabdomyolysis with acute renal failure; 5 patients had inflammatory process of the lungs.

Other health correlates and drug related consequences

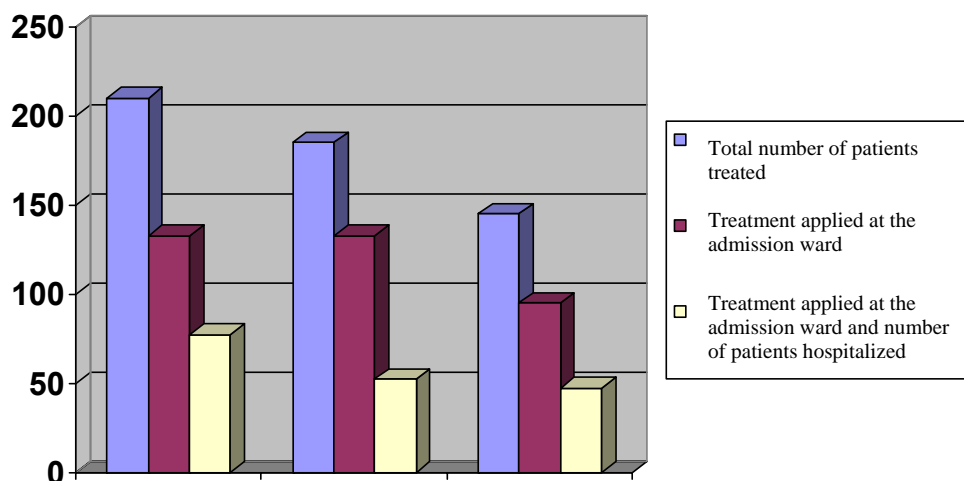
Non-fatal emergency drug related cases

For the last 3 years (2004 – 2006) at the Toxicology Clinic at “N.I.Pirogov” MHATEM 537 patients with drug addictions were treated (450 men and 87 women), who sought medical aid because of acute intoxication. They represent 2,9 % of all the patients who have visited the admission surgery of the Toxicology Clinic (24 678 clients). Of the total number of drug addicted persons the number of heroin abusers is 498.

The dynamics of this acute pathology in toxicology over the last 3 years is represented on *Figure 6-7*.

Figure 6-7

DINAMICS OF THE ACUTE TOXICOLOGICAL PATHOLOGY OVER THE PERIOD 2004-2006



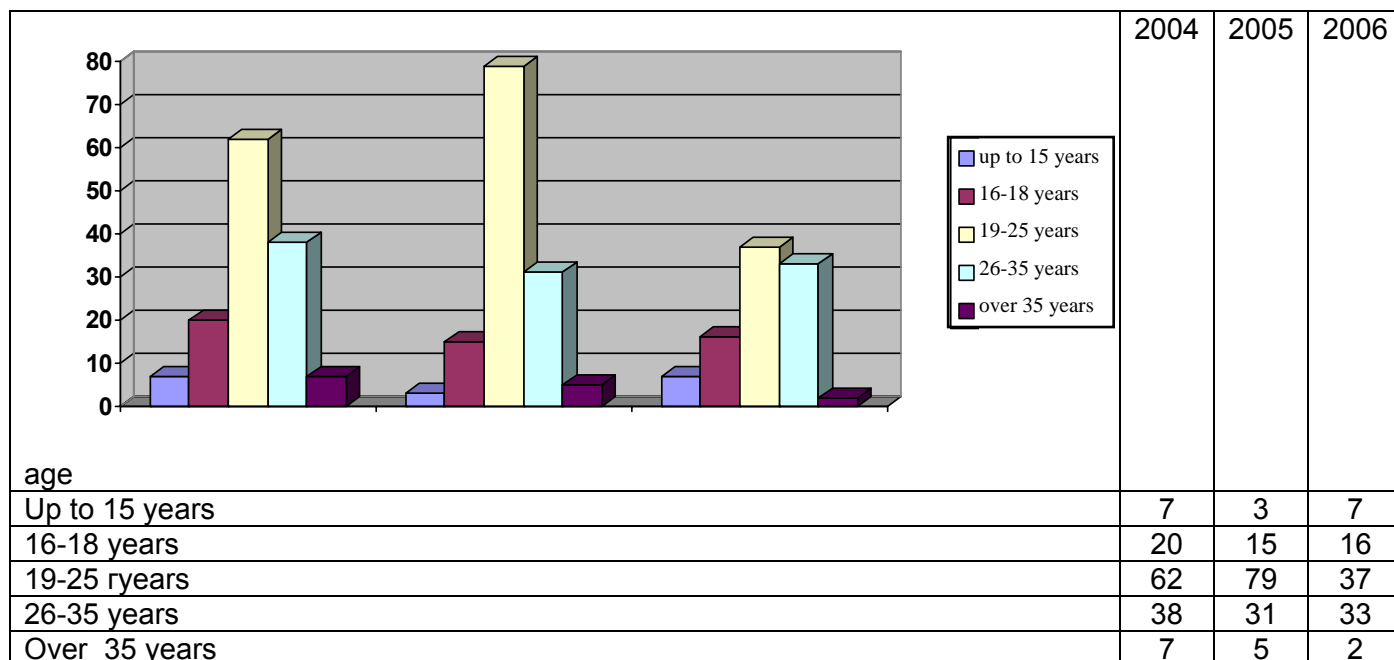
	2004	2005	2006
Total number of treated persons	210	185	145
Treatment at the admission ward	133	133	95
Treatment at the admission ward applied and hospitalized	77	52	47

Source: Toxicology Clinic at the “N.I.Pirogov” MHATEM

The distribution according to age is represented in *Figure 6-8*. The greatest number of drug-addicted patients is in the age sub-group 19-25 years – 33 %.

Figure 6-8

DISTRIBUTION OF THE PATIENTS ACCORDING TO AGE OVER THE PERIOD 2004-2006



Source: Toxicology Clinic at the "N.I. Pirogov" MHATEM

For the heroin addicted persons the main way of applying the drug is the intravenous way – 90,97 %.

For the indicated period of 3 years 3 of the inpatients died - indirect deaths (2 patients had sepsis and 1 had non-traumatic rhabdomyolysis with acute renal failure).

In the group of patients admitted for an overdose of heroin, there were no deaths registered irrespective of the severity of the clinical condition (including lack of breathing). This is due to the reanimation done and adequate antidote treatment - bolus doses of naloxone. Because of this the mortality rate for the period 2004-2006 year is extremely low-around 0,006 %. A number of the patients leave the hospital immediately after the resuscitation of the vital functions - explicit objection to treatment.

384 of the heroin abusers are hepatitis C virus carriers – 77,1 % on the data of their history. HIV carrier is one female patient – on the data from her history; other virology tests have been done to the rest of the patients and they were negative.

7. Responses to Health Correlates and Consequences

Prevention of drug-related deaths

Overdose prevention

A great part of the cases of lethal overdose among the drug users can be prevented. In a situation of stigmatizing and criminalizing of drug use a greater number of the cases of overdose can have a fatal outcome because of fear and objection to seeking help. Calling an ambulance from the Emergency Center may not be done because of the fears of the problem drug users present that a team of the police may possibly arrive as well. In this case the training of the drug users themselves in diagnosing and adequately reacting to the overdose and giving first aid are of vital importance.

The following reasons can be defined as main risk factors for an overdose:

- Injecting drugs;
- Opioid use;
- Heroin use in combination with substances suppressing the nervous system;
- Loss of tolerability (after a period of abstinence or of reducing the use);
- When the injectors are alone (there are no other people present at the moment of injecting).

The problem drug users who are not treated and cannot receive information and knowledge from their attending physician are a target group of the NGOs working to reduce the harm caused by drug use. The outreach practices are the most effective for work with them. The ideology of this method is that groups which for one reason or another do not have an access to the services offered may be encompassed if the services are offered within the target communities. At the communities of the problem drug users specific services are offered depending on their needs. The services are constantly being adapted to the changing circumstances. The organizations are trying to include people from the respective risk groups in all the activities, in which these people can work as collaborators.

The activity of these NGOs refers to the implementation of the “Prevention and Control of HIV/AIDS” program funded by the Global Fund to fight HIV/AIDS, malaria and tuberculosis, and more precisely, to the implementation of Component 4 - Maintaining low level of HIV prevalence among the injecting drug users. Alongside the teams of the programs make detailed explanations to the IDUs how to inject safely, and they also describe the symptoms of an overdose and how to react correctly in case of an overdose.

The activities aimed at preventing the drug-related deaths are as follows:

- ◆ Training for a safer drug use;
- ◆ Training how to give first aid;
- ◆ Applying antagonists, etc.

In 2006 the “**Initiative for Health**” **Foundation** continued to work on the principle of outreach, and to the previous ones new sites of field work were added (for the last year they numbered 13). In the month of May the “Initiative for Health” Foundation established the first drop-in center in Sofia for drug users to cope with the need of organizing low-threshold programs. This drop-in center could serve as a model for similar practices in the town. In the month of May 2006 a **second drop-in center** of the foundation was established, which was **meant mainly for drug users from Roma origin**. It is open every week-day and a social worker is always present there,

who receives and services the visitors. There non-formal training of the drug users and of the sex workers – men and women - is done.

At the **drop-in centers** every visitor can be given:

- sterile needles and syringes and he/she can also return the used ones;
- clean materials for injecting /caps, filters, citric acid/, disinfectants;
- condoms;
- Information materials on safe injecting, prevention of HIV/AIDS, hepatitis, sexually transmitted infections, overdose, etc.;
- information on the medical services.

At the two drop-in centers of the foundation information can be received on how to reduce the risk of drug use, as well as on the options of treatment or testing for sexually transmitted diseases. Only the outreach field in the “Fakulteta” district was dropped out because its patients were in fact the same ones as those of the new drop-in center. There is a mobile medical surgery functioning as a part of the work of the foundation where tests and field work ⁵¹ are done.

The **“Dose of Love” Association** in Bourgas ⁵² in the last year also successfully maintained activities to prevent overdose. The organization is still the only one to work with active drug users and with active sex workers. The outreach practice is still maintained as a method of work with the target groups. In the previous year work was done with 536 different clients of the program in 35 different fields.

The “Dose of Love” Association also established the **Day Center for Drug Users**. There the clients of the program can stay, can talk to social workers, can have coffee or tea, or vitamins. This site is very important for the recreation of the social behaviour and for establishing habits of mutual confidence between the users and the team working with them. At the Day Center are provided: information, brochures, condoms, needles and syringes, and if necessary psycho-social consultations of the clients and their relatives are held. At the Day Center bringing in and use of drugs is not allowed. There certain rules are observed, ensuring the order and the security of the clients and of those who work there.

As concrete activities can be indicated the needle and syringe exchange and the dissemination of information materials. The activities of the mobile surgery continue to be implemented in 2006 as well. 751 health consultations have been held, 487 individual and 264 group consultations. The activity of the only one of its kind Drop-in Center in the town also continues.

The methods to access the target groups through “gatekeepers” and “peer”-hired collaborators from the target communities represent a new element in the work of the foundation. “Prevention of the health risk of sexually transmitted diseases and other infections among persons in imprisonment” project was won and implemented and within the frames of the project information brochures were distributed. The total number of the brochures distributed is 581.

The teams of the **“Panacea” Foundation** in Plovdiv have also done activities for the implementation of the outreach program: providing training in safe injecting techniques, distributing materials for safer injecting, psycho-social work done among the addicted persons, referring for consultation and treatment to the specialized surgeries – more than 400 patients have been referred to such surgeries. The teams work in a total of 17 fields and drop-in centers. All who work in the teams have been trained to work for harm-reduction in the risk groups. Contacts have been made with **466 new for the program injecting drug users**.

⁵¹ More on the activity of the foundation at its address: <http://www.initiativeforhealth.org/>

⁵² More on the activity of the association at the address: <http://www.doseoflove.hit.bg>

The consultations where the risks are explained and knowledge is provided on safer techniques of injecting and safer sexual contacts were conducted either with groups or with individuals. Their number for 2006 was **1 959**. On a daily basis discussions with the program clients were held on different topics - including the prevention of infections and of overdose.

Materials containing health information on AIDS, overdose, hepatitis and types of substances have been distributed in a total number of **1 700**⁵³.

The “Public Charity Fund” Foundation in Blagoevgrad also continued its activity from the past year of needle and syringe exchange and of work among the addicted persons to enhance their knowledge of the risk they run. A number of 586 contacts have been organized with the drug users. 3 580 number of syringes and 7 615 number of needles have been distributed. The team works among the addicted persons with the aim of enhancing their knowledge of the health risk they run so that a denial of such behaviour can be motivated or at least reduction of the risk practices can be achieved.

One of the significant problems for the outreach workers is the frequent presence of police employees in the field where the contacts are realized, which greatly reduces the chance of adequate contact between the team and the clients⁵⁴.

The Foundation **“For a Better Psychic Health”** in Varna has realized 3 416 contacts, of them 583 – primary. The team has experience and knowledge on how to work with injecting drug users. There is a Drop-in Center established as part of the work of the foundation and the most suitable premises is used for it. The respective share of contacts realized there makes for 78,7% of the total number of contacts. 60 971 number of syringes and 121 942 number of needles have been provided.

645 individual consultations and 380 group consultations have been conducted, and more particularly on safe injecting techniques – 658.

The field collaborators seek for and establish new sites for injecting, but they report that contact with the clients is difficult to realize. The supply with drugs is already done through preliminary bargaining on a mobile phone. Another difficult moment in their work is the patients' reluctance to receive the results from the tests they have done for the blood borne infections. This illustrates the need of preliminary work to motivate the clients⁵⁵.

In the town of Pernik the **“P.U.L.S.” Foundation** is also working after the method of outreach and for the previous year they realized 1 835 contacts with problem drug users. 14 748 needles, 9 174 syringes and 2 021 caps have been exchanged. 3 673 condoms have been distributed, 1 684 packages of citric acid and a lot of health information materials. (see *Figure 7-1*).

The members of the organization of the **Bulgarian Red Cross in the town of Rouse** also exchanged needles and syringes in 2006 - 15 980 needles and 12 569 syringes. Members of the Red Cross worked after the outreach method at 9 key sites. 1 690 contacts have been made, of them 183 were unique (37 women and 146 men). The mean age of the clients was 18 – 37 years. A lot of written materials on the health risk run have been distributed. A not insignificant circumstance for the successful work is the calm and pleasant atmosphere at the office, which predisposes the clients to the program. The team establishes contacts with different institutions - Regional Inspectorates of Environment and Public Health Preservation and Control, MHAT-JSC, Prevention and Information Centers – aimed at a better coordination and a more appropriate realization of the objectives of the problem⁵⁶.

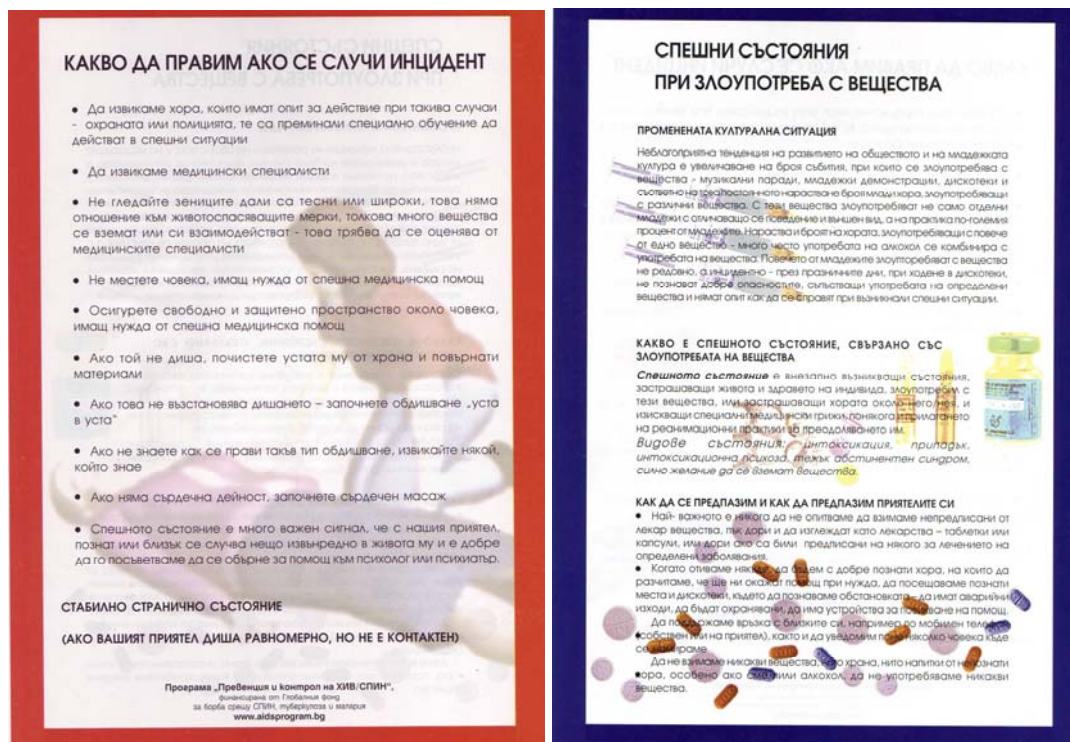
⁵³ Source: Report of the “Panacea” foundation for 2006

⁵⁴ Source: Information reference on the activities of the “Public Charity Fund” foundation in Blagoevgrad for 2006

⁵⁵ Source: Annual report of the „For a Better Psychic Health” foundation for 2006

⁵⁶ Source: Information on the activity of the BRC in the town of Rouse on component 4 “Maintaining low level of HIV prevalence among IDUs over the period 1st January – 31st December 2006

INFORMATION BROCHURE ON STATES OF EMERGENCY WHEN USING SUNSTANCES



Source: "Prevention and Control of HIV/AIDS" program, presented by the "P.U.L.S." Foundation in the town of Pernik

The organization of the **Bulgarian Red Cross in the town of Stara Zagora** has a similar activity. Maintaining constant contacts with the drug users is what characterizes the activity of the organization. The contacts are based on anonymity and mutual confidence. Personal cards are issued, certifying the clients' participation in the outreach program⁵⁷.

Karitas - Sofia has been working for 7 years after the Project "Mobile surgery for persons addicted to psychoactive substances." Within the framework of the project have been set and held consultations on health problems and primary healthcare has been provided to those in need. As main objective for its work the organization points out motivating more drug users to change their conduct, to limit the blood/sexually transmitted diseases, so that the social attitude towards the drug users can change. The organization has planned expansion of its activity by establishing consulting centers in the towns of Sofia, Bourgas, Pernik, Nova Zagora, Plovdiv. **Karitas in Sofia** is studying the possibility to establish a day and night center for people abusing drugs. 3 574 visits have been paid; new (initial) contacts have been established with 259 persons. The team estimates as difficulties in the work the reduction of the number of clients' visits and the reduction of the number of those willing to be tested for AIDS and for hepatitis B and C⁵⁸.

Since 1st March 2006 the Regional Council of the **Bulgarian Red Cross in the town of Kyustendil** has taken up the task of continuing to provide services for the implementation of the program of maintaining a low level of HIV/AIDS prevalence. The BRC in the town of Kyustendil makes regular contacts with the injecting drug users from the Roma district of the town, its members present information, health consultations, distribute needles and syringes and other materials. Contacts have been made with **136 Roma people, the total number of contacts being**

⁵⁷ Source: report on the Project of harm reduction – the town of Stara Zagora

⁵⁸ Source: The annual report of the "Mobile surgery for work with persons addicted to psychoactive substances" Project

2 175. 183 clients have been consulted on how to apply safer injecting techniques. 222 copies of health information printed materials and brochures have been distributed ⁵⁹.

The distribution of sterile sets for injecting is part of the preventive work of the organization, doing outreach work among the injecting drug users in the country. The sterile sets have been supplied by the Global Fund to Fight HIV/AIDS, malaria and tuberculosis. On *table 7-1* the figures for the needles and syringes distributed are given for the different towns in the country for 2006.

Table 7-1

**NUMBER OF STERILE SETS FOR INJECTING DISTRIBUTED
(NEEDLES AND SYRINGES) IN 2006 IN SOME OF THE TOWNS**

TOWN	NEEDLES	SYRINGES
PLOVDIV	156 990	78 495
VARNA	121 942	60 971
BOURGAS	47 596	23 798
KYUSTENDIL	44 177	21 877
ROUSE	15 980	12 569
PERNIK	14 748	9 174
BLAGOEVGRAD	7 615	3 580

Source: The annual reports of the NGOs from the "Prevention and Control of HIV/AIDS" program funded by the Global Fund to Fight HIV/AIDS, Malaria and Tuberculosis

The use of opiate antagonist - naloxone

The effectiveness of the work of the emergency centers in the country plays an important role for prevention of fatal outcome from an overdose. Not insignificant is also the fact that when an ambulance is called, a doctor always comes trained for work in cases of overdose. In accordance with Regulation № 25 from 1999 on the list of medicines applied and in the bag with medicines there is always an opiate antagonist - naloxone.

Naloxone is a medicine used to prevent the effects of opioid overdose - heroin and morphine. Its specific use is related to its especially high affinity to the μ -opioid receptors in the Central Nervous System. When injected intravenously its effect starts in 2 minutes and can last for 45 minutes. It is distributed under the trade names Narcan, Nalone or Narcanti.

In some counties the medicine is distributed for use by the problem drug users themselves to prevent a lethal outcome from an overdose. This is not the practice in Bulgaria.

The activities in the country aimed at preventing cases of lethal overdose are still exercised in specific towns implementing the program of the Ministry of Health and of the Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria. The program has already been enforced in ten towns in the country – the situation in those towns has been assessed in advance and determined as greatly at risk for spreading injection drug use – and the program for prevention and control of HIV/AIDS provides for the IDUs the knowledge how to prevent the lethal outcome from an overdose.

Prevention and treatment of drug related infectious diseases

Prevention

The prevention of infectious diseases related to drug use is a constituent part of both the basic documents adopted by the Council of Ministers of the Republic of Bulgaria - the National

⁵⁹ Source: Report of the Regional Council of the Bulgarian red Cross in the town of Kyustendil for the course of implementation and the results achieved after Component 4 from the "Prevention and Control of HIV/AIDS" program for 2006

Program for Prophylaxis and Control of AIDS and the Sexually Transmitted Diseases for 2001 - 2007 and the National Anti-Drug Strategy (2003 – 2008).

In the Action Plan of the National Strategy the activities for prevention of the infectious diseases related to drug use are specified as Strategic Task 5: “Reduction of the prevalence of diseases affecting society among the drug users: blood borne infections(HIV/AIDS, hepatitis B and C, etc), tuberculosis and diseases transmitted sexually, etc”.

The following sub-tasks have been set:

- Training teams for field work with drug abusers;
- Working up and applying programs for field work, needle and syringe exchange, distribution of condom, consultations;
- Identifying the problems and preparing programs to reduce the risk in particularly difficult to access and high-risk groups;
- Programs for early testing (including in the field), pre- and post-test consulting and referring for specialized treatment.

All the organizations working in field should present their projects to the medical board of the NCA (in accordance with Regulation № 30 from 20th December 2000 of the Minister of Health).

In 2006 10 not-for-profit organizations undertook activity for the prevention of HIV/AIDS, hepatitis B and C among the IDUs and they have been delivered with positive opinion by the NCA for doing these activities, namely the Programs for Field Work, needle and syringe exchange and testing for blood borne and sexually transmitted diseases within the frame of component 4 “Maintaining a Low Level of Prevalence of HIV among the IDUs after the Program of the Ministry of Health “Prevention and Control of HIV/AIDS, Malaria and Tuberculosis”, funded by the Global Fund, as follows:

- “Initiative for Health” Foundation - Sofia
- “Panacea” Foundation - Plovdiv
- “Dose of Love” Foundation - Bourgas
- Pleven
- “Health and Social Development” Foundation
- Bulgarian Red Cross - Rousse, Kystendil and Stara Zagora
- “For a Better Psychic Health” Foundation – Varna
- “P.U.L.S.” Foundation - Pernik
- “Public Charity Fund” Foundation – Blagoevgrad
- “Health and Social Development” Foundation - Sofia

The mobile medical surgeries are supported by 5 NGOs after Component 4 and by KARITAS - Sofia, as well as by the organization “Physicians without Borders”.

Consulting and testing

Testing for HIV/AIDS in Bulgaria is free. The laboratory of the NFPDDA has been established to provide service to drug users. The kits for these tests are supplied by the Ministry of Health.

The addicted persons who are health-insured can have the tests also via the health insurance system.

In 2006 18 surgeries for anonymous and free consulting and testing for HIV/AIDS continued functioning in the big towns of the country.

Since 2000 in the Republic of Bulgaria no immunizations have been given to the drug users against hepatitis B or hepatitis C. In Sofia the KARITAS NGO gives free immunizations to the IDUs, but the number of those immunized is very small (for 2006 - 19 persons). Since 1992 a free and compulsory immunization against hepatitis B has been given to all new born infants.

Treatment

All the persons infected with HIV as well as the patients with AIDS are free - treated at the specialized department of the Hospital of Infectious Diseases in Sofia, as well as at the

departments of Infectious Diseases for AIDS Treatment in the towns of Plovdiv and Varna. To the infected patients addicted to opiates free and immediate treatment is provided after the program of maintenance treatment at the Specialized Psychiatric Hospital for Treatment of Alcoholism and Addictions /SPHTAA/ – Sofia and after the regional programs in Plovdiv and Varna.

The treatment of the addicted patients infected with hepatitis C is funded by the NHIF. According to the requirements of the NHIF the persons addicted to drugs may be included in a program for interferon treatment if they have not used drugs for the last 6 months. The persons who are not health insured have no access to the treatment of hepatitis C. The treatment of those who have been approved by the NHIF is done at the Departments of Gastroenterology in different hospitals in Sofia but the data we dispose have not been confirmed. The treatment of patients with acute and chronic form of hepatitis B is accessible only for health insured addicted persons.

The treatment of syphilis is regulated; it is done at the Dermatology and Venereology Dispensaries in the regional towns in Bulgaria and is free of charge.

Intervention in case of psychiatric co-morbidity (double diagnosis)

There is no accessible current information on interventions in case of psychiatric co-morbidity (double diagnosis) for 2006.

Interventions for other health correlates and consequences related to drug use

There is no accessible current information on interventions for other health correlates and consequences, related to drug use in 2006.

8. Social correlates and consequences

Within the frames of this section the following topics will be reviewed:

- Social exclusion;
- Drug-related crime;
- Drug use in prisons.

When reviewing the topic of social exclusion in the context of the report attention was focused on the assessment of the number of homeless people, the number of the unemployed people, including those demanding treatment because of drug use, as well as on the data of the student dropouts.

The topic of drugs related crime includes a review of the data from the police, the data from the Procurator's Office related to the Action Plan to reduce the demand and supply of drugs and the data concerning antisocial deeds and crimes committed by minors and under aged people.

Presenting the topic of drug use in prisons is based on the routine information received directly from the prison administrations and on the purposeful research among inmates in Bulgaria.

Social exclusion

Homeless people

Among the general population

Currently there is no reliable statistics on the number of the homeless people in the country, including the children living in the street. The information on their number is imprecise and incomplete, because of the variations in the members of this risky group and the inadequate reliability of the sources.

On the data of the Regional Directorates of the Ministry of the Interior for 2002, the number of children in connection with their families but spending most of the time in the street, was 551 children, and the number of those who were away from their families or had no families at all, i.e. they lived permanently in street, was 35. For the year 2002 the number of children who had passed through asylums and day centers for children from the streets was 3 394 children (on the data of the National Informational Center on the problems of the waifs and strays of the Free and Democratic Bulgaria Foundation).⁶⁰

The data from the NGOs working with children in the street point to several hundred children, whose number is growing in summer and mostly during the holidays, when the children institutionalized are sent to their families.

On the one hand the main problems of the homeless children are related to the immediate risks of the street - violence, malnutrition, diseases, and on the other hand there is the problem of their education and qualification - most of them do not attend school regularly, which limits their options for progress. They have difficulties in accessing medical service and are often engaged in hard physical labour.⁶¹

⁶⁰ Source: National Strategy on the Child 2004-2006 accessible at:

<http://www.mlsp.government.bg/bg/docs/STRATEGIA-proekt.doc>

⁶¹ Source: the Ministry of Labour and Social Policy, Strategy for the Development of Services for Children and Families in Sofia for the Period 2003-2005, accessible at:

http://www.mlsp.government.bg/bg/projects/children/docs/Sofia_3_discussed.doc

Among the drug users

In 2007 the National Focal Point on Drugs and Drug Addictions and the “Initiative for Health” Foundation in partnership with a network of NGOs⁶² carried out a research on the treatment demand in relation to drug use and on the obstacles to access such treatment among the problem drug users in Bulgaria. Apart from the information directly related to the research topic data was received on the main social and demographic characteristics of the target group, including their status of residence. These data are not representative from statistical point of view, but they can serve as a basis for orientation mainly because of the random choice of the people included in the sample and its not ignorable size for such type of study⁶³. The social profile of the respondents showed that 19 of them (or 2.1 %) were homeless (had not a home for permanent residence). In two of the big cities (Sofia and Varna) the respective number of the homeless people in the samples was undoubtedly the largest (respectively around 37 % and around 42 %). Besides some specific ways of life in the groups of the population studied, this was probably due to the greater number of homeless people among the general population in the big cities.

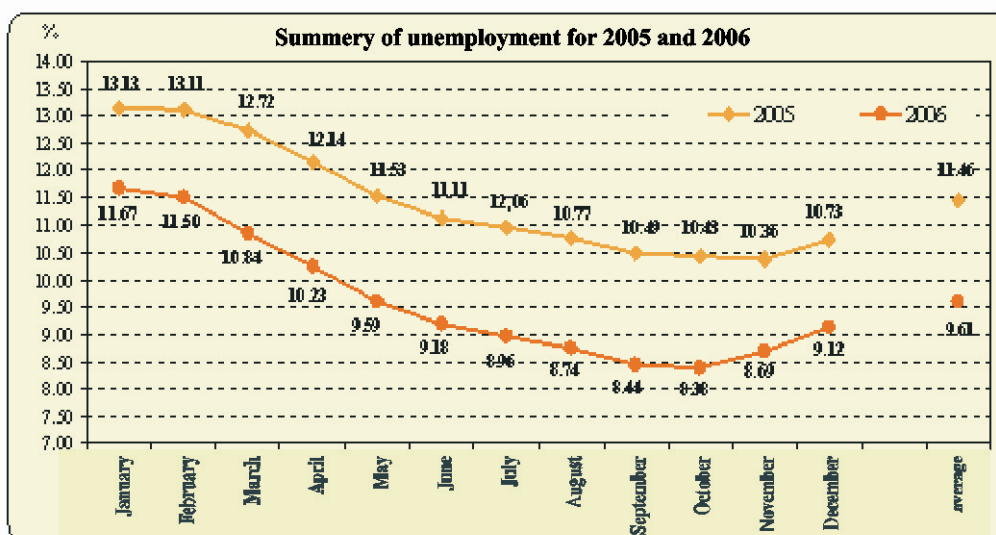
Unemployed people

Among the general population

For a sixth year in succession the trend still holds of decreasing the number of registered unemployed people, registered at the Labour Services in the country. In 2006 their average annual number dropped to its lowest value since 1991– 356 054 people. The reduction in comparison to the previous year was by 68 327 unemployed people or 16.1 %.

The level of unemployment (unemployed people per 100 economically active persons) reached in the second half of 2006 the lowest level since the middle of 1991. In October the lowest level for the year was registered - 8.38 %, and for the last three months (October, November and December) the lowest level of unemployment was registered for these months since 1990. The annual level of unemployment for 2006 was 9.61 %. In comparison to the previous year there is a decrease of 1.85 points (See *Figure 8-1*). For the period 2000 – 2006 the level of unemployment in the country dropped by 8.53 points.

Figure 8-1



Source: Employment Agency, Statistics and Analyses, Unemployment for 2006

⁶² The Bulgarian Red Cross - Rousse, Panacea Foundation in Plovdiv, the Iga Regional Fund in Pazardjik, the Bulgarian Red Cross in Kyustendil, the “For Better Psychic Health” Foundation in Varna, the “A Dose of Love” Foundation in Bourgas, the “Alternatives” Association in Blagoevgrad

⁶³ 893 problem drug users from 8 towns studied - Sofia, Rousse, Plovdiv, Pazardzik, Kyustendil, Varna, Bourgas and Blagoevgrad

For the specific territories the level of unemployment is also dropping, but with different rate and there is still a great difference among the specific regions. The level of unemployment is decreasing in all the territories, but the fact that it is decreasing most obviously in the territories where the level of unemployment was highest should be noted as especially positive. These are the regions of Targovishte, Montana and Vidin, where unemployment decreased by 4.11 points, 4.09 points and 3.18 points respectively. In the regions of Sliven and Jambol the decrease is also significantly greater than the average for the country (1.85 points), respectively by 3.76 points and 3.31 points.

The regions where the level of unemployment is lower than the average for the country are 9. In the remaining 19 regions the level of unemployment is higher than the average, and in the regions of Kyustendil and Sofia it is quite similar to the average for the country. The trend of the previous years still holds of keeping the lowest level of unemployment in the regions of Sofia-town, Gabrovo, Bourgas, Varna and Blagoevgrad and the highest level of unemployment is still registered in the regions of Targovishte, Montana, Vidin, Razgrad, and Shumen. In 4 regions unemployment is not only lower than the average for the country, but it is also lower than the average level of unemployment for 2006 for the European Union (EC-27). These are the regions of: Sofia-town (2.40 %), Bourgas (5.21 %), Gabrovo (5.34 %) and Varna (6.85 %). The positive trend of narrowing the variation range between the minimal and the maximal level of unemployment in the country, respectively for Sofia-town and Targovishte, still holds. The value of this indicator has dropped by 3.44 points compared to 2005 and it reached 18.31 points.

The average annual level of unemployment in the Eurozone and in the European Union (EU-27) for 2006 on the data of Eurostat was respectively 7.8 % and 7.9 %. These data decreased by 0.8 points each in comparison to 2005. According to Eurostat (on the data provided by the National Institute of Statistics from the observation of the work force which are comparable to the data of the member-countries of the European Union) the average level of unemployment for 2006 in Bulgaria was 8.9 %, i.e. 1.0 -1.1 points higher than the unemployment in the European Union. The lowest level of unemployment in the member-countries of the European Union was found again in: Denmark - 3.8 %, the Netherlands - 3.9 %, Ireland - 4.4 %, Austria and Luxemburg - 4.8 % each, Cyprus - 4.9 %. The level of unemployment is still the highest in Poland - 14.0 % and in Slovakia - 13.3 %. In Greece and in France the level of unemployment is the same as in Bulgaria - 9.0 %.

Among the drug users

On the data of the National System for monitoring drug related treatment demand⁶⁴ 43,4 % of all those who began treatment because of drug use in Bulgaria for 2006 were unemployed (in the preceding year - 42,4 %). The gender differences according to this indicator were smaller than in the preceding year – in 2006 43,9 % of the unemployed were men and 41,5 % of the unemployed were women, while in 2005 the ratio of men to women was 43,7 % : 36,6 %. In 2006 25,9 % of those who started treatment for the first time in their life were unemployed (in the previous year - 42,3 %). The unemployed among men are still more than among women - 28,2 % vs 14,3 % (in 2005 – respectively 45,5 % vs 27,5 %).

In 2006 in Bulgaria 48,6 % of the inpatients who started treatment because of drug use were unemployed (48,2 % of the men and 50,7 % of the women). Alongside 31.1 % of those who had initiated treatment for the first time in their life were unemployed (31.8 % of the men and 26.9 % of the women).

In 2006 in Bulgaria 41,2 % of the outpatients who started treatment because of drug use were unemployed of (41.8 % of the men and 38.8 % of the women). 18.3 % of those who had initiated treatment for the first time in their life were unemployed.⁶⁵

⁶⁴ For more details on the monitoring system see Chapter 4 of the present report

⁶⁵ Source: National Focal point on Drugs and Drug Addictions, Monitoring System for Drug Related Treatment Demand.

On the data of the research done by the National Focal Point on Drugs and Drug Addictions and by the "Initiative for Health" Foundation about the drug - related treatment demand and about the obstacles for the problem drug users in Bulgaria to access such treatment, among 893 persons from 8 towns the registered unemployed people numbered 51 (or 5.7 %), and the unemployed who were not registered numbered 515 (57.2 %). This means that nearly 63 % of the drug users who were in the cross section had no regular job. This is a high rate, all the more so if it is compared to the mean annual level of unemployment in 2006 which was 9.61 %⁶⁶.

School dropouts

On the data of the Regional Inspectorates of Education a total of 19 639 students dropped out from school in the year 2006/2007 and of them 1 000 children were first - year pupils. In 2004/2005 19 193 students dropped out from school out of a total of 963 051 students, enrolled at the beginning of the school year. In 2003/2004 31 552 students dropped out from school. In 2002/2003 the drop outs numbered 31 002 students.

When analyzing the reasons for dropping out from school in the already existing literature sources and research already done it is stated that the reasons are grouped in several basic categories: economic, ethnic and cultural, social and pedagogic. **The main factors**, which according to the empirical data have the greatest impact on school dropping out are as follows:

1. **The economic status** of the child's family, which is presented by different indicators summarized in a complex factor, which is of great importance for dropping out from school.

2. **The ethnicity**, which is the reason for observing definite cultural stereotypes which are of greatest importance when the family lives among a compact group of representatives of its own ethnos. The ethnicity influences dropping out from school through economic reasons (low income, low living standard, bad conditions of life, unemployment) as well as through the so called family reasons (early marriages, single-parent families, etc.).

3. **The school milieu and the related to it pedagogic factors.** On the one hand these are motives related to difficulties which the child faces at school; on the other hand – the value of education, the interest to the educational process and the desire/or lack of it ensuing from this to go to school; thirdly – the conflict relationships with class-mates and/or teachers and finally – the quality and the methods of teaching, and to what extent the topics of education meet the expectations of the child and his/her family.

It is important to note that these motives predominate among the Turkish community, and their influence among the Bulgarian children and the children of Roma origin is similar. There are some objective elements of the school environment which have an effect on the dropping out from school and on the number of years the child has spent at school – whether there has been pre-school preparation done and how effective it has been, the quality and complexity of the school syllabus, the qualification of the teachers, studying in mixed and incomplete classes, etc.⁶⁷

According to the national representative research including the children who used to go to school but then dropped out which was carried out in 2006 by the Vitosha Research Agency under a joint project of the Ministry of Education and Science and UNICEF - Bulgaria, studying the reasons for the children's dropping out from school, 80 % of them do this in the period from the V to the VIII grade. Moreover, between 70 % and 80 % of the drop outs are of Roma origin and are of low social status. Their level of literacy is very low.

The research shows that a great number of the parents of the drop outs want their sons and daughters to have at least secondary education, especially if this will help them acquire some profession, but in 72% of the cases they have not done anything to prevent their children's dropping out.

The results of the project also showed that for the young people education ranks third in value and family and love come before it. They, however, are of the opinion, that the main problems at school are aggression, poor discipline and alcohol drinking of the part of the youths.⁶⁸

⁶⁶ For more details see above in the same Chapter.

⁶⁷ Source: National Strategy for the Child 2007-2017

⁶⁸ Source: http://www.bguzi.com/index.php?option=com_content&task=view&id=337&Itemid=128

Financial problems

There is no information available on the drug related financial problems.

Social networks

There is no information available on the drug related social networks.

Sex workers

There is no new information available on the drug related aspects of the sex workers.

Drug related crime

Crimes (arrests/reports on trafficking /production/ cultivation, etc.)

Data from the police

On the data of the police in 2006 at the “Drugs” Department there were 1 064 signals received. The most numerous were the signals at the Metropolitan Police Directorate (MPD) – 506, followed by the Regional Directorates of the Ministry of the Interior (RDMI) in Plovdiv (86), Varna (64) and Haskovo (59). The fewest signals were received at the Regional Directorates in Smolyan (1) and in Jambol (2). (see *Table 8-1*)

Table 8-1

Work done by the police in relation to drugs	
Activities	Number of cases
Response to signals	1 064
Operative lawsuits instituted	253
Persons detained	2 734
Specialized police operations realized	2 409
Clubs and open drug scenes checked	5 405
School regions checked	3 450
New open drug scenes and meeting points for drug sale discovered	215

Source: National Police Service

253 operative lawsuits have been instituted. The most numerous were in RDMI Plovdiv (75) and at the MPD (59). Operative lawsuits have not been instituted at the Regional Directorates in Gabrovo, Montana and Shumen, neither at the Department of the Transport Police.

The persons detained in relation to drugs number 2 734. 57 % of them or 1 559 were detained by the MPD. Next according to the number of the detained persons come RDMI in Varna (219) and the RDMI in Plovdiv (209). The fewest detained were from the RDMI in Shumen (1) and the RDMI in Yambol (2).

In 2006 the number of the open drug scenes and clubs checked was 5 405. The most numerous of these checked were by the RDMI in Silistra (987), MPD (595) and the RDMI in Dobrich (456). The fewest were by the RDMI in Gabrovo (16), RDMI in Shumen (27) and RDMI in Lovech (29).

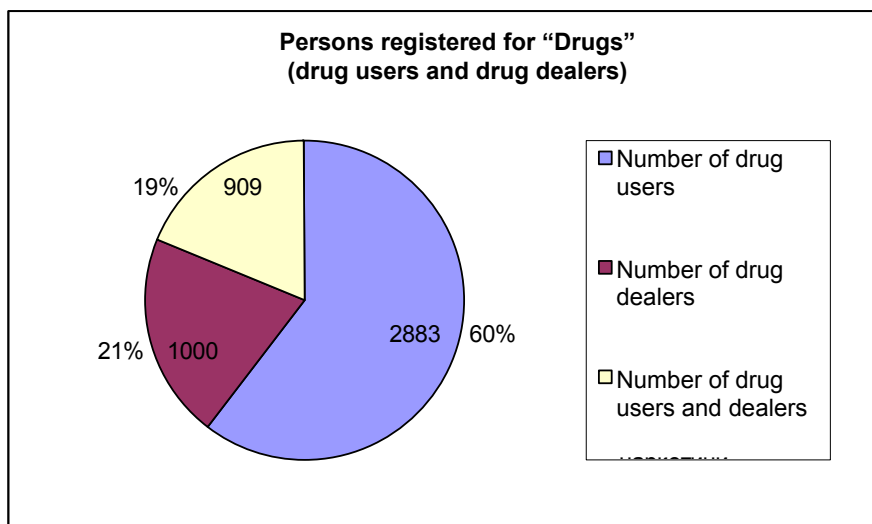
The number of the school regions checked was 3 450. The most numerous school regions were checked by the RDMI in Silistra (619), the MPD (331) and the RDMI in Pernik (290). The

fewest school regions were checked by the RDMI in Lovech, (24), RDMI in Gabrovo (25) and the RDMI in Yambol (25).

215 new open drug scenes and meeting points for drug sale were discovered. The most numerous of them were discovered by the MPD (66), RDMI in Plovdiv (31) and in Bourgas (19). No such scenes or points were discovered by the regional directorates in the towns of Vratsa, Gabrovo, Pleven, Targovishte and Shumen.

On the data of the National Police Department in 2006 the total number of persons registered in the “Drugs” section (users and dealers) was 4 792 (See *Figure 8-2*).

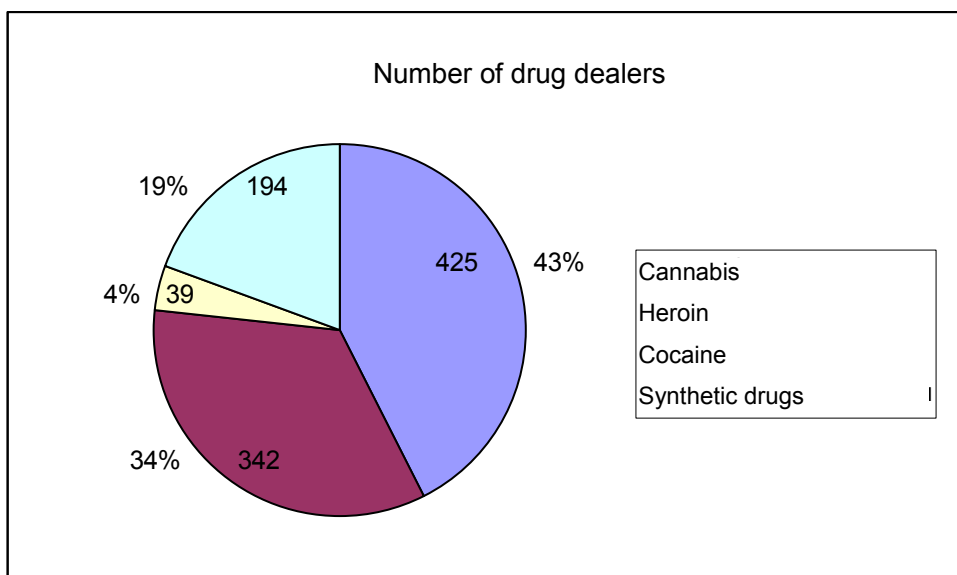
Figure 8-2



Source: National Police Service

The number of drug dealers is 1 000 or 21 % of the total number of the persons registered (users and dealers). 509 (or 51 %) are minors and under aged. 425 (43 %) deal with cannabis, 342 (34 %) deal with heroin, 39 deal with cocaine (4 %) and 194 deal with synthetic drugs – ecstasy, amphetamines, barbiturates (19 %) (See *Figure 8-3*).

Figure 8-3



Source: National Police Service

The number of persons simultaneously using and dealing with drugs in 2006 was 909, which is 19 % of the total number of the persons registered for drugs (users and dealers). Of them

443 or 49 % were minors and under aged. The persons registered for cannabis (both users and dealers) were 463 (50.9 %); for heroin – 294 (32.3 %), for cocaine – 13 (1.4 %) and for synthetic drugs – 139 (15.3 %).

On the data from the police in 2006 there were a total of 2 384 **claim files for instituting preliminary proceedings for** drug users and/or dealers. This number has diminished by 2,5 % in comparison to 2005 (2 445). Most of the claim files in 2006 were submitted by the MPD – 1281, next by the Regional Directorates in Plovdiv (190), Varna (189) and Bourgas (108). The above shown decrease of the number of the claim files over the year was mostly due to the decrease in the number of people not only dealing with but also using drugs – from 1 959 in 2005 to 1 881 in 2006. At the same time the number of dealers for whom a claim file has been prepared has slightly increased – from 486 in 2005 to 503 in 2006. The ratio “users and dealers / dealers only” has diminished, but it still remains within the limits of 4:1.⁶⁹

On the data of the Chief Directorate “Combating Organized Crime” in 2006 the persons detained for drug related offence numbered 271. In 2005 they were 318, i.e. there was a decrease of 15 %. In 2006 the persons arrested for cannabis related offence numbered 106 (39.1 %), for heroin – 87 (32.1 %), for cocaine – 15 (5.5 %), for amphetamines – 51 (18.8 %), for ecstasy – 4 (1.5 %) and for other substances – 8 (3.0 %). All the persons arrested for trafficking drugs numbered 62, for dealing – 205, and for production – 4. (see *Annex: Standard Table 11*)

The data from the national representative research carried out in 2006 among university students in Bulgaria show that 14 % of the 3220 students who participated in the polls from 7 Bulgarian towns (Blagoevgrad, Varna, Veliko Turnovo, Plovdiv, Rousse, Sofia and Svishtov) have at least once driven a vehicle after drinking alcohol. This refers mostly to the students from Plovdiv – 23.2 % and least – the students from Svishtov – 10.4 %.

It is important to note that 4.5 % of the students inquired have driven a vehicle at least once after having used drugs. This refers mostly for the students in Plovdiv – 13.1 % and least – for the students from Blagoevgrad – 1.5 %.

Measures of the Prosecutor’s Office to implement the Action Plan concerning the reduction of drug demand and supply

The problem of drugs is a constant priority in the work of the Prosecutor’s Office in the Republic of Bulgaria – on the one hand because of implementing the contracts of the country according to the home and foreign policy pursued, and on the other hand - because of the fact that combating the illegal traffic of narcotic substances and precursors is an integral part of combating organized crime and a means to limit the funding of the international terrorist organizations. It is a well known fact that in the sphere of drug trafficking the organized crime combines with the international organized crime and turns into cross border crime.

I. Preliminary proceedings for crime related to narcotic substances, precursors and plants containing narcotic substances. Art. 354a, art. 254b and art.354c from the Penal Code

1. Under Art. 354a, Para.1 the total number over the first 6 months of 2007 of the proceedings under the procurators’ monitoring, for which the procurators have executed their functions of guiding and supervision, numbered 637. 240 of the proceedings were newly instituted. There was a close of pleadings in 360 cases, and the procurator’s indictments introduced in court numbered 156, 88 of them were bills of indictment against 173 persons. 250 persons had a sentence enforced. 64 persons were acquitted, and for 29 persons there was an acquittal with an effective date set.

2. Under Art. 354a, Para.1 (production and processing) the number of proceedings under procurators’ monitoring was 15, and the newly instituted numbered 5. 6 bills of indictment were introduced against 10 persons. 4 persons have been sentenced. 4 persons had sentences enforced. There were no acquittals.

⁶⁹ Reports on the work of the National Police Department for “DRUGS” for the whole country for the period 1st January 2006 – 25th December 2006 and for the period 1st January 2005 – 31st December 2005

3. Under Art. 354a, Para.1 (acquisition, keeping, including storing) all the proceedings that were monitored numbered 451, and from them the newly instituted were 137. The bills of indictment introduced numbered 40 against 104 persons. The number of persons sentenced was 180. 201 persons had sentences enforced. 59 persons have been acquitted, 28 persons had acquittal with an effective date set.

4. Under Art. 354a, Para.1 (drug dealing) all the proceedings that were monitored numbered 171, of them the newly instituted were 97. 42 bills of indictment were introduced against 59 persons. 53 persons were sentenced over the period and there are 44 persons with sentences enforced. 5 persons have been acquitted, and 1 person has an acquittal with an effective date set.

5. Under Art. 354a, Para. 2 from the Code of Criminal Law (large quantities, incl. large quantities, State Gazette issue 75/2006 acquiring and keeping in public place with the aim of dealing with drugs and their analogues, especially large quantities, as well as on the order or as an execution of an order of an organized criminal group) all the preliminary proceedings monitored numbered 84, and 27 of them were newly instituted. The bills of indictment introduced numbered 43 against 65 persons. The persons sentenced were 56, and 60 persons had a sentence enforced. 6 persons were acquitted, and 4 persons had an acquittal with an effective date set.

6. Under Art. 354a, Para. 3 from the Code of Criminal Law (acquisition and keeping narcotic substances and their analogues, incl. a minor case) the proceedings monitored numbered 1 448, of them 1 030 were newly instituted. 425 bills of indictment were introduced against 636 persons. Over the period 313 persons were sentenced. 238 persons had a sentence enforced, 11 persons were acquitted and 3 of them had an acquittal with an effective date set.

7. Under Art. 354b from the Code of Criminal Law (persuading or helping to use) the proceeding monitored were 7, and 5 of them were newly instituted. 1 bill of indictment has been introduced against 1 person. 1 person has been sentenced. 1 person had a sentence enforced.

8. Under Art. 354 from the Code of Criminal Law (sowing or growing plants) the proceedings monitored were 51, and 30 of them were newly instituted. 10 bills of indictment have been introduced against 14 persons. 14 persons have been sentenced, and 7 persons had a sentence enforced. 3 persons have been acquitted but there were no acquittals with an effective date set.

II. Crimes against the customs regime – Art. 242, Para. 2, Art. 242, Para. 3, Art. 242, Para. 4 and Art. 242, Para. 9 from the Code of Criminal Law – smuggling drugs and their analogues across the country's border, smuggling across the border of the country of precursors and facilities and materials for production, smuggling of especially large quantities and especially heavy offence, or with the participation of a custom's officer.

The proceedings monitored numbered a total of 94, and 37 of them have been newly instituted. 15 bills of indictment have been introduced against 37 persons. Over the first 6 months of 2007 the persons sentenced numbered 27, and 14 persons had a sentence enforced. 1 person has been acquitted. 1 person had an acquittal with an effective date set.

III. Drugs seized as proof and disposition with them over the period 1st January 2007 – 30th June 2007

For a total of 1 883 preliminary proceedings drugs, precursors and plants have been seized as a proof. The narcotic substances seized were as follows: heroin - 815 kg, cocaine - 2 kg, marijuana - 2 133 kg, and other narcotic substances - 73 kg.

The precursors seized were 502 kg and plants seized - 264 kg. The total quantity used for expertise was 15 kg. The total quantity delivered for storing at the Customs Agency for destruction was 1 559 kg.⁷⁰

⁷⁰ Source: Supreme Prosecutor's Cassation. Report on the activity of the prosecutor's office to counteract the drug related crimes in the first half of the year 2007.

Antisocial deeds and crimes committed by minors and under aged

15 969 minors and under aged were registered at the Children's Pedagogic Services (CPS) in the country in 2006 (in 2005 they numbered 17 390 or 8.2 % less). The number of minors and under aged, who were registered in 2006 was 4 830, or 9.7 % less in comparison to the previous year. The girls registered numbered 2 697, which is 11.1 % less in comparison to 2005. The persons aged 14 - 17 years numbered 12 632 (79.1 % of the total number of the minors and under aged registered), and in comparison to 2005 there was a decrease of 6.3 %. The number of the persons registered aged 8 - 13 was 3 337 (3 913 for 2005 or 14.7 % less).

In 2006 the number of truants increased by 25.4 % (from 1 888 in 2005 to 2 367 in 2006). Alongside there was a decrease **in the number of the minors and under aged referred to the Children's Pedagogic Services for prostitution or homosexuality** by 20.2 % (from 501 in 2005 to 400 children in 2006), **for drug use** by 19.0 % (from of 584 children in 2005 to 473 children in 2006) and for **alcohol drinking** by 18.7 % (from 802 children in 2005 to 652 children in 2006). (see *Table 8-2*)

Table 8-2

MINORS AND UNDER AGED, WHO HAVE COMMITTED ANTISOCIAL DEEDS AND CRIMES (2000-2006)

(Number)

	2000	2001	2002	2003	2004	2005	2006
Children referred to the Children's Pedagogic Services for antisocial deeds committed							
Total for the country	10 305	10 322	11 070	13 196	13 343	12 407	10 765
including:							
Alcohol drinking	741	555	554	612	721	802	652
Drug use	815	872	846	841	920	584	473
Children who have committed crimes							
Total for the country	7 356	8 662	8 653	9 607	10 146	9 720	8 541
including:							
Drug related crimes				394	385	379	252

Source: National Institute of Statistics

There cannot be deduced a stable trend over time in relation to drugs related crimes committed by minors or under aged. The number of persons having committed drug related crimes has decreased by 33.5% (from 379 in 2005 to 252 in 2006). The minors who have committed such type of crimes number 16, or 6.3% (5.3 % in 2005).⁷¹

Other crimes (e.g. against property, illegal prostitution, illicit prescriptions, violence under the influence of drugs, driving, etc)

There is no updated information available on other drug related crimes.

Drug use in prisons

On the data of the Chief Directorate „Penalties Enforcement” at the Ministry of Justice in 2006 at prisons and at prison hostels there were 2 013 persons imprisoned who were addicted to

⁷¹ Source: the National Institute of Statistics: <http://www.nsi.bg/SocialActivities/Crime.htm>

drugs ⁷² (see *Table 8-3*). It means that every fifth prisoner had this problem, which additionally complicated his/her treatment under the conditions of penitentiary as well as the work of the staff.

In 2006 there was a doubling of the number of drug addicted persons in places of detention in comparison to 2005. The supply with drugs among the prisoners is done very quickly and is a natural consequence of the increased drug use among the criminals.

There are compact groups of drug addicts at the prisons in Sofia, Plovdiv, Varna, Bourgas, Pazardjik and at the prison hostels of closed type in Kremikovtzi and Troyan.

There is definite drug dealing among the persons in detention in the open type hostels. These persons work at outside sites without guard, they have various contacts with the citizens and they can supply themselves with drugs. The manifestation of such a tendency necessitates the application of crude measures of control in respect to this category of persons in detention, intensifying the control, the surveillance and the unexpected testing of the persons detained, as well as imposing corrective and preventive measures for them.

There are 3 ways to supply the prisons with drugs. The first way is the smuggling of drugs by outer visitors in parcels, the second one is simply passing the doses over the fence and the third is supplying the drugs by transport vehicles.

The trade going on among the persons detained, as well as the contribution services among them are a way to supply drugs, which is a part of the prisoners' subculture.

Table 8-3

DRUG USERS AMONG THE PRISONERS IN BULGARIA

Drug use in life time (Year 2006)	Drug users among the prisoners							
	Number of persons	Cannabis	Cocaine	Heroin	Ampheta mines	Ecstasy	Other (specify)	Any illicit drug
Use before detention:								
- on a regular basis (10-15 days per month)	2 013	19.07 %	12.30 %	54.50 %	15.90 %	10 %	5.23 %	
- Injection use		15 %		73 %		12 %		

Source: Chief Directorate "Penalty Execution" at the Ministry of Justice

The heroin addicted persons, despite their isolation and the corrective and therapeutic measures applied to them, after they have initially cut down on drugs, are prone to return consequently to drug use again.

For 2006 the prisoners awaiting trial numbered 819 addicted persons in detention. Of them the men numbered 771 and the women numbered 48. Over 50 % of the persons in detention were over 25 years of age. The number of the addicted persons who are detained while awaiting trial is also increasing. This circumstance complicates the work with them, especially in view of the fact that the addicted persons are brought to the police departments in a state of abstinence.

For these reasons there is a short term program planned for work with the addicted persons detained while awaiting trial. There are more consulting, educational and information courses conducted with the persons in detention.⁷³

Social price

There is no available updated information about new results from studies on the social price of the illicit drug use in the society.

⁷² Source: Chief Directorate "Penalty Execution" at the Ministry of Justice

⁷³ Source: Chief Directorate "Penalty Execution" at the Ministry of Justice

9. Response to social correlates and consequences

Within the frame of this section the following main topics will be reviewed:

- Social reintegration of the problem drug users and of the persons addicted to drugs;
- Crime prevention.

On reviewing the topic of social reintegration the focus was on information and issues related to finding homes for the persons with problems and at risk as well as on finding work, on the vocational training and the preparation of the problem drug users to begin work. The focus was also on combating unemployment. On presenting these issues information was used provided by the Ministry of Labour and Social Policy and by the State Agency for Child Protection.

In this report the topic of crime prevention is presented by information concerning the assistance that the drug addicts receive in prison (more specifically prevention, harm reduction and treatment related to drug use). On presenting these issues information was used provided by the Chief Directorate "Penalties Enforcement" at the Ministry of Justice.

Social reintegration

Finding homes

With the amendments in the Child Protection Act passed on 9th May 2006 new measures were introduced for temporary institutionalization of children under administrative order and in this way assistance was provided for the child and his/her family, aimed at prevention and reintegration, at upbringing the children in the families of relatives or in foster families.

Over the years the number of children institutionalized decreases. Such institutions are: Home for Upbringing and Educating Children Deprived of Parental Care (HUECDPC), the homes for disabled children - Home for Mentally Disabled Children and Youths (HMDCY) and Home for Physically Disabled and Mentally Unharmed Children and Youths (HPDMUCY) and Home for Medical and Social Care for Children (HMSCC).

The total number of the children institutionalized in **2006** was **8 653**. By 31st December 2006 at the **Homes for Medical and Social Care for Children**, where children aged from 0 to 3 years were reared (both healthy and disabled, and some disabled children stay there until they get 7 years old) was **2 743**. At the **Homes for Upbringing and Educating Children Deprived of Parental Care** where children aged from 3 to 18 years are institutionalized, by 31st December 2006 the number of children was 4 717. At the homes for disabled children, where children aged 4 to 18 years are institutionalized, by 31st December 2006 the number of children was **1 193**. In comparison to 2005 the number of children institutionalized has decreased by 1 123 children, or by 11,5 %. The decrease over the last 6 years of the number of children institutionalized compared to the number of the total population of children in the country is insignificant – from 0.78 % in 2001 to 0.61 % in 2006.⁷⁴

Apart from the specialized institutions there are 9 Social and Pedagogic Boarding Schools (SPBS) and 5 Educational Schools – Boarding Schools (ESBS) where the children are institutionalized under the order of the Act on Combating the Antisocial Deeds of Minors and Under Aged. These children numbered 600 in 2006 – nearly twice fewer in comparison to the previous year.

The total number of the children institutionalized and the children who are reared at these Pedagogic Boarding Schools and Educational Schools is 9 256, which is 0,65 % of the population

⁷⁴ Source: State Agency for Child Protection

of children in the country for the period. In comparison to the preceding year their part has diminished insignificantly - by 0.09 %.⁷⁵

According to the results of the research conducted by the State Agency for Child Protection the children institutionalized, who come from single parent families have the biggest part – 46 % (or 3 958 children). Despite the decrease in the number of children institutionalized in 2006 the number of the children of lone or divorced parents has increased by 187 children or by 5 % compared to 2005. While in 2005 these children represented 39 % of those institutionalized by 31st December, in 2006 they were nearly 46 %. The fact that there is not a second parent to care for the child represents a great risk for institutionalizing the child at an early age – 66 % (1 807) of the children institutionalized at the Homes for Medical and Social Care for the Children come from single parent families. At the homes for disabled children the relative part of the children of lone and divorced parents is 39 % (464) of the total number of children institutionalized there by 31st December 2006. The smallest is the relative part of these children at the Homes for Upbringing and Education of Children Deprived of Parental Care – 36 % (1 687).

The parents of 40 % (3 460) of the children are unemployed- they are of a very low social status and they cannot cope with upbringing their children. The children from large families represent 27 % of the institutionalized children (2 328), next come the children who have been abandoned and the foundlings – 15 % (1 322) and the children of whom one of the parents has died – 8,6 % (742). **The orphans represent 2 % of the institutionalized children (or 174 children).** At the specialized institutions there are 159 (1.8 %) children born by under aged mothers – under 18 years of age.

In 2006 the number of foreign citizens and fugitives accommodated at specialized institutions in Bulgaria increased by 56 % in comparison to the preceding year. In 2005 they were 62 and in 2006 they were as many as 97. The children of this risk category represent a serious problem for the social policy of the developed European countries and in Bulgaria the parameters are already delineating of these newly arising situations.

A National Research of the State Agency for Child Protection shows that in **2006 more than 80 % of the children institutionalized had families**, but they were institutionalized because of impossibility to be reared at home or in a milieu close to the family one.⁷⁶

The main reasons for which the children coming from socially disadvantaged families are institutionalized are the difficulties in upbringing them (economic, psychological, social) combined with a lack of alternative to the institutional care services. The main risks which the children run in such families are related to the quality of life, the atmosphere in the family and the access to education. These data illustrate the necessity of applying the respective preventive and supporting policies aimed at limiting the “poverty” risk. There is also a demand for new flexible forms of social services and support for the family as the main factor for the child’s development.⁷⁷

Education and training

There is no available updated information for 2006 about the activities to provide options for education and training of drug users or of persons at risk.

Finding work

The reintegration of drug addicts who have successfully completed a course of treatment is of great importance for their personal development as well as for the society as a whole.

In view of improving the capacity for employment and the participation of these people in the active labour and social life and in order to overcome their negative stereotype in society, the Ministry of Labour and Social Policy, the Employment Agency together with the National Centre for Addictions at the Ministry of Health, the municipal administrations, the NGOs, employers and educating institutions have worked out an **“Independent Again” National Program**.

⁷⁵ Source: State Agency for Child Protection

⁷⁶ Source: National Strategy for the Child 2007-2017 (Project), accessible at: <http://www.mlsp.government.bg/bg/ministry/projectact.htm>

⁷⁷ For more details see there again

The program started in May 2005 and was in force until the end of 2006. Its main aim was to improve the fitness for employment and the complete integration in society of the persons registered at the "Labour Office" Directorate and of the unemployed persons who have successfully completed the course of treatment for drug addiction. By implementing this program an opportunity was given to those willing to take a course of motivational education for active behaviour at the labour market and to participate in a free training to acquire vocational qualification. The opportunity was also presented to them of a subsidized employment by an employer under a labour agreement for a period of 18 months.

Over the period since starting the program in 2005 and till its completion in 2006 40 people who had successfully completed a course of treatment for drug addiction **started work** and **6 of them had successfully completed a course of acquiring vocational qualification.** For the period under review **the expenditure from the state budget amounted to BGN 70 817.**

The unemployed persons were enrolled in qualification courses according to their desire for the specialties: "Production of culinary articles and drinks", "Text processing", and "Basic Computer Preparation". The employers who participated in the program are NGOs and small private companies. The persons appointed have worked previously in the sector of services, like trade, social activities, culture, etc., in the positions of technical collaborator, gardener, mechanic, unskilled worker, barman, accountant, etc.

In view of attracting partners and popularizing the options of the program, the territorial sections of the Employment Agency have held meetings with different organizations working with this risky group as well as with possible employers. In spite of all the efforts the results of the program were poorer than expected. The main reasons for this were: the reluctance on the part of the drug addicted persons to declare that they have completed a course of treatment and because of this the employees from the Labour Office had difficulties identifying the unemployed who were the target group of the program, and the waning interest on the part of the employers because of the specificity of the target group.⁷⁸

In view of the social significance of the problem and of the successful integration in society of this target group in the month of March 2007 the scope of the National Employment Program for permanently disabled people was broadened and a new target group was included, namely unemployed people who have successfully completed a course of treatment for drug addiction. With the change in the Program the term of the subsidized employment from the state budget was prolonged from 24 to 36 months which is aimed at achieving more sustainable employment of these unemployed persons.

For the implementation of the National Program for Employment and Vocational Training of Permanently Disabled People in 2007 funding amounting to BGN 1 508 647 was provided for the employment of 545 unemployed persons, who are a target of the program and 40 unemployed persons were included in a training to acquire vocational qualification.

By 31st May 2007 in the Program were included 2 persons who had successfully completed a course of treatment for drug addiction. This program shall be in effect till 31st December 2009.⁷⁹

Main social assistance

The "Social Assistance" directorates at the municipal administrations and the "Child Protection" departments established there represent a body carrying out policy for child protection at the municipality. In their immediate activity the "Child Protection" departments work with children at risk by providing cooperation, information and consultation, referral to social services in the municipality, etc. This includes providing pedagogic, psychological, judicial assistance for the children as well as for the parents and for the persons executing parental functions, and financial support under the order and the conditions of the regulations for enforcing the Child Protection Act.

The role of the "Child Protection" departments for the problem of drug use is related to undertaking activities of prevention. The social workers initiate or participate actively in school lectures and discussions on the topic of preventing addictions and dependencies among the children. The aim of these measures is to enhance the awareness of the students on the issue of

⁷⁸ Source: Ministry of Labour and Social Policy

⁷⁹ Source: Ministry of Labour and Social Policy

the harm inflicted by drug use, alcohol drinking, smoking, improving the health culture and sexual education, informing them about their rights and obligations.

The “Child Protection” departments work in good collaboration with other institutions at local level, like the Children’ Pedagogic Room, the Regional Health Centers, the Regional Inspectorates on Education, etc. The Child Protection departments are a desired partner for the implementation of a number of projects of NGOs which have as a main goal coping with the problem of drug use.

The Agency of Social Assistance makes sustained efforts for solving with the problems of the drug-addicted persons and their involvement in all the spheres of social life. One of the successful ways to overcome their social isolation is reintegration via the development of social services in the community, provided by NGOs entered in the register of social service providers. In 2006 these were:

- “Phoenix” Center for Social Work Ltd. The city of Sofia, compl. Mladost-3, entrance B, tel. 962-35-84, 0898 -20-91-75, / Certificate № 58 dated 11th July 2003.
Long term rehabilitation program for drug addictions. It is implemented on the premises in the village of Brakyovtsi, municipality of Godect. It holds 22 beds.
- “Combating epidemic diseases and addictions” Association - the city of Sofia, 14 G.M. Dimitrov Blvd., tel.971-10-96 /Certificate № 170 dated 28th December 2003/.
“Solidarity” Day Center– psychosocial rehabilitation of drug addicted persons. A team of 7 specialists, 17 drug-addicted persons. The premises at 64 H. Botev Blvd. There is an agreement for joint work between the DC “Solidarity” and the National Centre for Addictions.
- “Mladezki Forum 2001” Association – the town of Razgrad, 15 Bulgarian Blvd., tel. 084/ 66 16 94, /Certificate №112 dated 6th December 2003/
“Civil society for decreasing drug demand- primary and early prevention” Project. Educational seminars on the problems of addictions in the course of full year. The project has been implemented by Care Bulgaria.
- “Personal Perfection” Foundation–the city of Sofia, 103 Tsar Samuil St., tel. : 02/ 981 26 30, /Certificate № 339 dated 17th August 2004/
Cooperation for programs against addictions and alcoholism.
- “Diva” Foundation for community care– the town of Plovdiv, 226 Shesti Septemvri Blvd., floor 1, tel.: 032/ 6 23 35, /Certificate № 507 dated 9th December 2004/
“Community assistance for vulnerable groups in the town of Plovdiv” Project
- “Izberi” Association – the town of Varna, compl. Chaika, bl. 28, entrance A, floor 3, flat 8, tel.: 052/30-80-05; 0897 69-25-75, /Certificate№ 652 and 653 dated 23rd March 2005/
“Individual consultations for children and youths having problems with their psychic and emotional functioning” Project
- “Outpatient Group Practice for specialized medical care- Center of Psychic Health – Varna – Ltd., the town of Varna, 1 Hristo Smirnenskui St., tel.: 052/30-29-48, /Certificate № 165 dated 17th December 2003/
“Substitution and maintenance methadone treatment” Program
“Outpatient rehabilitation and re-socialization of drug addicted persons” Program
- “Future without Drugs” Association of parents- the town of Varna, 1 Sv. Sv Kiril I Methodi Sq., tel.: 052/30-23-87, 0898-614-228, /Certificate № 737 - 740 dated 16th May 2005/
- “Posoki 2005” Foundation – the town of Pleven, 49 Georgi Benkovski St., 81 Mechta block, entrance 1, floor 1, flat 1, tel.: 0899-76-43-09, / Certificate № 683 and №1178 dated 30th March 2005/

The target group of the “Protected Home and Social Rehabilitation and Integration Center” services are persons of age who are addicted to psychoactive substances, parents and friends. The activities are implemented through a worked out rehabilitation program - “New beginning”

which includes preparing of an individual plan of recovery, individual consultations, group work and educational and information sessions. It includes a team of psychologists, psychiatrist, physician, social worker and consultants. The site is in the village of Bunovo, the region of Sofia.⁸⁰

Crime prevention

Assistance for the drug addicted persons in prisons (prevention, harm reduction, treatment, social reintegration)

All the drug addicted persons imprisoned in 2006 have been subjected to:

- examination by a physician;
- prompt psychic diagnostics;
- evaluation of the system of marking dangers of relapse and harm which has been borrowed from the British prison service and has been approved at the Bulgarian penitentiary institutions.

After they are brought to prison, the drug addicted persons are subjected to a program of adaptation, because they are emotionally unstable, with unstable behavior, and they have difficulties to immerse.

During the main stage of undergoing their penalty of deprivation of liberty the convicts are included in a short term program for work with drug addicted persons and pass through a 12-step program which is applied daily in the course of 4 months. At the beginning of 2006 a training of the employees at all the prisons began under these programs and the first short term programs for work with drug addicted persons were successfully completed. 200 delinquents were included in the programs and 30 employees of the Chief Prison Directorate participated directly in them.

Practically the training of the employees under this 12-step program was finalized. At the prisons in the towns of Stara Zagora, Bourgas, Varna, Pleven and Plovdiv, the respective groups were organized and their training was completed. This intensive introduction of the two programs for work with drug addicted delinquents became a fact thanks to the valuable methodological assistance and supervision on the part of the British specialists. They successfully worked with their Bulgarian colleagues for implementing the twinning project "Consolidation of the Bulgarian penitentiary system".

The data from the group sessions were carefully and in detail analyzed and interpreted. After they were precisely systematized and edited they were presented to the leading groups for discussion at a seminar of the penitentiary employees. Psychologists, social workers and supervisors who had been trained and conducted the group sessions with the delinquents took part in it.

Before dismissing the drug addicted detainees from prison they participate in a program to prepare them for life outside the prison. Special attention is paid to:

- surrounding milieu and lifestyle;
- improving their skills for coping with specific difficulties;
- giving themselves a positive self evaluation.

After finalizing the program for preparation for life in freedom a great number of the detainees suffering from addictions will participate in a short program. This is done with the aim of maximally motivating them to adequately react to the difficulties in real life after leaving the penitentiary.

A significant part of the resocialization of the drug addicted convicts is their participation in educational and qualification courses during serving their term in prison. Over the same period they are included in different sports, cultural, informational and labour activities. On the data of the "Penalty Enforcement" Chief Directorate which refer to the social and educational measures undertaken at prison more than 800 drug addicted convicts have taken part in the 3 types of activities.

⁸⁰ Source: Ministry of Labour and Social Policy

The labour and sports activities are more intensive in summer and spring, but in winter the penitentiary administration locally make efforts to diversify the cultural and information activities, the amateur art activities, the activities related to specific interests and the conducting of specialized programs.

All these activities are always combined with consulting the drug addicted convicts since they have a number of conflicts and complications with the prison administration as well as with the other convicts.

In 2006 the scope of the methodological level and the diversity of the psychological and social services offered by the penitentiary institutions to the convicts were expanded. Gradually a whole system for their effective treatment is being built up, in which the specialized programs and methods are combined with the forms of the general penitentiary treatment. This approach is complemented by a systematic individual consultation and treatment, so that the conduct of the drug addicted convicts could become more stable and they can be motivated for a more active participation in specific social activities of positive effect.⁸¹

Policy of security in the city zones of drug related crime prevention (participation of the citizens, collaboration with different agencies, intervention to assist the victims).

There is no available updated information for 2006 about the policy of security in the city zones for prevention of drug related crime.

⁸¹ Source: "Penalties Enforcement" Chief Directorate at the Ministry of Justice.

10. Drug Markets

Within the frames of this section the following main topics will be reviewed:

- Availability and supply;
- Seizures of drugs;
- Price and purity of drugs at street level.

On reviewing the topic of drug availability and the ways to supply drugs attention has been focused on the information and data related to drug availability among the population as a whole, among students at universities and among prisoners as representing specific social groups, as well as on the production, the sources for supply and models of trafficking drugs in the country and abroad. The different routes registered and ways of production are indicated – as a whole and for the different types of drugs. When reviewing these issues information from the Ministry of the Interior has mainly been used, and also information provided by the Customs Agency at the Ministry of Finance. Different studies conducted by the National Focal Point on Drugs and Drug Addictions have been used as a source of information, too – mainly in relation to drug availability.

The number of seizures and the quantity of drugs seized have been the main point when analyzing the second topic in the section, and attention has been focused on the main trend as well as on the data about the specific drugs and in some cases about the different institutions. Information provided by the Ministry of the Interior and by the Customs Agency at the Ministry of Finance has mainly been used.

In this report the topic of the price and purity of drugs at street level is presented by giving information on the price at street level (on the data from two sources - the police and the local regional institutions) as well as by presenting information on the purity at street level and the purity of drugs / tablets – according to types of drugs. On reviewing these topics information and analyses were used presented by the Chief Directorate of the National Police Service /NPS/, by the regional boards on drugs and by the Scientific and Research Institute of Criminology.

Availability and Supply

Availability of Drugs

No updated information about the availability of drugs.

Production, sources of supply and models of trafficking inside the country and abroad

In 2006 the trends observed in the previous years still held. Through the territory of Bulgaria **heroin, synthetic drugs, cannabis and cocaine** were transported. As a characteristic peculiarity stands out the fact that a large part of the illicit drugs are only transited through the territory of the country and just a small part of them are kept for the local market.

Afghanistan is still the main leader in the production and supply of opium, which is the main raw material for the production of **heroin**. The heroin used in the countries of the European Union comes mainly from Afghanistan, Turkey and Iran. The trend also holds of dislocating the traditionally used routes of trafficking from Turkey through the Balkans along roundabout routes (to the North through the Caucasian region and to the South by the Mediterranean). The reason for this dislocation is on the one hand the inadequate borderline control in the countries from the Caucasian region and on the other hand-the successful activity of the law-enforcing bodies in Bulgaria and the redistribution of the drug markets done by the organized criminal groups. In spite

of this the smuggling of heroin from the processing centers via the confirmed Balkan routes to the drug markets in Western Europe is still a fact.

The organizers of the channel for heroin trafficking are mainly Turkish citizens and citizens of ex-Yugoslavia - ethnic Albanians from Kosovo.

The analysis of the information available about the market of heroin at national, regional and global level delineates two main trends: **demand exceeds supply and respectively the prices of this illicit drug are constantly dropping**. An illustrative example of these trends is the glutting of the UK market where from the middle of 2003 around 25-35 tons of heroin of ever increasing purity are smuggled annually, and meanwhile the price of 70 pounds for a gram of heroin in December 2000 dropped to 54 pounds in December 2005. In general, over the period 2000-2005 the drop in the prices of heroin was 45 % for all the European countries. Bulgaria is not an exception in relation to all the European and global trends – for the last 6 years the number of heroin users remained relatively constant (20 000-30 000), but there was a drug abuse reduction and a drop in the prices in the different regions of the country was observed.

Traditionally **cannabis** remains the most widely used and produced drug globally in all of its forms: marijuana, green mass, resin, hashish and oil. The cannabis offered for use in the European Union comes from different countries – the Netherlands, Albania, the USA and from a number of African countries. In most of the countries there is local growing – in green houses or in the open. It is also the drug to be most often seized in the European Union and it comes second to heroin as a cause for treatment demand.

In 2006 in Bulgaria cannabis continued to be the most widely used drug. There are no significant changes observed in its growing and distribution over the territory of the whole country. The trend still holds of supplying the home market from the plantations in the hard – to - reach and uncultivated lands mainly in the regions of Petrich, Sandanski and Ograzhden. There have been attempts of growing it in green houses in the towns. Because of its higher price in Greece compared to the price in Bulgaria part of the amount produced is smuggled through the so called “green border” and through the state border check points. Channels for smuggling are used which have been established along the Balkan route.

Next to cannabis the most widely used illicit drugs in the countries from the European Union are the **synthetic drugs**. According to the report of the UN for 2005 Bulgaria produces 3 % of the world production of amphetamines. The active traffic of kaptagon is intended mainly for Turkey, Syria, Jordan and Saudi Arabia. In respect to quality, however, the synthetic drugs produced in Bulgaria are inferior to those produced in the European countries and are of lower price.

The processes of popularizing and expanding the synthetic drug market are characteristic of Bulgaria, too. The number of young people using amphetamines and ecstasy (especially in the capital and in the large towns with a population over 100 000 people) is also increasing.

Cocaine comes third in the trafficking of drugs worldwide. The production of cocaine on a global level is growing. The main countries producers of this illicit drug are Columbia (56 % of the total production), Peru (28 %) and Bolivia (16 %). Over the last 5 years the quantities of cocaine seized in the countries from the EU are on the increase. According to a report by the UN, the annual profit from cocaine trade amounts to 300 000 000 €. The experts in the field point London as the world capital of cocaine, where the demand for cocaine is larger than that for ecstasy.

In 2006 some characteristic for the previous years trends in the trafficking and distribution of cocaine still held – the participation of Bulgarian citizens in organized criminal groups trafficking cocaine from South America to countries in Central and Western Europe. Under the cover of legal trade activity smuggling of larger quantities of cocaine is done- transported by sea, and of smaller quantities – by air.

Bulgaria is most often transit country – cocaine has as a final destination other countries in Europe. The distribution of cocaine in the country is limited because of its high market price.

Seizures

In 2006 the counteracting to the traffic and distribution of drugs on the territory of the Republic of Bulgaria remained a priority in the activity of all the law-enforcing institutions

responsible for this. The specialized offices at the Ministry of the Interior are the main factor in respect to reducing the supply, they are a partner in reducing the demand and use of drugs and from them originated the initiatives to change the legislation in respect to the different aspects of the problem.

As a result of the activities of the offices and the agencies in the structure of the Ministry of the Interior and the Ministry of Finance in 2006 on the territory of the country a total of **4 234 545 kg, 110 102 tablets, 73.47 liters, 200 ampoules and 112 doses of drugs and their precursors were seized.** (see Table 10-1).

Table 10-1

DRUGS AND PRECURSORS DISCOVERED AND SEIZED BY THE MINISTRY OF THE INTERIOR AND BY THE MINISTRY OF FINANCE IN 2006

narcotic substance	units	CDCOC	CDASDPOPP	CDBP	customs agency	total
heroin	kg	176,651	49,943	6,600	492,804	725,998
	dose	112				112
cocaine	kg	77,998	2,189		63,333	143,510
	leaves /kg/				0.947	0,947
marijuana	kg	79,552		52	6,41	137,962
cannabis /green mass/	blades	636			400	1,036
	kg	825,412	817,893	91,71		1,735,015
hashish	kg	1,031			29,792	30,823
Synthetic drugs	kg	324,238	261,094	8,600	356,928	950,86
	liters				0.04	0.04
	tablets	3843	9,641		81,385	94,869
precursors	kg				509,430	509,430
	ampoules				200	200
	liters	72.85	0.58			73.43
	tablets				15,233	15,233

Source: Annual situational report on the trafficking and distribution of drugs on the territory of the Republic of Bulgaria– 2006 of the National Informational and Analytical Team on Drugs- Ministry of the Interior (information has been used provided by the offices of the Ministry of the Interior- Chief Department for Combating Organized Crime /CDCOC/), Chief Department Border Police /CDBP/ and Chief Department Antisocial Deeds and Public Order Preservation and Prevention – National Police Service /CDASDPOPP- NPS/), and of the Ministry of Finance- Customs Agency)

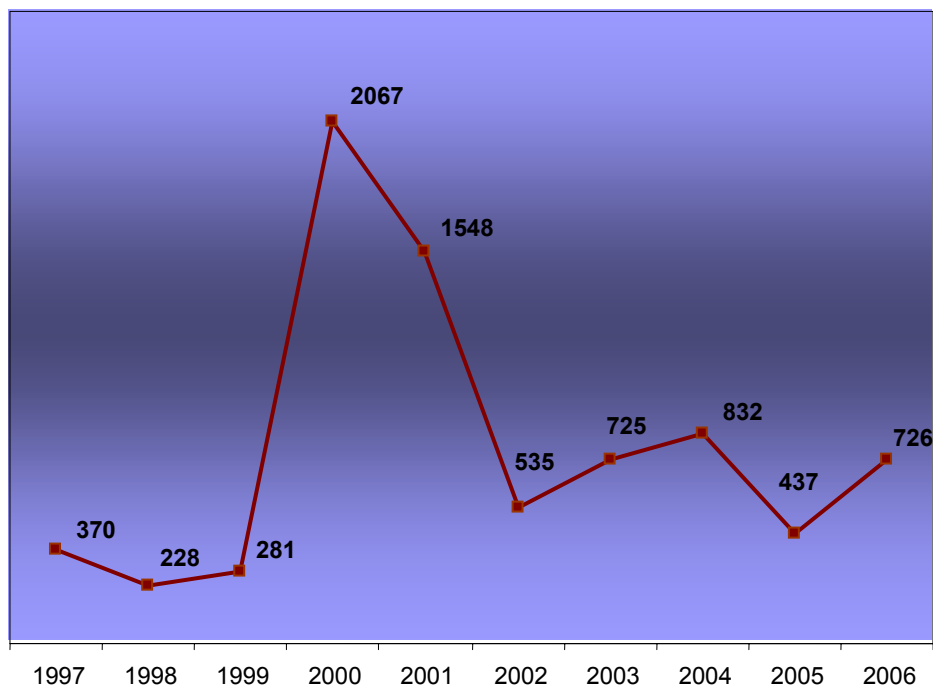
In 2006 the customs officers seized a total of **1 459.895 kg and 96 618 tablets of drugs and precursors in 148 cases.** The number of the attempts for illegal trafficking of drugs for the last year which were solved by the Customs Agencies is record breaking and it is **54%** higher in comparison to 2005 (96 cases with a total of 1 137.630 kg seized). A total of **100** delinquents have been arrested from 12 different nationalities and 88% of them are citizens of the countries in Southeast Europe - Bulgarians, Serbians, Turks, Macedonians, Slovenians, and Romanians). The number of the Bulgarian traffickers is growing continuously, and for the last year they represent **55 %** of all the persons detained.

In Customs Agency in 2006 **heroin** was again the drug smuggled most often through the borders of Bulgaria – **493 kg in 48 seizures.** When compared to the previous year (324 kg in 32 cases) a considerable increase is seen, both in the number of seizures, and in the quantities seized. The trend from 2005 of smuggling comparatively low quantities of heroin in cars or by couriers traveling by bus still held in 2006. The seizures from cars, minibuses and buses

represent **75%** of the total number of the seizures. Last year 4 attempts of smuggling in trucks were discovered, and the 185 kg seized then amount to 1/3 of the total quantity of heroin seized.

Figure 10-1

Quantities of heroin discovered and seized on the territory of Bulgaria over the period 1997-2006



Source: Annual situational report on the traffic and distribution of drugs on the territory of the Republic of Bulgaria – 2006 of the National Informational and Analytical Team on Drugs - the Ministry of the Interior (information has been used provided by the offices of the MI - CDCOC, CDBP and CDASDPOPP- NPS, and the Ministry of Finance - the Customs Agency)

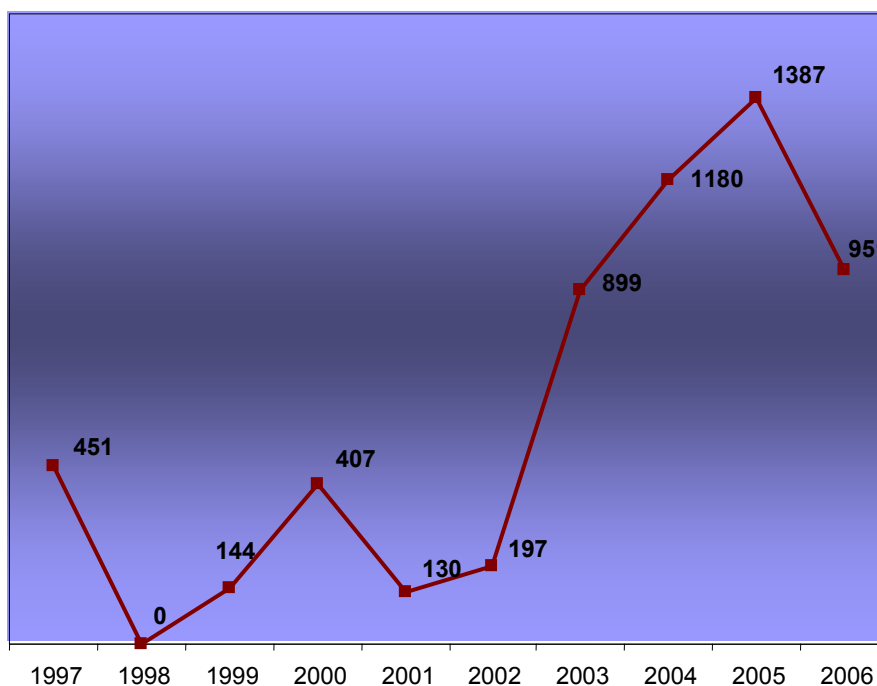
Over the last 5 years the Bulgarian customs services found out a constantly increasing trend in the trafficking of **synthetic drugs**.

In 2006 **282 kg amphetamines in 7 cases** were seized with a final destination-Turkey and the countries from the Middle East. In almost all the cases the amphetamines seized in the country are in the form of tablets with the kaptagon logo on them. There is a certain decrease in comparison with 2005 when the quantity of amphetamines seized was 407 kg in 9 cases. The smuggling shipments are most often hidden in minibuses and buses under Bulgarian registration.

For the first time in 2006 the customs officers seized the record breaking **75 kg of ecstasy in 7 seizures**. In most of the cases the delinquents are Dutch citizens of Turkish ethnic origin, and the vehicles used are cars of Dutch registration. There are data that the illegal traffic of ecstasy from the Netherlands to Turkey passing through Bulgaria is organized by Turkish criminal groups exchanging heroin for ecstasy.

In 2006 there was a great increase in the number of seizures of **psychoactive drugs**, hidden in airmail and postal shipments, from 20 to 1000 tablets each. The total quantity amounted to **81 385 tablets in 39 cases**, which means an increase of **2.7 times** in comparison to the quantity seized in 2005 (30 168 tablets in 25 seizures).

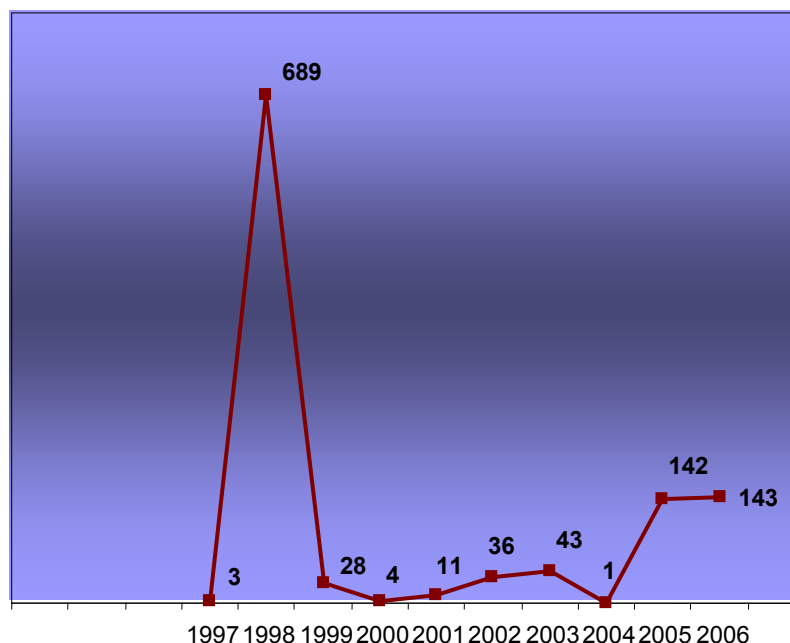
Quantities of synthetic drugs discovered and seized on the territory of Bulgaria over the period 1997-2006



Source: Annual situational report on the trafficking and distribution of drugs on the territory of the Republic of Bulgaria – 2006 of the National Informational and Analytical Team on drugs - Ministry of the Interior (information has been used provided by MI - CDCOC, CDBP and CDASDPOPP - NPS, and by the Ministry of Finance - Customs Agency)

Over the last year the Customs Agency prevented **7 attempts** of illegal trafficking of cocaine with a total quantity seized of **63.333 kg**. The biggest shipment of 60 kg was discovered by the customs officers in August at the Varna port in a naval container coming from Venezuela. After this 2 false shipments were sent under police surveillance, in cooperation with the Drugs Department CDCOC – MI, as a result of which the organizers of the traffic were detained in Turkey. Apart from the traditional for the cocaine trafficking via sea and air transport, in 2006 4 attempts of illegal trafficking of cocaine through the land borders of Bulgaria were prevented with a total amount of 1.537 kg seized.

Quantities of cocaine discovered and seized on the territory of Bulgaria over the period 1997-2006



Source: Annual situational report on the trafficking and distribution of drugs on the territory of the Republic of Bulgaria– 2006 of the National Informational and Analytical Team on Drugs of the offices of the Ministry of the Interior- CDCOC, CDBP and CDASDPOPP- NPS, and of the Ministry of Finance- the Customs Agency)

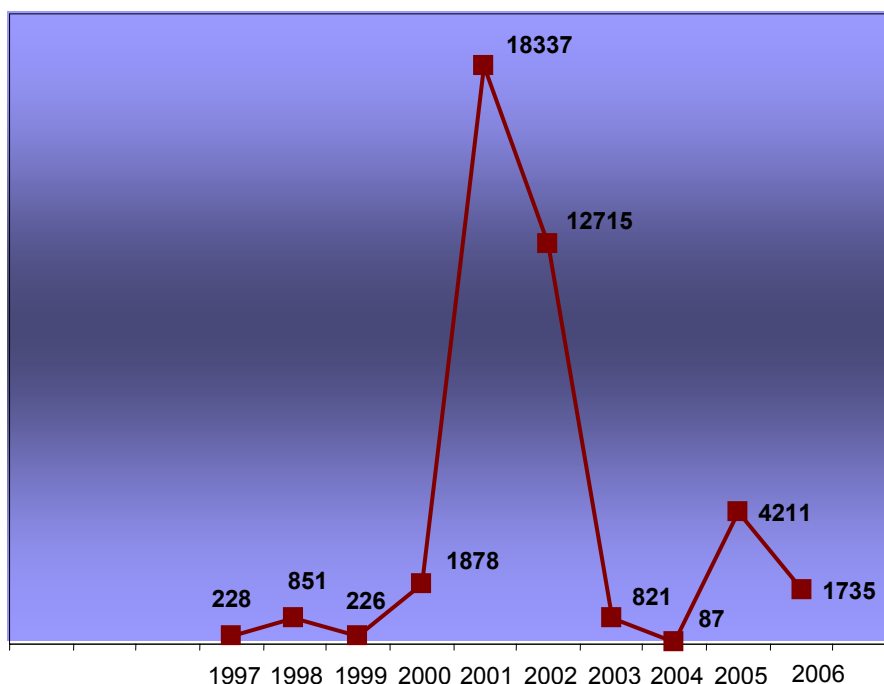
The illegal trafficking of the **products of cannabis** (marijuana and hashish) has not changed in comparison to the previous year. A total of **36.202 kg** were seized in **13 cases**.

The most often smuggled **precursor** over the last 3 years remained **ephedrine** in tablet forms. It is smuggled in comparatively small quantities from Turkey through Bulgaria to the countries in Western Europe. In 2006 in 7 cases a total of 9.430 kg, 15, 233 tablets and 200 ampoules of ephedrine were seized. For the first time, on crossing the Bulgarian border, the considerable quantity of **500 kg phenylacetic acid (a precursor, used for the illegal production of amphetamine)** was seized.

The traditionally good professional contacts and exchange of information between the Customs Agency and the specialized offices of the Ministry of the Interior continued during 2006 as well. As a result of the joint activities of the customs and the police bodies a total of 33.798 kg and 35, 400 tablets of drugs and 500 kg of precursors were seized in 15 cases.

The specialized teams of the Customs Agency and the CDCOC-MI for combating drug trafficking under the guidance of the Supreme Prosecutor's Cassation organized **6 international false shipments (under police surveillance)** of drugs. As a result of these operations on the territory of Bulgaria and abroad more than **160 kg of drugs** were seized and the members of organized criminal groups who did the trafficking were arrested.

Quantities of cannabis discovered and seized on the territory of Bulgaria over the period 1997-2006



Source: Annual situational report on the traffic and distribution of drugs on the territory of the republic of Bulgaria – 2006 and of the national Informational and Analytical Team on Drugs – the Ministry of the Interior (information has been used provided by the services of the Ministry of the Interior - CDCOC, CDBP and CDASDPOPP – NPS, and by the Ministry of Finance - the Customs Agency)

For the last year the Customs Agency participated actively in 5 **international operations** to counteract the illegal trafficking of drugs, precursors, weapons and explosives. 4 of the operations were carried out on the initiative of the customs cooperation Work Group under the European Committee, namely:

- **“COMPASS”** operation – against the illegal trafficking of cocaine in naval containers and container-tractors coming from Latin America and South Africa to Europe;
- **“PALLAS”** operation – against the smuggling by land transport of precursors for the production of synthetic drugs;
- **“FIREBALL”** operation – against the illegal trade with weapons and explosives, transported by land from other countries to countries-members of the European Union;
- **“CONQUEST 2”** operation – against the illegal traffic of heroin in naval containers coming to Europe from Afghanistan, Pakistan, India, Bangladesh, Iran and Oman.

In July 2006 the anti-drug departments at the Customs Agency and CDCOC took part in the **“PREVENTION 5”** international operation for combating heroin smuggling along the Balkan route in road vehicles. The decision to carry out this operation was made by the Specialized Work Group on Drugs at the Initiative for Cooperation in Southeast Europe (ICSEE) Center in Bucharest and in it participated the members of 12 customs and police administrations from Central and Southeast Europe. Within the frames of the operation the Bulgarian customs officers prevented a total of 9 attempts of smuggling, including 35 kg of ecstasy in 2 cases, 9.270 kg of heroin, 30 000 €, 1,654,000 pieces of cigarettes, 121 antique coins and other articles for smuggling. After the end of the operation, the ICSEE Center in Bucharest officially announced that Bulgaria, with these results, ranks first among the countries – participants.

Price/Purity

Price at street level

No available updated analyze about price of the drugs.

Purity at street level and composition of the drugs /tablets at a street level

In *Table 10-2* are shown only the data taken from the laboratory analyses of the substances indicated, done at the laboratory of Forensic Science Institute (FSI). In previous years this table included data which were a summary for all the laboratories in the country, where drugs were tested.

Table 10-2

PURITY AT A STREET LEVEL OF SOME ILLICIT SUBSTANCES IN 2006

	Number of the excerpt	Minimum	Maximum	Average	Mode
Cannabis resin (%THC)	5	3,8	8	5	5
Cannabis grass (unspecified type), (%THC)	247	0,01	10	2	1,5
Heroin brown (%)	170	1	61	29	20
Heroin white (%)	----	----	---	--	---
Cocaine (%)	45	4	80	36	30
Crack (%)	2	72	80	76	80
Amphetamines (%)	569	0,2	72	29	25
Methamphetamines (%)	10	7	50	25	30
Ecstasy (mg at MDMA basis in tablets/units)	139	0,3	66	60	63

Source: Forensic Science Institute – Ministry of the Interior (FSI-MI)

The data shown in table 14 and table 15, for 2005 and 2006 are from the data basis of the “Drugs” sector at FSI-MI. The data for the synthetic drugs are for the whole country because these substances are only tested at the laboratory of the FSI, while the substances heroin, cocaine, cannabis and hashish are analyzed at 12 other regional laboratories in the whole country.

Because in table 14 there are no separate rows for the content of amphetamine in the powder and in the tablets, the content of amphetamine is shown in the table irrespective of the different forms. This is not quite correct, because the content of amphetamine in the powder and in the tablets is very different.

In 2006 there was observed an increase in the number of the samples containing heroin and cocaine, while those for cannabis were less (for the laboratory of the FSI). Likewise the increased number of tablets containing MDMA should also be considered. This increase is at the expense of the amphetamine-containing tablets. The number of tablets containing more than one psychoactive substance has also increased. For example the number of tablets analyzed containing apart from MDMA also chlorphenylpiperazin (CPP), MDEA, amphetamine and N-ethyl

MDA has increased. This trend, of mixing more than one narcotic substance, is also observed in the powdered drugs, where there are cases of mixing an amphetamine with heroin, with codeine, with cocaine and with ketamine.

In samples of amphetamine besides the often present additional substances like caffeine, procaine, chinin, pyramem, benzocaine, theophyline, paracetamol, in 2006 there were samples analyzed containing amphetamine and papaveirne, which is one of the opium alkaloids not under control.

There are also new psychoactive substances, which are not included in the lists of the Conventions of the UN and the Act on Drugs and Precursor Control but which were under surveillance by the European System of Early Surveillance (EWS). Chlorphenylpiperazin (CPP) and ketamine are two such substances.

Part B: Selected issues

12. Vulnerable Groups of Young People

Introduction

Within the frames of the common European space the European Commission undertook activities to develop the all-European Children's Rights Strategy as well as to administratively provide the new policies. In this way the EU clearly identified the assistance for the children's rights as a specific field, deserving special activities.

Pursuant to Art.136 and Art.137 from the **Amsterdam Treaty** from 1997 over the last years the EU undertook important activities to combat poverty and social isolation. At the meeting of the **European Council in Lisbon** in 2000 the EU set itself the task of becoming "*the most competitive and dynamic knowledge-based economy in the world, with more and better jobs and a greater social cohesion*"⁸². Also adopted was the "An Open Method of Social Protection and Social Inclusion." Child care represents one of its most important parts. Besides, the Open Method of coordination is used as a mechanism of mutual involvement among the member-countries and for learning from the good practices when applying the UN Convention on the Rights of the Child.

The situation of the children, as well as the current situation of the Bulgarian population is the result of the continuous effect of a lot of factors and influences. Some of them are related to the common trends characteristic of the European countries, others - to the specific particularities of the historical, economic and the cultural development of the country.

Social and Demographic Characteristics of the Types of Subgroups

Institutionalized children

In the Supplementary Provisions to the Child Protection Act in the Republic of Bulgaria the national definition of the concept "**Specialized Institutions**" is given.

Specialized institutions are "boarding house – type of homes for upbringing and educating children, where they are permanently separated from their home environment".

Over the last years Bulgaria made efforts to promote the welfare of the children and to adapt the system of child protection to the level of the international standards. Upbringing the child in the home environment is a basic principle, which the Bulgarian Child Protection Act implements through a system of rules and mechanisms. When compared to the previous years the total number of all the children institutionalized is dropping. These special institutions are: Homes for Upbringing and Educating Children Deprived of Parental Care (HUECDPC), the homes for disabled children – the Home for Mentally Disabled Children and Youths (HMDCY) and the Home for Physically Disabled and Mentally Unharmful Children and Youths (HPDMUCY) and Home for Medical and Social Care for Children (HMSCC).

The total number of the children at the specialized institutions in **2006 was 8 653**. For comparison the number of all the children institutionalized is given in *Table 12-1*.

By 31st December 2006 at the **Homes for Medical and Social Care for Children**, where children aged from 0 to 3 years were reared (both healthy and disabled, and some disabled children stay there until they get 7 years old) was **2 743**. At the **Homes for Upbringing and Educating Children Deprived of Parental Care** where children aged from 3 to 18 years are institutionalized, by 31st December 2006 the number of children was **4 717**. At the homes for disabled children, where children aged 4 to 18 years are institutionalized, by 31st December 2006 the number of children was **1 193**. In comparison to 2005 the number of children institutionalized

⁸² National Strategy for the Child 2007-2017- Draft, 28th May 2007

has decreased by 1 123 children, or by 11.5 %. The decrease over the last 6 years in the number of children institutionalized compared to the number of the total population of children in the country is insignificant - from 0.78 % in 2001 to 0.61 % in 2006.

Apart from the specialized institutions there are 9 Social and Pedagogic Boarding Schools (SPBS) and 5 Educational Schools – Boarding Schools (ESBS) where the children are institutionalized by order of the Act on Combating the Antisocial Deeds of Minors and Underage. These children numbered 600 in 2006 – nearly twice fewer in comparison to the previous year.

The total number of the children institutionalized and the children who are reared at these Pedagogic Boarding Schools and Educational Schools - Boarding Schools is 9 256, which is 0,65 % of the population of children in the country for the period. In comparison to the preceding year their part has diminished insignificantly - by 0.09 %.⁸³

Table 12-1

NUMBER OF CHILDREN INSTITUTIONALIZED OVER THE PERIOD 2001-2006

Institution type year	№ of institu- tions for 2001r.	№ of children for 2001r.	№ of institu- tions for 2002r.	№ of children for 2002r.	№ of institu- tions for 2003r.	№ of children for 2003r.	№ of institu- tions for 2004r.	№ of children for 2004r.	№ of institu- tions for 2005r.	№ of children for 2005r.	№. Of institu- tions for 2006r.	№ of children for 2006r.
Institutions at the Ministry of Education and Science												
Homes for Upbringing and Education of Children Deprived of Parental Care (HUECDPC)	102	7, 145	102	6, 920	102	6, 151	101	5, 567	101	5, 506	86	4,717
Institutions under the municipalities												
Homes for Mentally Disabled Children and Youths (HMDCY)	31	1, 901	31	1, 854	30	1, 818	30	1, 835	28	1, 310	27	1,193
Homes for Mentally Disabled Children (HMDC)	30	1, 803	30	1, 773	29	1, 742	29	1, 763	27	1 251	26	1,138
Homes for Physically Disabled and Mentally Unharmed Children and Youths (HPDMUCY)	1	98	1	81	1	76	1	72	1	59	1	55
Institutions at the Ministry of Health												
Homes for Medical and Social Care for Children (HMSCC)	32	3, 563	32	3, 141	32	2, 906	32	2, 882	32	2, 960	32	2,743
Total for all the institutions	165	12, 609	165	11, 915	164	10, 875	163	10, 284	161	9, 776	145	8, 653

Source: State Agency for Child Protection

On the data of the State Agency for Child Protection in **2006 more than 80 % of the children institutionalized had families**, and they were institutionalized because of impossibility to be reared at home or in an environment close to the family one.⁸⁴

School Dropouts and Students Who Cannot Manage the Syllabus

The fact is disturbing that alongside with the **existing common trend of decreasing birth rate the relative number of school dropouts** remains great over the last years. On the data of

⁸³ Source: State Agency for Child Protection, National Strategy for the Child 2007-2017-draft, 28th May 2007

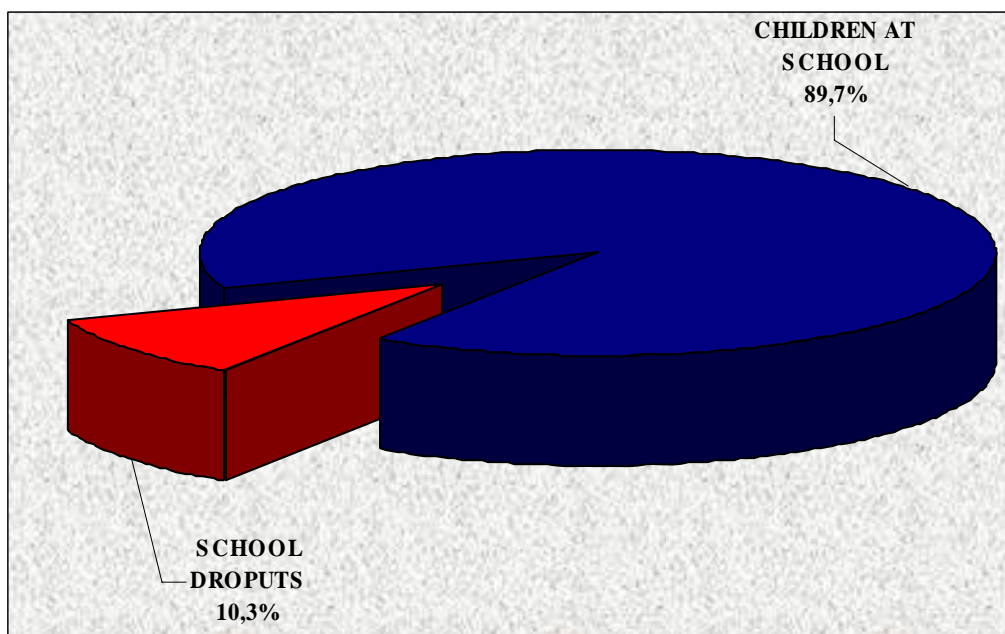
⁸⁴ Source: State Agency for Child Protection, National Strategy for the Child 2007-2017-draft, 28th May 2007

the regional inspectorates on education for the 2004/2005 school year there were 19 193 dropouts from a total of 963 051 students enrolled at the beginning of the school year. In 2003/2004 the number of dropouts was 31 552. In 2002/2003 the number of dropouts was 31 002.

On the data of the State Agency of Youth and Sports the school dropouts in the school year 2006/2007 represented 10,3 % of the youths aged 15-19 years. Represented in figures this means that nearly 30 000 youths do not finish and will not finish their secondary education (see *Figure 12-1*). The reasons for this disturbing phenomenon can be grouped in four basic categories: economic, ethnic and cultural, social and pedagogic. The main factors for dropping out from school are the economic status of the family, the ethnic identity, and also the school environment and the related to it pedagogic factors ⁸⁵.

Figure 12-1

SCHOOL DROPOUTS IN 2006 AMONG YOUTHS AGED 15-19



Source: State Agency of Youth and Sports

Children from Families Where There Are Problems with Alcohol or Drug Abuse

There is no information available.

Homeless Children

On the data presented by the State Agency for Child Protection the number of children who have been to the centers for waifs and strays in 2006 was 280, or that is 34 fewer than in 2005 and 251 fewer than in 2004. The distribution according to gender gives the following information: 151 boys and 129 girls (see *Table 12-2*).

⁸⁵ State Agency for Child Protection, National Strategy for the Child, 2007-2017 - draft, 28th May 2007

Table 12-2

NUMBER OF WAIFS AND SRAYS INSTITUTIONALIZED AT RECEPTION CENTERS OVER THE PERIOD 2004-2006

YEAR	2004	2005	2006
Number of reception centers	7	6	6
Number of children at the reception centers	531	314	280
- boys	293	179	151
- girls	238	135	129
Number of the children according to age	531	314	280
- up to 7 years	35	60	53
- from 8 up to 14 years	309	160	90
- from 15 up to 18 years	170	87	123
- over 18 years	17	7	14

Source: National Agency for Child Protection

Contrary to the trend of reducing the number of children institutionalized, there was a constant tendency in 2006 of increasing the number of children who have been to the already existing and to the newly established day centers in Bulgaria (see *Table 12-3*). According to the data of the State Agency for Child Protection the number of the actually functioning day centers in Bulgaria in 2006 was 9. For the entire period from January to December last year a total of 332 have been there (153 girls and 179 boys).

Table 12-3

NUMBER OF CHILDREN INSTITUTIONALIZED AT DAY CENTERS OVER THE PERIOD 2004-2006

Year	2004	2005	2006
Number of the day centers	4	6	10 ⁸⁶
Number of the children at the day centers	107	232	332
- boys	53	151	179
- girls	54	81	153
Number of the children according to age	107	232	332
- up to 7 years	2	9	43
- from 8 up to 14 years	88	96	220
- from 15 up to 18 years	7	101	69
- over 18 years	10	26	141 ⁸⁷

Source: State Agency for Child Protection

The centers for temporary institutionalization in Bulgaria are 4 – 2 are in Sofia, 1 in Varna and 1 in Plovdiv. In 2006 the children institutionalized there numbered 95 - 34 girls and 61 boys (see *Table 12-4*).

⁸⁶ Data have been taken from 9, because 1 DC is not functioning.

⁸⁷ These are not included in the total number of children.

**NUMBER OF THE CHILDREN AT CENTERS FOR TEMPORARY INSTITUTIONALIZATION
/CTI/ IN 2006**

Year	2006
Number of CTI	4 ⁸⁸
Number of children at the CTI	95
- boys	61
- girls	34
Number of the children according to age	95
- up to 7 years	29
- from 8 up to 14 years	46
- from 15 up to 18 years	20
- over 18 years	50 ⁸⁹

Source: State Agency for Child Protection

Juvenile Offenders

In the year 2006 15 969 under age and minors were registered at the Children's Pedagogic Services /CPS/ (in 2005 they numbered 17,390 or 8.2 % fewer). The number of the underage and minors, registered in 2006 was 4 830 or 9.7 % fewer in comparison to the preceding year. The girls registered were 2 697, which is 11.1 % fewer in comparison to 2005. Persons aged 14-17 were 12 632 (79.1 % of the total number the underage and minors registered), which in comparison to 2005 marks a decrease of 6.3 %. The number of persons registered aged 8-13 years was 3 337 (in 2005 they numbered 3 913 or 14.7 % fewer)⁹⁰.

In 2006 the number of the underage and minors, who have been at the CPS for vagrancy and begging decreased by 36.6 % (from 1 537 in 2005 to 975 in 2006). Vagrancy and begging are a more common phenomenon among the minors in comparison to the underage. The number of persons aged 14-17 years, who have been registered at the CPS for vagrancy and begging was 533, while for the underage the respective figure was 442.

On the data of the National Institute of Statistics in 2006 the number of truants increased by 25.4 % (from 1 888 in 2005 to 2 367 in 2006). Alongside there was a decrease in the number of the minors and underage who have been at the CPR for prostitution and homosexuality by 20.2 % (from 501 children in 2005 to 400 in 2006), for drug use by 19.0 % (from 584 children in 2005 to 473 children in 2006) and for alcohol consumption by 18.7 % (from 802 children in 2005 to 652 children in 2006).

The number of underage and minors, registered at the CPS as juvenile offenders decreased in comparison to 2005 by 12.1 % (from 9 720 in 2005 to 8 541 in 2006). In comparison to 2005 the number of children who have committed larceny dropped by 6.7 % (from 6 304 in 2005 to 5 883 in 2006). There is also a decrease in the number of children who have committed robberies by 12.3 % (from 2 593 in 2005 to 2 274 in 2006). The children pickpockets were 737, which is 42.6 % fewer than in 2005.

The number of juvenile offenders registered for robberies committed was 401, which is 36.9 % fewer in comparison to 2005, when they numbered 635. At the same time there is an increase in the number of juvenile offenders who have perpetrated rape (by 44.4 %), carnal abuse (by 25.0 %), and bodily harm (by 8.2 %).

⁸⁸ 4 in Sofia – city, 1 in Varna and 1 in Plovdiv.

⁸⁹ The children from "Sv. Sofia" CTI are not included.

⁹⁰ National Institute of Statistics, Antisocial deeds of minors and under age in 2006, <http://www.nsi.bg/SocialActivities/Crime.htm>

Children Living in Unfavorable Conditions and/or Places Where Drugs are Available

On the data of the National Institute of Statistics the social characteristics of the minors and underage persons registered at the Children's Pedagogic Services are similar to those of the previous years. 11,774, or 73.7 % of the children who have been registered at the CPS had lived in unfavorable conditions (in 2005 they numbered 10,842). Those are the children of divorced parents or practically separated parents, children of socially underprivileged families, orphans or children with a single parent alive, children who had lived in conflict family environment, criminogenic family environment or criminogenic circle of friends. From the children registered in 2006 at the CPS 2,442 neither study nor work, and in comparison to 2005 there is an increase in their number of 0.7 points ⁹¹.

An important issue affecting the social characteristics of the minors and the underage members of each society is child poverty. The broadest concept of child poverty is the one used by the Innocenti Research Center of UNICEF with a basic reference to the UN Convention on the rights of children. According to this concept **“child poverty is a situation in which the child has a standard of living not promoting his/her physical, mental, spiritual, moral or social development”**.⁹² In this aspect the concept of *poverty* should not be only conceived as lack of funding. It acquires a new and much broader meaning, comprising concepts and ideas from different professional spheres.

Since the financial poverty remains a universal concept in understanding the quality of life in the community, in this section are included illustrative data on the social situation in the Republic of Bulgaria.

In 2002 the level of financial poverty in Bulgaria was 13.4 %. This is the lowest level of relative poverty since 1995 ⁹³. According to the Joint Memorandum on Social Inclusion of the Republic of Bulgaria and the National Report on the Strategies for Social Protection and Social Inclusion for the period 2006 – 2008 the children represent one of the main groups at risk of becoming poor. This risk is especially great for the children living in single-parent families or in families with many children (the risk of poverty is respectively 25.1 % and 31.5 %), as well as among the children from the vulnerable ethnic minorities ⁹⁴.

In Bulgaria, as well as in the other countries from Southeastern Europe there is relatively low level of child poverty because of low income. According to the World Bank (2005), the rate of the poor children in Bulgaria under the age of 15 in 2003 was 8 %, (as a threshold of poverty is considered an income of \$2.15 per capita per day).

The data for 2001 show that the part of the children living in extreme poverty is 1 % for the capital Sofia and it reaches ¼ of all the children in the region of the villages.⁹⁵

Ethnic Minorities

On the summarized data of the State Agency for Child Protection included in the working out of the draft of the National Strategy for the Child (2007-2017), the conclusion can be drawn that the representatives of the ethnic groups represent a great part of the population of the abovementioned vulnerable subgroups among the young people. This specially applies for the members of the Roma ethnic community.

⁹¹ National Institute of Statistics, [Antisocial deeds of minors and persons under age in 2006](http://www.nsi.bg/SocialActivities/Crime.htm), <http://www.nsi.bg/SocialActivities/Crime.htm>

⁹² State Agency for Child Protection, National Strategy for the Child, 2007-2017 - Draft, 28th May 2007 on the data of Innocenti Social Monitor 2004. Economic Growth and Child Poverty in the CEE/CIS and the Baltic states.

⁹³ State Agency for Child Protection, National Strategy for the Child 2007-2017 – Draft, 28th May 2007 on the data of the Joint Memorandum for social inclusion of the republic of Bulgaria. (2005-2010)

⁹⁴ State Agency for Child protection, National Strategy for the Child 2007-2017 - Draft, 28th May 2007 on the data from the National Report on the strategies for social protection and social inclusion of the republic of Bulgaria for the period 2006-2008

⁹⁵ State Agency for Child Protection, National Strategy for the Child 2007-2017 - Draft, 28th May 2007

Ethnicity is one of the main factors for dropping out of school. On the data of the State Agency of Youth and Sports half of the youths aged from 15 to 19 who have dropped out from school are representatives of the Roma ethnic community (see *Table 12-5*). The ethnic belonging brings about observing specific cultural stereotypes, which have the strongest impact when the family lives in a compact group among the representatives of its own ethnos. The ethnic belonging has its impact on dropping out from school through economic motives for dropping out (low income, poor standard of living, unemployment, etc.), as well as through the so called family reasons (early marriages, incomplete families, etc.).

Table 12-5

THE RATE OF YOUTHS AT SCHOOL AGED FROM 15 TO 19 FROM THE DIFFERENT ETHNIC GROUPS IN %

ETHNIC COMMUNITY	AT SCHOOL	DROPOUTS
BULGARIANS	98.1	1.9
BULGARIAN TURKS	76.9	23.1
ROMA	41.5	58.5

Source: State Agency of Youth and Sports

Poverty because of low income and particularly child poverty because of low income in Bulgaria reflects the concentration of minorities in the different regions (Roma people, but also Turks). According to the conclusions of the Bulgarian Review of the integrated families 2001 the Roma population represents a little less than 9% of the total population of the country and more than 15 % of the child population, but more than 60 % of the children living in poverty because of low income, are Roma children ⁹⁶.

On the data of the State Agency for Child Protection the greatest part of the children institutionalized at the Homes for Medical and Social Child Care (HMSCC) and at the Homes for Upbringing and Education of Children Deprived of Parental Care (HUECDPC), again belong to the representatives of the Roma ethnic community (see *Table 12-6*).

The representatives of **the ethnic minorities are an especially vulnerable group for traffic** aimed at sexual exploitation, forced labour, begging, other illegal activities and for adoption, their part for 2003 represented 76.9 %, and for 2004 - 81.8 % ⁹⁷.

Closely related to the standard of living at the households where the young people live is **the access to healthcare and dental care**. Especially grave is the situation with the dental care among the young Roma people. Nearly a third of the young people having dental problems can't afford to have their teeth cured, and for the Roma people this rate reaches up to 54 %. The access to dental care is limited for the Bulgarian Turks as well, although the problem here is not only financial. A great part of them live in the mountain regions and in villages difficult to reach and with poor communications, and for these people dental care is seldom available ⁹⁸.

⁹⁶ State Agency for Child Protection, National Strategy for the Child 2007-2017 – Draft, 28th May 2007

⁹⁷ State Agency for Child Protection, National Strategy for the Child 2007-2017 – Draft, 28th May 2007

⁹⁸ State Agency of Youth and Sports

**DISTRIBUTION ACCORDING TO ETHNICITY OF THE CHILDREN INSTITUTIONALIZED BY
31ST DECEMBER 2006**

- HMSCC

Ethnical and cultural belonging	Number of children
• Bulgarian	653
• Roma	1,446
• Turkish	127
• Other	39
• Unidentified	478
Total	2,743

- HUECDPC

Ethnical and cultural belonging	Number of children
• Bulgarian	1,689
• Roma	2,272
• Turkish	341
• Other (specify)	89
• Unidentified	326
Total	4,717

Source: State Agency for Child Protection

Visiting Recreational Sites

There is no information available.

Children from Vulnerable Families

On the generalized data of the State Agency for Child Protection which are included in the National Strategy for the Child (2007-2017) now being drawn up the greatest part of the children at the specialized institutions is that of the single-parent families – 46 % (or 3 958 children). Despite decreasing the number of the children institutionalized in 2006 the number of the children of single or divorced parents increased by 187 or 5 % in comparison to 2005. If in 2005 those children represented 39 % of the children institutionalized by 31st December in 2006 they were nearly 46 %. The fact that there is not a second parent to care for the child is a main risk for institutionalizing the child outside the family at an early age – 66 % (1 807) of the children institutionalized at the HMSCC come from single-parent families. At the homes for disabled children the relative part of the children of single or divorced parents is 39 % (464) of the total number of children institutionalized there by 31st December 2006. The relative part of this group of children is the smallest at the HUECDPC – 36 % (1 687)⁹⁹.

The parents of 40 % (3 460) of the children are unemployed – they are of very low social status and cannot manage with upbringing their children. The children of large families represent 27% of the institutionalized children (2,328), and next come the children who have been abandoned by their parents and the foundlings – 15 % (1 322) and the children one of the parents of whom has died – 8,6 % (742). **2 % of the children institutionalized are orphans - 174 children.** At the specialized institutions there are 159 (1,8 %) children born by underage mothers under 18 years of age¹⁰⁰.

⁹⁹ State Agency for Child Protection, National Strategy for the Child 2007-2017 - Draft, 28th May 2007

¹⁰⁰ State Agency for Child Protection, National Strategy for the Child 2007-2017 - Draft, 28th May 2007

Part C

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