



Phare

Phare Project on Drug
Information Systems
Bridging Phase

National Report on the drugs situation in Lithuania

2000

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**NATIONAL REPORT ON THE
DRUG SITUATION**

LITHUANIA

**VILNIUS
2000**

THE NATIONAL REPORT ON THE DRUG SITUATION in Lithuania, 2000,
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PART I. NATIONAL POLICY: LEGAL & ORGANISATIONAL FRAMEWORK

1. TRENDS AND NEW DEVELOPMENTS IN DRUG POLICY

1.1. Philosophy, direction, scope, objectives

In the decade of its independence with assistance of UN organizations, EU Phare program, EC, WHO, Scandinavian countries and other bilateral support, Lithuania has been forming the country's drug policy in compliance with international requirements and norms in terms of drug control and drug addiction prevention.

The main objectives of the country's drug policy are: drug free society to the extent possible, prevention of drug abuse among young people, drug supply reduction, care of drug addicts. In 1999, the National Drug and Drug Addiction Prevention program 1999-2003 was adopted by the Government of Lithuania, and nearly half of the measures included aim at primary prevention.

In terms of formation and implementation of goals and objectives of the respective national policy the following areas may be pointed out:

- From 1994, Lithuania is a party to the UN Single Convention on Narcotic Drugs (1961) and the UN Convention of Psychotropic Substances (1971), in 1994 - ratified the Convention on Laundering, Search, Seizure and Confiscation of Proceeds from Crime (1990), of the Council of Europe, in 1998 - ratified the UN Convention On Fight Against Illicit Trafficking of Narcotic Drugs and Psychotropic Substances (1988). In 1996, the Lithuanian Government together with other Baltic Countries, the European Commission and UNDCP signed the Riga Declaration on the Fight Against Money Laundering.
- Legislation and regulations adopted by the Parliament and Government of the Republic of Lithuania is aimed at and facilitates establishment of a basis for programs measures of drug prevention, treatment, rehabilitation and risk-minimizing.
- The main network for implementation of drug control and drug prevention principles, with involvement of youth organizations, NGOs and the community, has been established. The National Health Program 1998-2010, the National Drug Control and Drug Abuse Prevention Program 1999-2003, the State Mental Health program 1999-2010, the State AIDS Prevention Program 1999-2001 pay necessary attention to youth.
- International multi-lateral and bilateral cooperation in the field of drug demand and drug supply reduction is being carried out, with particular emphasis on development of respective systems in local communities and increasing their capacities.
- In relation to the emerging new tendencies in the transitional period regarding abuse and trafficking of illegal drugs and psychotropic substances, institutional framework is being set up with particular attention to improved coordination of the activities and establishment of information systems.

1.2. Policy developments on specific issues of particular interest

Lithuania, being an accessing country to the EU and concerned about the worsening drug situation, aims at the future international collaboration in the drug prevention field.

Lithuania signed the agreement and adopted NPAA on the fight against drugs. The Accession Partnership/NPAA priorities (December 1999) provides highlights such as short-term priorities - to upgrade law enforcement bodies and the judiciary (staff numbers, recruitment, training and equipment), to continue the fight against organized crime, drug trafficking and corruption, to ensure better co-ordination between law enforcement bodies, to ratify the European Criminal Law Convention, to sign the OECD Convention on Bribery, to adopt and start implementation of the national anti-corruption strategy; as well as medium-term priorities: to continue strengthening police cooperation mechanisms with EUROPOL in fight against organized crime (in particular, money laundering, drugs and trafficking).

Lithuania proposed the National Phare Project 2000 - *Strengthening Illicit Drug Demand and Supply Reduction Capabilities* – for consideration to the EU Commission. The proposed project covers three main action areas - drug policy development, drug supply reduction and drug demand reduction - and attempts to build up and complement the work which has been done by the Phare Multi-beneficiary Drugs Program, strives in line with the EU Action Plan to Combat Drugs 2000-2004.

1.3. Developments in public opinion and perceptions of drug issues

In Lithuania the public opinion in terms of drug addiction started to change along with the democratisation process, emerging of free mass media, social changes, open approach by parents of drug addicts towards drug problems, treatment and rehabilitation facilities. Finally, drug addicts addressed for help to them, and for the community a drug addiction problem stopped being alien and the society having recognized existence of the problem, started to discuss it in an open manner.

For formation of the public opinion mass media play a significant role. PHARE project Multidisciplinary Training on the Global Approach to Drugs Phenomena in 1997 provided the basis for collaboration with mass media in terms of community awareness rising. Within the framework of this project training for journalists of radio, TV, news agencies and magazines was organised leading to more active participation by journalists facilitating the community awareness on drugs related problems and formation of drug policy and the opinion on global approach to drug phenomena.

2. DEVELOPMENTS IN LEGISLATION (NEW LAWS, DIRECTIVES ETC.)

2.1. Drug laws

Being aware of an increasing drug threat, young people in particular, and necessity to control drugs, facilitate prevention in the most effective manner, Lithuanian Parliament adopted respective legislation, also implementing acts were issued by the Government.

The Law on Narcological Supervision (No.VII-156; 1997) regulates health care of narcological patients, as well as persons abusing alcohol, narcotic drugs and psychotropic substances, aiming at controlling the disease and social consequences, to reduce harm to the patients and surrounding people. This law provides basis for prevention of narcological diseases, early identification of these diseases, health care of the patients, integration into the society through specialized organization of health care arrangements.

Decree No.239 by the Ministry of Health (1997) approved the list of narcotic drugs and psychotropic substances in compliance with the lists of controlled narcotic drugs and psychotropic substances by the UN Conventions.

The Law on Control of Narcotic Drugs and Psychotropic Substances (No.VIII-602; 1998) prescribes the basis for classification of narcotic drugs and psychotropic substances, licit trafficking when used in health care establishments, for veterinary and scientific purposes, in compliance with the provisions of international agreements. In Lithuania this law prohibits growing drug raw materials - poppies and cannabis.

So far licit drug trafficking has been regulated by decrees of the Ministry of Health and resolutions by the Government based on provisions of the UN Conventions.

The Laws on Amendments to the Administrative and Penal Codes regarding illicit trafficking of psychotropic substances were introduced in 1998.

The Law on Precursors Control (No.VIII-1207; 1999) regulates activities, procedure and control in relation to precursors in the Republic of Lithuania and external trade. This Law aims at assurance that precursors are not used for manufacture of illicit narcotic drugs and psychotropic substances. The law was prepared on the basis of requirements in the UN Convention (1988) and European Union Regulations on precursors trade. The Ministry of Health was authorised to carry out control of precursors by the Government of Lithuania. The Ministry of Health confirmed a primary list of Precursors by decree (No.557; 1998), and later adjusted it by the decree (No.52; 2000) in compliance with the above law, also issued the order approving legal acts related to the Law on Control of Precursors of Narcotic Drugs and Psychotropic Substances (No.526; 1999).

In 1999, Parliament adopted the Law on Amendments to the Penal Code, Article 232¹⁰, on illicit trafficking of precursors category I. The Penal and Administrative Codes of the Republic of Lithuania are under review currently.

The Law on Prevention of Money Laundering (1997) and respective implementation acts are expected to contribute too.

2.2. Other legislation (e.g. public health, data protection)

The Law on Protection of Right of Personal Data (No.I-1374; 1996; amended 1998) regulates relationship which arise in relation to the data gathering, aggregation, analysing, protection, distribution about physical persons or state information systems. The Law provides procedure for the data protection, rights to data and data protection guarantee in terms of establishment of personal data in the information system.

The Parliament of Lithuania ratified the UN Convention on Protection of Children Rights that obliges to protect children against drugs (article 33). The Law on Children's Rights Protection (No.1-1234; 1996) provides protection of children against drugs, poisonous and other substances. Any child must be protected against production, selling or distribution otherwise of drugs, poisonous and other substances, for involvement of a child into substance abuse administrative or penal liability is imposed.

Decree No.544 by the Minister of Health (1998) provides implementing regulations of the Law on Narcological Care:

- Order aiming at medical and social influence means on active estimation of social and health situation of a person;

- Order for health care institutions on provision of information about narcological patients and persons abusing psychoactive substances, their health status, prognosis, health care services provided;
- Order on rendering narcological care service in primary health care institutions and secondary or tertiary level of health care institutions;
- Criteria for period of narcological inclusion of narcological patients.

The Law of the Health Care System provides that the National Health Council shall take part in coordination of the drug, alcohol and tobacco control policy and prevention.

The Law on Health Care Institutions (1998) provided that the dependence disorders centers, as well as the Mental Health Center shall be financed from the state budget.

3. DEVELOPMENTS IN ORGANIZATIONAL FRAMEWORK

3.1. Key actors, roles and coordination structures

Governmental Drug Control Commission

Established in 1995, and headed by the Vice-minister of Health, the Governmental Drug Control Commission, including representatives of 9 Ministries is responsible for the overall planning and coordination of supply and demand reduction activities in the country, also drug abuse prevention.

Each ministry or its related institution has their assignment and task:

- The Ministry of Health is responsible for treatment of drug addicts, prevention or identification of drug addiction cases, control of licit circulation of narcotic drugs and psychotropic substances, laboratory diagnostics, forensic expertise, precursors control, expertise of intoxication with psychotropic substances and alcohol;
- The Ministry of Interior - control of law enforcement, illicit trafficking of narcotic drugs and disclosure of facts related to that, prevention of criminal activities, destroying of illegal drug plant crops, money laundering prevention;
- The Ministry of Justice - improvement of legislation, control of courts;
- The Ministry of Finance - money laundering prevention;
- The Ministry of Education and Science - prevention of harmful habits, educational work;
- The Ministry of Agriculture - control of drug plant crops;
- The Ministry for Social Security and Labor - social programs, prevention, rehabilitation of drug addicts; the Division dealing with social policy for children, family and youth was established within this ministry;
- The Ministry of Economics - control of chemical substances used for production of synthetic drugs;
- The Customs Department at the Ministry of Finance - control of customs check points in relation to illegal shipment of narcotic drugs and psychotropic substances;
- The Ministry for Foreign Affairs - relations with international organizations;
- The Ministry of Environment - control of chemical substances used for production of drugs;
- The Department of Border Police - control of the state borders to avoid shipment of illegal substances.

Demand for the coordination of drug control and prevention produced the increased scope of work for the Governmental Drug Control Commission. The Commission

collects data and information on drug related phenomena and acts in compliance with the effective regulations.

The Commission actively participates in formation of drug policy, assessment of the drug situation, cooperates with NGOs, mass-media in drafting laws and other important documents related to drug control and prevention, interrelates with international organizations such as the UNDCP, WHO, Mini-Dublin Group and others.

The Governmental Drug Control Commission was authorized to coordinate implementation of the National Drug Control and Drug Addiction Prevention Program by the Government and to provide reports on drug situation to the Government.

Narcotic Commission of the State Medicine Control agency by the Ministry of Health
The Narcotic Commission for licit drug control, established at the State Medicine Control Agency in 1995, carries out control of narcotic drugs and psychotropic substances used for medical and scientific purposes, issues licenses for activities related to narcotic drugs and psychotropic substances, issues permits for taking these substances into and out of the country, keeps records, provides reports to the UN International Drug Control Committee, prepares relative documents. This Commission is appointed responsibility for control of precursors.

Anti-drug Unit for fight against illicit trafficking

The Anti-drug unit for fight against illicit drug trafficking, established in 1995, in the Police Department by the Ministry of Interior cooperates with the Border Police, the Municipal Police, the Customs Department, analyses the data, carries out investigation, operations, situation assessment, cooperates with respective structures of other countries and international institutions, coordinates support programs on drug supply reduction.

Money Laundering Prevention Division at Taxation Police Department

The Money Laundering Prevention Division at the Taxation police department by the Ministry of Internal Affairs, established in 1998, carries out its activities in line with requirements of the Law On Prevention of Money Laundering of the Republic of Lithuania. The main Functions of this division are:

- to collect, to record and to examine information relating to the prevention of money laundering;
- to investigate criminal acts connected with money laundering;
- to provide recommendations to financial institutions and other legal entities seeking clarification of the law;
- to cooperate with foreign organizations implementing measures for the prevention of money laundering.

National Health Council

The National Health Council, established in 1998, aims at the strengthening of public health and population involvement in solving health problems and the coordination of activities by NGOs, state and municipal institutions in these areas: the health education policy, alcohol control policy, tobacco control policy, drug control policy. The National Health Council reports to Parliament, acts as an advisory board for the Parliamentary Health Committee.

The Coordination Council for Drug Abuse Prevention, Treatment and Rehabilitation by the Ministry of Health

The Coordination Council for Drug abuse Prevention, Treatment and Rehabilitation was established at the Ministry of Health, by Decree of the Minister of Health June 1988. The Coordination Council is an advisory/expert body including specialists of drug

abuse prevention, rehabilitation, drug prevention and control, policy makers. The Coordination Council provides proposals to the Ministry of Health regarding the implementation of drug prevention, treatment and rehabilitation measures, considers and approves drug prevention, treatment and rehabilitation methodology, plans based on submitted materials, provides conclusions and recommendations.

National Public Health Promotion and Education Center

The National Public Health Promotion and Education Center is as a public health care institution subordinate to the Ministry of Health. The Center is responsible for creation and implementation of different health promotion and education programs to facilitate awareness rising within the society, including drug, alcohol and tobacco abuse prevention measures.

State Mental Health Center

The State Mental Health Center, established in 1999, The State Mental Health Center is responsible for the mental health, secondary and tertiary prevention of dependence diseases, also records of the above diseases. The Center was authorized to implement the State Alcohol Control Program and Mental Health Program by the Ministry of Health.

Lithuanian AIDS Prevention Center

The Lithuanian AIDS Prevention Center is responsible for HIV/AIDS prevention in the country including prevention of AIDS/HIV among intravenous drug addicts and implements harm reduction measures. The Center established rehabilitation department for drug addicts. The AIDS center is responsible for implementation of the State AIDS Prevention Program.

Pedagogic Institute

The Pedagogic Institute by the Ministry of Education and Science is responsible for preparation, assessment and implementation of drug prevention programs for schools, participates in the international survey ESPAD regarding the substance abuse level, coordinates the UNDCP program for drug prevention in schools in the Baltic countries.

State Council of Youth Affairs

The State Council of Youth Affairs aims at assistance to solve social, psychological and other youth problems, each year finances drug prevention projects.

Non-governmental Organizations

In Lithuania NGOs more and more actively are involved in the drug prevention programs, the Temperance Fund renders support to recovering alcoholics and drug addicts actively cooperates with NGOs and international organizations, provides public education and training in matters related to alcohol and drug prevention; organizations to support alcohol and drug addicts are established, such as the organization of addicts at the AIDS Rehabilitation Center and others. Organizations of Drug Addicts' Parents operate in major cities (Vilnius, Klaipeda, Kaunas, Druskininkai) involving themselves in rehabilitation programs for drug addicts.

The Health Expert Commission at the Ministry of Education and Science coordinates substance abuse prevention and health education activities.

Administratively Lithuania includes 10 counties and 44 regions, both on the county and regional levels structures responsible for drug control and prevention exist. The Councils of major cities have established inter-institutional coordination commissions to coordinate the substance abuse prevention in local communities, with assistance of governmental institutions and NGOs.

3.2. Budget and funding arrangements

Based on the state finance regulations and programs, activities of governmental institutions on drug prevention and drug control are financed from the state budget. Besides, the above programs and activities are provided funds from different sources including international organizations within the framework of different projects.

3.3. International cooperation

The international cooperation that started after Lithuania regained its independence in 1990, contributed much to the drug policy development in the country, with particular support and assistance provided by Scandinavian countries.

Being a member of the WHO Lithuania cooperates with the WHO European Regional office; the Ministry of Interior of the Republic of Lithuania cooperates with the Interpol; the Lithuanian Customs is a member of the World Customs Organization. The Mini-Dublin Group acts in Vilnius and cooperates with the Governmental Drug Control Commission; public organizations actively cooperate with respective European organizations.

Regionally, the Baltic Assembly, established by the Baltic countries, among numerous areas collaborates in the drug-related matters and, in 1997, the Resolution regarding drugs was adopted by the Baltic Assembly. Lithuania also collaborates with international NGOs in fight against drugs, such as 'European Cities against Drugs'. The Council of Vilnius City signed Stockholm Declaration "On European Cities against Drugs". Representatives of the UN, UNICEF, WHO reside in Lithuania.

Lithuanian institutions received assistance on illicit drugs from the PHARE Multi-beneficiary Program that included: Drug Information Systems Project, Precursor Project, Licit Drug Control and Illicit Synthetic Drugs Project, Baltic Sea Region Money Laundering and Asset Tracing Project, Drug Police Personnel Exchange Project, Technical Assistance to Drug Demand Reduction Project. Other projects are planned as the Synthetic Drugs Project, the Technical Assistance to NGOs Project, and the second phase of projects on demand reduction and on precursors control.

Assistance from the Council of Europe/Pompidou Group included: DRSTP II 1999-2001 demand reduction staff training project providing multidisciplinary training materials and the Council of Europe Pompidou Group airport working group, aiming at combating drug smuggling at airports.

The UNDCP developed a regional project for comprehensive drug abuse material for youth in schools in the Baltic States AD/RER/99/ C10 for 1999-2002 and the national project "Strengthening drug interdiction capacities" (1995-1998) providing specialized training and logistic support.

As bilateral assistance, the Swedish Government funded several seminars, training and study visits related to demand and supply reduction.

4. DEVELOPMENTS IN INFORMATION REQUIREMENTS FOR DRUG POLICY

For developments in information, Lithuania follows the UN requirements and indicators, reports on drugs to UN organizations the UNDCP, INCB, i.e. quarterly and annual reports according to new requirements.

New step for the development of drug information systems in the country was the Drug Information Systems Project within the framework of the EU PHARE Program "Fight against Drugs in Eastern and Central European Countries" (started in 1994). This project carried out through different actions provides major support in assessment and development of the National Drug Information System in the country - human and technical network. The establishment of technical facilities was a very significant step for the information system development and encouraged an opportunity to collaborate on the European level more efficiently. Preparation of the Living Document covering the drug demand and supply, reduction of the drug information sources was of particular importance in this aspect.

The know-how support on drug epidemiology by the Pompidou Group of the Council of Europe was very valuable. In 1994, based on the decree by the Minister of Health the statistical data form (the drug addict record) according to the Pompidou Group requirements was established. Development of information data was supported by UN organizations.

Lithuania aiming at EU membership has a task to develop the drug information system in the line with the EMCDDA requirements.

PART II. DRUG MONITORING SYSTEMS AND SOURCES OF INFORMATION

5. DEVELOPMENTS AND CHANGING PRIORITIES IN NATIONAL MONITORING SYSTEMS, INFORMATION SOURCES AND RESEARCH

5.1. Epidemiology

Lithuania with the population of 3,75 mln. is divided into administrative units including 67,9% urban population and 32,1% rural population. In the administrative units mental health care centers or facilities for patients ill with dependence disorders are established, in major cities specialized facilities for treatment of patients with alcohol or drug addiction problems undergo treatment, also in-patient and out-patient units exist there. Ten mental hospitals at the national or county levels were established. Due to political changes and with the process of democratisation, the data collection entered a new stage according to the EU requirements.

Statistical data about mental disorders and abuse of narcotic drugs and psychotropic substances, alcohol are registered in each health care institution. All health care establishments must fill in the form in compliance with the Pompidou Group Protocol and other respective records, provided a person contacts to get assistance reasoned by drug abuse. The medical staff fill in documentation including the purpose of the contact, the nature of rendered assistance, and health care establishments must prepare reports in compliance with prescribed requirements that are sent to State Mental Health Center for analysis and assessment. The State Mental health Center carries out detailed analysis of the aggregated data.

Prevalence of drug addiction is analyzed based on:

- reports by psychiatrists (f-030-1/a);
- assessment of first treatment demand for drug addicts based on the record card of the drug addict f-025/5a (started in 1995);
- assessment of the methadone treatment;
- emergency assistance of intoxication with drugs;
- death cases caused by drugs.

Prevalence of drug addiction is analyzed by age, sex, geographical area, ways of usage, kind of drugs.

In 1997, the X international disease classification (ICD-10) was introduced, F10-F19 (Psychic and behaviour disorders due to psychoactive substances). Based on the clinical condition and the treatment demand information about morbidity and other cases is identified.

Analysis and the aggregated data is forwarded to the State Health Information Center for further analysis of the condition of the Lithuanian population including consequences of drug addiction and alcoholism, then the data is forwarded to the State Statistical Department that also gathers drug related death data.

Due to fast changes on drug phenomena new needs for gathering information on drug abuse among general population was necessary. Solely researches on alcohol, drug, tobacco usage among 15-16 year old youth are available, with support of the Council of Europe (ESPAD).

Lithuania is planed to establish epidemiological data collection system on main key indicators in the line with EMCDDA.

5.2. Demand reduction

Demand reduction activities related to treatment data introduced in to the reporting system on drug information, that became more accurate due to establishment of the health insurance system in Lithuania.

Data on primary drug prevention measures was collected through public health institutions, and special attention was paid within the framework of the PHARE DDR project and DIS project activities.

Attention to demand reduction activities, their coordination and quality was paid as the different state programs and different non-governmental organizations started to act in the drug field to avoid overlapping of activities, introduce respective information and evaluation systems.

National Health Education and Promotion Center is responsible for gathering information on demand reduction activities on drug demand reduction, treatment or rehabilitation. Technical assistance to the DDR project in 1999 supported the establishment of a Resource Center in the National Health Education Center for information on drug demand reduction. However, further development of the Resource Center needs local investment.

Drug demand reduction is a very important part of the public health policy and foreseen to be develop its information network through County Public Health Centers. Ten Public Health Centers in the counties were established in the country, though not each of them is prepared to execute these responsibilities. It requires additional inputs, i.e. special regulations and training, exchange of experience.

5.3. Drug policy and legislation

The drug policy development by the Republic of Lithuania is based on the recommendations and provisions of the UN Conventions. The national laws are drafted and implemented following the international agreements on drug and substance abuse control. The drug prevention among youth is connected with substance abuse prevention.

Legislation

Law on Control of Narcotic Drugs and Psychotropic Substances

The Law on Narcotic and Psychotropic Substances Control (No.VIII-602; 1998).

This Law regulates the classification principles for narcotic and psychotropic substances, licit circulation and control of these substances when they are used for health care, veterinary and scientific purposes in compliance with the international agreements. The schedule of substances subject to control includes natural and synthetic substances that due to their harmful effect or abuse cause serious human health disorders, individual's psychic and physical dependence on them or incur harm to human health. Narcotic and psychotropic substances are included into the schedule of controlled substances issued by the Ministry of Health.

Narcotic and psychotropic substances are classified based on their harm to human health when they are abused and on their use for medical purposes. Three schedules include:

1. plants, narcotic and psychotropic substances, banned for medical purposes because of harm when abused; introduction of these substances into the Republic of Lithuania is prohibited based on the Decree by the Health Minister;

2. plants and psychotropic substances used for medical purposes, abuse leads to harm; they are highly harmful to human health;
3. plants and psychotropic substances used for medical purposes, abuse leads to harm; they are harmful to human health.

Advertising of narcotic drugs and psychotropic substances is prohibited. Cultivation of opiate and oily poppy, cannabis and coke trees are prohibited in the Republic of Lithuania. To use substances of schedule I for medical purposes is prohibited. Use of substances of schedule II and III is licensed. Regulation for prescription, acquisition and selling at pharmacies was established by the Ministry of Health. Accounting of licit trade and control of narcotic drugs and psychotropic substances is carried out by an institution authorized by the Ministry of Health and institutions authorized by the Government in compliance with the international agreements.

According to Article 81 of the Penal Code production, acquisition, possession, shipment, selling or distribution otherwise, seizure of these substances, organizing dens to use or possess narcotic and psychotropic substances are attributed to the serious offence category.

Law on Control of Precursors of Narcotic Drugs and Psychotropic Substances (No.VIII-1207; 1999).

This Law regulates the activities related to the precursors of narcotic drugs and psychotropic substances and their control in the Republic of Lithuania. The aim of this Law is to prevent the use of precursors for the illicit manufacture of narcotic drugs and psychotropic substances. This Law shall not apply to products containing precursors, which cannot be recovered and used for the illicit manufacture of narcotic drugs and psychotropic substances.

Definition of the Precursors of narcotic and psychotropic substances (hereinafter - precursors) means chemical substances, salts of these substances or their mixtures frequently used for the illicit manufacture of narcotic drugs and psychotropic substances and are subject for this reason to control under the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), and are included in the list of precursors approved by the Minister of Health.

Listing of Precursors

A list of precursors was produced in accordance with the UN Convention (1988) and EU regulations. A list of precursors shall be approved by the Minister of Health in a special decree. The listed 22 precursors and their salts are classified into the precursors of category I, category II, and category III on the basis of ability to use them for the illicit manufacture of narcotic drugs and psychotropic substances. The list of precursors may be amended, updated and supplemented by chemical substances, with account of the amendments of the annexes to the UN Convention (1988). Precursors are listed under their Lithuanian and international (or in the event of their absence, chemical) names, and their codes under the Combined Customs Tariffs and Foreign Trade Statistical Nomenclature is indicated.

The Narcotic Commission of the State Medicine Control Agency is appointed for Precursors Control by the Government of Lithuania.

Law on Narcological Care

The Law on Narcological Care (No.VII-156; 1997) regulates health care for narcological patients, alcohol addicts, drug addicts, abusers of psychotropic and other substances affecting psychics, aiming at blocking the disease and social consequences, harm reduction for patients and surrounding people. This Law provides basis for prevention

and early diagnosis of narcological disorders, health care of patients, their integration into the society.

Narcological care aims at integration of narcological patients into the society based on organization of special health care for such patients, diagnosis and treatment of health disorders, application of psychological, medical and social rehabilitation, provision of social services and social care. Health care for narcological patients is financed by the state, treatment of narcological patients is based on voluntary principles, except provisions in Article 7 of this Law, that provides a drug addicts shall be hospitalised compulsory based on provisions of the Law on Mental Health Care, i.e. according to medical indications such psychosis.

Human rights to health care services may not be limited taking into account the fact a person is a narcological patient or substance abuser.

Observation of narcological patients (drug, alcohol addicts)

For provision of narcological care observation should be carried out for:

- narcological patients who had been ill with alcohol psychosis;
- alcoholic women and men, drug addicts having children under 18;
- alcoholic children and children drug addicts;
- narcological patients with HIV positive, ill with AIDS, active tuberculosis;
- narcological patients who are not able to learn their disease and do not follow hygiene requirements;
- narcological patients engaged in activities that incur danger to health and life of other people.

Specialists of health care must report to municipal health commissions, municipal health care divisions, organizations of protection of children rights and other authorized public and municipal institutions about narcological patients who abuse substance, do not take care of their children under the age of 18, are aggressive to them.

Health care institutions implement prevention measures for narcological care: inspection of an intoxicated person to determine intoxication level caused by alcohol or substances, diagnosis of narcological disorders, detoxification, treatment, medical rehabilitation, social services to narcological patients, social care, registration of narcological patients, registration of cases (aggressive deaths and suicides, traumas, intoxication, somatic and infectious diseases, etc.) related to alcohol and drug abuse, education of public health.

Prevention measures

Goals of prevention measures against narcological incidence:

- to stop substance abuse;
- to stop development and spreading of narcological sickness;
- to mitigate consequences of substance abuse for both a patient and the society.

Prevention measures should be applied in all health care establishments.

All health care specialists should inform patients and the society about:

- consequences of substance abuse for human health, families and the community;
- efficient measures aiming at mitigation of harm caused by substance abuse;
- health care of narcological patients and substance abusers;
- measures including limitation for narcological patients and substance abusers in laws of the Republic of Lithuania.

All health care specialists are obliged pay attention to identification of substance abusers in order to stop narcological sickness, providing health care services and to these groups in particular:

- children;
- pregnant women and women having children;
- persons who are engaged in work endangering health or life of other people;
- persons ill with dangerous infectious diseases.

Disease prevention and control centers in the counties register and carry out accounting of narcological sickness cases, substance abuse cases (aggressive deaths and suicides, traumas, intoxication, somatic and infectious diseases, etc.).

Disease prevention and control centers in the counties collect and systemize the information about narcological situation, substance abuse cases and consequences and provide information to the Health Ministry in compliance with the established procedure. All health establishments must provide information about narcological situation, substance abuse cases and consequences and provide information to disease prevention and control centers in the counties.

Public health education

Public health education regarding narcological care is carried out by accredited public health education establishments.

For implementation of public health education, particular attention should be paid to schoolchildren, students to make them aware of harm incurred by the substances to human health and economy, healthy environment, formation of healthy lifestyle habits.

Law on Prevention of Money Laundering (1997) regulates measures regarding money laundering and provides responsibilities for respective bodies and institutions.

Other related Laws

The Law On Alcohol Control (No.I-857; 1995) aims at reduction of alcohol consumption in general, alcohol abuse and damage it causes to health and the economy, facilitating:

- preparation and implementation of health programs to augment public awareness of social and economic harm to health and economy resulting from alcohol use;
- augment the number of population members who do not use alcohol beverages, or use them infrequently, by promoting programs of temperance organizations;
- support planning of an alcohol free living environment;
- encouragement of formation of alcohol free social environment and social activities.

The Law on Tobacco Control (No.I-1-143; 1995) aims at reduction of tobacco abuse and harm to human health. This Law regulates relationship related to tobacco growing, production of tobacco products, domestic trade of tobacco products, their storage, import, tobacco advertising, use of tobacco products and determines principles for the state tobacco control.

The principles for the state tobacco control:

- to protect rights of non-smokers to environment free of tobacco smoke;
- to use revenue from the excise duty on tobacco products for preparation and implementation of health programs;
- to increase awareness of the population about social and economic harm of smoking.

This Law prohibits sniffing and chewing tobacco.

The Law on Protection of Children Rights (No.1-1234; 1996) aims at improvement of legal protection of children through principles of children rights and freedom in compliance with the Constitution of the Republic of Lithuania and international legislation, provides the main principles for children protection against negative social environment by public, municipal institutions, physical and juridical persons. Promotion of healthy lifestyle and legal education of children are important guidelines for the public social policy and activities. Children are prohibited to be engaged in work related to production or sales of tobacco products or alcohol beverages. For involvement of a child into alcohol intoxication administrative or penal liability is imposed. Aiming at protection of any child against production, selling or distribution otherwise of drugs, poisonous and other substance, for involvement of a child into substance abuse administrative or penal liability is imposed.

5.4. Documentation centers

In Lithuania two documentation centers, such as libraries of Vilnius University and Kaunas Medical University, collect different publications related to alcohol, tobacco and drugs including reference data basis for other documentation centers.

According to the National Drug Control and Drug Prevention Program 1999-2003, the National Documentation Center is planned to be established in the National Medicine Library that has modern computerized data basis with connection to the other world libraries. The bibliographical list was created in relation to alcohol and drug publications.

Though mass media is rather active in Lithuania, unfortunately, no documentation center engaged in analysis of public opinion on drug issues according to mass media reports exists, and only some episodic work was carried out, for example, in 1999 in the city of Klaipeda about 200 articles on drug problems were collected from local newspapers during the TA to DDR project implementation in the local community on drug prevention.

From 1999, the Drug Focal Point receives information on drug issues from EMCDDA – (books, news letters), and these materials are forwarded to the principle libraries, dependence disorders centers, public health institutions, professionals, politicians.

6. DEVELOPMENTS AT THE NATIONAL FOCAL POINT

6.1. Organization, legal basis, operation, staffing, financing

The basis for the development of the drug information systems and Focal Point was the Drug Information Systems Project within the framework of the EU PHARE Program “Fight against Drugs in Eastern and Central Europe Countries”. Preparation of the Living Document covering the drug demand and supply, reduction of the drug demand sources was of particular importance. Based on the Living Document the principle data, information about the contact persons and their technical facilities were collected. The establishment of technical facilities in the Focal Point was a very significant step for the development of the drug information system in country.

For implementation of the main objectives of the Drug Information System Project, the Focal Point informally was established in the Governmental Drug Control

Commission. The decision was based on the fact that this Commission includes experts from all ministries related to drug problems, and its regulations, approved by the Government of the Republic of Lithuania, provided a legal basis for data collection on drug matters. The Governmental Drug Control Commission:

- Collects information;
- Assesses;
- Provides analysis of the situation in the country to the Government of the Republic of Lithuania;
- Submits proposals related to the existing situation.

Information is obtained according to the regulation based on requests within 15 days or could be obtained in a shorter period of time. The Governmental Drug Control Commission has all information on drugs, analyses the information about drug distribution on the territory of the Republic of Lithuania and submits proposals to the Government, also analyses and assess statistical data regarding drug abuse problems, obtained from different organizations and institutions, public authorities, prepares reports analysing the drug situation in the country in the second quarter of each year and submits it to the Government of the Republic of Lithuania.

Having decided that the Focal Point will be located within this Commission, the technical facilities were provided to this Commission.

In 1995, for secretariat of the Governmental Drug Control Commission one staff was introduced, however, in 1998 this staff was reduced, and since then the Public Health Department of the Ministry of Health has been carrying out tasks of the secretariat of the Governmental Drug Control Commission, Focal Point, besides direct responsibilities on public health.

The secretariat of the Governmental Drug Control Commission and Focal Point is planed to be established in the coming years according to National PHARE Program and will be supported by the Lithuanian Government. Currently obtaining of information is based on the regulations of the Governmental Drug Control Commission, and no additional legal basis for the Focal Point on gathering information and reporting has been provided.

Currently the main objective is to develop the Drug Information System based in the line with the European Drug Monitoring Center.

6.2. Network of partners of the Focal Point

The Focal point is located in the secretariat of the Governmental Drug Control Commission at the Ministry of Health, and all aggregated data on drug related problems from different institutions are available here. The network of partners of the Focal Point has been constantly strengthened.

The Narcotic Commission, established in 1995 at the State Medicine Control Agency for control of licit drug circulation, carries out records for import and export of narcotic drugs and psychotropic substances, assesses demand on drugs for medical purposes, license activities with involvement of narcotic drugs and psychotropic substances, issues permits. The Narcotic Commission has its own data system and reports to the INCB and other organizations on licit drug and psychotropic substances turnover and very closely collaborates with the NFP in producing joint reports to international organizations and trend analysis.

The Anti-drug Unit (engaged in narcotic illegal trade investigation, at the Organized Crime Investigation Service of the Police Department) by the Ministry of Interior

collects information on the illegal circulation of narcotic drugs, receives information from all law enforcement institutions in the country, processes this information into the special data base that is assessed regularly. The Anti-drug unit collects information about seized quantities and types of drugs, criminal actions related to drugs, prices of drugs, geography of drugs circulation, while municipal police - about drug plant fields, dens, criminal actions; the transport police, border services, customs collect information about shipment of drugs, the State Security Department obtains information on respective levels. The Customs Department makes reports regarding import and export of listed drugs, precursors, and together with the Police analyze all cases of illegal shipment of drugs.

The State Mental Health center is a partner of the Focal Point on drug related health consequences.

The most important partners to provide information in the Living Document of the Focal Point are as follows:

- State Mental Health Center (in 1999 reorganized from the Vilnius Psychiatric Clinic department);
- Health Information Center by the Ministry of Health;
- State Department of Statistics at the Lithuanian Government;
- Lithuanian AIDS Center by Ministry of Health;
- Health Care Service at the Ministry of Interior;
- Municipal Police Department at the Ministry of Interior
- Anti-drug Unit in the Organized Crime Investigation Service of the Police Department, Ministry of Interior;
- Customs Department by the Ministry of Finance;
- Division of Legislation at the Ministry of Justice;
- State Forensic Medicine Center, Laboratory of Chemistry;
- Narcotic Commission of the State Medicine Control Agency;
- Ministry of Social Security and Labour;
- Ministry of Science and Education;
- National Health Education and Promotion Center ;
- Vilnius Narcological Center;
- Non-governmental organizations;
- International Relations Department of the Ministry of Foreign Affairs;
- Mass media.

The Focal Point and Governmental Drug Control Commission directly obtains data on demand reduction activities through close contacts with public institutions and NGOs.

The information map electronic version from the main sources was introduced to the EMCDDA - European Drug Monitoring Center.

Communication with the partners was facilitated within the PHARE Drug Information Systems Project as the Focal Point was additionally strengthened and equipped with the electronic network facilities.

6.3. Role of NFP in national monitoring and information systems

The role of the NFP in national monitoring and information systems is very important. All available information related to drugs is analyzed and assessed in the National Report on Drug Situation in the country and provided to the Government and Parliament of Lithuania.

The Focal Point provides requested information to different governmental institutions and officials on drug issues, drug legislation, drug demand, institutional framework. No doubt that this information is very important for the Drug Policy development in the country and shows the overall situation on drug related problems, trends.

Reports on Drug situation are used by NGOs in their anti-drug activities and mass media that provides this important information to the community.

Unfortunately, the informal Focal Point has been working with limited resources, and thus the volume of information is limited too.

6.4. Other roles and activities of National Focal Point within the Member States

The national drug information is an important part of European data, and shows common trends on drug issues. NFP and drug information systems are important for collaboration with neighbouring countries and the EU member states. NFP prepares reports for Dublin-mini Group, which acts in Vilnius and on request of embassies of EU member states in Lithuania on drug problems, also reports to different projects on special drug issues.

The requirements to have flexible and exact drug information based on surveys, also a good data basis are growing, in relation with the country's EU membership negotiations. The Lithuanian Government comprehend the importance of drug information systems and in the Accession Partnership/NPAA priorities has planed establishment of the National Information System on drugs.

Setting up a National Drug Information Focal Point (in line with EMCDDA requirements) is planed in the National PHARE Program 2000.

7. DEVELOPMENTS ON REPORTING TO THE OTHER INTERNATIONAL ORGANIZATIONS

Since 1998 the National Report according to special requirements of EMCDDA are prepared annually. Besides EMCDDA, Lithuanian authorities reported to the UNDCP, INCB, WHO, Interpol, international NGOs.

Recently, new and more exact data are requested which sometimes is difficult to obtain because of a limited drug information system in country. The need for development of a Drug Information System Focal Point and a coordination body is obvious and establishment of these has been planed.

PART III. EPIDEMIOLOGICAL SITUATION

8. NEW INFORMATION ON HISTORICAL DEVELOPMENT OF DRUG USE

(From Lithuanian Human Development Report 1999, UNDP)

During the Soviet period the use of illegal drugs, like many other negative social phenomena, was not publicly acknowledged in Lithuania.

Opium produced from poppies growing in Lithuania began to be used at the end of 1970's (both as drink and intravenous), while medications compounds which UN conventions define as narcotics (codeine, tranquilizing agents, etc.) were in use even earlier for their intoxicating effect. At that time the use of narcotics was not related to youth culture and leisure. As it had somewhat earlier in Western Europe, drug use in Lithuania became an expression of youth "protest" at the end of 1970's, and at the beginning of 1980's. However, only several hundred followers of the belated "hippie" culture in Lithuania used poppy straw derivatives intravenously.

Due to their limited numbers, drug users often were considered emotionally disturbed, and were therefore treated in psychiatric hospitals. On the other hand, in society drug addicts were denounced and looked upon as dangerous criminals. Drug users were severely punished and incarcerated, which in turn contributed to the tendency for the spread of narcotics in prisons and among former convicts.

The changes which began in 1990 affected the use of narcotics in Lithuania as well as in other Central and Eastern European (CEE) countries. Drug use began to spread among young people as a manifestation of a western style of life. Other factors also play an important role, particularly the opening up of markets, the increase in trafficking, in effective legislation and law enforcement, and growing standard of living.

(From Report Observatoire Geopolitique des Drogues, No.96, December, 1999; article "Lithuania: from "shirka" to Cocaine")

Lithuania gained independence from the Soviet Union in 1991, but now is becoming a key point for the transit of narcotics within the former Soviet empire that is being rebuilt. Before independence alcoholism was the main problem and the general public had practically never heard of other forms of drug abuse. Indeed, in those days the only narcotic problem worth mentioning was in prisons where some wardens, natives of Central Asia, sold opiates to the inmates. Young Lithuanian soldiers who had fought in Afghanistan came home with an opium or heroin habit. But since relatively few people were affected, it was fairly easy to either rehabilitate them or isolate them in prisons before they "contaminated" the rest of the society. Opening of the borders after independence has facilitated the penetration of organized crime, including drug trafficking. The young state, which has borders with four countries, including the Russian enclave of Kaliningrad, and 100 km of the Baltic Sea coast, is not adequately equipped to resist the development of drug trafficking on its territory.

9. TRENDS AND NEW DEVELOPMENTS IN DRUG USAGE

Recently in Lithuania as in other East and Central Europe countries fast economic and social changes influencing life of people occur. Youth is most vulnerable due to complicated economic, social factors. Availability of alcohol, tobacco and drugs, lack of information about consequences of these substances lead to use of alcohol and tobacco products, illegal narcotic and psychotropic substances at early age and involvement into risky activities related to these substances.

Abuse of psychotropic and narcotic substances among young people becomes a new social phenomenon at entertainment events, discotheques. Drugs are distributed in discotheques, near schools, on streets in major cities. During entertainment events alcohol beverages and tobacco products are sold. Young people take interest in the new Western youth philosophy and ideology related to use of drugs - hashish and marihuana, synthetic drugs of the amphetamine group, ecstasy, LSD.

Young people also try to use smoking heroin and sniffing cocaine, and within a very short period they start to use heroin intravenously (this data is according to information provided by the Vilnius Narcological Center, and Toxicological Department of the First aid Vilnius University Hospital).

Data based on both observation and the epidemiological investigation demonstrate that abuse of addictive substances among youth becomes a threatening social phenomenon: social, health, legal problems related to drug abuse, alcohol and tobacco are increasing.

9.1. Drug consumption in the general population

Epidemiological survey data on drug use among youth

In Lithuania the real epidemiological situation is not known. Surveys in terms of drug use have been carried out solely among schoolchildren but not among other community groups, except smoking and alcohol abuse surveys.

Since 1995, upon initiative by the Information on Alcohol and Other Drugs Council of Sweden and the EC Pompidou Group dealing with fight against abuse and illicit trafficking of drugs, the survey on alcohol and drugs abuse among schoolchildren (ESPAD) were carried out simultaneously in 26 European countries including Lithuania. The main objective of this project was to collect comparable data regarding tobacco, alcohol and other drug prevalence among schoolchildren in Lithuania, to compare tendencies of substance abuse in different countries.

3196 students aged 15-16 from high and technical schools participated in the survey (in 1995) that reflected the existing situation in Lithuania. Analysis of the questionnaires revealed the following information: 25,3% of the participants smoked daily, 94,8% - used alcohol (over 2/3 used to get intoxicated), 3,2% - used illegal drugs (smoked marihuana mainly, used amphetamine, crack, ecstasy, heroin and LSD), 14,6% - tranquilizers, soporifics, 15% - used to sniff volatile substances, glue, aerosol. The rates of frequent use of inhalants were higher for boys than for girls (17,6% and 14% respectively). Inhalants were popular among age group of 13-14.

Until 1995 the prevalence of different drugs in Lithuania among students was low in comparison with other Baltic States or European countries (ESPAD Report, 1995). The survey in 1997 in Vilnius schools showed the tendency of rapid growth of drug abuse among the schoolchildren aged 15-16, and they were familiar with most of the drugs. The use of illicit drugs in the same age group (in Vilnius) became alarming - jumped from 3,2% in 1995 to 26% in 1997 year, i.e. 8 times more. Every fifth

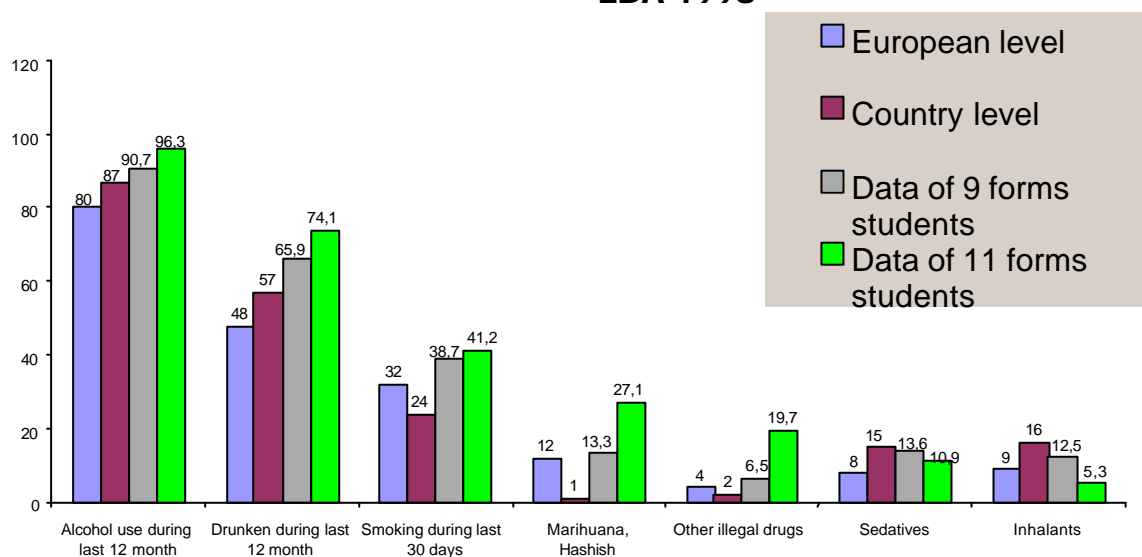
participant of the survey “experimented” using marihuana or hashish, ecstasy, LSD, amphetamine and other.

Use of tranquilizers or sedatives without prescription among students was rather high in 1995 (14,6%). According to use of tranquilizers in comparison with other European Countries Lithuania was in the second place after Poland. The figures showing consumption of tranquilizers and sedatives in 1998 increased to 23,6%, among girls - to 37,3%. The rates of inhalants use frequency decreased from 15,7% in 1995 to 12% in 1998.

The survey indicates much higher prevalence of legal substances compared to illicit ones. But due to transfer of cultural patterns as well as social changes the use of illicit drugs among youth picked up speed during the last 3 years.

The situation regarding alcohol and drug abuse is more threatening in the regions including favourable geographic transit conditions. One of such places is the port city of Klaipeda. In the end of 1998 Klaipeda was chosen for implementation of the PHARE program TA to DDR project “Primary Drug prevention of Drug Demand within the Local Community”. According to this project the survey using the above ESPAD questionnaire was carried out in secondary schools in Klaipeda (1999).

SURVEY ON ALCOHOL AND OTHER DRUGS USE AMONG THE STUDENTS OF SECONDARY SCHOOLS OF KLAIPĖDA 1998



The number of respondents: 655 schoolchildren of grades 9 and 11. The survey among schoolchildren of grades 9 and 11 in secondary schools in Klaipeda demonstrate that harmful habits among the age group of 15-16 years and among the age group of 16-18 years are wide spread in this region: 35,1% of schoolchildren smoked on daily basis, even 96,8% used alcohol at least once, 65,9% of the teenagers had been drunk at least once. 38,7% of the schoolchildren indicated immoderate drinking dangerous to young people at that age. A problem of illicit drug abuse does exist. The data showed that 27,1 per cent of students of grade 11 used marihuana and hashish, 19,7 per cent or every fifth used illegal drugs, 10,9 used sedatives and 5,3 percent - inhalants. The diagram above demonstrates comparison of alcohol, tobacco and other drug abuse including the average in Europe, in the country and the survey results in Klaipeda.

As provided above, the survey results among respondents of grade 9 in Klaipeda look better than those for the same age group schoolchildren in Vilnius, though the survey results (many items) among respondents of grade 11 exceeds those of Vilnius and surpasses the European average determined in 1995. Alcohol is abused more (intoxication, hard drinking).

The European School Survey project on Alcohol and other Drugs - ESPAD 1999

In 1999, the ESPAD survey in Lithuania again was fulfilled by Pedagogic Institute. 5039 students aged 15-17 from secondary and vocational schools participated in the European School survey Project on Alcohol and other Drugs.

Structure of participants, ESPAD 1999

School	Number of Schools	Number of classes	Number of schoolchildren		
			Boys	Girls	All
Secondary	184	378	1949	2015	3964
Vocational	66	104	660	415	1075
All	250	482	2609	2430	5039

The data of survey on alcohol, tobacco and drug use among youth show that the drug problem among youth is more urgent in cities in Lithuania.

Comparison of the data ESPAD 1995 country level and the data ESPAD 1999 country level on alcohol, tobacco and other drug usage show that percentage of students who tried to smoke tobacco increased within 4 years. One third of them started to smoke at 11 years of age. Students in Vilnius and Klaipeda smoked more compared to the country level.

The data of survey show that boys smoke tobacco more than girls, relationship among tobacco usage, enjoyments, advancement, alcohol and other drugs usage were established. Data of survey ESPAD 99 show that all who practice smoking drugs without exception use tobacco.

The testing during the survey revealed that usage of alcohol beverages among youth is popular as a means of personal contacts and eventually develops into a lifestyle. Abstinence among schoolchildren aged 15-16 shares a little part (3,5% ESPAD 1995 and 2,5 % ESPAD 1999). One fourth of students indicated alcohol usage 40 and more times during their lifetime. In vocational schools it accounts for every third student.

Illegal drug usage (ESPAD 99)

ESPAD 1999 once more confirmed that illegal drug usage among schoolchildren has recently considerably increased, especially in large cities as Vilnius, Klaipeda. The table below shows the cases of usage of different drugs among schoolchildren in the country in 1995, 1999 and the cities of Vilnius, Klaipeda.

Usage of illegal drugs among students. ESPAD survey data 1995-1999 (%)

Survey	Sex	Name of drug							
		Marihuana /hashish	Ampheta mine	LSD	Ecstas y	Cocaine	Heroin	Crack	any kind
Country ESPAD 95	Boys	2,0	0,3	0,1	0,4	0,1	0,1	0,1	3,4
	Girls	1,2	0,3	0,1	0,4	0,6	0,2	0,1	2,7
	All	1,6	0,3	0,1	0,4	0,4	0,2	0,1	3,2
Country ESPAD 99	Boys	17.4	1.9	2.9	6.4	1.3	5.9	0.5	21.0
	Girls	6.1	1.0	0.7	2.3	0.8	3.6	0.1	9.6
	All	11.9	1.5	1.4	4.4	1.1	4.8	0.3	15.5
Vilnius 1998	Boys	28,7	8,2	8,7	13,0	-	1,1	2,3	30,2
	Girls	11,9	2,3	1,8	4,7	-	-	1,5	14,6
	All	19,8	4,5	5,1	8,3	-	0,5	1,8	22,7
Klaipeda 1999 Grade 9	Boys	23,1	3,1	4,6	3,1	-	1,5	-	27,7
	Girls	4,7	-	-	0,7	0,7	-	-	6,0
	All	13,3	1,4	2,2	1,8	0,4	0,7	-	16,1
Klaipeda 1999 Grade 11	Boys	31,7	3,1	3,7	9,3	2,5	4,3	3,1	37,3
	Girls	14,4	0,9	2,8	7,0	1,9	0,9	1,4	14,0
	All	27,1	1,9	3,2	8,0	2,1	2,4	2,1	23,9

The situation on drug usage among youth is obvious and dangerous. ESPAD survey 1999 revealed a new tendency on heroin smoking among schoolchildren including small regions. In comparison with 1995, usage of heroin increased from 0,2 to 4,8 percent. Usage of marihuana/hashish increased about 8 times. Usage of amphetamines, LSD, ecstasy increased too.

Usage of other psychoactive substances. ESPAD survey data 1995-1999 (%)

Survey	Name of psychoactive substance					
	Tranquilizer soporific			Inhalants		
	Sex			Sex		
	Boys	Girls	All	Boys	Girls	All
Country ESPAD 95	8,0	20,4	14,6	17,6	14,0	15,7
Country ESPAD 99	8,2	16,9	12,4	13,3	5,7	9,7
Vilnius 1998	12,4	37,3	23,6	17,2	7,5	12,0
Klaipeda 1999, form 9	10,8	16,1	13,6	20,0	6,0	12,5
Klaipeda 1999, form 11	6,2	14,4	10,9	6,8	4,2	5,3

In 1999, usage of psychoactive substances insignificantly decreased in comparison with 1995. The usage of inhalants is lower in 1999. However, tranquilizer and soporific usage was high among girls in Vilnius and usage of inhalants - high among schoolchildren of grade 9 in Klaipėda.

9.2. Problematic drug use prevalence

According to the data based on routine statistical analysis by the State Mental Health center, within the period from 1991 the number of addicts increased 6 times per 100.000 population (in 1991 - 15,3 cases per 100.000 population, in 1999 - 83,3 cases per 100.000 population), the level within the last two years increased from - 77,4 cases per 100.000 population in 1998, to - 83,3 cases per 100.000 population in 1999.

94% of all drug addicts are urban population and 6% are rural population; 19,1% of them - women and 80,9% - men.

According to the statistical data analysis (1999) the highest rate of prevalence of drug addiction was in the city of Visaginas - 462,9 per 100.000 population, i.e. 5,5 times exceeding the country level of 83,3 - per 100.000 population. The second highest rate of addiction was identified in the region town Birzai - 426,1 drug addiction cases per 100.000 population, i.e. 5,1 times exceeding the country level; in Klaipeda - 220,2 drug addiction cases per 100.000 population, i.e. 2,6 times exceeding the country level, Druskininkai is in the fourth place - 213,1 per 100.000.

9.3. Patterns and modes of drug use, characteristics of users (for drug consumption and prevalence)

Morbidity

Since 1997 the ICD-X including drug abuse classification is applicable in Lithuania.

According to the data by the State Mental Health Care Center at the health care institutions 3082 drug addiction cases were registered at the end of 1999, including 408 newly registered drug addiction cases during the last year, 201 were deleted from the list because 37 died, 131 – recovered and residence of 33 persons became unknown (departure). 83,3 drug addiction cases per 100.000 population accounted for in the country in 1999. In 1999 for different reasons 37 drug addicts died.

Morbidity with dependence disorders per 100.000 population according to ICD-10, 1997-1999 (data by the State Mental Health Care Center)

ICD-10	F10	F11	F12	F13	F14	F15	F16	F17	F18	F19	All
1997	2026,0	54,3	0,5	3,7	-	2,2	0,3	0,1	2,8	13,5	2103,4
1998	1927,4	53,8	0,7	3,5	0,03	2,2	0,2	0,2	4,0	12,9	2004,9
1999	1840,0	59,6	0,8	3,1	0,1	2,3	0,2	-	4,4	12,8	1923,3

71,5 % (2207) of the observed drug addicts use opiates (injections), multi-drugs - 15,3% (472) (injections), individuals who use cannabis preparations - 1% (28), amphetamines and other stimulants - 2,7% (84), hallucinogenic substances - 0,3% (9), psychotropic substances - 3,8 (117), even volatile substances, solvents - 5,2% (161,) cocaine - 0,1% (4) were registered.

The age of drug addicts in comparison with 1998 continues to be young, and drug abuse cases registered with health institutions distribute as follows: under 14 years – 0,6%, 15-19 years – 7,5%, 20–24 years – 24,5%, 25-35 years - 39,5, and 27,9 % of drug addicts are over 35 years of age.

9.4. New user groups, new drugs, new drug user patterns

According to data by treatment institutions drug profiles have been changing. The most of drug addicts are using home made heroin or poppy extract from poppy heads and poppy straw (“shirka” in slang), dried poppy straw is prepared in a simple manner with solvents, and the brown color solution is injected once or twice a day. 95,4% of drug addicts use opiates intravenously, 4,6 % - orally. IDUs use mixture of poppy extract with tranquilizers or antihistamines.

Traditionally psycho-stimulators, mainly “jeff” produced of medication containing ephedrine, like “Solutan”, ephedrine powder “Kristal” was used (up to ten injections a

day). In 1996 new amphetamine were introduced in the “black market” and is consumed by young people, aged 15-19, in tablets or intravenously as well as synthetic drugs (ecstasy, LSD). Among children, aged 9-14, sniffing of volatile substances (mainly glue) is popular. Smoking of marihuana, hashish increased significantly. Growing of plants for drug raw materials has increased much.

Pure heroin for smoking is a new drug that has been recently introduced in Lithuania, and consumption by young people increased leading to very fast addiction and intravenous usage eventually.

9.5. Health consequences and risk behaviour

2323 drug abuses were treated during 1999 year, including 400 who applied for the treatment institutions the first time.

According to doctors of the Vilnius University Children Mental Development Clinic and Vilnius Narcological Center, smokers and heroin users started to address the above institutions for anonymous help and advice more frequently. They are not on the register of medical institutions as drug addicts.

According to the decree by the Health Ministry of Lithuania all drug addicts must be checked for HIV infection one or two times a year. First HIV-infected intravenous opiates drug user was identified in Klaipeda in 1994.

At the end of 1999, 201 HIV positive cases were registered in Lithuania - 180 males and 21 females. Intravenous drug users account for 54,7 % of all registered. As of December 31, 1999, 28 AIDS cases were registered - 27 males and 1 female, including 2 IDUs. At the end of 1999 prevalence of HIV infected was 1,162 per 100.000 population (*data by the AIDS Center*).

HIV among IDUs in Lithuania 1994-1999 (data by the AIDS Center)

Year	1994	1995	1996	1997	1998	1999
All tested drug addicts	130	290	398	1072	1389	1953
HIV positive	1	1	4	22	37	45
HBV Tested/ Positive		9/0	46/3	47/15	199/15	382/16
HCV Tested /positive		9/9	46/46	47/32	199/159	382/235

95% of all drug addicts use drugs intravenously. Five syringe exchange programs were started in different places in the country to avoid risk is related to infection of HIV and hepatitis. At the same time information is provided regarding safe use of syringes.

In pharmacies disposable syringes are available but the infection risk arises due to the fact that the drug addicts mainly use home made drugs taking it from one container and have a habit of using drugs – to share one needle. The AIDS risk also arises from the neighbouring regions - the Kaliningrad region, Belarus.

As risk behaviour of volatile substances may be considered snuffers which use a plastic bag on the head led to a few death cases among children during last years in Klaipeda, Trakai, Vilnius.

According to the data by State Mental Health Center in 1999, 37 drug addicts died: suicides - 1, accidents - 4, infectious diseases - 4, somatic diseases - 1, overdose - 4, uncertain reasons - 22 cases.

Death caused by drug abuse 1998-1999 (final data by the State Statistical Department)

Age	1998			1999		
	Male	Female	Total	Male	Female	Total
Under 15	-	-	-	-	-	-
15-19	-	-	-	2	2	4
20-24	2	3	5	7	1	8
25-29	3	1	4	8	2	10
30-34	3	2	5	4	-	4
35-39	7	2	9	4	2	6
40-44	2	1	3	3	-	3
45-49	5	-	5	2	-	2
50-54	-	-	-	-	-	-
55 and older	1	-	1	-	-	-
Unknown	-	-	-	-	-	-
Total	23	9	32	30	7	37
From them:						
F11	9	3	12	4	3	7
F19	3	2	5	8	-	8
X42	5	3	8	14	2	16
X62	2	-	2	4	2	6
Y12	4	1	5	-	-	-

9.6. Legal consequences

According to the Ministry of Interior within the last years the situation in terms of drugs worsened fiercely. In 1999 the level of criminal offence (701) related to drugs increased 9 times compared to the level of 1990 (76). In 1999 there were registered 701 criminal offences related to drugs i.e. 12% more than in 1998 (629).

Illicit narcotic drug trafficking, production, possession, acquisition, transportation, shipment and trade in illicit drugs predominate among criminal offence cases, in Vilnius the stable drug trade network exists.

Drug addicts committed 207 offences (1998 - 213) or every fourth offence. 53 offences were committed by intoxicated drug addicts. Every third person who committed offence had already been delinquent earlier.

253 drug offences were performed by persons who had been prisoners. Persons who neither worked nor studied committed 343 offences or every second offence. 19 criminal offence cases were committed by teenagers (18 in 1998).

Male offenders accounted for 74%, female ones - 26%. 255 offences related to drugs, i.e. 40% were committed in the capital city of Vilnius. 693 persons were applied to penal provisions (Penal Code, 232¹)

Drug related crimes (data by the Ministry of Interior)

Year	1994	1995	1996	1997	1998	1999
Drug related crime Registered	334	395	511	630	629	701
Solved crimes committed by drug addicts	235	215	382	502	881	735
% of total solved crimes	1.0	0.9	1.4	1.4	1.6	2,3
Crimes committed by individuals under the influence of drugs	82	94	82	91	91	5,3
% of total solved crimes	0.4	0.4	0.4	0.4	0.4	0,2

In 1999, in Lithuania 12 foreigners (8 in 1998) from Russia, Latvia, Azerbaijan, Korea were arrested.

In 1999, 173 drug dealers were arrested, including 6 foreigners, 30 women, 8 teenagers.

According to the data of the Public Police Prevention Service executed complex measures "Aguona" (*Poppy*) in summer 1999 (legal basis: Decree No.390 by the Minister of Interior) during which more than 300 raids together with the other police divisions in different regions and cities were organized with aim to prevent illicit drug trafficking and destroy drug raw crops, discover dens and other activities related to illicit drugs.

During two months:

- destroyed 33679 sq.m poppy fields and 1842 sq. m. cannabis crops;
- established 219 persons (1998 - 148) who intoxicated with narcotic drugs or psychotropic substances committed administrative violations including 27 under-aged (15 in 1998), mainly (15) in the seaside region Kretinga;
- for the administrative violations related to narcotic drugs administrative penalties were applied to 4503 individuals (3037 in 1998, including 18 teenagers);
- in compliance with article 44 of the Administrative Code ("illegal drug acquisition and storage of small quantities and usage without prescription") administrative penalties were applied to 353 persons including 8 teenagers (200 persons including 18 teenagers in 1998); most such violations were performed in the biggest cities Vilnius - 93, Kaunas - 23, Klaipeda - 22 and Siauliai - 18;
- according to the Administrative Code, article 44¹ (Illegal pharmaceutical activity) administrative penalties were applied to 12 persons;
- according to the Administrative Code, article 107 (Illicit growing of drug raw material) administrative penalties were applied to 4224 persons in 1999, 2836 persons were persecuted legally in 1998, the number of such persons was 49 % more compared to 1998.

During the raids and operations also were established: 129 drug dealers, 740 drug users including 13 under-aged, 90 under-aged who were intoxicated with drugs, the most of them in the biggest cities; 94 dens where narcotic drugs were used, mainly in Kaunas, Klaipeda; 291 persons who kept or carried drug raw materials or narcotic drugs.

During the operation were seized: 326.736g of poppy straw, 15.723g of cannabis, 109.846g prepared drugs from plants; 577g of synthetic drugs.

The above actions were taken by the police, transport services, criminal police, organized crime investigation police service Narcotic Drugs Investigation Division (Anti-drug unit), border police, municipal police.

9.7. Drug markets (supply and availability, market indicators)

In 1999, 33.697 sq. m. of poppy fields (in 1998, 35.006 sq.m) and 1842 sq.m of cannabis fields were destroyed. In 1998 were destroyed. 511,5 sq.m cannabis fields. In 1999 was destroyed 3,6 times more cannabis than in 1998. The cannabis has been becoming more popular among users and growing of cannabis has increased.

In 1997-1999 the following drugs were withdrawn from the illicit trafficking (data by the Ministry of Interior)

No.	Name of drug	Seized in 1997 Quantities	Seized in 1998 Quantities	seized in 1999 quantities
1.	Opioides			
1.1.	Poppy heads and straw	1291kg	1525 kg	744 kg
1.2.	Opium extract	86,04 l	49.49 l	190 l + 190 g.
1.3.	Opium	236 gr.	101,3 gr.	35,9 g.
1.4.	Acetylopium	16,461	182,38 gr.	-
1.5.	Heroin	89,3 gr.	422,62 gr.	923 g.
1.6.	Methadone	252 pills, 10 ml, 0,34 gr.	13 pills 0,04 gr.	-
1.7.	Monoacetylmorphi	4,41 gr.	-	-
2.	Cannabis			
2.1.	Marihuana	8 kg. 63 gr.	30 kg. 357 gr.	25 kg 667 g.
2.2.	Hashish	78,4 gr.	3 kg 780 gr.	1 kg 54 g
3.	Cocaine	2 kg 49 gr.	10 kg 780 gr.	275 g.
4.	Psychotropic substances			
4.1.	Amphetamine	171 gr. 5641 pills	12,84 gr. 142 pills	77,5 g.+2276 tab.
4.2.	Ecstasy	1641 pills	831 pills	1122 tab
4.3.	Ephedronum	1348 ml.	994,9 ml.	486 ml
4.4.	Phencyclidine (PCP)	2,21 gr.	-	-
4.5.	LSD	2 marks	342 marks	164 marks
4.6.	Relanium	123 amp	671 amp.	580 amp.
4.7.	Rodedorm (nitrazepam)	143 pill.	566 pills	-
4.8.	Oksazepam	-	43	-
4.9.	Ephedrine			8860 g.

**Quantity and number of seizures per drug 1996-1999
(data by the Ministry of Interior)**

	1996		1997		1998		1999	
	Numbe r	Quantity	Numbe r	Quantity	Numbe r	Quantity	Number	Quantity
Cannabis	5	0,826 kg	13	8,63 kg	45	30,357 kg	70	25,667 kg
Cocaine	2	1,056 kg	2	2,049 kg	11	10,133 kg	16	0,275 kg
Heroine	-	-	2	0,089 kg	6	0,423 kg	34	0,923 kg
Ecstasy	6	56 tab.	3	1641 tab.	10	831 tab.	22	1122 tab.

Ampheta mines	2	0,054 kg	8	0,171 kg 5641 tab.	12	0,013 kg 142 tab.	29	0,077 kg 2276 tab.
LSD	-		2	2	19	342	9	164

Average "street" prices of drugs (USD 1 equals to 4 Litas)

Name of drug	1998	1999
Poppy heads and straw (1 glass)	From 2 to 20 Litas	from 4 to 30 Litas
Opium extract (ml)	4 to 10 Litas/ml	4 to 15 Litas/ml
Marihuana (g)	20 to 60 Litas/g	15-60 Litas/g
Hashish (g)	60 Litas/g	50-60 Litas/g
Amphetamine (tab)	30-40 Litas/tab.	16-40 Litas/tab.
Amphetamine (g)	120 Litas/g	80-100 Litas/g
Ecstasy (tab)	40-60 Litas/tab.	25-60 Litas/tab.
LSD (unit)	50-60 Litas	30-50 Litas
Heroin (g)	600-1000 Litas/g	200-350 Litas/g
Heroin (1 dose = 0,015 g)	60 Litas/dose	30-40 Litas/dose
Cocaine (g)	360-400 Litas/g	240-350 Litas/g

The prices vary in relation to the quantity and each seller. Earlier the sellers were more specialized and dealing with one brand of drugs while at present the same sellers retail different drugs. The sellers act in discotheques and other entertainment places, bars, streets etc. Last year prices decreased. The most expensive drug remains cocaine, and most stabile price stay for LSD, PCP is very expensive - one gram costs about USD 220 or 880 Litas. The prices are decreasing because the market is replete or aims at more consumers. Decreasing of prices was noticed half a year ago. Higher prices of drugs are in the city of Vilnius.

Illicit drug transportation

Lithuania, being situated in the center of Europe, has become a transit route from East to West including that of illicit drug trafficking from Eastern to Western Europe and due to Lithuania's favourable geographical location, the developed road network, sea and air routes. More than 14.000 of different transport and tourism companies are registered in Lithuania.

According to the data of the Ministry of Interior, from the East the poppy straw and heads, opium, heroin, marihuana, hashish, ephedrine hydrochloride are introduced to Lithuania. The usual way is transportation of drugs by train from the Russian Federation to the Kaliningrad region. This way is used for transportation of drugs from Kazakhstan, Kirghizastan, Azerbaijan, Tadjikistan and Afghanistan, Pakistan, and Turkey, by car drugs are transported from Ukraine to Kaliningrad.

Another direction of transportation of drugs may be mentioned as follows: from Ukraine through Belarus, Lithuania, Latvia, Estonia towards St. Petersburg. A heroin laboratory existing in Ukraine form a threatening situation because the heroin could be transported via Lithuania to Scandinavian countries.

A staging post on international routes (OGD report No.96, 1999)

Transit trafficking is developing in Lithuania. To the south west, the Russian enclave Kaliningrad is a regional drug-trafficking hub, and this has an impact on Lithuania. Poppy straw, opium, heroin and cannabis products are shipped to Kaliningrad from Afghanistan and Central Asia via Russia. Drugs from the Ukraine are transited via Belarus, Lithuania (the two countries have 720 km of common border, some parts has not been precisely defined) and the Baltic Countries. The Lithuanian Police have information suggesting that heroin manufactured in Ukraine could transit Lithuania on its way to Denmark. After reaching Lithuania, and especially its ports on the Baltic sea, drugs are shipped in various directions including Saint Petersburg, Russia, Scandinavia and Western Europe. To the south border with Poland, a major amphetamine producer, and the port of Klaipeda are the main points of entry for substances as cocaine, amphetamine, ecstasy, LSD, Ephedrine and cannabis derivatives shipped from Poland, Germany, the Netherlands and the United Kingdom.

Usually light is shed on Lithuanian's role as a transit country as a result of investigations or trials carried out in other countries. In 1997, 30 Lithuanians were arrested in different countries for drug related activities, including three people in the UK, each with a kilo cocaine. In Scandinavia Lithuanians are mostly involved in amphetamine products, while in Ukraine they specialize in ephedrine - the main ingredient in amphetamine. In September - October 1998, a monitored delivery of 52 kg of cocaine was carried out by Russian police in a joint operation with counterparts in Lithuania, Britain, Germany and Poland. The cocaine shipped from Bahamas was concealed in an engine compartment of a cargo ship which made a stop in Lithuania. The trial of 12 people, including 8 Lithuanian's, involved in the seize of 12 metric tons of Afghan hashish from the MS *Kvedarna* of Klaipeda, belonging to a company in Klaipeda, Lithuanian's main port on the Baltic Sea, opened in Denmark in August 1999. This case suggests that in Lithuania as elsewhere drug trafficking networks can be linked to legitimate business (*OGD special envoy in Lithuania*).

9.8. Social problems linked to drugs

Dependence disorders centers reported about great difficulties concerning the integration of drug addicts into the job. The drug addicts are very satisfied after the treatment to receive any job, but only about 15 are working in the outreach programs and could be paid according to the program.

The Law on Narcological Care includes provisions on social support for addicts and reintegration to the society and occupation but till now these provisions are not being implemented. About 90% of drug addicts don't work and have no constant means of subsistence. The prices of drugs show permanently increasing demand for drug addicts to get money to buy drugs by illegal and criminal way, some female drug addicts earn on drugs by prostitution.

Solved crimes committed by drug addicts since 1990 (30 cases) to 1998 (881 cases) increased 29 times (Ref.1). Criminal offence related to drugs constantly increase (see chapter 9.6.). ESPAD survey data 1999 elucidated (anonymous) delinquent behaviour among schoolchildren related to drug use/intoxication.

9.9. Geographical/regional differences in trends in indicators

94% of all drug addicts are registered in cities and only 4% in rural areas. According to epidemiological surveys ESPAD data on drugs, the biggest drug problem is in the principle cities - Vilnius (capital) and Klaipeda (sea-port). Data of epidemiological

survey among students show that usage of cannabis increased in Klaipeda 17 times, in Vilnius 12 times, also usage of other drugs here is higher than the country level. According to the data of the State Mental Health Care Center, one third of all drug users of the country are registered in the Vilnius Narcological Center (1091). According to data of the Ministry of Interior 40% all drug related crimes from all drug related crimes in country (701) were committed in Vilnius in 1999. Street prices on drugs are stable in Vilnius.

The second very problematic city on drugs is Klaipeda. Drug addiction prevalence is 220,2 per 100.000 population, i.e. 2,4 times exceeds the country level. Klaipeda is also a hot spot because of HIV positive cases among the intravenous drug users, for the first time exposed in this city in 1994. Klaipeda is very closely to Kaliningrad region (Russian enclave) where HIV positive cases among drug users are extremely widely spread. Two synthetic drug laboratories were disclosed near Klaipeda in 1999.

According to statistical data analysis in 1999, the highest rate of prevalence of drug addiction was in Visaginas - 462,9 per 100.000 population, i.e. 5,5 times exceeding the country level (83,3 per 100.000 population). This city is known in Europe because Ignalina Nuclear Power Station. The second highest rate of prevalence of drug addiction was established in Birzai region (northern Lithuania).

Growing of drug raw materials are widely known in rural places southern and northern Lithuania. The poppy straw market is related with neighbouring countries. According to the ESPAD data heroin became popular in the countryside.

9.10. Risk and protective factors (individual and population level)

Difficulties of the transitional period, vivid social differentiation, changing of values forces individuals to adjust to the new environment, and sudden changes that opened perspective for many people arouse chaos among those who failed to adjust themselves to the new environment. People in rural areas found themselves in the most complicated situation, having lost the only income source and hope in the future. The statistical data demonstrate that currently the suicide rate in Lithuanian rural areas among different age groups exceeds 2-2,5 times the urban rate. In rural areas production and consumption of home-made alcohol ("moonlight") has been increasing.

The family mode of life, value orientation, behaviour changed. Unfortunately, the family role in the socialization process has been reducing:

- The number of divorces and single parent families increased;
- Many families with young children nearly approached the poverty line;
- Parents more attention pay to work, career instead of communication with children and their education. Children do not get necessary psychological support and help in their families;
- In Lithuania the number of delinquent families who abuse alcohol and neglect their children is high; children suffer from psychological, physical or even sexual abuse;
- The number of stray and homeless children is growing up.

The country's reforms affected youth, and according to the sociological investigation (Ref. 20) a part of young people cannot find their place in the changed world, they do not believe in the future, and the following problems arise:

- Behaviour problems (criminality, delinquent behaviour, substance abuse);
- Learning problems (poor progress at school, non-attendance, etc.);
- Mental health problems (unrest, depression, suicide, etc.).

The psychological help network for youth including different youth organisations is under development in Lithuania, mainly in major cities. However, professional help to young substance abusers is insufficient.

Among young people the Western lifestyle and culture through TV, advertising, music and fashions has been becoming more and more popular. To numerous young people the Western lifestyle is associated with the absolute right to choose one's lifestyle, behaviour, and at the same time it means ignorance of behaviour and moral standards. Young people admire drug legalization and liberalization promoted in some Western Europe countries. This information is distributed through the Internet and some national dailies. The approach of liberty to choose drugs becomes more popular. The forecast estimates drug abuse increase in the future.

The society does not have sufficient information about drug abuse harm. Prevention measures in schools are short- term, episodic and insufficiently efficient. Among schoolchildren drug myths are spread around, schoolchildren know little about drug abuse harm and no drug education is organized among parents. Brochures, posters, leaflets about drugs are issued rarely, with a limited number of copies.

Alcohol and drug abuse among teenagers and young people causes criminal actions as substance abusers need money. Children are involved in criminal groups of adults, illicit drug trafficking, abused sexually, prostitution increases. Teenagers and young people comprise the major risk group.

The situation of drug use in the risk group includes teenagers and youth who do not attend schools and don't work has been unexplored.

Evaluation of youth problems by young people (State Council of Youth Affairs)

In 1997 the sociological survey was carried out to find out views by young people on social and economic situation in our country, initiative by the youth, future plans, etc.

The existing political, economic and social situation in Lithuania as more favorable was viewed upon by 32% of the respondents; not as favorable as before – by 14%, less favorable – by 38%. Thus among young people the opinion prevails that the existing situation in Lithuania is less favorable compared to five years ago.

The reasons due to which the existing situation is less favourable to young people include (%):

Difficult to find job, unemployment	38
Insufficient attention paid to young people by the state, absence of social guarantees	17
Unfavourable economic situation	15
Higher poverty	12
Difficult to join and graduate a higher school	6
Slight possibilities for young people to express themselves	4
Not everyone may study	4
No chance to acquire housing	3
Low remuneration	2
More difficult to get a job complying with one's profession	2
Prospering of corruption, bribing	2
Parents don't take care of their children	1
Youth does not have guidelines for activities	1
More difficult to earn	1

Young people are most concerned about finding jobs. Lithuanian youth lacks the state policy regarding young people. In the view of young people, no social policy for youth has been established. Young people think that unfavourable conditions for young people is due to the existing situation in Lithuania that strengthens the insecurity feeling within the society.

According to young people the most urgent issues in Lithuania are as follows (%):

Decreasing standard of living	67
Criminality	67
Unemployment	61
Corruption of civil servants	21
Inflation	15
Weakening of moral standards in the society	12
Environment pollution	11
Violation of human rights	11
Disagreement between different political parties	8.6
Increased influence of Western culture	5.5
Decrease of production investments	5.3
Worsening of relations with foreign countries	1.9
Conflicts among nations	0.7

According to young people the most important issues in the Lithuanian society are those that are directly related to economic, physical and psychological security of a person.

Young people are different and different life areas are equally important for them.

Different areas and issues important to young people (%)

Area	Very important	Important	Not very important	Absolutely not important
Policy	4	44	42	9.2
Welfare	41	53	5.3	0.4
Leisure	39	56	4.8	0.2
Employment	46	47	6.8	0.4
Education	44	46	10	0.2
Religion	7.2	36	47	9.4
Friends, acquaintances	36	58	5.1	0
Studies	31	50	18	1.3
Family	48	45	6.0	0.3

9.11. Social process and cultural context (possible impact on trends)

Among the persons consuming drugs a four social groups may be distinguished in particular. The biggest risk group includes urban young people, aged 15-25, that relate consumption of drugs and relaxation in spare time, fashion, musical culture, that attend discotheques and use the stimulators as experimenting with drugs; they are from well-to-do families, study or work, are not involved in criminal activities and don't consider consumption of drugs to be dangerous or risky.

Another group can be distinguished including schoolchildren sniffing volatile substances. Mainly these are teenagers from poor and disintegrated families, with parents abusing alcohol. These children can be easily influenced by the criminal circles.

The third group includes persons dependent on drugs, half of them had been imprisoned or had committed some legal violations. The group of a social minority the community in Vilnius is a specific risk group with such distinguished features as illiteracy, unemployment, isolation from the society.

Out of 240 members of the gypsy camp in Vilnius, 50 inject opiates, they avoid changing their lifestyle leading to high risk for AIDS infection. Special program for the gypsy community social integration and drug prevention has been prepared by Department of Social Minorities at the Lithuanian Government.

9.12. Attitudes and public opinion

Views by youth upon drugs and drug use

In 1998, based on the request by the Educational Department of the Municipality of Vilnius the survey Schoolchildren and Drugs in secondary schools in Vilnius (Ref. 19) was carried out. The objective was both to investigate peculiarities of intoxication substance abuse, views upon intoxication and application of prevention measures in schools.

The answers by the schoolchildren why young people use drugs were as follows:

1. Out of curiosity (46,8% boys; 51,9% girls).
2. Want to feel pleasure (44,1% boys; 29% girls).
3. Want to relax (35,1% boys; 26,3% girls).
4. Want to follow their friends (32,8% boys; 36,4% girls).
5. Want to feel oblivion (25% boys; 39,4% girls).
6. In fashion (11,6% boys; 14,8% girls).

The answers by boys and girls are rather similar. However, the girls indicated willingness to follow their friends in the second place. Different answers were provided to this question by different age groups though curiosity remained in the first place. If the wish to relax was indicated by 27,3% of the 8th grade schoolchildren and the wish to follow their friends – by 5,7%, the answers provided by the 12th grade schoolchildren – 35,8% and 30,6% respectively.

Aiming at finding views upon drugs by schoolchildren certain statements were provided to them to answer whether they agree or disagree.

Views upon drugs and problems related to them by schoolchildren (%)

Statement	Agree	Disagree
Light drugs should be legalized	41	56,9
Use of drugs is a personal matter of an individual	74,8	23,9
Drug addicts should be strictly punished	44,4	53,4
Addiction is not caused by using one or few times	34,4	62,7
Grass smoking is absolutely not harmful	19	78,9
Light drugs are better than alcohol abuse	22,3	73,9
Drug abuse is always related to criminal activities	44,8	52,5
Only drugs provide full relaxation	13,7	84,4
Only cowards do not try drugs	4,1	94,3
Drug dealers should be strictly punished	82,1	16,2

Drugs may extend learning challenges	28,3	68,7
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The above results provide contradictory views upon many issues by the schoolchildren. This fact demonstrates that schoolchildren lack knowledge about drugs, their impact on human organism and abuse consequences. Even 34,4% of the schoolchildren think that addiction is not caused by using one or few times, and 19% - that grass smoking is absolutely not harmful. Views by the boys are more liberal – the greater number of them support legalization of drugs, are against stricter punishment to drug dealers and think that use of drugs is a personal matter of an individual. Views by the different age groups differ too. Views by the 8th grade schoolchildren are stricter: 65,1% support punishment to drug addicts (compare: 30,5% of the 12th grade schoolchildren); 63,4% of the lower grade schoolchildren and 32,4% of the 12th grade schoolchildren think that drug abuse is always related to criminal activities. Younger schoolchildren's knowledge about drugs are poorer. 21,9% of the 8th grade schoolchildren think that only drugs provide full relaxation (the 12th grade schoolchildren – only 9%); 7,1% think that only cowards do not try drugs (the 12th grade schoolchildren – 2%), and 35,7% think that drugs may extend learning challenges (the 12th grade schoolchildren – 25,1%).

The survey showed that more liberal views and poorer knowledge about drugs and their impact is by the schoolchildren who are worse learners: 47% speak in favor of drug legalization, 70,1% – for punishment of drug dealers. The brilliant students provide answers respectively 38,2% and 87,8%. 43,3% of the worse learners and 23,3% of the brilliant students think that addiction is not caused by using one or few times. Even 34,3% of the worse learners and only 8,7% of the brilliant students think that grass smoking is absolutely not harmful.

However, different views are related to different experience by the schoolchildren. Views by the schoolchildren who use drugs are more liberal: 71,2% speak in favor of drug legalization, 88,3% think that use of drugs is a personal matter of an individual. More schoolchildren who use drugs think that drug use is not harmful. 55,5% of schoolchildren who use drugs think that addiction may not be caused by using drugs one or more times (compare: 30,5% of non-users); 46,2% - that grass smoking is absolutely not harmful (compare: 12,9% of non-users). 40,9% of schoolchildren who use drugs think that drugs are better than alcohol abuse (compare: 81,2% of drug non-users disagree with this statement).

Sources of knowledge about drugs by schoolchildren were identified. The main information source is the TV (61,7% of the boys and 59,6% of the girls), in the second place - friends for the boys (52,1%) and press – for the girls (49,5%). In the third place press was for the boys (42,5 %) and friends – for the girls (47,6%). Unfortunately, information about drugs is obtained from teachers rarely, and this information source was indicated by 11,8% of the girls and 10,1% of the boys. Information sources change with different age groups as demonstrated in the below Table.

Sources of information about drugs for different age schoolchildren (%)

Grade	Press	TV	Radio	Friends	Clubs, discotheques	Teachers	Other
VIII	45,5	70,7	5,8	34,4	15,1	13,4	15,1
IX	47,9	71,3	3,6	41,4	9,0	13,1	14,1
X	45,6	57,9	1,7	52,4	14,9	12,6	14,9
XI	44,5	53,0	1,6	56,0	17,1	10,3	17,5
XII	47,1	49,0	1,6	65,0	17,2	5,5	13,8

The information provided shows that schoolchildren of the 8th-12th grades are less influenced by the TV programs, and more information is obtained from friends, at clubs, discotheques. Unfortunately, the role of teachers to provide knowledge about drugs has been decreasing. Information sources by worse learners and good students differ. The brilliant and good students obtain information from the TV and press while the worse learners – from friends (63,3% of the worse learners indicated this source). The schoolchildren who use drugs get mostly information from their friends (even 82%), 32,3% of the schoolchildren who use drugs get this information at clubs and discotheques.

10. TRENDS PER DRUG

10.1. Cannabis

Survey ESPAD data

According to the data of ESPAD survey in Lithuania from 1995 and 1999 the usage of cannabis preparation (marihuana, hashish) among 16-17 year students increased 8 times at the country level, 12 times in Vilnius, 17 times in Klaipeda.

Use of marihuana and hashish among students. ESPAD survey data 1995-1999 (%)

Survey	Country ESPAD 1995	Country ESPAD1999	Vilnius 1998	Klaipeda grade 9 1999	Klaipeda grade 11 1999
boys	2,0	17,4	28,7	23,1	31,7
girls	1,2	6,1	11,9	4,7	14,4
all	1,6	11,9	19,8	13,3	27,1

Register

In the medical register cannabis users account for about 1%. In 1997, 20 or 0,7 % of cannabis addicts out of 2871 persons was registered, in 1998 among - 35 persons (1,2 %) out of 2862, in 1999 28 persons (0,9%) cannabis users were registered out of 3082.

According to the Law On Control of Narcotic Drugs and Psychotropic Substances (No.VIII-602; 1998) cultivation of cannabis in Lithuania is prohibited. In the List of Narcotic Drugs and psychotropic substances adopted by the Ministry of Health cannabis are included in schedule I as narcotic drug. To use substances of schedule I for medical purposes is prohibited.

Destroyed cannabis fields in sq. m. in Lithuania 1994-1999 (data of the Ministry of Interior)

Year	1994	1995	1996	1997	1998	1999
Destroyed sq. Meters	496	1061	722	290	511	1842

Dynamics of quantity of seized cannabis (data of the Ministry of Interior)

Year	1994	1995	1996	1997	1998	1999
Marihuana	27 kg 312g	1 kg 473g	0 kg 825g	8 kg 063g	30 kg 357g	25 kg 667g

Hashish			0 kg 248,5g	0 kg 78g	3 kg 780g	1 kg 54g
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Cannabis street prices (Litas/g) (data of the Ministry of Interior)

Year	1998	1999
Marihuana (g)	20-60 LTL (USD 5-15)	15-60 LTL (USD 4-15)
Hashish (g)	60 LTL (USD 15)	50-60 LTL (USD 12,5-15)

For last two years cannabis is very popular local because of its low price. Local cannabis price is three times lower than that delivered from abroad. Cannabis is also introduced to Lithuania from other eastern and western countries. Lithuanian people are engaged in trade of cannabis not only in the country but also abroad.

Illegal advertising regarding legalization of cannabis in Lithuania, conditions of growing these plants may be found on Internet in the Lithuanian language.

10.2. Synthetic drugs (amphetamine, ecstasy, LSD)

Synthetic drugs remain popular among youth and are used during leisure time in entertainment places, discotheques. The use of marijuana, ecstasy, LSD and amphetamines is often considered an integral part of the alternative youth subculture. Synthetic drugs cost approximately 30-60 LTL (USD 7,5-15) for the single dose, and are often accessible to young people from families with average income.

The illegal delivering of drugs existed among youth in entertainment places. Drugs are delivered even in schools. Official number of usage synthetic drugs among youth is unknown.

The data of ESPAD survey among 15-16 year students show that the usage of the synthetic drugs in 1999, compared to ESPAD survey data of 1995, increased in the country, and particularly in the big cities, mostly in Vilnius.

Usage of synthetic drugs (amphetamine, ecstasy, LSD among students). ESPAD survey data 1995-1999 (%)

Drug name	Sex	Country ESPAD 1995	Country ESPAD 1999	Vilnius capital 1998	Klaipeda 1999 Grade 9	Klaipeda 1999 Grade 11
Amphetamine	Boys	0,3	1,9	8,2	3,1	3,1
	Girls	0,3	1,0	2,3	-	0,9
	Total	0,3	1,5	4,5	1,4	1,9
Ecstasy	Boys	0,4	6,4	13,0	3,1	9,3
	Girls	0,4	2,3	4,7	0,7	7,0
	Total	0,4	4,4	8,3	1,8	8,0
LSD	Boys	0,1	2,9	8,7	4,6	3,7
	Girls	0,1	0,7	1,8	-	2,8

	Total	0,1	1,4	5,1	2,2	3,2
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Register of addicts on stimulants and hallucinogens

According to the data of State Mental Health Care Center in 1999, at the health care institutions 84 patients (2,7 % of all addicts) were registered as users of stimulants and 9 patients (0,3%) as users of hallucinogens (staying on the same level as in 1998).

Amphetamines, ecstasy, and LSD are listed in the I schedule of the List of Narcotic Drugs and Psychotropic substances, their usage for the medical purposes as well as import of amphetamines to country are prohibited.

Illicit trafficking

According to the data of Ministry of Interior the illegal trade on synthetic drugs is increasing. In 1997, a laboratory of illegal production of amphetamines was exposed for the first time; in 1999, another illegal laboratory was exposed in a small village in the Klaipeda County; in 2000, two laboratories was exposed one in Kelme and a huge, very well equipped one in Kaunas. Trade of illegal synthetic drugs is very active near schools, particularly in Vilnius. Teenagers younger than 16 years are involved in trade of synthetic drugs and that they can not be subject to the Penal Code art. 232¹⁻¹⁰. In 1999, 9 teenagers were retained as distributors of synthetic drugs (*data of the Ministry of Interior*).

Dynamics of quantity of seized synthetic drugs 1996-1999 (data by the Ministry of Interior)

Drugs name	1996	1997	1998	1999
Amphetamine	54 g.	171 g. + 5641 tab.	12,84g. + 142 tab.	77,6 g. + 2297 tab.
Ecstasy	56 tab.	1,641 tab.	831 tab.	1122 tab.
LSD (units)	0	2	342	164
Ephedrone (ml)*	1,035	1,348	994,9	486

*"Ephedrone" (or pervitine) belongs to the amphetamine group, was made under primitive conditions from medications containing ephedrine (and from illegally imported ephedrine). In 1999, 8860g of ephedrine were seized.

Street prices of synthetic drugs 1998-1999 (data by the Ministry of Interior)

Name of drug	Price in Litass in 1998	Price in Litass in 1999
Amphetamines (tab).	30-40	16-40
Amphetamines (g)	120	80-100
Ecstasy (tab.)	40-60	25-60
LSD (platelet)	50-60	30-50

The prices of synthetic drugs decreased during last year.

According to *OGD article data*: "In Lithuania like in West synthetic drugs such as amphetamine, ecstasy (USD 4,50 - 6,50) and more rarely LSD are used mainly by young people and mostly at night clubs. Retail distribution of these substances is a still very much an informal affair. University students from large cities sell drugs in small towns in order to bankroll their own consumption. Prostitutes and taxi drivers also sell drugs".

10.3. Heroin/opiates

Intravenous opium extract is produced under home conditions from local poppies-heads and straw. This substance usually is manufactured by drug dependent individuals: dried poppy straw is prepared in a simple manner with solvents. However, in less than ten years the consumption of “*shirka*”, crude form a heroin manufactured poppy “straw” (in fact, from the fresh stems and bulbs of the poppy plant, which is akin to the “*kompot*” used by Polish addicts, has reach epidemic level). The drug is manufactured by boiling the “straw” in a large pot with adding acetic anhydride to the decoction. Opium extracts derived from poppy straw remain the most predominant intravenous narcotics.

However, brown sugar heroin has recently become available in Lithuania and usage among youth has been increasing (data of survey and observation of professionals based on applying for medical advice). According to data by Vilnius police and mass media information heroin is becoming more popular among youth. According to the municipal police of Vilnius, the most widespread way of consumption is smoking: it is rolled in common paper like a cigarette, a small heroin dose is put on aluminum film, one person keeps it in the hands and heroin is heated from the bottom, while a user inhales the steam. For youth, this way of drug usage is very attractive as being safe against AIDS, and the first attempt often is free of charge. According to the survey data heroin usage increased from 0,2% (1995) to 4,8% (1999).

ESPAD survey data among 15-16 year students 1995-1999 (%)

Drug name	Sex	Country ESPAD 1995	Country ESPAD 1999	Vilnius Capital 1998	Klaipeda 1999 Grade 9	Klaipeda 1999 Grade 11
Heroin	Boys	0,1	5,9	1,1	1,5	4,3
	Girls	0,2	3,6	-	-	0,9
	Total	0,2	4,8	0,5	0,7	2,4

Medical Register of opiate users

According to the State Mental Health Care department in 1999 addicts to opiates accounted for 71,6% (2207 persons) from all registered drug users (3082). They all used drugs intravenously. 15,3 % (472 persons) used different drugs including usual opiate.

The Law on Control of Narcotic Drugs and Psychotropic Substances (1998) prohibited all poppy cultivation in Lithuania. Poppy straw is included in schedule I of List of Narcotic Drugs and Psychotropic substances and prohibited to use for medical purpose.

Illicit trafficking

Growing of poppies in Lithuania is prohibited by law and controlled by relevant institutions, and subsequently the fields of poppies are destroyed each summer in order to limit drug supply. However, the dynamics of confiscated poppies indicates that their production is still prevalent in Lithuania.

Destroyed poppy fields in thous. sq.m in Lithuania in 1994-1999 (data by the Ministry of Interior)

Year	1994	1995	1996	1997	1998	1999
Poppy	50,312	81,152	101,589	58,729	35,006	33,697

Dynamics of quantity of seized opiates (data by the Ministry of Interior)

Year	1996	1997	1998	1999
Poppy straw in kg	1652	1391	1525	744
Opium extract liters and grams	96,09 liters	86,04 liters	77 liters + 527g.	190 liters + 190g
Opium in grams	277,5	236.	101,3	35,9
Heroin in grams	0	89,3	422,65	923

The magnitude of police seizures every year of poppy “straw” and “*shirka*” confirms that it is the most popular drug among the drug users in Lithuania. “*Shirka*’s” low price is very attractive to poor groups of the society.

Data from OGD: Recently brown sugar heroin from the Golden Crescent has become available in Lithuania, as is shown by the seizure. In Vilnius, brown sugar is sold in gas stations, on Pilies street in the old town and in several Mc.Donald’s restaurants. Petty dealers are usually working for a “*diedushka*” (‘grandfather’). The OGD special envoy had difficulty gathering information on these people. The use of imported brown sugar has been spreading fast, especially among young people.

The preferred form of intake is smoking, which, users say, reduces the addictive power of the drug and helps to fight spreading of AIDS. Nevertheless, very shortly they start to use heroin intravenously.

Street prices of opiate drugs (data by the Ministry of Interior)

Name of drug	Price in Litass 1998	Price in Litass 1999
Poppy straw 1 glass	2-15	4-30
Opium extract (1 ml)	4-10	4-15
Heroin (1g.)	600-1000	200-350
Heroin (1 dose = 0,015)	60	30-50

According to the data by Ministry of Interior in 1999 there were 34 seizures of heroin (mostly in Vilnius), and 65 persons were retained.

10.4. Cocaine

Data about cocaine usage is very limited. This drug is very expensive, though the price has decreased since 1998, and according to narrative stories of medical doctors this drug is used among the rich population. According to the Ministry of Interior the price of cocaine was 360- 400 Litass (USD 90-100) at the beginning of 1998, in 1999 - 240-350 Litass (USD 60-87,5).

ESPAD survey data on cocaine usage among students, aged 15-16 years 1995-1999 (%)

Drug name	Sex	Country ESPAD 1995	Country ESPAD 1999	Vilnius 1998	Klaipeda 1999 Grade 9	Klaipeda 1999 Grade 11
Cocaine	Boys	0,1	1,3	-	1,5	4,3
	Girls	0,6	0,8	-	-	0,9
	Total	0,4	1,1	-	0,7	2,4
Crack	Boys	0,1	0,5	2,3	-	3,1
	Girls	0,1	0,1	1,5	-	1,4
	Total	0,1	0,3	1,8	-	2,1

According to the ESPAD survey data usage of cocaine among students increased especially in Klaipeda among students of grade 11.

Register

According to the data of State Medicine Center 4 cocaine addicts were registered in health care institutions in 1999, and it accounted for 0,1% of all drug addicts register.

Seizes of Cocaine

There has been a consumer market for cocaine in Lithuania for a number of years (2 kg seized in 1997 and 10 kg in 1998) sold at price of 40 - 45 USD/g, though the demand is not high. According to the police, some or all of the 9 kg cocaine seized in the spring of 1998 in express mail sent from Panama could be destined for the domestic consumer market (*ODG data*).

In 1999, 275g of cocaine were seized (data by the police).

Cocaine seized (data by the Ministry of Interior)

Drug name	1996	1997	1998	1999
Cocaine	0	2,0 kg 49 g	10 kg. 133 g	275 g

10.5. Medicines

Findings of the study of ESPAD provided valuable information Use of tranquilizers or sedatives without prescription among students was rather high in 1995 year (14,6%). According to use of tranquilizers in comparison with other European Countries Lithuania was in the second place after the Poland. In Vilnius, the figures showing consumption of tranquilizers and sedatives in 1999 increased to 23,6%, among girls - to 37,3%.

The survey indicates much higher prevalence of legal substances compared to illicit one. But due to transfer of cultural patterns as well as social changes the use of illicit drugs among youth picked up speed during the last 3 years.

The psychoactive substances stay less popular in 1999. Usage of psychoactive substances decreased in country in comparison with 1995. However, usage of psychoactive substances remains high in Vilnius city particularly among the girls.

Usage of other psychoactive substances according to ESPAD survey data 1995-1999 (%)

Drug name	Sex	Country ESPAD 1995	Country ESPAD 1999	Vilnius 1998	Klaipeda 1999 Grade 9	Klaipeda 1999 Grade 11
Tranquilizers Soporific	Boys	8,0	8,2	12,4	10,8	6,2
	Girls	20,4	16,9	37,3	16,1	14,4
	Total	14,5	12,4	23,6	13,6	10,9

Register

According to the data of the State Mental Health Center in 1999, 117 psychoactive drug users were registered, i.e. tranquilizers and soporific users accounted for 3,8% of all registered.

Illicit trafficking

Tranquilizers seized in 1996-1999 (data by the Ministry of Interior)

Drug name	1996	1997	1998	1999
Relanium (amp.)	385	123	671	580
Rodedorm (tab.)	18	143	566	-

Medicines are controlled according to the Law On Control of Narcotic Drugs and Psychotropic Substances in the line with the UN Convention (1971). Drug stores sell these medicines according to prescriptions of medical doctors, though.

10.6. Multiple use (including alcohol)

In the end of the 1999, 472 cases of multiple drug users were registered in health care institutions and it accounted for 15,3% of all drug users, in 1998 this group accounted for 16,7 % (Ref. 3).

This phenomenon was elucidated among students during the ESPAD survey.

10.7. Solvents

According to ESPAD data usage of inhalants increased in Klaipeda City among schoolchildren of grade 9 (for boys by 20%). The rates of use frequency of inhalants decreased from 15,7% in 1995 to 7,5% in 1999 (country level).

The use of inhalants has been observed as very early intoxication among children. Two deaths from intoxication of solvents were registered in the early age (12 years) in Klaipeda in 1996.

In 1999, among registered drug addicts solvents these users accounted for 5,2% (161 persons), in 1998, 148 persons were registered. The most popular is glue "Moment", which according to regulations can not be sold to children.

Inhalant usage according to ESPAD survey data 1995-1999 (%)

Drug name	Sex	Country ESPAD 1995	Country ESPAD 1999	Vilnius 1998	Klaipeda 1999 Grade 9	Klaipeda 1999 Grade 11
Inhalants	Boys	17,6	13,3	17,2	20,0	6,8
	Girls	14,0	5,7	7,5	6,0	4,2
	Total	15,7	7,5	6,0	12,5	5,3

No data is available on risk groups who do not attend schools, i.e. the so co-called street children who are provided a possibility to attend street clubs or day centers organized by NGOs.

10.8. Doping

Anti-doping Commission data

Lithuania signed the Anti-Doping Convention (1993), following establishment of the Anti-doping Commission the same year.

At the Governmental level the Commission coordinates the anti doping activities and doping abuse prevention programs. The target groups are the young people participating in top level sport and the youth attending health and body building clubs.

At non-governmental level the Commission provides information and gives advice on anti-doping education and legislation issues, and at this level acts as a serving body.

Lithuania does not have an accredited doping control laboratory.

The Commission has relations and used Hormone Laboratory at Aker Hospital in Oslo where about 50 -60 doping tests are taken every year. There are 12 sample collection officers trained in Lithuania. All the officers are sport medicine doctors fully employed at Sport Medicine Centers in 5 biggest towns of Lithuania.

In 1998, out of 44 tests 4 were positive; in 1999 out of 34 tests 3 were positive.

The list these substance are established according to international requirements.

11. CONCLUSIONS

11.1. Main trends and new developments in drug use and consequences

The usage of illegal drugs has increased among young people, and usage of narcotic drugs and psychotropic substances among youth becomes a new social phenomena. The use of marihuana has increased 12 times since 1995, the use of other illegal drugs 8 times, especially among students. Both synthetic drugs and also heroin are spread fast, among young people in particular, aiming at the network near and inside schools. The number of offences committed by teenagers has increased. According to the data of the Ministry of Interior, last year new drugs were introduced to the drug market - mushrooms and Psilocybine extr. trade (hallucinogen), first time seized in 1997.

Awareness and concern of the community, its changing approach towards drug addict should be pointed out.

11.2. Possible reasons or hypotheses for major trends observed

Psychological and sociological surveys and observation carried out in recent years enable the conclusion that the most vulnerable and least protected society group in Lithuania is the youth. A big group of young people does not manage to get aware of the circumstances and adapt to the country's political, economic and social changes, reforms and feel rejected, not needed, without ensured future. Unemployment of parents, poverty, divorce and other negative phenomena affects children and youth. This affects mental health, feelings, behaviour of the youth.

During the survey Lifestyle and Health of Schoolchildren (1996) the question was posed to the schoolchildren whether they felt happy. Among 11 year old schoolchildren 28,3% of the girls and 22,6% of the boys responded they did not feel happy; among 13 years old – 43,7% of the girls and 31,4% of the boys; among 15 years old – 50,4% of the girls and 36,1% of the boys respectively. Thus the feeling of “not being happy” grows with the age. 38,7% of urban schoolchildren and 43,9% of rural schoolchildren do not feel happy.

Within the last 7 years suicides have become a serious social problem, and Lithuania is in the first place according to this indicator among European countries. In 1996 the suicide level was highest – 46,4 suicides per 100.000 population (1 723 suicides annually). In 1997 this suicide figure declined, i.e. 44 suicides per 100.000 population. Thus, in Lithuania 4 - 5 people commit a suicide daily. The suicide rate among 15-19 year old people is 18 per 100.000 population. Though lowest out of other age groups, it is very high compared to those countries that have high rate of suicides among young people. In 1990, 26 young people 15-19 years of age committed a suicide, in 1991 – 48, in 1996 – 47, in 1997 – 54, in 1998 m. – 48 respectively. In Lithuania the suicide rate among the age group of 15-24 years is also very high – 31 suicides per 100.000 young population. The suicide rate of young men aged 20-24 increased fiercely – by

180,6%. Experts point out recent social processes in the country as the main reason causing increased suicides.

Frequency and problems addressed to the Youth Hot line also reveal youth problems, mental health faced by young people. In 1998 the Youth Hot line in Vilnius was addressed by 8 079 young people (17,8% more compared to 1997). The most frequent problems addressed were as follows (%):

Tension, anxiety	37,8
Loneliness	34,9
Low mood (depression)	30,7
Anger	30,7
Fear	24,7
Absence of self-confidence	23,1
Personal contact with young people of different sex	23
Relationship with parents	21,3
Intention to commit a suicide	20,1

11.3. Methodological limitations and evaluation of data quality

The epidemiological survey data on drugs are limited, they covered only certain groups in secondary or technical schools among the age groups of 15-17. No survey carried out among youth of higher schools, working youth and street children, general population.

Methodology for evaluation of data quality and capacities for the verifying of data are limited.

11.4. Relationship between indicators (consistencies and inconsistencies)

Though relationship between indicators is very important, however, not all indicators according to requirements of EMCDDA are developed in the country and the gaps emerge leading to inconsistencies of indicators.

However, Lithuania has consistent indicators on treatment, prevalence, criminality, death, seizures, ESPAD survey among young people since 1995 that enable annual assessment of drug situation in the country. In recent years new indicators on the average of street price of drugs have been introduced, and these indicators are very informative.

11.5. Relevance of data to policy issues or interventions

Being aware of relevance data importance to policy issues, it should be noted that data needs development of the multidisciplinary and integrated drug policy and strategy in the field of drugs in line with the EU Action Plan to Combat Drugs (2000-2004), based on balanced approach between drug demand and drug supply reduction, development of necessary institutional structures and their capacities of Drug Information System in compliance with EU standards, methodology of EMCDDA.

11.6. New information needs, gaps, and priorities to future work

The information needs and gaps during the preparation of National Report 2000 stay very obvious. The framework of the Drug Information System in Lithuania needs additional inputs for the development its capacities and sustainability, also for development of the quality of key indicators. Gaps of information exist undoubtedly. The capacity of the informal National Focal Point is very limited and seeks for efforts for gathering data required for the National Report. The understanding of definitions of information must be made uniform for candidate countries. According to the requirements only part of the tables on the required data could be filled in.

Institutionalization of the Drug National Focal Point, ensuring its sustainability and ability to collect, analyze and distribute data (supply and demand) in the line with the standards laid by EMCDDA is one of the priorities proposal in the National PHARE Program 2000, including activities for the future information needs and coverage of existing gaps.

PART IV. DEMAND REDUCTION INTERVENTIONS

12. NEW DEVELOPMENTS AND INFORMATION NEEDS

12.1. New developments during the reporting year

The Plan of Main Activities for Drug Control and Drug Prevention 1998-2000 was approved by the Government in 1998 and forms a basis for the National Drug Prevention Program.

In 1998, the Health Committee of the Lithuanian Parliament discussed drug policy and decided to establish the Coordination Board on Drug Prevention, Treatment and Rehabilitation within the Ministry of Health. The Coordination Board of experts was established by the decree of the Ministry of Health in 1998.

Since 1998, drug related problems have been authorised to the Public Health Department of the Ministry of Health.

The National Drug Control and Drug Prevention Program 1999-2003 with focus on primary prevention among young people was adopted by the Government (Resolution No.970; 1999). The Governmental Drug Control Commission was appointed to coordinate the National Drug Program.

In 1999, the Inter-institutional Coordination Board for implementation of the Drug Control Program was approved by the Minister of Health (Order No.205).

In 1999, the following international programs on drug demand reduction were implemented: PHARE program TA to DDR project "Local community Drug Prevention in Local Community", WHO program "Prevention of Substance Abuse among Youth people in Central and Eastern European Countries", Council of Europe Pompidou Group program DRSTP II "Prevention in Local Community" encouraging preparation of materials for community prevention and training of DDR experts, European Cities Against Drugs supported program started in Vilnius.

12.2. Specific events or programs during the reporting year

According to the Public Health Education Center information, 11.338 events on prevention were recorded in the country in 1999, including alcohol and drug prevention. It accounted for 8% of all health education activities, i.e. the number of health promotion and education events increased 1,5 times compared 1998 on drug demand reduction. The majority of these events were applied for drug prevention among youth.

The Public Health Center in Kaunas established a volunteer's group which provided a series of lectures including discussions on drug related problems. The Public Health Center in Panevezys organized a health promotion program for 9-12 grade schoolchildren in city schools, with the main stress on drug prevention lectures.

In 1999, healthy life style curricula was introduced in 30 secondary schools in Klaipeda County.

Different activities throughout the country were arranged to mark the European Drug Prevention week and International Day on Fight against Drugs.

In 1999, the National Health Promotion Center arranged event on Drug and AIDS prevention "Different Lesson" in the Vilnius youth school. Other programs on DDR during the year were under implementation. PHARE TA to DDR project was implemented in Klaipeda "Primary Drug prevention within the Local Community", and lot of different actions were related to this project.

The Sub-regional seminar according to TA to DDR project Sub-regional plan "Primary prevention in local community" was organized in Vilnius on 25-29 of March, 1999. The representatives from Albania, Bosnia, Slovenia, Poland also visited Klaipeda community where a meeting was arranged with representatives of Klaipeda municipality authorities and representatives local community, the guests visited institutions of Klaipeda, a school which participated in the WHO school project - Health Promoting Schools and the NGO "Spiritual Guidance Center for Youth". These visited institutions widely introduced their activities on drug prevention as well as their problems. Representatives from Lithuania participated in sub-regional seminars arranged in other countries.

The Sub-regional meeting of Baltic Cluster PHARE Multi-beneficiary Drugs programme project "Drug Information Systems" was arranged in Vilnius, 13-14 December 1999, with participation of representatives from Estonia, Latvia, Lithuania, Poland, Swedish Focal Point and project coordinator from eesv MSDP, the Netherlands.

In 1999, in Klaipeda 8 training seminars for different target groups were arranged during the year according to the project plan and 156 people were trained as trainers. The Focus Group meetings for evaluation of outcomes were arranged.

The Final Report was prepared on the TA to DDR project implementation results on drug prevention in the local community in Klaipeda city "Primary Drug Prevention of Drug Demand within the Local Community of Klaipeda".

The implementation of the WHO project on "Prevention of substance abuse among young people in Central and Eastern European countries" started in Lithuania. The plan was approved by the Decree of Minister of Health as the National Task Force group for the coordination of this project.

"Review on prevention of substance abuse among young people in Lithuania" has been prepared.

Training for the target group "Youth for Youth" on drug prevention was organized for the students of Vilnius University (psychologists, social workers). The book "On prevention of Alcohol and Other Drugs at School" was prepared and published.

The Pedagogic Institute participated in the survey ESPAD on substance use among youth (in 1999).

May of 1999, National Conference on Health lifestyle schools was organized in Klaipeda to share experience of implementation of Health life style curriculum schools in Klaipeda.

November 1999, the international Conference for youth "Youth against Drugs" organized together with non-governmental youth organizations and resolution on drug prevention was adopted.

According to data of the National Health Promotion Center local community programs were going on in 4 regions and 6 cities. All municipalities received methodological

publication "Drug Prevention in Local Community" by the National Health Promotion Center.

According to reports from Public Health Care institutions the following events took place:

Events and published materials on drug prevention in 1999

Events	account	Publication	account
Conferences	195	Brochure	27
Lectures	3199	Memorable	198
Meetings	2497	Posters	39
Stands	1491	Newspapers	9
Wall newspapers	1796	Questionnaires	23
Questions-answers	62	Other	18
Video films demonstrated	1244	Video production	32
Coverage	234		
Telecast	68		
*Articles	228		
All	11 388	All	346

*obviously not all events and materials are registered. These articles were gathered mostly in Klaipeda during the TA to DDR Project implementation.

12.3. Main issues and future information needs

Due to implementation of activities according to above mentioned programs on drug demand reduction and more active participation of different organizations carrying out activities on outreach, low threshold and primary prevention field, the need for information on DDR activities has raised. Not all information is known on the national level, new needs for the register as well as coordination and evaluation of these processes is required. Information is needed on all human resources, capacity of organizations working on the drug demand reduction field, both governmental and non governmental, coverage fields by their activities, the register of existing materials related to the drug demand reduction, programs on DDR and their evaluation, training in the DDR field, ongoing DDR activities on the national and local levels. The existing information collection is not sufficient and does not cover all activities.

The National Resource Center on Drug Demand Reduction in Lithuania was established in the National Public Center for Health Promotion and Education in 1999.

Prevention of harmful habits including drug abuse is the first priority of the Center's activities on the national level. The National Public Health Promotion and Education Center collected some information on drug demand reduction and has gained experience in this field since 1994 (the PHARE project on DDR contribution is obvious). The Resource Center establishment for this purpose was supported by the PHARE program TA to DDR project.

Gathering of all articles in the regional and national newspapers related to drug issues and their analysis or use as prevention materials is necessary and needs additional investments.

13. ORGANIZATION, STRUCTURES AND RESPONSIBILITIES RELATED TO DRUG DEMAND REDUCTION ACTIVITIES

In 1998, alcohol, tobacco and drug related problems have been authorised to competence of the Public Health Department of the Ministry of Health. Public health authorities are responsible for the policy on drug, alcohol, tobacco demand reduction at the national to local levels.

The Public Health Care Centers functioning in all 10 counties of the country established health promotion divisions. The National Public Health Promotion and Education Center is a leading institution in this chain.

The State Mental Health Care Center as a public health care institution was established in 1999.

49 Mental Health Care Centers have been established in municipalities within the primary health care system, based on the Law On Mental Health Care.

These above mentioned institutions are responsible for the Drug Demand Reduction activities.

The Health Committee of the Lithuanian Parliament discussed drug policy March 25, 1998, and proposed to establish the Coordination Board on drug prevention, treatment and rehabilitation within the Ministry of Health. The Coordination Board by the decree of the Minister of Health was formed June 23, 1998.

13.1. Changes in national structure

The Board of the National Drug Program Coordination was established by the Order of the Minister of Health (No.205; 1999).

The new composition of the Governmental Drug Control Commission was approved by the Government (No.547; 1999), and its regulations were reviewed (No.282; 1995).

The draft proposal for the establishment of the Resource Unit was prepared by the National Health Promotion Center, the and presented to PHARE TA to DDR project coordinators, including financial proposals to meet national requirements.

Based on the above proposal funds for the establishment of the Resource Unit were provided, technical facilities were introduced and activities on drug demand reduction information was planed by the National Health Promotion Center. Possibilities on collaboration with the Drug Focal Point was discussed., though it has to be institutionalized, reinforced and open to the public in order to become an effective dissemination center of good practice in the field of demand reduction.

13.2. Involvement in European activities during the year

In 1998-1999, the EU PHARE program TA to DDR project *“Technical Assistance to Drug Demand Reduction” on “Primary Prevention of Drug Demand Within the Local Community”* was implemented in local community of Klaipeda.

Results of the above Project was that Lithuanian demand reduction experts received training on project formulation and management, a national team was established for the country's participation in a sub regional project prevention within the local community (together with Poland, Albania, Bosnia and Herzegovina and Slovenia), the National Demand Reduction Resource Center is under establishment.

Lithuania signed the Decision 910/98, of June 24, 1998, on the participation conditions in the social and health policy programs foreseeing participation of Lithuania in the EU programs against AIDS and other infectious diseases, dependence from drugs and other programs.

In 1999, the WHO project *“Prevention of Substance Abuse among Young People in Central and Eastern European Countries”* started. This project is coordinated by the WHO Program on Substance Abuse (PSA). The Project represents a major attempt to develop a comprehensive and coordinated response to primary prevention of substance abuse among young people in seven countries in Central and Eastern Europe - Bulgaria, the Czech Republic, Estonia, Latvia, Lithuania, Poland and Slovakia. The Project seeks to build networks for exchanging information between the seven countries.

The project promotes the establishment of National Task Forces and preparation of National strategies addressing primary prevention of substance abuse among young people in each of the seven countries to guide national priorities and selection of priority projects, as well as creating opportunities for inter-country communication and exchange of information.

Project funding is sought from the UNDP to act as a catalyst for local and regional resources. Projects have been selected which have a significant bearing upon human resource development.

In 1999, the *Council of Europe Pompidou Group project on DRSTP II* started. The main goal of the DRSTP follow-up program should be to support the development of materials (on information on drugs, drug abuse, drug addiction, risk behavior, early interventions/crisis intervention, providing psychological support, social care and medical advice in the local community, messages to society) for target groups such as health workers, psychiatrists, psychologists, social workers for sustainable multidisciplinary staff training in the field of DDR.

The *Final Phase Drug Information Systems Project* started in December 1997 and lasted until March 1999. It resulted in Information Map and National Report prepared following the EMCDDA guidelines.

Baltic Sea Region Money Laundering and Asset Tracing Project in line with the Riga Declaration, the objective of this project is to support the adoption of anti-money laundering legislation in line with the EU Directives and other international standards and the implementation of the legal framework. This project, started in June 1998, is an initiative of the Finnish Ministry of Interior within the framework of the Task Force on Organized Crime in the Baltic Sea Region.

The overall objective of the *Police Personnel Exchange Project (1999–2000)* is to strengthen and improve the drug law enforcement capacities and cooperation through the exchange of operational personnel from the drug policy agencies in the PHARE Partner Countries and EU Member States. The preparatory phase (I quarter of 1999) was aimed at determining the number of police organizations and officers, which will participate in the project. In 1999, Lithuania was represented and started its commitment to participate at the Project Coordination meeting in Strasbourg on 5 March 1999.

In order to avoid a gap between the new project “Cooperation EMCDDA/CEEC” and the “Drug Information System Project” which finished in March 1999, a bridging phase

(Drug Information Systems and Networking – Bridging Phase, Aug. 1999 – April 2000) was launched, which is a continuation of certain minimum level activities to ensure basic information provision and communication and to maintain the human network of Focal Points on Drug Information in Central and Eastern Europe.

Precursor Project –Phase V (Nov. 1999 – Dec. 2001) is a continuation of the previous phases. It intends to facilitate the further establishment and implementation of measures, in line with EU Acquis for the prevention of the diversion of precursors and other chemicals used for illicit manufacture of narcotic drugs and psychotropic substances.

In 1999, UNDCP assistance started with *UNDCP Regional Baltic States project AD/RER/99/C 10 “Development of comprehensive drug abuse prevention material and related training for public schools in the Baltic States”* (Phase A - July 1999-December 2000, Phase B -January 2001-June 2002). The objective of this project is to reduce the prevalence among youth, raising awareness among school children on drug prevention and promoting healthy life styles and alternatives to drug abuse through the development of school curricula and materials.

14. DEMAND REDUCTION APPROACHES IN THEIR SOCIO-CULTURAL CONTEXT

The Parliament of the Republic of Lithuania adopted the National Program 1997 – 2000. Besides other objectives, this Program includes guidelines to solving youth problems. According to this Program the concept covering youth problems including the most urgent issues and planned solutions will be prepared:

- to establish long-term crediting funds for students;
- to develop youth professional orientation;
- to finance agriculture and training program in rural comprehensive secondary schools, to support activities by young farmers.

For the public health care

- to further continue public programs under implementation with a particular attention to prevention and treatment infectious diseases that are spread through drug abuse and sexually.

Measures for primary prevention of substance abuse among young people are declared and legitimated in Lithuanian laws and is a component of the all National Programs of Lithuania: National Health Program 1998–2010, State Tobacco Control Program (1998), State Alcohol Control Program (1999) and National Drug Control and Drug Prevention Strategy 1999-2003.

Youth organizations, religion organizations, mass media, cultural workers, art workers contribute to the process on prevention of substance abuse in terms of cultural and social context.

15. MAJOR STRATEGIES AND ACTIVITIES IN DEMAND REDUCTION

The National Drug Control and Drug Prevention Program 1999-2003

The National Drug Control and Prevention Program 1999-2003, approved by the Government of the Republic of Lithuania (Decision No.970; 1999), complies with the

National Health Program (1998-2010), the Resolution on Fight against Drugs by the Baltic Assembly (1997), guidelines by the UN International Drug Control Program and the WHO, taking into account proposals by the public institutions and organizations. The main objective of the Program is to identify the most important drug abuse control and prevention problems, to foresee objectives and measures for resolution of these problems including:

- improvement of the drug policy, supervision and implementation;
- strengthening of illicit trafficking and smuggling control;
- strengthening of narcotic and psychotropic substances and precursors control;
- drug demand reduction: prevention, treatment of narcological patients;
- drug demand and harm reduction: rehabilitation and integration of drug addicts.

The following institutions will participate in the implementation of the drug abuse prevention Program: the Ministry of Health, the Ministry of Education and Science, the Ministry of Social Protection and Labor, the Ministry of Interior, the Committee of Sports, the Department of Customs at the Ministry of Finance. The Governmental Drug Control Commission was authorized to coordinate the Program.

The national strategy for drug control and prevention programs include establishment of the drug prevention system (primary prevention, treatment and rehabilitation). According to this Program the implementation of primary drug prevention measures through education establishments and public health and individual primary health care institutions will be carried out. It is planned to prepare and implement drug prevention programs within communities, to establish commissions to coordinate activities related to the drug abuse problems, to carry out the scientific, and epidemiological investigation, to train specialists. This Program pays particular attention to youth education through other measures for youth.

Special attention is given to partners - NGOs and mass media.

The main target group in Lithuania is young people. The main national strategies on substance abuse prevention are directed to youth.

Other related programs

The National Health Program 1998-2010 established the health policy in Lithuania regarding substance prevention measures. For implementation of the WHO policy Health to All in the 21st Century the goal is to improve the Lithuanian population quality and one of the factors is recognition of healthy life as social standard. As component for healthy life is promotion of healthy lifestyle, encouragement of families to seek for improved health.

This Program includes goals to reduce the rate of smoking of the population, alcohol consumption through different measures and programs, with established monitoring and evaluation systems. The Program established strategy and main guidelines for drug abuse prevention, drug demand and drug supply reduction, specifying particular importance of intersectorial coordination, legislative background, reaching international agreements, international cooperation, development of a drugs information system, epidemiological research, etc.

The State Tobacco Control Program 1998-2010 was approved by the Government of the Republic in Lithuania (Decree No.945; 1998). The Ministry of Health is responsible for implementation and coordination of this program. The coordination Council (advisory body including representatives of various public organizations and institutions) was established. The Tobacco Control Program was prepared in compliance with article 16 of the Law on Tobacco Control of the Republic of Lithuania.

Program goals: to reduce the smoking level, its social and economic harm to health. The prioritized areas of the program are children and youth. One of the main goals is to limit availability of tobacco products. If this program is implemented the number of smokers would reduce by 10%, young people would take up smoking 2-3 years later. The implementation of this program would assist the implementation of substance control in general and would lead to reduction of social and economic harm to the state and its population. The implementation of this Program is being financed from the State Health Fund.

The State Alcohol Control Program, approved by the Government of the Republic of Lithuania (Decree No.212: 1999) is implemented in 1999-2001, by respective institutions, i.e. the Ministry of Health and the State Tobacco and Alcohol Control Agency at the Government of the Republic of Lithuania. The Program aims at the measures following the Law on Alcohol Control.

The Program includes: analysis of alcohol harm to human health and the economy, communication of survey results to the society, sociological survey aiming at alcohol abuse reasons, communication of temperance principles to youth, children, families. It is planned to prepare teachers, medical and social staff, journalist to support NGOs, development to the temperance movement, to promote alcohol-free mode of life, to implement the Alcohol and Drug Prevention Program for schools approved by the Ministry of Health.

This Program aims at implementation of principles of the alcohol control policy: to reduce availability of alcohol beverages through taxation, to encourage production and trade of weak alcohol beverages and alcohol-free beverages, to support formation of the alcohol-free mode of life and social environment, etc.

16. SPECIFIC INTERVENTION AREAS

16.1. First childhood intervention

In the pregnancy period specific attention is paid to prevention of harmful habits, mothers participate in special training courses *Motherhood School* preparing for delivery, they are provided detailed information about harmful and negative impact of drugs, alcohol and smoking. Publications are provided to them, they are taught to refuse alcohol, reduce smoking, refrain from unnecessary medication. Much initiative in this field is demonstrated by the Family Planning Center, similar programs are being implemented by public organizations in cooperation with preventive organizations of foreign countries.

In kindergartens no special drug prevention programs are applied, children are provided information about risk in connection with consumption of any medication, why people use medicine. Children are informed that medicine could be taken only from their parents. Medication packaging includes the mark "Keep away from children". Currently in Pedagogical University discussion about the possible intervention at this age stage is going on.

For families with little children, if parents abuse alcohol or drugs and provide poor care to their children social service units are informed of that and the social staff attends these families, sometimes parents are deprived their rights in compliance with the laws, and the children are put into institutions.

Sometimes families are not careful enough keeping medicines safe at home, and mass media give message about necessary safety to the population.

16.2. Prevention in the family

According to the data of 1998 only 79% of children grew in typical families with both parents, the remaining 21%, i.e. nearly 200 thousand children have no happiness to live with both parents.

Examination of parent care deprivation reasons demonstrate that only one child out of 10 loses parent care due to their death. 90% of such parent care deprived children have one or both parents. In recent years the number increase of parent care deprived children is caused by behaviour of parents (delinquent families, imprisonment of parents, etc.) and long-term diseases of parents. Having identified that parents avoid their obligation to take care of their children or abuse their parent rights, behave cruelly towards their children or make harmful influence due to their immoral behaviour, a court may deprive them of their parenthood rights. Within 3 last years about 11-14% children lost care because their parents were deprived their parenthood rights.

The society is very concerned about street children who are from delinquent families, being aware of the necessity to strengthen prevention measures within the families, as the most important society cell in this respect. A special training course for parents started in April 1999, in Klaipeda with participation of representatives of non-governmental organization "The Second Birth" (parents who have drug addict children). The aim was to prepare trainers for training "parents-to-parents".

27 trainers were trained to work on prevention with families in early intervention techniques, handbooks on prevention issues were presented to them. Thus, the background of "parents school" has been created and successfully continued and facilitated by funds. Such training courses were multiplied for parents in the Vilnius community.

Most non-governmental organizations such as "Save the Children" movement have been working with children from delinquent families, leading to 20 day centers for street children, where the children could spend their leisure time, prepare their homework and take lunch.

Different booklets have been published for families including various messages on substance abuse prevention. In general, drug prevention programs for families are on the development stage and the worsening situation regarding drugs calls to invite parents to take urgent actions to save the children from drugs.

16.3. School programs

In Lithuanian schools the drug abuse primary prevention usually is included into health promotion programs. In 1993, the National Program of Healthy Lifestyle Promotion at School was approved, and the strategic task of this program was healthy and safe lifestyle promotion in schools, creation of healthy and safe environment. General tasks of the program may be summarized as follows:

- to develop national health promotion system in schools involving the schoolchildren, family, community;
- to put into practice the health education system by promoting healthy lifestyle by asking for support of various institutions, authorities and NGOs;
- to implement the universal program of health promotion;
- to create healthy and safe learning conditions;

- to train teachers and members of school by health service staff adequately, constantly improve their knowledge about the issues of healthy lifestyle promotion;
- to carry out research, analyze the status of children's health and causes of their bad health, search for new and effective methods and forms of prevention.

Since 1993, according to this National Program, Lithuania began to participate in the European Network of Health Promotion in Schools (WHO-CEEC Project). Health School programs are being implemented only in 50 schools, the national network of the healthy schools is under development.

From 1993, the Health Education Project (including drugs) was established by the Open Society Fund, and special training activities for teachers were organized, teaching materials and guidelines on substance abuse prevention in schools were provided.

The national smoking preventive program in Lithuanian schools was planned for 12 years. The general task of this program was to prepare teaching materials on smoking and other harmful habits and psychologically relevant ways of teaching corresponding by its form and content to the psychology of certain age groups.

In 1993-1995, Lithuania took part in the international program HBSC (Health Behaviour Among School Children) and CINDI. The country wide integrated non-communicable disease intervention program includes the component "Healthy children in healthy families".

For some years Lithuanian teachers have a possibility to take part in special seminars "Introduction to substance abuse and prevention", which are organized by APPLE (American Professional Partnership for Lithuanian Education).

Healthy lifestyle at school is also promoted through the activities of the youth temperance movements "Baltu Ainiai" and "Valanciukai". They organize special seminars and camps for schoolchildren and students on weekends, work at schools, publish special newspapers.

"Children and Youth Social Skills Training" is alcohol and drug abuse primary prevention program. The program reflects the prevention more widely as besides substance abuse but it also includes school failures, delinquency, personality problems, crisis, truancy prevention. The principle aim of the program is to increase psychological resistance, to promote psychological maturity of children and youth, hoping that in future it will prevent the arising of various personality disorders and social malfunctioning, such as alcohol and drug use, smoking, etc. It is a school based program. First of all it was presented for teachers and psychologists. Useful booklets were provided for teachers, and information about drugs is selected very carefully. All methods and techniques are on stage of adaptation to the Lithuanian school.

Hundreds of teachers participated in training groups according to this program. Special investigations trying to evaluate the effectiveness of this program are being done.

Health care establishments organize drawing competitions aiming at demonstration of negative impact of smoking and drugs.

In 1998/1999 Primary Health Care Curriculum pilot project in two Klaipeda secondary schools for schoolchildren of grades 7-8 was adopted and introduced. The Health Curriculum was given as a present to the schoolchildren in Klaipeda and their families by University of Illinois, Chicago, College of Nursing. The long-term goal of the curriculum is to prevent substance use, HIV/AIDS and improve overall health. The

specific objectives were to develop strategy for implementing the Primary Health Care Curriculum in the secondary schools in Klaipeda, to implement it in two pilot schools and to evaluate its success, to develop peer-led health and HIV/AIDS, substance use prevention related educational activities and discussions in the schools, to expand the Public Health Center for the city of Klaipeda and to make the program available nationally. The curricula were evaluated very positively and for two classes prepared additionally. The curricula in 1999/2000 schooling year were introduced in 28 secondary schools in the County of Klaipeda.

Various leaflets, booklets and other educational materials are published by the National Health Education Center, the Ministry of Education and Science, AIDS center, NGOs, Vilnius Narcological Center, Ministry of Health. In 1999, the methodological recommendation for teachers "Prevention of alcohol and other drug use in school" was published.

The special programs for schools are needed due to rapid increase of drug abuse in schools. According to the Law on Alcohol Control (1995), Article 26, the Ministry of Education and Science is responsible for preparation and implementation of programs on healthy lifestyle in all schools and other educational establishments.

16.4. Youth programs outside schools

Youth programs outside schools are based on activities by non-governmental youth organisations. Non-governmental organisations work actively in the drug prevention field among youth.

The *Youth Psychological Help Center* (YPHC) is a non-profit, non-governmental organization that provides free psychological and social support to young people. This work is performed by specialists and 100 volunteers. One of the main work principles is youth to youth. The main objectives of the YPHC is: prevention of suicides and psychological crisis; psychological and social support to youth' development of the telephone network as "Youth Hotline" and other volunteer psychological and anonymous help in Lithuania; youth education dealing with issues youth is interested in; organization of interesting and creative leisure; support to newly established similar organizations; involvement of volunteers into such activities.

The YPHC has been implementing the drug prevention program. In 1997, the Program Volunteers to Prevent Drugs was successfully implemented, financed by the UNDCP. Workshops for the volunteers were organized facilitating communication with youth about drugs, information how to provide help to those who got involved with drugs; meetings with young people were organized to discuss drug matters. The campaign YPHC Against Drugs was organized. Specialists, drug addicts from rehabilitation communities were invited to participate in this campaign. The YPHC has been establishing a telephone network for psychological help in Lithuania. In 1998, the YPHC issued the publication "Social and Psychological Help to Youth". This publication includes information about organizations providing social and psychological help to youth in the major cities in Lithuania.

The *Lithuanian Christian Youth Temperance Union "Zingsnis"* is a youth organization consolidating young people of 15-35 years old who promote healthy lifestyle and fights against alcohol and drug abuse, guided by traditional values. Aiming at implementation of its goals the organization organizes lectures, workshops, discussions, conferences, various campaigns, distributes leaflets and publications promoting the goals of the organization, prepares and implements various specific projects and programs. Currently four long-time programs are being implemented. "The Elderly Brother" is a

program for children of delinquent families, homeless and orphans. "Street Volunteers" is a program for delinquent people, alcoholics, drug addicts, homeless. "Preparation of Volunteers" is a course organized for volunteers who wish to participate in the programs. The Program "The Snow Ball" aims at teaching young people to organize leisure activities without alcohol and drugs. "The Bridge" is the newest program introduced by the Lithuanian Christian Youth Temperance Union "Zingsnis". This Program includes long-term cooperation between students and adults aimed at drug prevention. This project aims at teaching people to organize their leisure activities, to prevent oneself and friends from alcohol and other substance abuse instead of treatment of addicts

"*The Snow Ball*" drug prevention program came to Lithuania from the USA in 1993. Currently "The Snow Ball" centers operate in Kaunas, Panevezys and its region, Utena, Klaipeda and Vilnius. This Program includes long-term communication and cooperation process between young people and adults aimed at prevention of substance abuse. The Program is targeted at elderly schoolchildren of secondary schools. This program aims at support schoolchildren to formulate a positive view upon temperance, strengthening individual psychological resistance and motivation to be free from alcohol, tobacco and drugs, also to communicate the knowledge acquired to younger schoolchildren.

"*Baltu ainiai*". The Lithuanian Youth Temperance Union "Baltu ainiai" established its units in 29 regions. "Baltu ainiai" is engaged in substance prevention activities. Each year the Society implements about 10-11 projects dealing with this problem. Currently the following projects are being implemented: the alcohol, drugs and tobacco abuse prevention project for schools (preparation of teachers), youth projects "Contemporaries – to Contemporaries" and "I among Others", a prevention program for children from delinquent families, students in special education establishments, etc.

The *Lithuanian Blue Cross Youth Organization*. The goal of this organization is to distribute information regarding advantages of alcohol-free lifestyle and to follow this lifestyle. Efforts are made to change views regarding use of alcohol and drugs by the society; to actively participate in implementation of substance prevention programs; to provide proposals and amendments to legislation, to contribute to formation of the state policy to reduce alcohol and drug harm, etc. Currently the organization is implementing the Project "Safe and Healthy Society" including three programs. The program for alcohol and drug prevention and legal education deals with children, teenagers and youth aged 16-18 years. Implementation of this Program involves traffic and municipal police. At general practitioners the alcohol and drug prevention, early diagnosis and treatment program is carried out. The third program aims at formation of views regarding alcohol and drugs by the society, youth leaders are taught how to work with young people, family and public health education centers and other organizations are communicated.

The *Lithuanian Red Cross Youth Society*. It is a non-governmental, non-budgetary organization engaged mainly in social work, teaching to provide the first aid, seeking of family members, etc. The Red Cross Organization pays much attention to education, training of youth leaders. The book "Kasparas and his Family" targeted to young people and teenagers (10-15 years old) was published. Problems concerned by young people are analyzed: work and commitment, family relationship, friendship and love, sex, alcohol and drugs. In 1998 two new projects were started: socialization of children who left their families and HIV/AIDS and sexual education among schoolchildren. At the beginning of 1999 a set of workshops to deal AIDS and drug abuse problems was organized.

“Gelbekit vaikus” (Save the Children) is the Lithuanian Children’s Rights Protection Organization. Its main objective is to inform children and the society of the UN Children’s Rights Convention, to collect information about the most vulnerable children’s rights, to learn about children’s needs, to implement educational and practical projects, etc. Volunteers of the Organization work with children of risk groups, street children. Unfortunately, many of those children intoxicate with glue or use other drugs. In 1999 video clips to mark the 10th anniversary of the Convention were produced. One of them, i.e. “Don’t be Afraid to Say No” deals with the drug prevention.

“Valanciukai” is a branch unit of the M.Valancius Temperance Movement. The goal of *“Valanciukai”* is to aim at alcohol-free lifestyle. The members sign a commitment that they will not use alcohol and drugs before 18 years of age. At present the number of the signed is 38 thousand of schoolchildren. The *“Valanciukas”* newspaper is published, trips and camps for schoolchildren are organized.

The *Spiritual Guidance Center for Youth* is a volunteer, self-dependent, non-political, non-profit, non-governmental organization in Klaipeda that provides spiritual, social, psychological help to young people facing different problems. Objectives of this organization are: improvement of spiritual, mental, social condition for young people and families in Klaipeda; help to young people and families through education, individual advice and social rehabilitation groups; encouraging and coordination of volunteer help by communities; investigation of social environment aiming at finding specific problems of the population in Klaipeda, analysis and distribution of such investigation.

All Youth organizations are working at different projects with youth and teenagers or their families. For example, the Spiritual Guidance Center for Youth DPJC is implementing the following programs:

- *The Youth “Hot-line” program.* The goal is to provide spiritual support anonymously, by telephone to youth having difficulties in life, communication or relationship problems, psychological problems, experiencing a crisis or thinking about a suicide. To inform youth about other available psychological, medical or social services;
- *Works on Mercy.* The goal is to teach how to provide support to elderly and isolated people, to promote personal and interpersonal support;
- *Big Brothers Big Sisters (BBBS).* The goal is to help children and teenagers from disintegrated families to adapt in the society, through development of positive relationship skills, self-confidence, competence;
- *The Youth Leadership Training Program.* The goal is to encourage youth to develop leadership skills, interpersonal support, to train volunteer youth counselors to provide help to children at risk, delinquent behaviour teenagers (violation of laws, living in poverty or in delinquent families);
- *Marriage Preparation.* The goal is to help youth couples prepare for a Christian Marriage, to provide a theological and psychological basis as well as to educate about natural family planning;
- *It Takes a Village to Rise a Child.* This program is designed for parents and community members who wish to promote healthy living, behaviour and attitudes. The goal is to aid participants to understand their attitudes and behaviour towards children and to promote an ongoing child and adult cooperative process;
- *Natural Helpers.* The goal is to teach youth self-awareness, to encourage good relationship skills and to effectively help their peers dealing with everyday difficult issues in their natural environment;
- *Operational Snowball Philosophy.* Operational Snowball is an ongoing youth and adult cooperative process, focusing on prevention, and founded on the belief that

every person has the capacity to make sound decisions regarding life and behaviour, based on accurate information and an understanding of self attitudes, and motivations. This process is designed to promote personal and interpersonal growth, leadership skills and healthy decision making, regarding a broad range of life concerns.

The youth organizations cooperate with international organizations and are supported by them, engage in publishing activities.

16.5. Mass media campaigns

According to the Law on Alcohol Control the National Radio and TV must at least twice a week devote not less than 5 minutes of the total transmission time to the information on health promotion matters, including drug use. The information on drug related problems are always on the mass media agenda.

Great input to the mass media campaigns was training of journalists according the EU PHARE program project Multidisciplinary training On the Global Approach of the Drug Phenomena by SETA. Efficiency of the training may be described by the following output:

- a network of journalists on national and local level writing about drug related problems was established;
- contacts between journalists and professionals were improved;
- opinion of journalists about drugs global phenomena was formed;
- journalists assist to NGOs;
- journalists become more professional in analysis of drug related problems;
- journalists seek for professional advice.

Results of the training were extremely positive, cooperation between journalists and specialists improved, journalist further willingly participate and take interest in this field and all related events. All problems are openly discussed with the help of mass media, the network of journalists for revealing problems and developing them was established. A publication compiled of newspaper articles about drug problems in Lithuania shall be issued. Lithuanian journalists participated in the PHARE/Pompidou Group seminar on the role of mass media in prevention activities. The National TV and Radio expressed interest in the development of special anti-drug programs. Currently the TV broadcasts a half an hour program and the National Radio has a 20 minutes weekly program on health education, which episodically include references on drug issues. Underlining the potential importance of the TV programs, findings from a survey indicate that respondents perceived, as the most effective means, the health information by the TV (50,3%), the radio (32,6%) and printed materials.

16.6. Telephone help lines

In Lithuania numerous organizations providing social and psychological help to young people have been established lately. The telephone psychological help network in established. The resolution of the Government was adopted that telephone help lines could be free of charge who seeking help. Volunteers according to special 100 hours program are prepared to work on help line.

Lithuanian Association of Telephone Psychological Help Services Telephones and working hours Calls to 8-800 xxxxx are FREE

Alytus, psychological help telephone

8-235 72224

daily 18.00 - 06.00

Druskininkai, youth line	8-800 23300	daily 16.00 - 21.00
Kaunas, youth line	8-800 77277	daily 19.00 - 07.00
Kaunas, psychological help telephone	8-800 76260	daily, 24 hours
Klaipeda, youth line	8-800 66366	daily 16.00 - 20.00
Klaipeda, psychological help telephone	8-800 60700	daily 20.00 - 7.00
Marijampole, youth line	8-800 71010	daily 16.00 - 19.00
Panevezys, psychological help telephone	8-25 516060	from 20.00 Friday to 20.00 Sunday
Sakiai, youth line	8-247 60225	Tuesday and Thursday 17.00 - 21.00
Siauliai psychological help telephone	8-800 11111	daily 21.00- 9.00
Siauliai, youth line	8-800 11111	working days 16.00 - 21.00
Telsiai, psychological help telephone	8-800 17000	Monday, Friday, Saturday, 17.00 - 23.00
Vilnius, children line	8-800 28800	daily 16.00 - 21.00
Vilnius, youth line	8-800 28888	working days 16.00 - 07.00 Saturday, Sunday 24 hrs
Vilnius, crisis center for women	8-22 616380	working days 09.00 - 21.00
Vilnius, psychological help telephone	8-800 20002	working days 13.00 - 20.00
Visaginas, youth line	8-266 60099	working days 15.00 - 18.00
Vilnius School line	8-800 28080	daily 8.00 - 17.00
Mazeikiai psychological help telephone	8-293 65555	Tuesday, Thursday, Saturday 19.00 - 22.30
Klaipeda children line	8-26 341111	daily 14.00 - 20.00
Kaunas children line	8-27 311112	daily 16.00 - 21.00
Kursenai youth line	8-21 585000	daily 15.00 - 22.00

Availability of information about help organizations for young people that could assist them in various situations is of particular importance. This information is also useful for the people who are engaged in work with youth, i.e. teachers, social workers, psychologists, medical staff, NGOs with social orientation, and employees of public institutions.

Need for information regarding psychological – social services is very important for the telephone help services. For example, about 20% of those who addressed the Youth Hotline in Vilnius looks for different information; young people ask what organizations they could address if they had communication problems, wished to stop using drugs, what engagement was available to handicapped, to engage themselves in positive leisure activities, etc. Taking into consideration this need the Youth Psychological Help Center issued the publication *Social and Psychological Help to Youth* funded by the USA Baltic Foundation DEMNET. Other organizations also take effort to produce leaflets, stickers including names, telephones, addresses of various organizations providing psychological – social help to youth.

16.7. Community programs

Primary prevention of drug addiction in community is the first priority for Lithuania in the drug demand reduction field. The drug abuse situation worsened in the last years very rapidly and especially among young people, teenagers. According to the results of researches the drug abuse threaten for health of young peoples their future and stay a threat for a society, future generation. Young peoples are experimenting with drugs and have no adequate knowledge about dangerous consequences, how to avoid them. The drug supply has been growing and the drug suppliers are working in a persuasive way to use drugs, propose it. Young people reported that they need information. The information they have usually is not fully right. The community groups that are very near youth - parents, teachers, friends, health care workers – do not have information either how to prevent drug abuse among them or to help at the very early beginning.

Implementation of the local project on TA to DDR “Primary Prevention on Drug Demand within the Local Community of Klaipeda City” aimed at increasing the role and awareness of the community of Klaipeda, enhancement of primary prevention and respective capacity building within the community, encouraging of knowledge on drug related problems in the community.

The implementation of the project in local community started in December 1998 and continued till October 1999. The implementation of the project went through different stages and different activities and the main goals of the project “awareness rising in the local community” were achieved. This TA DDR project “Primary Prevention on Drug Demand Reduction within the Local Community of Klaipeda” became as an examined primary prevention model for adaptation in other local communities for drug prevention in our country. Introduction of the project in the community was supported by active participation of the target groups. The community is interested to continue activities, which started on this project. It was something very new and impressed the community. The new projects for the continuity of this one were established and have support (*Parents school* project in Klaipeda and others).

The role of the TA to DDR project within the national context of drug demand reduction is very important, in particular it is related to the National Drug Prevention Strategy. This plan was evaluated as a very concrete step to primary drug prevention in local communities, with expectation that it will be used for future activities in the country.

Lithuania participated in the TA DDR sub-regional project on “Primary Prevention of Drug Demand within the Local Community” together with other cluster Countries - Albania, Bosnia & Herzegovina, Poland and Slovenia.

Another example model of the local community project was created with the support of Council of Europe Pompidou Group DRSTP I project in Druskininkai. The methodological material on community projects has been prepared.

According to the National Drug Prevention Program, community programs are very important. In every community prevention programs are implemented, but they do not always address global approaches to drug prevention in local community. The Ministry of Health supports preparation of the model of the local community program on drug prevention based on the experience of Klaipeda City.

Vilnius signed agreement of “European Cities Against Drugs” and implemented the community program with the support of this organization.

Kaunas participated in “Health Cities” program and implemented community programs against harmful habits. Mass media participated in the community programs very actively. In every community minor local projects are implemented in relation to substance abuse prevention among youth.

16.8. Outreach work

Special advisory centers with the needle exchange programs for drug addicts and prostitutes were established. In Klaipeda in May 1997, the city authorities initiated a needle exchange program and opened "a drop-in treatment" center. This enabled drug users to exchange a limited number of syringes and obtain information on drug treatment and drug prevention. The establishment of the 'drop-in treatment' center in Klaipeda was followed in October 1997 by outreach needle exchange project in Vilnius, run by the non-governmental organization "Salpa" and Vilnius Narcological Center. The project exchanged more than 33.000 clean needles and syringes in its first year of operation. It employed stable patients from the methadone program as outreach volunteers. Both needle exchange programs included peer education on HIV prevention, advice and information on treatment and other medical services. Leaflets, brochures, condoms are offered along with clean needles and syringes. A program offered its telephone number as a hot -line. Needle exchange programs followed in Druskininkai, Panevezys, Visaginas.

The AIDS Center established a social advisory room with needle and syringe exchange program in the Vilnius for prostitutes and drug addicts.

The special magazine "Saugok sveikata" ("Save the Health") for prevention of drug addiction and AIDS and for safer drug use and safer sex is available at the AIDS Center.

There are street clubs for risk groups, teenagers most who are snuffers of glue. The clubs are related to the sobriety organizations and started to work on offence prevention program. The street clubs have special social programs for teenagers with drug prevention activities who are glue snuffers. The day centers "Save the Children" are working with marginalized teenagers from delinquent families

16.9. Low threshold services

Activities within this field have just started. Crisis centers, common-lodging houses in municipalities, counseling centers with needle/syringe replacement programs for drug addicts have been established. Unfortunately, the network has not been adequately developed, for its start NGOs and municipalities contribute.

16.10. Substitution and maintenance programs

Methadone maintenance program after very careful preparation period was allowed by the order of the Health Ministry in 1995 and started in major cities in Lithuania as pilot programs, i.e. Vilnius, Kaunas, Klaipeda, in specialised institutions.

The evaluation was carried out in 1996 by Swedish experts Karolinska Institute, Department of Neuroscience section of Psychiatry, St. Goran Clinic of Dependence Disorders.

In 1998, the substitution therapy program started in Druskininkai (for a small group) and in three primary health care institutions of Vilnius in collaboration with the Vilnius Narcological Center.

In 1999, in the methadone substitution therapy 577 persons participated (493 in 1998), i.e. 236 in Vilnius, 200 in Kaunas, 118 in Klaipeda, 23 in Druskininkai. Part of the patients participating in the program were influenced positively, others continued using other drugs besides methadone. Control capacity is very limited because of lack of

facilities, overload of work for the personnel, limited social and psychological measures, also the social integration of the drug addicts is limited due to increasing unemployment. Financing of the substitution therapy has not been adequately solved.

To the extend possible, the Vilnius Narcological Center made a lot of efforts for implementation of the substitution therapy, published methodological recommendations, translated and published books, produced special video on drug related health problems.

The needs for revision of regulations of the methadone program and admission criteria to the methadone substitution therapy are planed to review by the Ministry of Health. Decentralisation of the program from the specialised center to primary health care institutions is planed in relation to reorganisation of specialised health care, establishment of dependence disorders centers in the counties.

16.11. Prevention of infectious diseases

Prevention of HIV infection among drug users is a part of the State AIDS Prevention Program on prevention of infection diseases including AIDS and hepatitis, and is being implemented through different programs particularly among IDUs.

The national program on prevention of infectious diseases (HBV, HCV) is under preparation.

In 1997, an anonymous consultations and needle/syringe replacement office was opened in Klaipeda. Information about protection against HIV and other infections, as well as treatment possibilities for these individuals who have mistrust towards health care institutions, are being provided to drug users. Provisions for the replacement of needles and syringes were also established in Vilnius.

In 1999, various needle/syringe programs operated in Vilnius, Klaipeda, Druskininkai, and Panevezys. These efforts resulted in comparatively better social contacts with drug users, and slower spreading of HIV infection in Lithuania.

16.12. Treatment systems

In 1999 according to reports by health care institutions, 2323 drug addicts were treated, 400 drug addicts applied for the first time for medical advice.

Funds for treatment of drug addicts are provided from two sources: the state budget and patient insurance fund, and according to the Law on narcological care and other health system laws treatment of this group must be financed from the state budget.

The capacities of the national institutions for treatment of drug addicts are limited. Specialised dependence disorders treatment centers operate only in Vilnius and Klaipeda – the Vilnius Narcological Center and the Klaipeda Center for Dependence Disorders. In Kaunas drug addicts undergo treatment in the Narcological Department of the Kaunas Psychiatric Clinics, in other towns and regions treatment of drug addicts are provided in psychiatric and out-patient institutions – in primary health care establishments, i.e. mental health centers and special narcological units. For implementation of the Law on Narcological Care, staff of the primary health care establishments also take part in treatment of drug addicts. Detoxification services are provided in special narcological units in Vilnius, Kaunas, Klaipeda, also in the Toxicology Department of Vilnius University and Toxicology department in Children clinics in Vilnius.

The First Aid Hospital in Vilnius is addressed by many drug addicts due to emergency medical indications. In other towns drug addicts are provided help due to overdose in reanimation wards. After detoxification patients should undergo rehabilitation but this component is not developed yet.

In the country (Vilnius) there are only 22 places for rehabilitation. Rehabilitation institutions were established in the Vilnius Narcological Center and the Lithuanian AIDS Center.

In different towns and regions mental health care centers (49) are established. Detoxification and rehabilitation institutions that will observe drug addicts and engage in treatment and rehabilitation activities are planned following the Law on Mental Health Care, the Law on Narcological Care and in accordance to the National Drug Control and Drug Prevention Program 1999-2003. Funds will be provided for improvement of treatment facilities for drug addicts, establishment of new ones.

Establishment of 5 dependence disorders centers on county levels is under preparation, respective documents are under preparation and being coordinated for necessary decision by the Government. Based on the Decree by the Ministry of Health (1998) the Narcological Center in Vilnius and Dependence Disorders Center in Klaipeda are under reorganisation into county level centers. Establishment of county dependence disorders centers was planned in Kaunas, Klaipeda and Siauliai for January 2000 but was postponed due to financing problems.

The Klaipeda Municipality adopted the Resolution on establishment of a rehabilitation center in Klaipeda, such rehabilitation places are also planned to establish in other cities according to the plan of the National Drug Control and Drug Addiction Prevention Program, supported by the Ministry of Health and Ministry of Social Affairs and Labour, local authorities.

Prior to 1995, the treatment of drug dependent individuals was usually limited to detoxification in psychiatric hospitals, later more attention was given to the social needs of these marginalized groups, a broader application of out-patient health care and rehabilitation, including methadone treatment programs, was introduced. Out-patient substitute treatment programs have been operating in Vilnius, Kaunas and Klaipeda since 1995 and Druskininkai since 1998.

Drug treatment approaches and capacity:

- Treatment coordination: carried out at municipal level;
- Inpatient detoxification: in 7 psychiatric hospitals and specialised drug detoxification units;
- Drug -free residential rehabilitation: 2 rehabilitation centers, 22 treatment places, since 1993;
- Outpatient detoxification with methadone. Since 1997, in 4 medical facilities (3 municipal and 1 state);
- Methadone maintenance: methadone maintenance programs in 4 cities (577 patients), since 1995;
- Needle exchange, outreach: needle exchange in Vilnius and Klaipeda municipalities since 1997, in AIDS prevention Center since 1998;
- Outpatient drug free treatment services: referral to inpatient, follow-up detoxification;
- Overall treatment capacity in 1999: 2323 drug addicts treated (75% of registered drug users);

- NGO in treatment and support of drug users: nearly 15 NGOs, are working in harm reduction programs, outreach in Vilnius, Klaipeda, Visaginas, Druskininkai, 1 NGO working in out-patient 12 step program; some activities NA (Narcotics Anonymous).

16.13. After-care

In all towns functioning mental care centers keep contacts with the former patients. Common-lodging homes are established for those released from prisons. Patients are also taken care by public organizations and the community providing support to recovering alcoholics and drug addicts, implementation of different programs is carried out. Two rehabilitation communities are established in Vilnius.

16.14. Self-help groups

In Lithuania many AA groups, in major cities in particular, as well as clubs of anonymous drug addicts are performing, most of them are working according to Minnesota program on 12 steps Alanon family clubs, societies for support of recovering alcoholics and drug addicts, temperance organizations that actively cooperate with persons who formerly had been dependent of alcohol or drugs, societies of parents of drug addicts exist. Long traditions are with the temperance clubs that unite families after treatment. Their activities are multi-lateral, numerous young people join this very important field of activities

16.15. General health care

The beginning of independence in Lithuania is related to major demographic changes in the country. The main demographic changes started in 1990 when the birth rate reduced to 0.76%, and in 1992 the population started to reduced for the first time after World War II. In 1997 this indicator was 0.09%. Clear tendencies of population aging are noticed. The number of people 60 years old or more is increasing and currently they account for 18% of the population. Both in cities and rural areas the number of old people is increasing and the number of children (0-14 years of age) is decreasing. In 1970 the number of children exceeded the number of old people by 82%, currently – only by 16%, and in rural areas the number of old people exceeds that of children.

Since 1991, new unpredictably low birth rate tendencies started. In 1997, the number of births was 37 812, i.e. 34% less compared to 1990. The accumulated birth rate indicator reduced from 2,0 to 1,39 respectively. In recent years the decreasing tendencies are still observed but its rate is lower.

The principle indicators for human health are as follows: the average life expectancy at birth and at the age of 40, mortality, morbidity, infant mortality. In 1997, the morbidity tendencies continued as in the previous years. In general morbidity of adults increases: 498,2 cases per 1000 adult population (1996 – 429,2), i.e. every second adult was ill. The general morbidity level of children increases. In 1997 each Lithuanian child was ill 1,4 times.

Regarding the death rate, two periods are distinguished during the independence years: the death rate increase in 1990-1994 and the death rate decrease in 1995-1997. Thus the death rate decrease is noticed within the last years. In 1997 the number of death cases accounted for 41 143. Compared to 1994, the death rate reduced by 11%. Because of these birth rate changes the future life expectancy extended for men by 3 years, for women – by two years. In 1997 the average future life expectancy for

men was 65,9 years, for women – 76,8 years. The most frequent death causes are diseases of the circulatory system, tumors, accidents, suicides, injury and poisoning.

Objectives of the Lithuanian health care strategy including health care from birth to death are related to problems of the transitional health system reform. The health system reform was foreseen taking into account the WHO Lubiana Charter on the health care reform. Its main principles aim at improvement of human health but not reorganization of the health sector itself. The reform orientation is aimed at service quality and adequate financing, the reform is focused on development of primary health care. In 1994, the Law on Health System provided further health care legislation program. The following related laws were adopted: on health insurance, health care establishments, rights of patients and harm remuneration, pharmaceutical activities, doctor's medical care, mental health care, narcological care, human infectious diseases and control, tobacco control, alcohol control, medicine, narcotic drugs and psychotropic substances, precursors control.

The following bodies were established: the Municipal and State Health Funds to finance prevention programs, the Governmental Health Commission, State Tobacco and Alcohol Control Agency, State Medical Audit Inspection, State Medicine Control Unit, Forensic and Legal Psychiatry Unit, State and Territory Patients' funds, other institutions. Primary health care was separated from the secondary one. The public health care is undergoing reorganisation. For the implementation of the national health care concept and the WHO doctrine "Health for all in the 21st Century" and aiming at re-orientation of the health policy to health preservation and strengthening in all health care levels, also ensuring the population involvement in formulation of the health policy, short-term and long-term health reform goals have been foreseen. The level of mandatory health activities in the country are determined by foreseen health programs following recommendations by the WHO regarding the prioritised health activities.

Health care for alcohol and drug addicts is prescribed in the Law on Narcological Care. The primary health care staff must have knowledge and be competent to provide the first aid based on indications, also to participate in treatment programs of these patients, perform interventions, to observe such families with children, to actively participate in identification of such patients, to provide counseling regarding treatment in specialized units. If necessary specialized aid must be provided in all health care establishments. Training of primary health care doctors is planned. General health care professionals participate in methadone substitution therapy and the establishment of respective subdivisions in three primary health care institutions has been introduced in Vilnius.

The training program for general health care workers on participation on the drug demand reduction network has been prepared by the Vilnius University Psychiatric Clinic. A special handbook was prepared and published.

Training on DDR for GDP was arranged in Klaipeda city in the line with the local community program, National Drug Control and Drug Prevention Programs.

The participation of primary care practitioners in the treatment of drug users immediately offered some advantages, i.e. patients could more easily make daily visits and receive treatment leading to better general health care. Employment of the general health care practitioners in methadone maintenance was found to be especially effective in reaching socially and economically deprived Romany (gypsy) community in the outskirts of Vilnius, where drug use is a serious problem. This marginalized, ethnic minority community which tended to be very suspicious of any "outsiders", appeared to trust the practitioner as a provider of basic health care and preventive measures

(including needle exchange and methadone treatment). Due to positive prolonged contacts with the community, GPs are in an excellent position to provide information on AIDS prevention and safer drug use, attract a significant percentage of these drug users.

Despite the positive experience in providing treatment by a primary health care practitioner to drug dependence patients, it is still an open question how widely such treatment will be accepted.

16.16. Criminal justice system

For illicit trafficking of narcotic drugs and psychotropic substances punishment is imposed in compliance with the provisions of the Penal Code of the Republic of Lithuania. Recently, more severe penalties for illicit trafficking of narcotic drugs and psychotropic substances have been introduced. Offence related to illicit trafficking of narcotic drugs and psychotropic substances is considered as follows:

1. Illicit production, acquisition, possession, transportation or shipment of narcotic drugs and psychotropic substances, without aiming at selling or distribution otherwise, is to be punished with imprisonment up to three years or penitentiary restriction up to two years. If the same offence occurs repeatedly the punishment imposed shall be imprisonment up to five years;
2. Illicit production, acquisition, possession, transportation or shipment of narcotic drugs and psychotropic substances, aiming at selling or distribution otherwise, or selling or distribution otherwise is to be punished with imprisonment from three to ten years;
3. Illicit production, selling or distribution otherwise of particularly strong narcotic drugs and psychotropic substances that cause danger to health, is to be punished with imprisonment from ten to fifteen years. The same actions performed repeatedly by a person who earlier had committed a crime, or by a group of persons being in advanced agreement, or by a dangerous recidivist, also distribution of narcotic drugs and psychotropic substances in large quantities are to be punished with imprisonment from ten to twenty years;
4. A person who gives away narcotic drugs and psychotropic substances voluntarily is released from the penal liability for possession, acquisition, transportation and shipment of narcotic drugs and psychotropic substances he gave away;
5. A person who contacts a health care establishment voluntarily regarding use of narcotic drugs and psychotropic substances not for medical purposes to be rendered medical assistance is released from the penal liability for possession, acquisition, transportation and shipment of narcotic drugs and psychotropic substances;
6. For seizure of narcotic drugs and psychotropic substances a person is punished with imprisonment up to five years. The repeated offence or offence performed by a group of persons in advanced agreement or committing violence not incurring danger to one's health or life, or persons trusted the above substances for custody are punished with imprisonment from three to ten years depriving them the right to occupy certain positions or to perform certain jobs or to be engaged in certain activities. Seizure of narcotic drugs and psychotropic substances in big quantities is punished with imprisonment from seven to fifteen years;
7. Keeping dens including narcotic drugs and psychotropic substances is punished with imprisonment from five to ten years;
8. Pressure to use narcotic drugs and psychotropic substances is punished with imprisonment up to five years. The same actions performed against few persons is punished with imprisonment up to ten years. The same actions performed against a teenager is punished with imprisonment from ten to twenty years;

9. Violation of regulations for production, acquisition, record keeping, transportation or shipment is punished with imprisonment up to three years or penitentiary restriction up to two years, depriving them the right to occupy certain positions or to perform certain jobs, or to be engaged in certain activities.

Penalties

Involvement of an underage person into use of medication not for medical purposes, as well as other substances shall be provided imprisonment up to 5 years.

For growing of prohibited poppies as well as cannabis the punishment includes imprisonment up to 5 years, and if the same prohibited action repeated - imprisonment up to 8 years.

Illegal growing of oil poppies and cannabis includes monetary penalty. If such offence has been done repeatedly within a year of imposing administrative penalty includes punishment of imprisonment up to 3 and penitentiary restriction up to 2 years, if other offences incurred also - imprisonment up to 8 years. Intoxication when performing offences is considered as aggravating circumstances.

Health care

According to the data of the health care service of the Ministry of Interior, in 1999 in the establishments of the Ministry of Interior there were 14.182 persons, including 11.263 sentenced and 2.763 under investigation. 25 % of the registered drug addicts in country constantly are in prisons. In 1999 there were 1072 drug addicts.

About 35% prisoners are infected with hepatitis B and C. In 1999, among prisoners 109 new cases of hepatitis were identified, including hepatitis B -71 cases and hepatitis C - 38 cases.

The prisons have their internal health care system and detoxification is provided to drug addicts, as necessary. No substitution therapy programs are implemented there. The prisoners get drugs in prison in illegal ways, one of them being through prisons' staff, and such cases were disclosed.

The prison system is under reorganization under subordination of the Ministry of Justice, the Penal Code is being reviewed. Imprisonment alternative is discussed in relation to the Penal Code if a person who contacts a health care establishment voluntarily regarding use of narcotic drugs and psychotropic substances not for medical purposes to be rendered medical assistance is released from the penal liability for possession, acquisition, transportation and shipment of narcotic drugs and psychotropic substances.

A person who gives away narcotic drugs and psychotropic substances voluntarily is released from the penal liability for possession, acquisition, transportation and shipment of narcotic drugs and psychotropic substances he gave away.

16.17. Gender-specific issues

The state of women's health is better than of men, mostly due to difference in lifestyle between the two genders. Smoking, consumption of alcohol and drugs is far less noticed among females than males; female mortality caused by accidents, poisoning and trauma is four times lower respective male mortality; suicide level was 5,4 times lower among women than among men in 1998; women are affected with tuberculosis, sexually transmitted diseases and AIDS more rarely than men.

The number of women addicted to alcohol and drugs has always been smaller than that of men. This can be explained by the society high requirements to women, as well as their responsibility for children, traditions, education of girls in a family.

In 1999, out of all (3082) registered drug addicts in health care institutions women accounted for 19,1 %; the main part of drug addicts is registered in towns (94 % in towns and 6% in rural areas).

The ESPAD survey carried out in 1995 and 1999 shows growing substance abuse among schoolgirls (particularly high use of tranquilizers in Vilnius) that may lead to the situation changes in the future.

16.18. Children of drug users

Lithuania is a party to the Children's Rights Protection Convention and in the line with this Convention the Law on Protection of Children Rights has been adopted in Lithuania. The Law on Narcological Care prescribes that such families including underage children must be observed, local governments have special programs, organize summer camps for such children.

Children growing in families of alcoholic and drug addicts need help by social care service units as they are poorly looked after by their parents and have health problems. A network of children's rights protection units covers all the country and have established day care centers for these children. Such families are attended by respective staff, sometimes parents are deprived of their rights and children are put into state institutions and orphanages. Family communities to take care of such children are also established.

About 10% of drug addicts marry and have children, sometimes with inborn abstinence syndrome due to mother's dependence of drugs. There were cases when mothers participating in the methadone program had children, who very frequently were growing with their grandmothers. Usually drug addict parents are not able to take care on their babies.

16.19. Parents of drug users

Parents of drug users at first established self-help organizations in Vilnius, Kaunas, Klaipeda and Druskininkai to facilitate mutual support, mainly through requests to provide respective rehabilitation facilities. Their activities are based on development of help to drug addicts, the parents try to contact international organizations.

At present the parents' organizations are active and have their own projects for DDR, harm reduction outreach line, funded by local communities, but mostly on secondary and tertiary prevention - consultations and support for drug addicts. They are involved in counseling or family therapy of drug users' parents. Also, parents of drug user participated in the special training for parents' trainers for primary drug prevention in school and in family.

With the worsening situation in terms of drug supply in schools all parents are invited to take part in the drug prevention activities "Stop drugs in schools".

16.20. Drug use at the workplace

Drug and alcohol use in workplace is prohibited, a person may be released from his position due to the fact if alcohol content in blood is 0.4 promile, or if drugs in the body are found, or a person is dizzy. Disagreements may be solved based on expertise to

determine the alcohol or drug level carried out by health care establishments, and this expertise certification would be basis for court procedures. Special control is imposed on staff working with high-risk equipment. Employers have a big choice of labour force, no programs related to drug use at the workplace are implemented. The Ministry for Social Safety and Labour plan prevention programs to be implemented at the workplace. According to the Law on Narcological Care treatment on volunteer basis may not cause to release a person dependent on alcohol or drugs from his work.

The Workers' Union frequently expresses concerned about worsening situation in terms of accidents related to alcohol and drug usage at work (about 25%). High percentage of accidents at work is closely related to substance abuse. The establishment of substance abuse prevention programs on the work place is on the agenda of the Workers' Union.

The Ministry of Social Affairs and Labour according to the National Drug Control and Drug Prevention Program is responsible for the implementation of drug prevention programs at the work place. According to Lithuanian laws usage of psychoactive substances, alcohol and drug at the workplace of high risk for health of other people is prohibited.

The testing of employees before accepting to job is carried out used in some industrial establishments.

16.21. Ethnic minorities

The gypsy community in Vilnius is a very special ethnic minority in Lithuania, which have urgent drug problems. "*shirka*" is always available in two gypsy (Romans) communities located near the airport. This drug is manufactured by boiling the "straw" in a large container and adding acetic anhydride to the decoction. Users often consume "*shirka*" immediately in the place where they buy, i.e. sharing of needles and syringes is widespread. A dose of "*shirka*" costs 10 Litas (equal to USD 2,5) (OGD). The members of gypsy community use the drug themselves and earn their living from illegal drugs. Different actions on drug prevention, harm reduction of drug abuse within the above community were implemented by the Vilnius Narcological Center together with general practitioners, such as methadone, needle/syringe replacement programs.

Police organizes special actions for seize of drugs, big quantities were seized but no significant improvement has been noticed there.

The Department of Minorities by the Government has prepared a social program for this gypsy minority including drug prevention activities.

17. QUALITY ASSURANCE

17.1. Research

Quality assurance research is planed within the National drug Control and Drug Prevention Program. Up to now researches on quality assurance of drug demand reduction activities have been very limited. The needs for such activities are obvious because different programs in community are implemented. The evaluation was carried out by interviews and questionnaires and this may be considered only as beginning of quality assurance. The experience of other European countries and methods are very important for this task. Manuals prepared by EMCDDA, "Guidelines

for the evaluation of drug prevention” are very useful material for program planers and evaluators, they were received and delivered in Lithuania.

17.2. Evaluation

Evaluation of participation in substance abuse prevention by institutions

In 1998 interviews in Klaipeda city were carried out with institutions participating in the substance abuse prevention (PHARE TA to DDR project). The interviews aimed at these goals: to obtain general information about the institutions; to identify participation of the institutions in the substance abuse prevention (primary prevention among youth, risk groups, drug addicts); to investigate inter-cooperation of the institutions and to learn the opinion of respondents about the youth generation in the city. 76 different institutions including 65 public institutions and 8 non-governmental institutions, 5 private ones participated in the survey.

The survey shows that about 82% of interviewed institutions are engaged in the substance prevention work among young people. Each organization devotes about 32% (the range is from 2% to 100%) of its time to prevention work among young people. It is obvious that activities of youth education institutions and NGOs are orientated towards this work. The health care sector, municipal structures, police, mass media and some other institutions include units within their structures that organize substance prevention work among young people. The names of these units are different varying case by case, for example, in schools these are usually councils, commissions.

About 64% of the respondents said that their institutions worked with young people who tried to use substance. The institutions devote about 26% of their time to this work – individual meetings with schoolchildren, their parents are organized, psychological telephone help is provided on the “youth line”, the teenagers’ club and the youth club exist, etc. 13 (17%) of the institutions who participated in the survey had units to work with risk groups. The survey data show that mainly the health sector, NGOs and mass-media are involved in work with drug addicts. 14 (18%) of the respondents said that their work was directly related to drug addicts.

A conclusion was drawn that cooperation among various institutions engaged in the substance prevention was not sufficient. The most efficient substance prevention methods in Klaipeda were as follows:

- training of staff engaged the substance prevention, coordination of activities;
- organizing of leisure time activities for youth;
- resolution of employment problems for school graduates;
- control of illicit drug trafficking;
- treatment and rehabilitation of drug addicts.

Youth organisations contribute their efforts to counteract the drug abuse phenomenon and implement various programs including the social ones against alcohol and drug abuse, thousands of young people participate in the youth temperance movement, work as volunteers at the telephone hot lines.

In Lithuania numerous organizations providing social and psychological help to young people have been established lately. The telephone psychological help network has been established.

Evaluation of work with Focus Groups, September 30th – October 1st, 1999

In order to evaluate the PHARE project Technical Assistance to Drug Demand Reduction project in Klaipeda “Primary drug prevention in the local community”, after completion of the project six focus groups in Klaipeda were organized. The focus

group methodology, which was discussed during sub-regional meeting in Vilnius 27 March 1999 and common questionnaire were applied in the work of the focus groups. The groups were homogenous: policemen, parents, teachers, youngsters, general practitioners and authorities of Klaipeda municipality, others decision making institutions.

Five main questions were discussed during the meetings:

- How would you evaluate drug abuse as a problem of your community against the background of other social problems?
- How would you evaluate collaboration among local institutions in the field of primary prevention of drug abuse?
- In recent year this collaboration has improved, worsened, has not changed?
- From perspective, could you give examples of activities, actions in the field of primary drug prevention, which have been undertaken in your community during current year?
- Proposals for the future.

The total number of the participants in focus groups was 66 persons plus 8 persons from mass media. All participants agreed that substance abuse among others is one of the main social problems in Klaipeda. It goes together with unemployment and poverty. It was stressed that substance abuse is a rising problem among youngsters.

The collaboration among local institutions in primary prevention of drug abuse was discussed. The main focus was made on the PHARE project in Klaipeda. During the project major of institutions had possibilities to acquainted each other better and some of them found new partners for the future collaboration, especially collaboration between governmental and non-governmental organizations. There were 26 local institutions collaborating on primary prevention of drug demand at the beginning of the project, and 76 institutions at the end of the project. Some of the participants noted that collaboration between local institutions started just during the project and collaboration should be strengthened in a future. In 82% among all responses it was said that the quality of collaboration during project improved.

All participants evaluated training seminars on drug demand reduction within community as main activity in the city during current year. Introduction of the health curriculum in secondary schools also was very important event in the city. Mass media is taking very active role in the city life concerning information about drug use, crime and so one. "The Snow Ball" and other programs for young people were introduced and successfully implemented. Harm reduction programs (syringe exchange, methadone program) are very important for drug addicts. The NGO "Antrasis gimimas" (Second Birth) is an organization of parents of drug addicts to be good advisors for other parents in the future.

All focus group members pointed out that PHARE seminars were very useful for them at their work, and were well organized. The printed material and other information papers provided them with newest information about substances, substance abuse and addiction. For the process sustainability is necessary to create a network organization for drug abuse primary prevention and a strategic plan of the drug demand reduction should be paid proper attention in the city. The specialists agreed that specialized publications, video, seminars and focus group meetings are very important for improved results of their work.

During a meeting with authorities strategy on primary drug prevention in the city was discussed. The Public Health Center in Klaipeda is an institution that will take a leading role in those issues in the Klaipeda city community.

Assessment of prevention activities

Currently assessment of the prevention programs, measures implemented in Lithuania is carried out. Efforts to answer the following questions are made: what is compliance of the programs to their goals; how are these programs valued by schoolchildren, young people; what organizations, institutions perform this work, etc.

Currently in Lithuania numerous organizations representing youth interests exist. Interviews with 48 youth organizations show that activities by 20 of them are more or less related to substance abuse prevention. Workshops, discussions, training for youth leaders are organized to deal with drug problems. Representatives of youth organizations think that the youth organizations had to contribute more to this field (42%) and even to influence preparation of laws related to substance abuse problems (29%). According to young people aiming at drug prevention more attention should be paid to:

Leisure organizing	44%
Psychological education of youth	36%
Education by families	35%
Psychological and social support to young people	30%

Unfortunately, only 25% of young people know that organisations representing interests of youth exist.

The survey carried out in secondary comprehensive schools in Vilnius showed that substance prevention measures in schools are implemented rarely, they are poor and do not comply with the schoolchildren interests.

Answers by the schoolchildren provided to the question what arrangements/events about drugs are organized in schools:

Discussed at some lessons	57%
Lectures delivered	26,7%
Discussed at class meetings	17,4%
Discussions organized	16,3%
Discussed in school paper	12,9%
Posters, leaflets distributed	9,4%

The majority of the schoolchildren acknowledge that they do not have sufficient information on drugs. Nearly half of the students (40,5%) pointed out that they lack information on drugs and their harm to human organism. 47,8% of the 8th grade schoolchildren and 35,3% of the 12th grade schoolchildren pointed out lack of such information. It's interesting to note that even those using drugs recognize that they lack information on drugs. This was acknowledged by 34,2% of the schoolchildren using drugs.

According to the schoolchildren the best way to provide information about drugs is to organize special campaigns, concerts with a motto: "No to Drugs". With age the schoolchildren wanted to participate in discussions themselves instead of being passive listeners.

53,6% of the respondents provided their proposals how to stop drug abuse among youth. The rest felt rather pessimistic and their answers provided the opinion it was too late to do something about it, "nothing can be changed", etc.

Some children who provided their proposals supported punishment, bans, stricter regulation. They proposed to impose stricter punishment on drug dealers, to strengthen border control, laws, etc. Quite a large group of the children said that education about drugs, should be introduced to young people at earlier stage, different forms should be used. It was proposed to promote healthy lifestyle more actively, to encourage leisure activities of young people. In their answers the schoolchildren underlined that "all should consolidate aiming at solving this problem", i.e. young people, teachers, police, etc., because "only all together may change something". The schoolchildren expressed many reproaches: "Finally you addressed us"; "Youth should be continuously taken care of and not only when something happens"; "Maybe it's good drugs exist, otherwise you would forget us completely".

Having reviewed the prevention programs and measures implemented in schools and the survey among schoolchildren the following conclusions have been drawn by the investigators:

- No uniform drug prevention policy and strategy exists in Lithuania;
- Substance prevention programs implemented in schools are rather rare, poor and do not meet interests by schoolchildren;
- The majority of programs are teenager orientated;
- No education on substance abuse prevention among parents;
- Foreign prevention programs are not always adjusted for Lithuania;
- Shortage of methodology materials, visual aids.

The investigators provided the main requirements for prevention programs and measures to be implemented in schools.

17.3. Training

The under graduation training department in Vilnius University organizes training for general practitioners on dependence disorders.

Annually about 50 medical professionals are provided with 156 hours in-service training. For staff in prevention, the situation is less favourable and mostly limited to teachers. Six-hour information on drug issues within the university curricula of medical students is offered. For psychology and pedagogic students no systematic orientation is being provided, while limited orientation on drug issues is extended to students of social work.

The curriculum for a two year M.A course in public health is being developed with the help of Nordic countries, focusing on creation of health environment, which will not include specific orientation on alcohol and drugs. General training is still mainly provided within the framework of international assistance programs (Report by PCU; Riga, 1999.12.31. p.16).

For Vilnius University students who study psychology, a 32 hour course on psychological aspects of dependence has been provided since 1995.

As an important part in the DDR projects on drug prevention in a community is considered training aiming at preparation of local trainers to train different community target groups. Such course including a 2-3 day training program for trainers was arranged in Klaipeda, during which different target groups such as politicians, journalists, youth leaders, municipal police, teachers, parents, medical doctors were

trained (a special 3 days program for medical doctors was adopted by the Vilnius University Psychiatric Clinic, and the book based on this program was published). In Klaipeda, 156 persons for DDR activities in a community were trained in 1999. Thus the basis for drug prevention schools "Parents for Parents", "Teachers for Teachers", "Doctors for Doctors", "Youth for Youth" was established, with the contribution of trainers in local projects.

According to the WHO Project "Prevention of substance abuse among young people" which started in 1999 in Vilnius, a two day training program on DDR was provided to 50 young people, i.e. students of Vilnius University (psychologists, social workers) and leaders of youth non-governmental organizations.

Also, in two groups in a secondary school in Vilnius -30 teachers and 22 parents - were trained at the beginning of 2000, and training in 2000 with involvement of 50 students for DDR activities is under preparation in J.Basanavicius Secondary School in Vilnius.

According to the National Drug Control and Drug Prevention Program, training of different target group for DDR in a community is of high priority. In the line with the Council of Europe Pompidou Group Project DRSTP II the preparation of training materials for DDR in a community has started. The target groups are professionals, such as primary and public health care doctors, psychiatrists, psychologists, social workers. The DDR training for about 1000 professionals is planned according to the National PHARE Program 2000.

Quality assurance of the training is carried out based on questionnaires adopted taking into account the experience of PHARE program on DDR.

PART V. SPECIAL TOPICS

18. HEROIN, METHADONE AND SUBSTITUTION TREATMENT

18.1. Criteria and target groups for substitution treatment

The target group for substitution therapy in Lithuania is opiate users. Methadone maintenance program after very careful preparation period was authorized by the order of Health Ministry in 1995 and started in major cities in Lithuania as pilot programs, i.e. Vilnius, Kaunas, Klaipeda in specialized institutions.

The criteria to the admitting to the program were elaborated in accordance to the Swedish model. The professionals before starting were trained in Stockholm, Karolinska Institute. The training materials for Lithuanian professionals were prepared.

The admission criteria were: regular opiate user for 5 years, two or more unsuccessful attempts of drug free treatment, minimum age of 20 years, incurable disease and other individual reasons in accordance to the decision of the special commission on methadone program, investigation of mental, physical and social status was recommended before starting and during program, detoxification before the starting of program was recommended, control on abuse of other drugs was required, psychological and social assistance. The special regulations for methadone control and drug control were prepared. The starting dose-minimal effective, a patient was not allowed to use other drugs in parallel. Termination of the program was foreseen in accordance with health status improvement, in case of rough disturbing of the regulations, using of other drugs. Involvement of GP was not allowed, take home doses or prescription of drugs was not allowed, detoxification after termination of treatment not regulated.

Two years later, it was allowed to use methadone substitution therapy in primary health care Institutions, mental health care centers. Admission criteria were reduced: regular opiate injection for 2 years, unsuccessful attempts of drug free treatment, detoxification before the admitting not required but recommended, dosage of methadone not regulated, urine screens recommended, psychological and social assistance recommended, take home doses for stable clients or in extraordinary situations allowed, involvement of GP in the cooperation with MMTP, short detoxification 2-8 weeks was allowed, criteria of the termination of treatment - clinical indications, decided by methadone program commission, no age limitations.

The interest of drug addicts at beginning of the program was very high. One of the reasons that drug free treatment facilities - detoxification and rehabilitation were very limited also the special actions on promoting very positive treatment results of methadone took place in Lithuanian press. Some specialists were very interest to start this program, other specialists supported only development of drug free treatment facilities for drug addicts. The methadone policy was supported by mothers drug addicts, and this family factor was important.

18.2. Legal basis for substitution

The methadone maintenance program was allowed by the order No.252 by the Minister of Health in 1995. Methadone maintenance treatment started as high threshold programs.

After two years the regulations of the methadone program and admission criteria to methadone substitution therapy for drug addicts were revised by the Minister of Health (Order No.702; 1997), the latter was amended by Order No.68 by the Minister of Health; also, the Resolution on control of the substitution program by the Parliamentary Health Committee was adopted in 1998.

18.3. Organization, regulation and monitoring of delivery system

Organisation, regulation and delivery system related to methadone programs in Lithuania was established according to orders by the Ministry of Health.

Delivery of methadone to users is executed in authorised institutions, a user must consume methadone in the presence of medical staff, and solely in exceptional cases methadone is given to consume at home.

18.4. Choice of drugs for substitution

In Lithuania only methadone is used for substitution treatment.

18.5. Extent and characteristics of substitution programs

Extent and characteristics of the programs depends on professionals and varies with capacities of the institution, also regional features being taken into account. The extensive programs are executed in Vilnius, less extensive - in Kaunas and Klaipeda, and for minor target group in Druskininkai.

18.6. Number of profile of clients

In 1998, according to report by the Vilnius Narcological Center on methadone substitution therapy 493 persons participated in programs: all opiate intravenous drug users, i.e. 77% men and 23% women, with the age distribution as follows: 20-30 years old - 33%, 31-40 years old - 50%, over 40 years old - 17%. Termination of treatment in 1998, except 66% who remained on treatment, was as follows: 7% stopped to use methadone because of improvement of health, 4% were sentenced, 2% died, 21% fell out because started to use other drugs.

In 1999 the total number of 577 patients were treated with maintenance substitution therapy and 261 underwent outpatient detoxification with methadone.

Methadone maintenance treatment

From the total number of 577 patients 236 were treated in Vilnius Substance Abuse Treatment Center, 200 in Kaunas Psychiatric Hospital, 118 in Klaipeda Addiction Treatment Center and 23 in Druskininkai Primary Health Care Center.

The total number of 170 patients were admitted to MMT, from whom 118 (69 percent) were admitted for the first time and 52 repeatedly. From the patients admitted to MMT 93 percent (158) used home-made poppies and only 7 percent heroin.

The age groups:

under 20	13	(2,3 percent)
21-30	173	(30,0 percent)
31-40	290	(50,3 percent)
41-50	86	(14,9 percent)
over 50	15	(2,5 percent)

Male – 445 (77,1 percent), female – 132 (22,9 percent).

There were 16 HIV positive patients MMTs.

The overall outcomes of 4 MMT programs in Lithuania was the following:

Successful detoxification	17	(3,0 percent)
Drop-outs	77	(13,3 percent)
Excluded	3	(0,5 percent)
Imprisoned	26	(4,5 percent)
Remained in treatment	454	(78,7 percent)

Detoxification with methadone

The total number of 261 (205 males and 56 females) patients underwent detoxification with methadone. 175 in Vilnius Substance Abuse Treatment Center, 6 in Kaunas Psychiatric Hospital, 79 in Klaipeda Addiction Treatment Center, 1 in Druskininkai PHCC.

45,6 percent (119) of patients who underwent detoxification were in the 19-25 age group 33,0 (86) in the 25-35 age group.

From the patients who were accepted to detoxification 210 (80,5) used home made poppy extract and 51 heroin. Most of heroin users (34 out of 51) were non injectors:, e.g. heroin sniffers or heroin smokers.

The outcomes of detoxification:

Detoxification successfully was completed for 69 patients (26,5 percent), 64 patients after unsuccessful detoxification were transferred to methadone maintenance treatment (24,5 percent), 128 patients dropped out (49,0 percent).

There were 10 HIV positive in methadone detoxification.

18.7. Evidence on impact of substitution, e.g. in prison, or during pregnancy, attitudes of policy makers, professionals, public

The interest of the drug addicts at beginning of the program was very high. One of the reasons that drug free treatment facilities - detoxification and rehabilitation - were very limited. The methadone program was supported by Lindesmith Center. Policy on starting methadone programs was supported by mothers of drug addicts.

According to the data of Vilnius Narcological Center after two years analysis of the methadone program showed, that out of 170 patients, treated in two years 2/3 remained on the methadone program. For 100 patients, their health and social status was evaluated. The average duration in the MMT for the evaluated patients was 16,1 month.

40 % of the patients demonstrated a considerable improvement in general health status and social conditions, stopped to use illegal drugs, some got job, two women were pregnant and delivered babies. 32 % showed average improvement, 28% showed minimum improvement and continued to inject drugs demonstrating chaotic behaviour patterns. The latter category was problematic and difficult to manage.

The Vilnius Narcological Center made a lot of efforts for implementation of good practice on substitution therapy.

No methadone programs are implemented in prisons.

The substitution program is focused on by policy and decision maker, this issue was on the agenda of the Parliamentary Health Committee.

Public opinion and views by professionals, parents of drug users and drug users themselves are not uniform.

19. LAW ENFORCEMENT, DIVERSION TO TREATMENT, ALTERNATIVES TO PRISON

19.1. Use/possession for personal use of cannabis/heroin/cocaine

Doses for use, possession for personal use of cannabis, heroin or cocaine have not been established.

The use of drugs in Lithuania is applicable administrative measures, with maximum fine of 1000 Litas (USD 250). Illegal manufacture, purchase or possession of narcotic substances with no intent to sell is punished by imprisonment up to 3 years; possession with intent to sell is punishable by imprisonment up to 15 years (and for repeated offence up to 20 years). Although the share of drug-related crimes relative to the total number of solved crimes is not large, their number is rapidly growing.

In Lithuania, if the amount of drugs confiscated is small (for personal use) and the offence has been made for the first time, the court's sentence on detention is usually postponed on the conditions that the person enters a treatment program but treatment programs are not accessible everywhere. They exist only in big cities, there are waiting lists for free rehabilitation or substitution treatment programs. In order to improve the rehabilitation process of illegal drug users and to keep them out of prisons, there are needs to improve coordination between the law enforcement and health care sectors.

19.2. Property crimes related to drug use

The actual number of property crimes related to drugs is unknown. Firstly, property is taken from the user's own home to sell, to acquire money for drugs, and this pattern is usual beginning of the criminal life of a drug user. Drug abusers cannot get jobs, and for daily drugs they need about 60 -100 Litas (equal to USD 15-25).

In 1991-1998, the greatest share of registered crimes accounted for thefts, with their number showing a growth trend of 52% over this period (from 31 716 in 1991 to 48 213 in 1998). Like thefts, robberies also make up significant share of registered crimes, and their number was nine times higher in 1998 (3,646 cases) compared to 1991 (402 cases).

However, statistics alone does not necessarily reflected the actual crime level in Lithuania. Law and order institutions are only aware of a portion of the perpetrators and crime committed, and ultimately not all the accused are brought to trail. Theft, robberies, drug related offences are largely dependent on complaints lodged by public.

In 1999, 735 crimes related to misappropriation of property were committed by drug addicts. The number of crimes committed by individuals under the influence of drugs was 150.

19.3. Retail distribution of drugs

According to the Law on Control of Narcotic Drugs and Psychotropic Substances retail distribution of drugs is carried out by drugstores which have special authorization according to prescriptions of medical doctors in compliance with established procedures.

The retail distribution of methadone for substitution treatment is executed in the health care institutions (authorization by the Ministry of Health provided) to use up in the presence of medical staff.

20. WOMEN, CHILDREN AND DRUG USE

The Law on Equal Opportunities (1998) was adopted by Parliament, and based on this law the office of Equal Opportunities/Ombudsman has been set up (LHDR 1999).

The number of NGOs related to women's problems are gaining momentum and becoming more and more important for the society. According to the Lithuanian Women's Information Center which acts as a mediator collaborating with all the women's organisations, there were 63 women's organisations existing in Lithuania as of beginning of 1999.

Obviously, the state of women's health is assessed to better than that of men, as habits harmful to human health (like smoking, alcohol, drugs) are more spread among men.

According to 1997 national survey "Violence Against Women", personal security is very important to 61 % of women and important to 32 % of men. Most adult women (63,3%) having experienced male violence at some point in their lives beyond the age of 16. The survey revealed that violence at home and sexual abuse are very pressing problems in the society. At present victims of domestic violence may seek refuge in five shelter homes and three lodging shelters. The crisis center founded by the NGO Vilnius Women's House, as well as the Psychological Advisory Center in Jonava and Family Relations Office in Pasvalys provide advice regarding domestic violence. There are special telephone helplines in five Lithuanian cities, municipal police have created 40 telephone trust lines.

According to the data by the State Mental Health Center, in 1998, out of all drug addicts registered in the country's medical care institutions women accounted for 18,9% (out of 2062), in 1999 - 19,1 % (out of 3082 registered addicts). Women use the same drugs as men, mostly are IDUs. Female drug addicts have social difficulties because of unemployment and usually earn money on streets. The special consulting office "Demetra" was established in 1998 in Vilnius near the Railway station, managed by the AIDS Center. There social workers teach streetwalkers safe sex and safe drug use, possibilities to take a shower, to exchange needles are provided.

According to the Vilnius Narcological Center, in 1998, 23% of 493 patients receiving methadone substitution therapy were women. Two female drug addicts gave birth to two babies.

According to the AIDS Center, at the end of 1999, 201 HIV/AIDS cases were disclosed, including 180 men and 21 women (11, 6 %).

In the pregnancy period specific attention is paid to prevention of harmful habits, mothers participate in special training courses *Motherhood School* preparing for delivery, they are provided detailed information about harmful and negative impact of drugs, alcohol and smoking. Publications are provided to them, they are taught to refuse alcohol, reduce smoking, refrain from unnecessary medication. Much initiative in this field is demonstrated by the Family Planning Center, similar programs are being implemented by public organizations in cooperation with preventive organizations of foreign countries.

The situation regarding children and involvement of drugs has been worsening. In 1998, in health care institutions 28 drug addict children under 14 were registered 28 (1% of all drug addicts), in 1999 drug addict children under 14 accounted for 0,6 % of all registered drug addicts; in 1998, 288 children aged 15-19 years (10%), in 1999 - children aged 15-18 years accounted for 7,5 %. According to the epidemiological survey data drug use among children increased.

For families with little children, if parents abuse alcohol or drugs and provide poor care to their children social service units are informed of that and the social staff attends these families, sometimes parents are deprived their rights in compliance with the laws, and the children are put into institutions. In the line with the Law on Protection of Children's Rights the special services for protection of children rights were established in every municipality.

The non-governmental organization "Save the Children" works with risk group children, is engaged in prevention drug abuse among street children. According to the strategy of this organization, in 1999, 20 day care centers for the risk group children were established aiming at creation of secure environment for socially disadvantaged children, to provide pedagogical, social and legal assistance, give qualified help for the parents.

CONCLUSIONS

21. MAIN ISSUES AND FUTURE INFORMATION NEEDS

21.1. Summary of main points, key trends and new developments

In the course of its ten year independence period marked with transitional economic and social changes, Lithuanian authorities developed the national drug policy strategy and were provided assistance on illicit drug control by the PHARE Multi-beneficiary Program, the Pompidou Group, the United Nations International Drug Control Program and bilateral donors that facilitated the drug policy development in the country.

From 1994, Lithuania is a party to the UN Single Convention on Narcotic Drugs (1961) and the UN Convention of Psychotropic Substances (1971), in 1994 - ratified the Convention on Laundering, Search, Seizure and Confiscation of Proceeds from Crime, of the Council of Europe, in 1998 - ratified the UN Convention On Fight Against Illicit Trafficking of Narcotic Drugs and Psychotropic Substances (1988); in 1995 – the UN Convention on the Children Rights protection. In 1996, the Lithuanian Government together with other Baltic Countries, the European Commission and UNDCP signed the Riga Declaration on the Fight Against Money Laundering.

Lithuanian authorities established the main key coordination units for drug control and drug prevention. In 1995, the Narcotic Commission for licit drug control of the State Medicine Control Agency by the Ministry of Health and the Anti-narcotic Unit at the Police Department by the Ministry of Interior were established. Currently several operation services share the responsibilities of the illegal drug control, i.e. the Criminal Police, Municipal Police, Border Service, Customs Service, State Security Department. In 1995, the Governmental Drug Control Commission was established. In 1997, special units in the Ministry of Finance and the Ministry of Interior for prevention on money laundering were established.

The National Drug Focal Point started to act within the secretariat of the Governmental Drug Control Commission (1996). Every year Lithuania reports on different drug issues to EMCDDA, UNDCP, INCB, WHO and others.

Efforts have been taken to draft and adopt new respective laws and regulations for the implementation of requirements of international agreements on drug control and drug abuse prevention. The Law on Money Laundering was adopted in 1997, Law on Narcological Care - in 1997, Law on Control of Narcotic Drugs and Psychotropic Substances - in 1998, Law on Precursors Control was adopted in 1999.

The amendments to Penal code on psychotropic substances were adopted in 1998, amendments on precursors illicit trafficking - in 1999.

Aiming at implementation of international agreements on combating illicit drugs and in the line with the respective national laws the National Drug Control and Drug Prevention Program 1999-2003 was adopted, its priorities being policy and strategy development on the national and local level; primary prevention among youth in schools, awareness rising of the society, collaboration with NGOs and mass media, support of local community prevention; development of relevant coordination units, training, development assistance to drug addicts.

The National Health Program 1998-2010 includes drug demand reduction prevention strategy, with focusing on intersectoral coordination, legislative background, international agreements, international cooperation, development of drug information systems, etc.

Besides, other programs also include drug issues. The Program of the Government of the Republic of Lithuania for 1997-2000 prioritized drug abuse prevention within the public health sector, other programs were adopted including drug abuse prevention measures among young people, with involvement of youth organizations and NGOs, such as the State Mental Health program 1999-2010, State AIDS Prevention Program 1999-2001, State Alcohol Control Program 1999-2011, State Tobacco Control Program 1998-2010. The Ministry of Education and Science approved the Health Education Program including drug abuse prevention, and prior to 2004 drug prevention issues will be included in the education contents in the pre-school establishments and schools.

Lithuanian Governmental organizations and NGOs, participated in different international programs and it influenced drug policy based development on the best practice in Europe. Various International organizations support Lithuania's efforts to combat illicit drugs, such as EU PHARE Program Fight against Drugs in CEEC through different projects, Council of Europe DRSTP I, II programs, WHO program on prevention of substance abuse among young people, UN program Substance abuse Prevention in Schools, also other bilateral support programs by different European countries contributed to this.

Regional cooperation regarding fight against drugs was developed among the Baltic states, the Resolution on fight against drugs was adopted by the Baltic Assembly in 1997.

From 1995, Lithuania participated in ESPAD surveys 1995, 1999. Each year small epidemiological survey regarding to substance abuse is carried out among schoolchildren on ESPAD methodology.

Collaboration among governmental organizations and NGOs, particularly with youth NGOs as well as initiative by youth organizations in drug prevention area increased. Youth leaders participated in training of drug prevention activities "Youth to Youth", a special program in collaboration with Vilnius University has been adopted, with involvement of training of 100 young people in Vilnius and Klaipeda. The network of psychological assistance providing advisory services for young people operate in the country. The network of hot line telephone service free of charge for those seeking aid was established. According to the strategy of the non-governmental organization "Save the Children" 20 day care centers for the risk group children. In the biggest cities parents of drug users established organizations which supported the establishment of treatment and rehabilitation facilities, substitution treatment, outreach programs in the country. The local community programs on drug prevention are being implemented, the crisis centers for women have been established.

The reorganization of the Lithuanian health care system is linked to participation in drug prevention and drug treatment programs. Public health care centers have been established, the State Mental Health Care center was established in 1999. The establishment of the county dependence disorders centers is under preparation.

Lithuania as in other East and Central Europe countries fast economic and social changes influencing life of people occur, and youth is most vulnerable to the complicated economic and social situation. Availability of alcohol, tobacco and drugs, lack of information about consequences of these substances lead to use of alcohol and tobacco products, illegal narcotic and psychotropic substances at early age and involvement into risky activities related to these substances, abuse of psychotropic and narcotic substances among young people has become a new social phenomenon at entertainment events, discotheques. Drugs are distributed in discotheques, even in

schools, on streets in the major cities in Lithuania. Young people take interest in the new Western youth philosophy and ideology related to usage of drugs - hashish and marihuana, synthetic drugs of the amphetamine group, ecstasy, LSD. Young people also try to use smoking heroin and sniffing cocaine, and within a very short period they start to use heroin intravenously.

The situation regarding drug usage among youth is obvious and threatening in the country. ESPAD survey in 1999 revealed a new tendency on heroin smoking among school children. Usage of marihuana increased about 8 times in the country, 12 times in Vilnius, 17 times in Klaipeda. Usage of amphetamines, LSD, ecstasy increased too. Usage of heroin increased in small regions.

Within the period from 1991 the number of drug addict cases increased 6 times per 100.000 population (in 1991 - 15,3 cases per 100.000 population, in 1999 - 83,3 cases per 100.000 population), the level within the last two years increased from -77,4 cases per 100.000 population in 1998, to 83,3 cases per 100.000 population in 1999.

94% of all drug addicts are urban population and 6% are rural population; 19,1% of them - women and 80,9% - men.

According to the data by the State Mental Health Care Center of the Ministry of Health at the health care institutions 3082 drug addiction cases were registered at the end of 1999, including 408 newly registered drug addiction cases last year, 201 were deleted from the list. 83,3 drug addiction cases per 100.000 population accounted for in the country in 1999. In 1999, for different reasons 37 drug addicts died.

71,5 % (2207) of the registered observed drug addicts use opiates (injections), multi drugs - 15,3% (472; injections), individuals who use cannabis preparations - 1% (28), amphetamines and other stimulants - 2,7% (84), hallucinogenic substances - 0,3% (9), psychotropic substances - 3,8 (117), volatile substances, solvents - 5,2% (161) cocaine - 0,1% (4).

The age of drug addicts in comparison with 1998 continues to be young, and drug abuse cases registered with health institutions distribute as follows: under 14 years – 0,6%, 15-19 years – 7,5%, 20-24 years – 24,5%, 25-35 years - 39,5, and 27,9 % of drug addicts are over 35 years of age.

In 1999, 37 drug addicts (42 in 1998) died: suicides - 1, accidents - 4, infectious diseases - 4, somatic diseases - 1, overdose - 4, uncertain reason - 22 cases.

In 1999, the level of criminal offence (701) related to drugs increased 9 times compared to the level of 1990 (76). In 1999, 701 criminal offences related to drugs were registered; 19 criminal offences were committed by under-ages

Lithuania, being an accessing country to the EU and concerned about the worsening drug situation, aims at the future collaboration in the drug prevention field. Lithuania signed the agreement and adopted NPAA on the fight against drugs. The Accession Partnership/NPAA priorities (December 1999) provides highlights such as short-term priorities - to upgrade law enforcement bodies and the judiciary (staff numbers, recruitment, training and equipment), to continue the fight against organized crime, drug trafficking and corruption, to ensure better coordination between law enforcement bodies, to ratify the European Criminal Law Convention, to sign the OECD Convention on Bribery, to adopt and start implementation of the national anti-corruption strategy; as well as medium-term priorities: to continue strengthening police cooperation mechanisms with EUROPOL in fight against organized crime (in particular, money laundering, drugs and trafficking).

The NPAA (May 1999) highlights (Ref. 3.7.T.A.4) are as follows: reinforcement of the coordination among various related units, combating illicit drug trafficking, establishing a national information system, reinforcement of the secretariat of the Drug Control Commission.

Lithuania proposed the National PHARE Project 2000 - *Strengthening Illicit Drug Demand and Supply Reduction Capabilities* – for consideration to the EU Commission. The proposed project covers three main action areas - drug policy development, drug supply reduction and drug demand reduction - and attempts to build up and complement the work which has been done by the PHARE Multi-beneficiary Drugs Program, strives in line with EU Action Plan to Combat Drugs 2000-2004.

21.2. New information needs and priorities for the future

The National Report 2000, describing the drug situation in Lithuania, was prepared within the framework of the European Union PHARE Project on Drug Information System Bridging Phase, by the Lithuanian Drug Focal Point in collaboration with the network involving the main national drug data resources and other sources, documents reflecting the drug situation and drug policy in the country. For preparation of the Report valuable support was contributed by the eesv MSDP Project Coordinator and the Swedish REITOX Drug Focal Point.

The National Report was prepared according to the new Guidelines and new information requirements of the newly-structured EMCDDA Annual Report. These requirements facilitated examination of the present drug information system network in Lithuania and showed the urgent need for its capacity development, in the line with the requirements of EMCDDA and being a contributing partner in the European data system.

Very limited comparable data on drug usage, drug related data, surveys among youth reflected rapidly worsening drug situation among the youth and calls for urgent actions to prevent the drug abuse in this target group, to adopt prevention programs for the family, school, local community. It also shows the needs for strengthening the drug demand and drug supply reduction capacities, policy coordination and development of data system capacities and other inputs, for example, the general survey data.

Because the limited capacities of the drug information system framework in the country and new growing requirements for the Annual Report of EMCDDA, gaps could be obviously perceptible in this Report, however, it was very important to verify the achievements and needs. We hope that our modest National Report will be a minor input to the common data basis of Europe and believe that in the future our data will contribute an adequate share to the Drug Information System of Europe, and the Lithuanian National Focal Point will be a value member of the EMCDDA network.

The development of drug information system in the line with the requirements of EMCDDA is planned according to the National PHARE program 2000: to develop a capacity of the National Focal Point, to establish main key indicators, to create a legal basis and framework for data on drugs. The Drug Information System Project started in 1994, and training courses for different target groups on the national level were arranged on establishment of the drug information system network, including study visits. However, due to the reorganization of the different structures in the health system and law enforcement systems, earlier trained staff left their work related to the framework of the Drug Information System and their substitutes need to be trained.

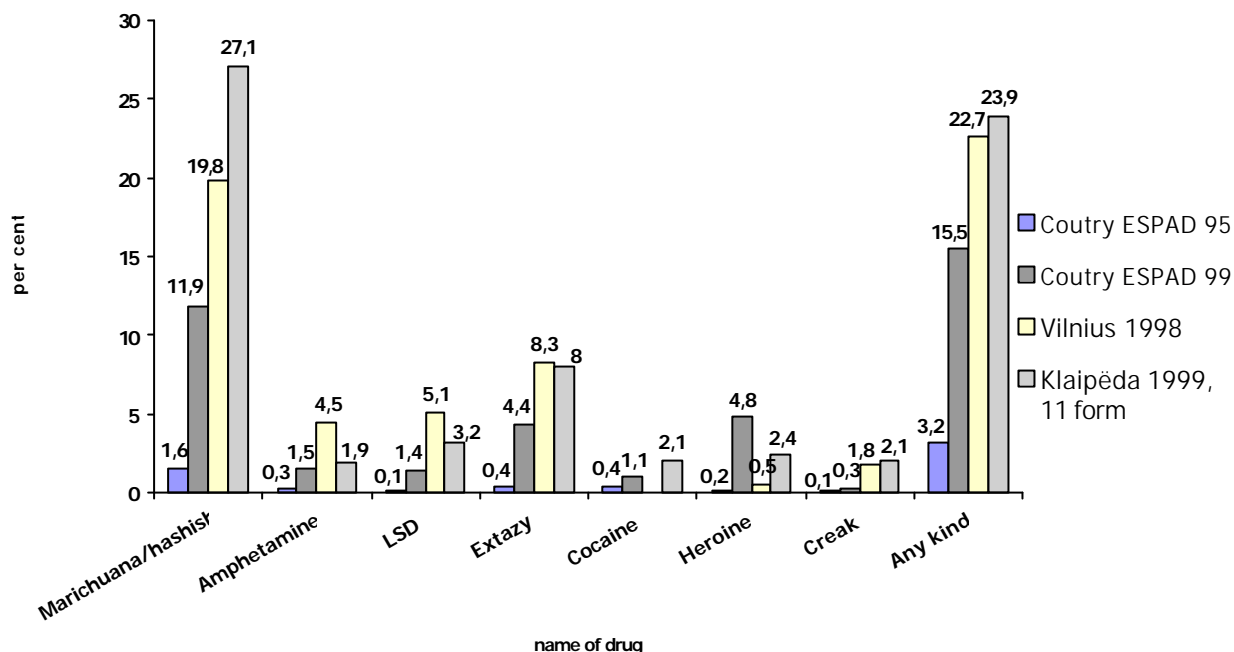
According to the National PHARE Program 2000, it is planed to train about 200 experts and to introduce main key indicators on drug data in the line with EMCDDA requirements.

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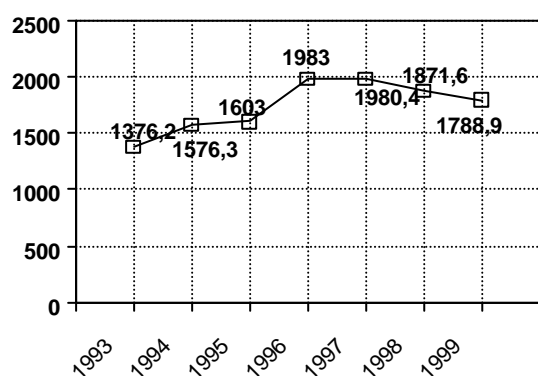
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21. Alcohol and other Drug Usage Among Students in 26 European Countries, ESPAD Report 1995, The Swedish Council for Information on Alcohol and Other Drugs
22. State Programs and Laws of the Republic of Lithuania
23. Report 1999 by NGO "Save the Children", Vilnius
24. State statistical department data on Deaths 1999.

STATISTICAL TABLES (EPIDEMIOLOGY)

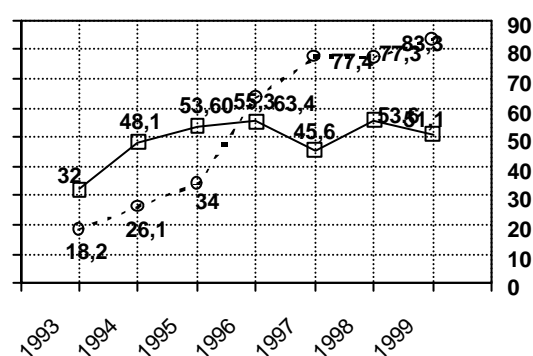
USAGE OF ILLEGAL DRUGS AMONG STUDENTS (ESPAD 99)



Alcoholic psychosis, alcohol and drug addiction dynamics of morbidity for 100 000 inhabitants in Lithuania 1993-1999

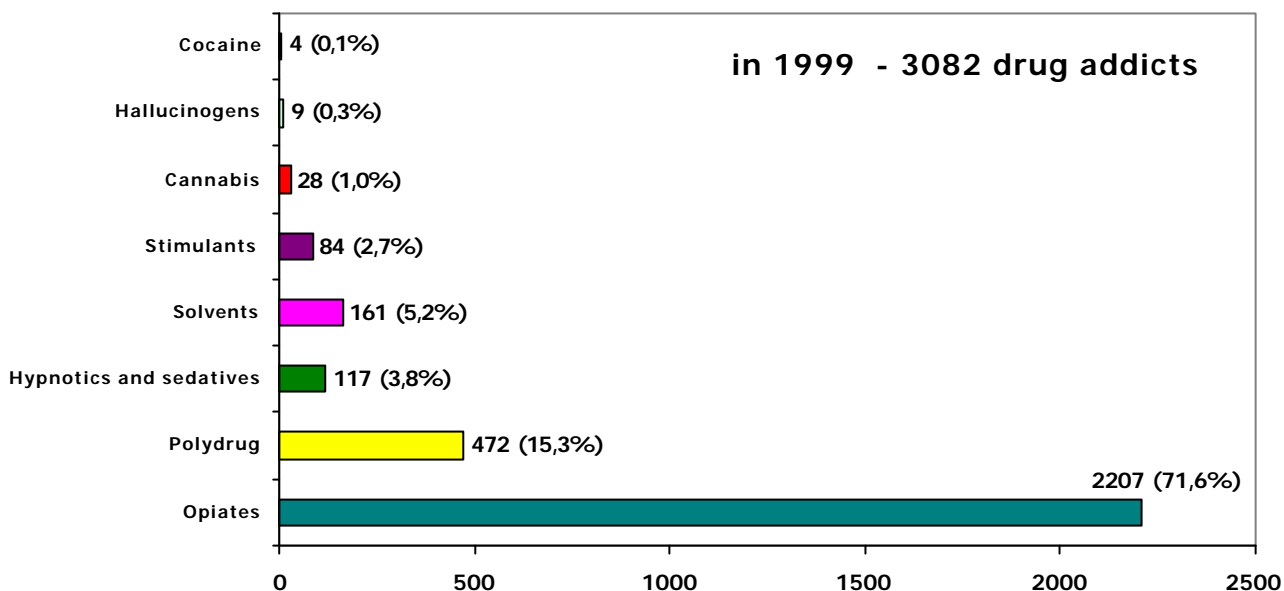


—□— Alcohol addiction



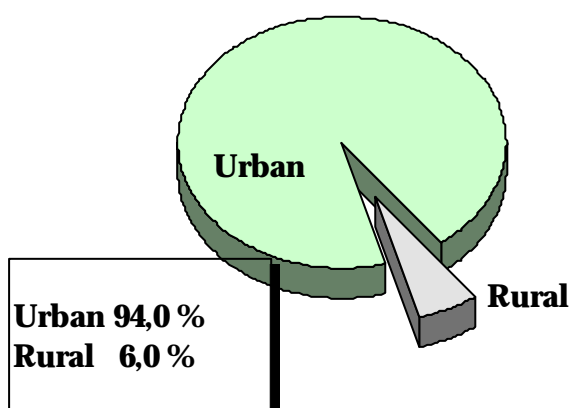
—□— Alcoholic psychosis
--○-- Drug addiction

Register Drug Addicts according to main Drug Usage in Lithuania 1999

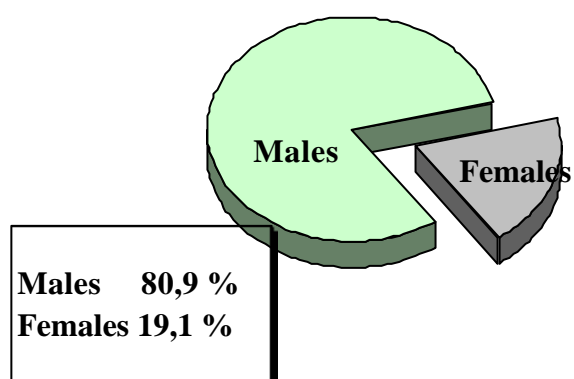


Drug addicts in Lithuania 1999

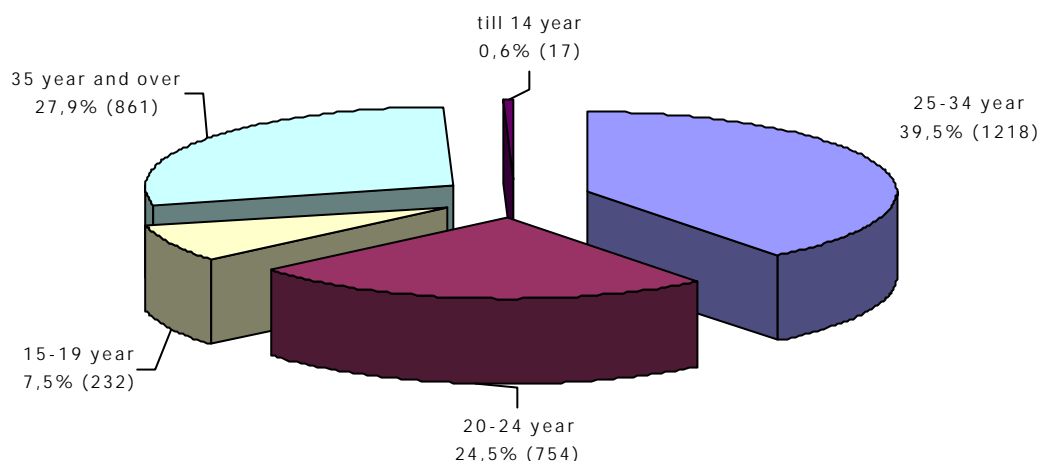
According to residence



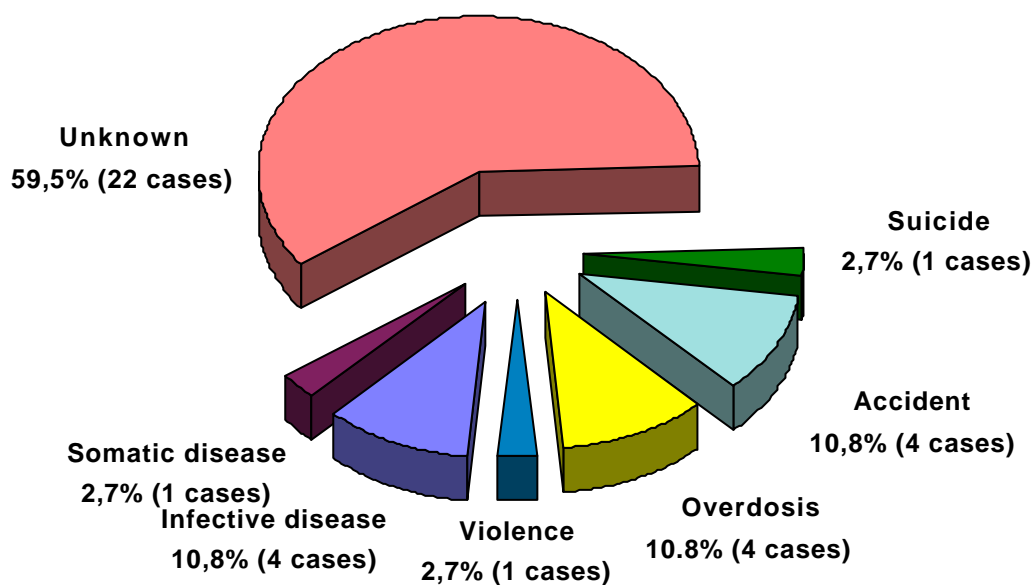
According to sex



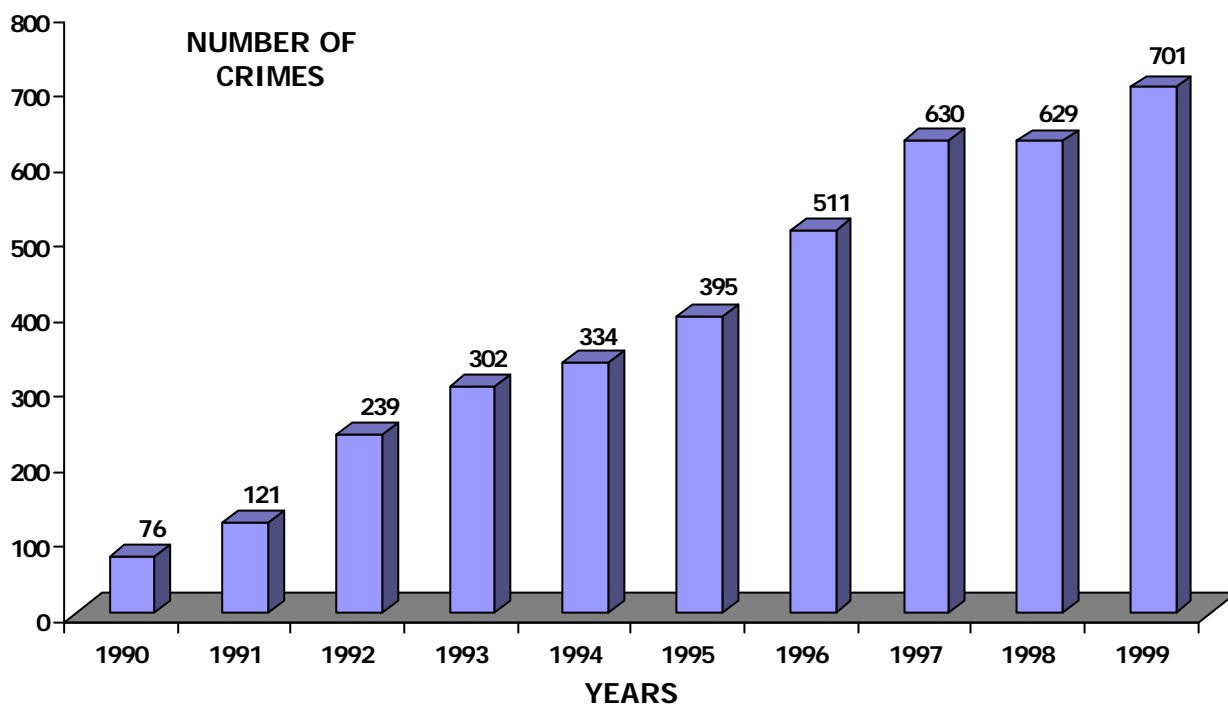
Registered drug users by age groups in Lithuania 1999



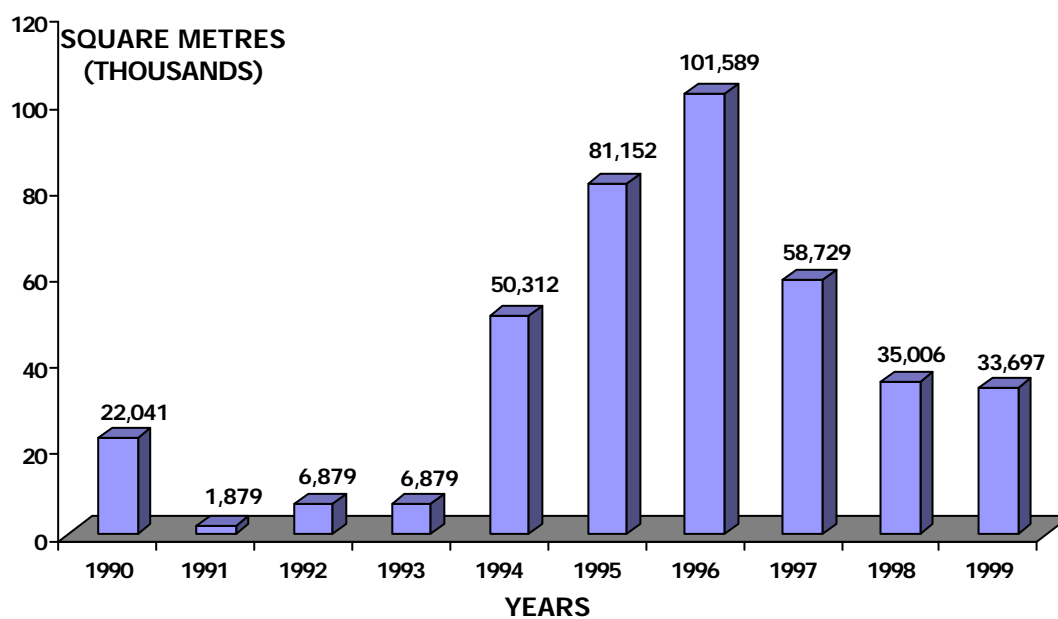
DRUG RELATED DEATH IN LITHUANIA 1999



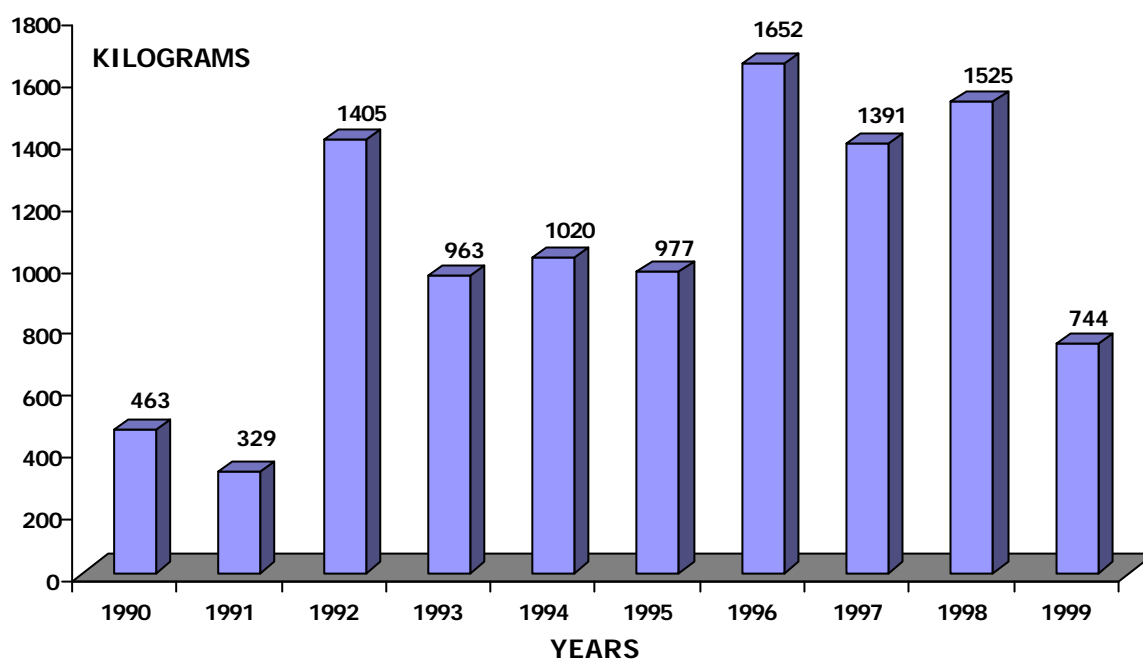
DRUG RELATED CRIMES



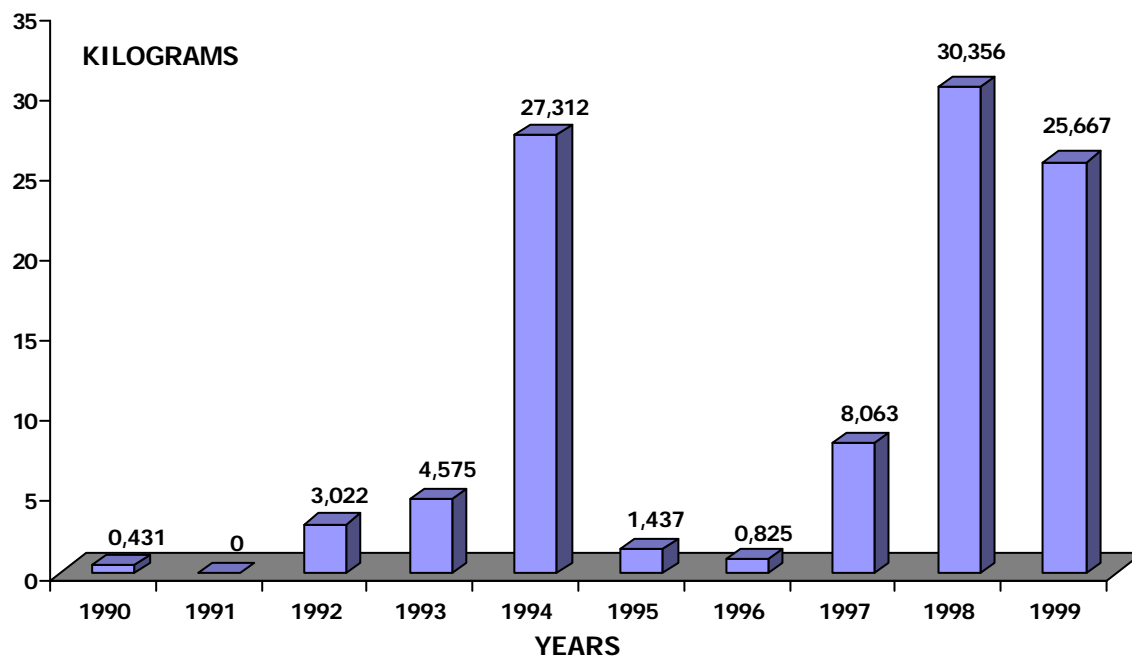
AREAS OF DESTROYED CULTIVATION OF POPPIES



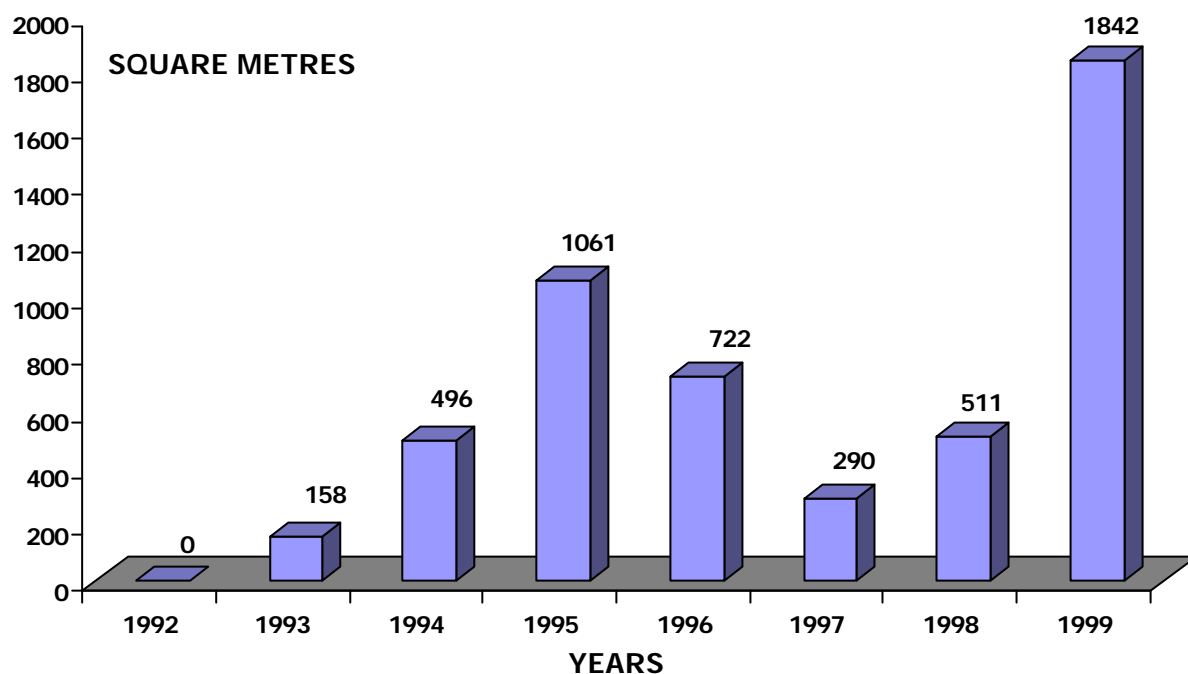
DYNAMICS OF QUANTITY OF SEIZED POPPIES



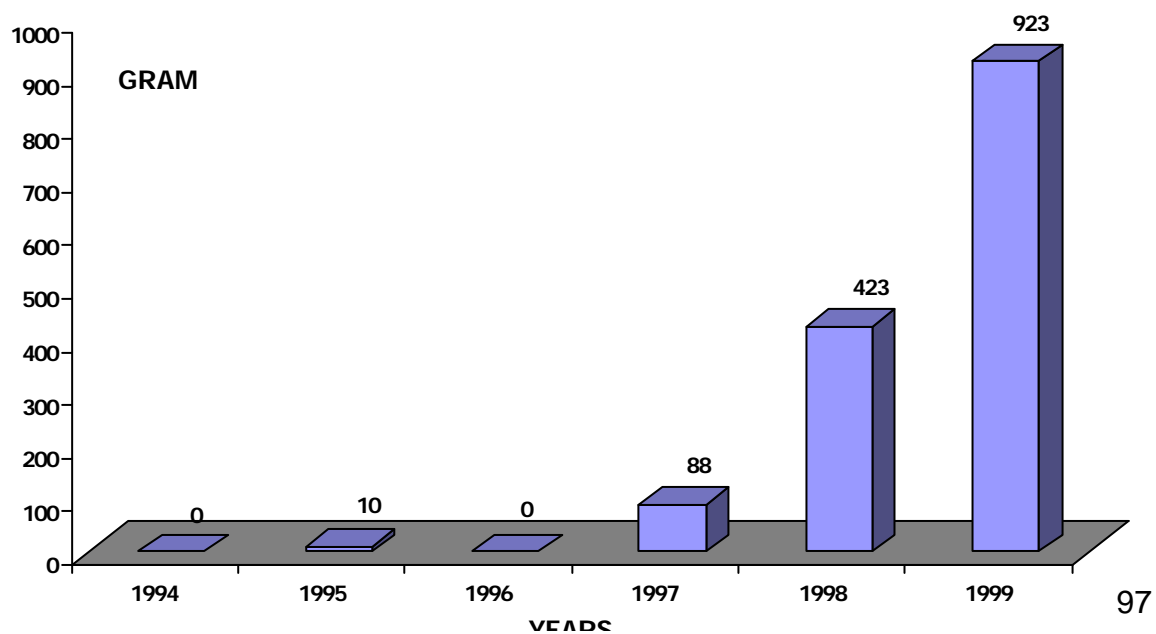
DYNAMICS OF QUANTITY OF SEIZED CANNABIS



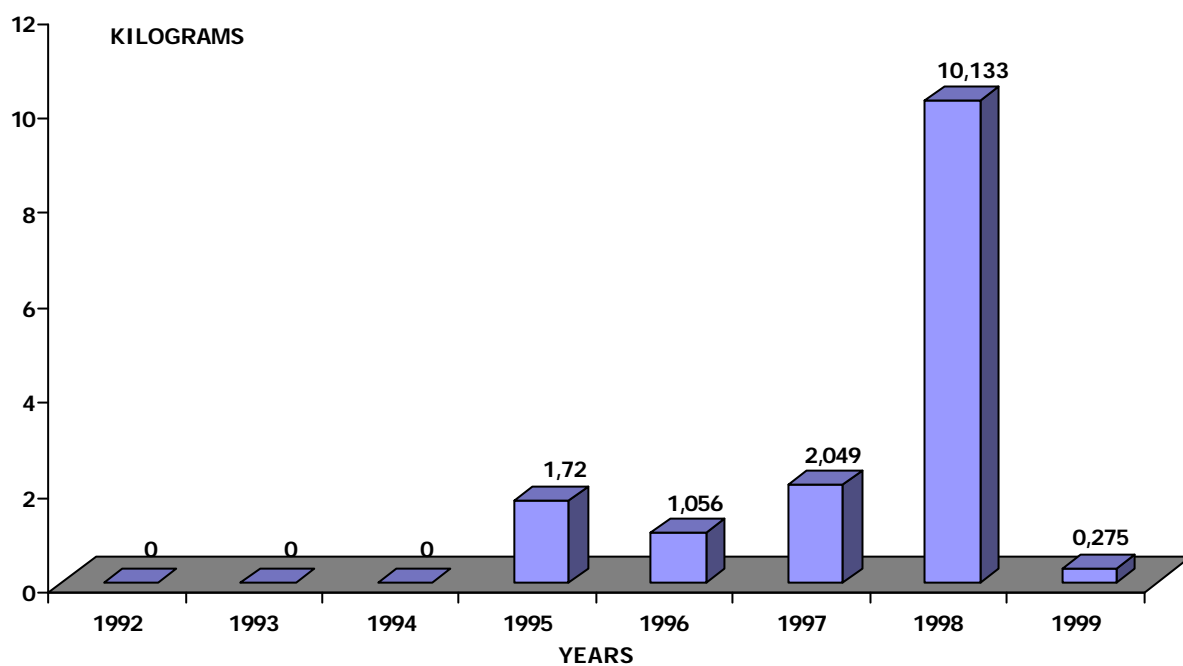
AREAS OF DESTRUCTED CULTIVATION OF CANNABIS



DYNAMICS OF QUANTITY OF SEIZED HEROINE



DYNAMICS OF QUANTITY OF SEIZED COCAINE



NOTE: The above diagrams are based on data by the State Mental Health Center and the Ministry of Interior.

LIST OF RELEVANT LAWS AND REGULATIONS

EC Acquis and International Standards in the field of Drug Supply Reduction	Legislation (envisaged/adopted)	Institutional and administrative capacity (envisaged/established)	Needs/ recommendations/ comments
UN Conventions			
Single Convention on Narcotic Drugs, 1961 and Protocol of 1972	<p>Constitution of the Republic of Lithuania (Art.138). Lithuania in 1994 acceded to the UN 1961 Convention;</p> <p>Governmental Resolution No. 68p./27/01/94 on acceding to the UNO conventions on the control of narcotic and psychotropic substances;</p> <p>Law on Narcotic Drug and Psychotropic Substances Control adopted in 08/01/1998: No.VIII-602;</p> <p>Baltic Assembly Resolution on Combating Drugs adopted in 08/11/1997;</p> <p>List on Narcotic Drugs and psychotropic substances that need the authorization of Drug Commission to be exported or imported. Approved by the order of Ministry of Health No.420 10/08/1995;</p> <p>List of Narcotic Drugs and psychotropic substances Degree Ministry of Health No.239 28/04/1997: Decree Ministry of Health No.5 06/01/2000;</p> <p>Degree of the Ministry of Health No.705 On licit Drug Control from 23/12/1997;</p> <p>Governmental Resolution 28/12/95 "Order on licensing for activities with narcotic drugs and psychotropic substances";</p> <p>National Health Programme for 1998-2010 approved by Lithuanian Seimas;</p> <p>Criminal code – Law No.VIII – 617;</p> <p>Administrative Law Violation Code – Law No.1-545</p>	<p>Ministry of Health Care; Ministry of Interior; Ministry of Justice; Narcotic commission at the State Medicine control Agency was established January 1995;</p> <p>Drug Trade Control Division in the Organized Crime Investigation Service in the Police Department the Ministry of Interior was established;</p> <p>Licensing Commission 1995 by Degree of ministry of Health was introduced;</p> <p>Drug control Laboratories inspectorate were created;</p> <p>Governmental Drug control Commission by resolution of Government No.282 from 28/02/1995 was approved</p>	<p>Data basis on Narcotic Drugs and psychotropic substances at Narcotic Commission;</p> <p>Strengthening of Narcotic Commission with personal staff;</p> <p>Establishment of secretariat of the Governmental Drug control Commission;</p> <p>Establishment of Drug Monitoring centre (or National Drug Focal Point)</p>
Convention on Psychotropic	Constitution of the Republic of Lithuania;	All above mentioned	All above mentioned;

Substances, 1971	<p>Government Decree No.68p on acceding to the UNO conventions on the control of narcotic and psychotropic substances;</p> <p>Law on Narcotic Drug and Psychotropic Substances Control adopted in 08/01/1998: No.VIII-602;</p> <p>Baltic Assembly Resolution on Combating Drugs adopted in 08/11/1997;</p> <p>List on Narcotic Drugs and psychotropic substances that need the authorization of Drug Commission to be exported or imported. Approved by the order of Ministry of Health No.420 10/08/1995;</p> <p>List of Narcotic Drugs and psychotropic substances Degree Ministry of Health No.239 28/04/1997;</p> <p>Order No.225 of the Ministry of Health Care on the conformation of the list of drugs and psychotropic substances 25/04/1997;</p> <p>Criminal Code – Law No.VIII-617, 03/02/1998;</p> <p>Narcological care law adopted March 25, 1997 No.544;</p> <p>The Degree of Ministry of Health from 25/04/1997 “On prohibition in import some psychotropic substances to Lithuania”;</p> <p>Degree of Ministry of health No.357 from 23/06/1998 “On establishment of the Coordination Commission for drug prevention, treatment and rehabilitation”;</p> <p>Resolution of the Lithuanian Government from 10/05/1999 No.547 On Governmental drug Control Commission-resume composition of the commission and changes in statute;</p> <p>Amendments to the criminal code on illicit trafficking of psychotropic substances, February, 1998;</p> <p>Resolution of Government No.92 from 15/01/1996 “On</p>		<p>Strengthening of control on selling psychotropic substances without prescription in drugstores;</p> <p>Establishment of county dependence disorders treatment centres, rehabilitation facilities;</p> <p>Implementation of the national drug control and drug prevention strategy;</p> <p>Implementation of drug control and drug prevention programmes on Community level.</p>
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	<p>Examination of drives of means of transportation and other persons and ascertainment of drug and alcohol intoxication"; Resolution of the Government "On order of forensic medicine examination of dependence disorders". Resolution of Assembly of Baltic States from 7-8 November /1997 "On fight against drugs"; Resolution of Health Committee of Lithuanian Seimas No.6 25/03/1998 "On drug prevention Treatment and rehabilitation"; Order of the Ministry of Health and Ministry of Interior No.342/482 on establishment of requirements of equipment for places of storing and producing of narcotic Drugs and psychotropic substances"(1998 No.8-161)</p>		
<p>United Nations Convention against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988)</p>	<p>Constitution of the Republic of Lithuania; Law No.VIII-660 of 12/03/1998 "On ratification of 1988 UN Convention on the fight against Illicit Trafficking in Narcotic Drugs and Psychotropic Substances"; Law on Narcotic Drug and Psychotropic Substances Control adopted in 08/01/1998: No.VIII-602; Order of the Ministry of Health Care and Ministry of Interior No.342/482 25/08/1998 on the establishment of requirements of equipment for places of storing and producing of narcotic and psychotropic substances; Law No.VIII- 275 April ,1997 On Prevention of Money Laundering; Law On Precursors Control No.VIII-1207 adopted on 01 of June 1999; Law on Enterprises 13 article-licensing of activities with precursors; Order No.705 23/12/1997 of the Ministry of Health Care on the control of legal circulation of narcotic medicines and medical</p>	<p>Ministry of Interior; Ministry of Justice; General Prosecutor's Office; Border Police; Paragraph 8 article 7 Ministry of Justice Office; paragraph 7 article 17 Border police Department; Registration licensing 12 art Ministry of Health; Ministry of Economy; Ministry of Finance; Ministry of Environment Protection; Strengthen Anti-Drug Unit at the Ministry of Interior; Money laundering investigation Unit was established at the Tax Police Department Ministry of Interior; Customs Department.</p>	<p>Creation of relevant coordination procedure between law enforcement institutions</p>

	<p>substances; Bilateral Agreements on legal assistance; Customs Code; Degree of Ministry of Health from 29/05/1997 No.306 "On Precursors Control"; Degree of the Ministry of Health from 12/10/1998 No.557 On list of precursors"; Degree No.52 31/01/2000; Decree of Ministry of Health on legal acts on precursors control No.526, 03/12/99; Law No.VIII-222 on Operational Activity; Criminal code - Law No.VIII – 617; Criminal Procedure Code - Law No.I-949.</p>		
Money Laundering			
European Convention on money laundering, search, seizure and confiscation of the proceeds from crime, 8/11/1990	<p>Ratified by Lithuanian Seimas in 1994; Law on Prevention of Money Laundering No.VIII-275 was realized from January, 1998</p>	<p>Money laundering investigation Unit at the Tax Police Department Ministry of Interior was established</p>	
3/12/1998 – Joint Action on money laundering, the identification, tracing, freezing and confiscation of instrumentalities and the proceeds from crime	<p>Law on Prevention on Money Laundering April, 1997 VIII-275; Ratification European Convention on Money laundering 1994; Law on ratification of UN 1988 Convention against Illicit Trafficking in Narcotic Drugs and Psychotropic Substances, 1998. No.VIII-660, 12/03/1998</p>	<p>Money Laundering Investigation Unit at the Tax Inspection; Police Department</p>	
10/6/1991 – Directive on the prevention of the use of financial systems for the purpose of money laundering	<p>Lithuanian Law on prevention of Money laundering No.VIII-275</p>	<p>Tax inspection of Ministry of Finance; Money laundering investigation Unit Police Department of Ministry of Interior</p>	
Precursor Control			
Council Regulations 3677/90 and 900/92 laying down measures to be taken to	<p>Law on Precursors Control approved by Seimas June/1999 No.VIII-1207; Degree of the Ministry of Health from 12/10/1998 No.557 "On list</p>	<p>Narcotic Commission at the State medicine Control Agency by the Ministry of Health; Ministry of Interior</p>	<p>Implementation of Law on precursors control; Strengthening of Narcotic</p>

discourage the diversion of certain substances to the illicit manufacture of narcotic drugs and psychotropic substances; 14/12/92 – Council Directive on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances	of precursors”; Degree No.52 31/01/2000; Decree of Ministry of Health on legal acts on precursors control No.526, 03/12/99; Law No.VIII - 660 of 12/03/1998 “On ratification of 1988 UN Convention on the fight against Illicit Trafficking in Narcotic Drugs and Psychotropic Substances”; Criminal Code art. 232 ¹⁰ Law No.VIII-1281a, 312, Law No.VIII-617		commission with staff for precursors control; Regulations for putting in to practice Precursors control cooperation
Synthetics / Chemical Profiling			
16/6/1997 – Joint Action concerning the information exchange, risk assessment and control of new synthetic drugs	New synthetic Drugs are on the list of Narcotic drugs - controlled substances which are prohibited to use in Medicine practice and to import to country; Governmental Resolution No.68p./27/01/94 on acceding to the UNO conventions on the control of narcotic and psychotropic substances; Draft Model-Agreement Europol cooperation with Third States; Law on Narcotic Drugs and Psychotropic substances control No.VIII_602 from 08/01/1998; Law on Precursors Control June 1999; Law on Ratification UN Convention 1988 adopted 12/03/1998; Information exchange according the European Agreement 101 article	Anti-Drug Unit in Police Department; Organized crime Investigation service established	
29/11/1996 – Joint Action on the exchange of information on the chemical profiling of drugs to facilitate improved co-operation between Member	101 article of European Agreement provided exchange of information No.3710-01; Baltic Sea Task Force on Organized Crime; Law No.VIII – 602 on Control Of narcotic drugs and Psychotropic substances (January, 1998 No.VIII – 161;	Narcotic Commission; Anti-Drug Unit at the Ministry of Interior; Ministry of Justice; Ministry of Health; Ministry of Interior	Drug monitoring centre

States in combating illicit drug trafficking	Law On Precursors Control, June 1999; Law on Ratification Of UN 1988 Convention. March 12, 1998 VIII-660; Draft Model-Agreement Europol cooperation with Third States.		
Inter Agency Law Enforcement Co-Operation			
29/11/1996 – Joint Action on the drawing up of police/customs agreements in the fight against drugs	Programme of Narcotics Control and Drug Addiction Prevention for the Year 1999-2003 No.970 adopted in 06/09/1999; Order No.388 of the Ministry of Interior (joined police and customs operations)	Training's UNDCP; PHARE	Creation of relevant coordination procedure between law enforcement institutions
Information Intelligence			
9/6/1997 Joint Action for refining of targeting criteria, selection methods and collection of customs and police information	Anti Drug Unit collected information on Illicit Drug Trafficking	Training for police, customs workers	Creation of relevant coordination procedure between law enforcement institutions
Cultivation / Production			
16/12/1996 – Resolution on measures to combat and dismantle the illicit cultivation and production of drugs within the EU	Cultivation of poppy and cannabis also other drug raw materials are prohibited in Lithuania by the law on Narcotic Drugs and psychotropic substances control No.VIII - 602 08/01/1998; Governmental resolution on accession to UN 1961 and 1971 convention; Administrative Law Violation Code – No.I 545; Criminal code - Law No.VIII - 617; Governmental Resolution No.68p./27/01/94 on acceding to the UNO conventions on the control of narcotic and psychotropic substances; Draft Model-Agreement Europol co-operation with Third States	Municipal and Criminal police; Operations on destruction of drug raw materials fields "POPPY"	Needs for technical equipment for instance helicopter for destruction of poppy fields
Customs Surveillance			

29/11/1996 Decision on revised arrangements for future joint customs surveillance operations	Order No.388 of Ministry of Interior (joined police and customs operation); Governmental resolution No.91 on programme of measures related to drug control and drug prevention for 1998-2000; National programme on Narcotic Control and prevention of drug Addiction 1999-2003		
9/6/1997 – Resolution concerning a handbook for joint customs surveillance operations	Handbook for estimation of risk on Drugs illicit trafficking for Customs UNDCP 1997; Bilateral agreements		
Broad Framework			
17/12/1996 – EU Joint Action concerning the approximation of the laws and practices of the Member States of the EU to combat drug addiction and to prevent and combat illegal drug trafficking	Accession to 1961 UN Convention on Narcotic Drugs 1994; Accession to UN Convention on Psychotropic substances 1994; Governmental resolution No.68); Ratification 1988 UN Convention fight against illicit trafficking of narcotic drugs and psychotropic substances Law No.VII - 660; Law No.VIII - 602 on Control Narcotic Drugs and Psychotropic Substances; Law On Precursors Control No.VIII – 1207 01/06/1999; European agreement with third states 3701-01; Criminal code VIII - 617 03/02/1998; Program on Narcotics Control and Drug Addiction Prevention for the Year 1999-2003 No.970 06/09/1999; Bilateral agreements on legal assistance		
Co-operation with Industry and Trade			
29/11/1996 – Joint Action on co-operation between customs authorities and business	Law on Enterprises	Commission of Licensing	

organizations on combating drugs trafficking			
Trafficking by Sea			
31/1/1995 Agreement on illicit trafficking by sea, implementing Article 17 of the UN Convention against illicit trafficking in narcotic drugs and psychotropic substances	Decree of the president on implementing of UN Convention art 17; Law on ratification of UN 1988 convention On Fight against Illicit drug trafficking. No.VIII – 660 12/03/1998; Criminal Code – Law No.VIII - 617 03/02/1998	Border Police Department at the Ministry of Interior; Ministry of Justice; General Prosecutor's Office	
Drug Tourism			
29/11/1996 – Resolution on measures to address drug tourism problem within the EU	Law on Narcotic drugs and psychotropic substances control; No.VIII - 602 provided the quantities of control materials to have the transit person with prescription.	Ministry of Interior; Customs Department; Ministry of Justice; Ministry of Health Care	
Sentencing			
20/12/1996 – Resolution on sentencing for serious illicit drug trafficking	Lithuanian Criminal code was strengthened in 1997 for the illicit drug trafficking till 16 years sentence and confiscation of property; Criminal Code - Law No.VIII – 617;	Ministry of Justice; General Prosecutor's Office	

