



European Monitoring Centre
for Drugs and Drug Addiction



Drug Control Department
under the Government
of the Republic of Lithuania

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

LITHUANIA

**New Development, Trends and In-depth
Information on Selected Issues**

REITOX

Table of contents

SUMMARY	3
PART A - NEW DEVELOPMENTS AND TRENDS.....	5
1. National Policies and Context	5
2. Drug Use in the Population	13
3. Prevention	20
4. Problem Drug Use	25
5. Drug Related Treatment	31
6. Health Correlates and Consequences	36
7. Responses to Health Correlates and Consequences	44
8. Social Correlates and Consequences.....	46
9. Responses to Social Correlates and Consequences.....	52
10. Drug Markets	54
PART B - SELECTED ISSUES	61
11. Public expenditures.....	61
12. Vulnerable groups of young people	61
13. Drug-related research in Europe.....	63
PART C - BIBLIOGRAPHY, ANNEXES, STANDARD FOR BIBLIOGRAPHIC REFERENCES	66
14. Bibliography	66
15. Annexes	66
PART D - STANDARD TABLES AND STRUCTURED QUESTIONNAIRES (2007)	67

Summary

Lithuania is a party to the 1988 UN Drug Convention, the 1971 UN Convention against Psychotropic Substances, and the 1961 UN Single Convention as amended by the 1972 Protocol. Lithuania also is a party to the UN Convention against Transnational Organized Crime and its protocols against trafficking in persons, migrant smuggling, and illegal manufacturing and trafficking in firearms.

Lithuania's national policy on drug control and prevention of drug addiction is established in the *National Strategy on Drug Addiction Prevention and Control 2004–2008* adopted by the Resolution of the Government of the Republic of Lithuania and in the *National Program on Drug Control and Prevention of Drug Addiction 2004–2008* adopted by the Parliament of the Republic of Lithuania. The main objectives of the country's drug policy strategy are: a drug-free society to the extent that this is possible; prevention of drug abuse among young people; drug supply reduction; care of drug addicts; international multilateral, bilateral and inter-institutional co-operation in the field of drug demand and drug supply reduction; and emphasis on the development of co-ordination systems at the local and national level.

Lithuania's Ministry of Interior, Ministry of Education and Science, Ministry of Health Care, Ministry of Justice, Ministry of Social Security and Labour, Drug Control Department under the Government of the Republic of Lithuania, Police department, and other institutions worked to implement the National Program on Drug Control and Prevention of Drug Addiction for 2004-2008, adopted in 2004.

The Drug Control Department under the Government of the Republic of Lithuania is delegated the responsibility to effect the drug prevention and drug control policy, to organize implementation of drug prevention and control measures, to set the scope of the drug prevention and control policy, and to coordinate drug prevention and drug control activities on the national and local levels. The latter is very important in seeking to ensure effective collaboration between public institutions and different organisations involved in the drug prevention and drug control activities. In 2006, for the implementation of the measures foreseen in the *National Program on Drug Control and Prevention of Drug Addiction 2004–2008* the Government of the Republic of Lithuania allocated 4238,27 thousand euros. Besides, budgetary allocations were assigned for the implementation of programs closely linked to the above.

Before 2005, Lithuania was among a few countries, where the prevalence of drug use in the general population was not surveyed. The general population survey on the prevalence of drug use in the country was carried out in 2004, according to the methodology of the European Monitoring Centre for Drugs and Drug Addiction (hereinafter referred to as EMCDDA). The target group of the study was permanent residents of Lithuania aged 15 to 64. The Survey results show, that 8,2 percent of the Lithuanian population aged 15 to 64 used drugs at least once in their lifetimes. 13,1 percent of men and 3,8 percent of women reported that they had tried drugs at least once in their lifetimes. Younger Lithuanian population (aged 15 to 34) more frequently than older population (35-64 years) indicated they had tried drugs at least once in their lifetimes (14,1 percent vs. 3,8 percent, respectively) (2004 National Survey data). Cannabis is the most commonly used drug, and 7,6 percent of the Lithuanian population reported they had used it at least once in their lifetimes. The rate of cannabis use at least once in their lifetimes among men is three times higher than among women, i.e. 12,1 and 3,4 percent, respectively. In Lithuania, besides cannabis the most common drugs are amphetamine and ecstasy, with very similar use rates. Prevalence of drug use at least once in lifetime among the Lithuanian population is as follows: amphetamine - 1,1 percent, ecstasy – 1,0 percent, hallucinogenous mushrooms – 0,5 percent, cocaine – 0,4 percent, heroin and LSD – 0,3 percent.

In 2006, prevalence of psychoactive substance use among inmates in foster homes of local governments and counties was as follows: 19 percent for the subgroup aged 15 to 17 reported using at least one drug in their lifetimes, 12 percent – at least once in the last 12 months, 8 percent – in the last 30 days.

In 2006, general, selective and targeted drug prevention measures were implemented, occupation of children was promoted, professionals, parents, teachers and community are involved into the prevention activities.

As of December 31, 2006, the healthcare institutions registered 68.951 individuals with mental or behavioural disorders caused by psychoactive substances, including 5.573 individuals with dependence disorders caused by drugs and psychotropic substances.

Lithuania operates five national drug dependence centers and ten regional public health centers, and several programs aim to reduce drug consumption through education programs and public outreach, especially in schools. In 2006, the Drug control department under the Government of the Republic of Lithuania (DCD) implemented targeted drug prevention programs involving parents, teachers, and

communities in prevention activities and efforts to keep high-risk youth occupied with better things. DCD in 2006 continue an education project targeted at reducing the use of narcotics in bars and clubs. The DCD has also provided narcotics control and prevention training for members of municipal drug control commissions.

Lithuanian law enforcement officials recorded 1673 drug-related crimes in 2006, a slight increase from the 1600 during the same period in 2005. In 2006, police and customs had seized 51 kg of poppies and their parts, 48 liters of poppy straw extract, 106 kg of hashish, 4,7 kg of heroin, 38436 tablets and 6022 g. of Ecstasy , 34.8 kg of amphetamines and 21 kg. of methamphetamines. They also impounded small quantities (less than five kg each) of cocaine, various psychotropic drugs, and precursors.

According to Lithuanian law enforcement agencies, domestically produced synthetic drugs have been intercepted en route to Sweden and Norway and also passing through Germany, Poland and Denmark. Customs agents have stopped drugs entering Lithuania from all sides; cocaine, Ecstasy, and other synthetic drugs arriving mostly from or via Western Europe; and heroin arriving from Central Asia via Russia and Belarus. Domestically grown poppy straw serves nearby markets in Lithuania, in Russia's Kaliningrad region, and in Latvia.

PART A - NEW DEVELOPMENTS AND TRENDS

1. National Policies and Context

Overview

Lithuania consistently implemented the policy on drug control and prevention of drug addiction being an integral part of its national foreign and domestic policy. For execution of the drug policy, both political support and needed financial and human resources shall be secured. The implementation of the drug control and prevention policy shall be based on the establishment of clear priorities, sound evaluation and coordination of measures as well as efficient allocation of resources.

One of the fundamental long-term national development priorities set out in the *Long-Term National Development Strategy* adopted by the Resolution of the Parliament of the Republic of Lithuania (Žin., 2002, No. 113-5029) is a secure society. The main priority of the national policy on drug control and prevention of drug addiction established in the *National Program on Drug Control and Prevention of Drug Addiction 2004–2008* adopted by the Resolution of the Government of the Republic of Lithuania (Žin., 2003, No. 94-4251) is primary prevention of drug use in the family, among children and youth. A strategic goal of the *National Strategy on Drug Addiction Prevention and Drug Control 2004–2008* adopted by the Parliament of the Republic of Lithuania (Žin., 2004, No. 58-2041) pertains to suppression and reduction of the prevalence of drug abuse, determination and implementation of guidelines and process trends of the national policy on drug control and prevention of drug addiction, as well as to maximisation of prevention efficiency of drug addiction in Lithuania. Based on the *Law on the Basics of National Security* (Žin., 1997, No. 2-16) the *National Program on Drug Control and Prevention of Drug Addiction 2004–2008* was enlisted on the agenda of the most critical long-term national security enforcement programs.

The Drug Control Department under the Government of the Republic of Lithuania is delegated the responsibility to effect the drug prevention and drug control policy, to organize implementation of drug prevention and control measures, to set the scope of the drug prevention and control policy, and to coordinate the drug prevention and drug control activities on the national and local levels. The latter is very important in seeking to ensure effective collaboration between public institutions and different organisations involved in the drug prevention and drug control activities.

1.1. Legal Framework

Laws of the Republic of Lithuania

The Parliament of the Republic of Lithuania adopted the **Law On Social Services**, of January 19, 2006, which establishes a concept, objectives and types of social services, regulation of the management, granting and provision of social services, licensing and financing of social care establishments, payment for social services and consideration of the disputes related to social services. This Law is important for drug control and prevention of drug addiction as establishes providing social services for:

1) *Adults at social risk*, i.e. persons of working age who are socially excluded owing to their involvement in begging, vagrancy, alcohol abuse, abuse of narcotic, psychotropic or toxic substances, gambling dependence, involvement or tendency to be involved in criminal activities, experience or being in the threat of experiencing psychological, physical or sexual abuse, violence in the family and partial or complete loss of the abilities to independently care for their private (family) life and to participate in society.

2) *Families at social risk*, i.e. families in which there are children under 18 years of age and at least one of the parents abuses alcohol, narcotic, psychotropic or toxic substances, is gambling dependent, due to the lack of social skills, does not know how to or is incapable of properly caring for children, abuses them psychologically, physically or sexually, does not use the state support he receives in the interests of the family, which results in a threat posed to the physical, intellectual, spiritual and moral development and security of the children. Families whose child has been established temporary guardianship (custody) in accordance with the procedure laid down by laws shall be regarded as a family at social risk too.

3) *Children at social risk*, i.e. children under 18 years of age who are involved in vagrancy, begging, do not attend school or experience behavioural problems at school, abuse alcohol, narcotic, psychotropic or toxic substances, are gambling dependent, are involved or tend to be involved in criminal activities, have experienced or are in the threat of experiencing psychological, physical or sexual abuse, violence in the family, which limits their possibilities of education and participation in society.

This Law is also important because it clearly establishes the management of social services, management entities and their competencies. The management of social services shall cover the planning and organisation of social services, division of competence, assessment, monitoring and control of the quality of social services at state and municipal levels. The Law also pays attention to ensurance of planning, control of the quality of social services. All social care establishments or individual enterprises intending to provide social care (based on the law institutions of long-term psychological and social rehabilitation provide short-term social care to persons dependent on psychoactive substances) shall have to acquire licenses from 2010. An inhabitant of Lithuania receiving social services or his/her family members, kinsfolk, his guardian shall have a possibility to inform the Social Services Monitoring Department at the Ministry of Social Protection and Labour which shall control the quality of these services concerning inadequate social care.

The Parliament of the Republic of Lithuania adopted the **Law On the Support to Employment**, of June 15, 2006, that establishes a legal basis for the system to provide support to the employment of persons searching for work, its objectives, the functions of the institutions implementing the employment support policy, the employment support measures, as well as organisation and funding of their implementation. Article 4 of this Law establishes that on the labour market among other groups persons dependent on drugs, psychotropic and other psychoactive substances are supported additionally, having accomplished programs of psychological social and/or professional rehabilitation, provided they addressed the territorial labour exchange within 6 months having commenced programs of psychological social and/or professional rehabilitation and are registered unemployed.

The Parliament of the Republic of Lithuania adopted amendments to the **Penal Code of the Republic of Lithuania**, of June 22, 2006, that establishes liability of juridical persons in respect to the actions as per article 260 (illegal disposal of drugs and psychotropic substances with intention to distribute them or illegal disposal of very big quantities of drugs and psychotropic substances), article 265 (illegal growing of poppies and cannabis) and article 266 (illegal disposal of category I precursors of drugs and psychotropic substances).

The Parliament of the Republic of Lithuania adopted the **Law On Pharmacy**, of June 22, 2006, that establishes prohibition to advertise medicinal products which contain drugs and/or narcotic substances to the general public, and import from the third countries of medicinal products entered in approved Lists II and III of Drugs and Psychotropic Substances is allowed solely to a juridical person possessing a licence to produce substances included in Lists II and III.

The Amendments to the **Law On the Control of Narcotic and Psychotropic Substances**, of November 16, 2006, provide a legal basis for institutions of the EU member states to transfer samples of controlled substances to other institutions aiming to disclose and investigate criminal activities and to prosecute in compliance with Council Decision of 28 May 2001 on the transmission of samples of controlled substances (2001/419/JHA). Also, the Law establishes a possibility for persons travelling to or in the territory of the parties to the Schengen *acquis* to possess with them drugs or psychotropic substances for treatment provided they have a certificate of a prescribed form issued by a competent institution of his resident country for this purpose.

Resolutions by the Parliament of the Republic of Lithuania

By Resolution No. X-767, of July 18, 2006, the Parliament of the Republic of Lithuania approved the Program of the Government of the Republic of Lithuania that establishes in point 3.11 to anchor healthy lifestyle, to strengthen the prevention of diseases and implement the measures to combat exploitation of children, violence, tobacco, alcohol and drug use, to consolidate efforts of the public and local government institutions, mass-media, science and society for this purpose; point 15.12 envisages to strengthen the prevention and control system for drug related violence, crimes, also the prevention and control system for legal violations committed by juveniles.

Resolutions by the Government of the Republic of Lithuania

By Resolution No. 57, of January 19, 2006, the Government of the Republic of Lithuania approved the *Profile of the Procedure for Funding, Control and Accounting of the National Strategy on Drug*

Addiction Prevention and Drug Control based on which the institutions foreseeing to implement the National Strategy on National Drug Addiction Prevention and Drug Control 2004–2008, on an annual basis, by 15 of February, shall submit proposals regarding the implementation of the measures included in the National Strategy on National Drug Addiction Prevention and Drug Control 2004–2008, estimated need for the budget for their implementation and executors for the following year, also information on the programs foreseen for the following year the implementation of which are related to drug addiction prevention and drug control to the Drug Control Department under the Government of the Republic of Lithuania. This resolution shall ensure improved coordination of the state budget funds allocated for the implementation of the National Strategy on National Drug Addiction Prevention and Drug Control 2004–2008.

By Resolution No. 221, of March 9, 2006, the Government of the Republic of Lithuania approved Regulation (EC) No 273/2004 of the European Parliament and of the Council of 11 February 2004 on drug precursors, Council Regulation (EC) No 111/2005 of 22 December 2004 laying down rules for the monitoring of trade between the Community and third countries in drug precursors, and Commission Regulation (EC) No 1277/2005 of 27 July 2005 laying down implementing rules for Regulation (EC) No 273/2004 of the European Parliament and of the Council on drug precursors and for Council Regulation (EC) No 111/2005 laying down rules for the monitoring of trade between the Community and third countries in drug precursors. These regulations establish licensing, import, export and control of drugs and psychotropic substances. This Resolution shall become effective having adopted and become effective the Law on Amendments to the Law on Precursors of Drugs and Psychotropic Substances.

By Resolution No. 452, December 12, 2006, the Government of the Republic of Lithuania approved the *Regulations* for identification of inebriation and intoxication of persons steering transport means and other persons that establish procedures of execution of the intoxication control and identification of inebriation/intoxication (including intoxication with drugs) for drivers of motor vehicles, including staff, steering motor vehicles of juridical persons, as well as other persons, and remuneration to a personal health care institution for a medical check-up performed there.

Other legal acts

By Decree No. A1-220 of 31 July, 2006, the Minister of Social Affairs and Labour approved the Profile of Terms and Procedure for Subsidised Employment. The aim of subsidised employment is to facilitate unemployed people to anchor on the labour market or to provide special conditions to stay in the labour market. Besides other persons included in the above Profile, subsidised employment is organised for persons dependent on drugs, psychotropic and other psychoactive substances having accomplished programs of psychological social and/or professional rehabilitation.

By Decree No. V-505, of June 20, 2006, the Minister of Health of the Republic of Lithuania approved the *Methodology* of medical examination for identification of inebriation/intoxication (including intoxication with psychoactive substances) and the *Methodology* of assessment of person's general condition.

By Decree No. V-569, of July 1, 2006, the Minister of Health of the Republic of Lithuania included 1-(3-chlorophenyl) piperazine, mCPP into the List of drugs and psychotropic substances *Drugs and Psychotropic Substances Prohibited for Medical Use*.

By Decree No. V-584, of July 5, 2006, the Minister of Health of the Republic of Lithuania approved the *Profile* of the procedure for the implementation of programs for harm reduction of drugs and psychotropic substances that establishes goals, objectives and the implementation of the programs for harm reduction of drugs and psychotropic substances for users of drugs and psychotropic substances being at highest risk to be infected with human immunodeficiency virus (hereinafter – HIV) and other infections, as well as their funding sources.

By Decree No. ISAK-494, of March 17, 2006, the Minister of Education and Science of the Republic of Lithuania approved the *Program* of prevention of use of alcohol, tobacco and other psychoactive substances. The objective of this Program is to ensure efficiency of the general (primary) prevention activities. This Program is targeted for the general (primary) prevention of use of injurious and psychoactive substances, i.e. domestic chemicals, medicines, alcohol, tobacco, drugs and other psychoactive substances in the educational establishments.

By Decree No. 1.2-107, of December 29, 2005, the Director of the Drug Control Department under the Government of the Republic of Lithuania approved the *Form* of an annual report on provision of medicinal, psychological, social rehabilitation services to children using psychoactive substances, which is filled in by the Ministry of Health of the Republic of Lithuania, the Ministry of Social protection and

Labour of the Republic of Lithuania, the Ministry of Education and Science, the Heads of the County administrations, having collected, analysed and summarised the data regarding provision of medicinal, psychological, social rehabilitation services to children using psychoactive substances, and submit it by February 1 each year to the Drug Control Department under the Government of the Republic of Lithuania.

By Decree No. T 1-14, of January 31, 2006, the Director of the Drug Control Department under the Government of the Republic of Lithuania approved the *Regulations* for tendering of drug prevention projects for funding in 2006. The Regulations establish procedures for the organisation and funding of the tender, control and reporting on the used funds. The objective of the tender is to activate by different forms, methods and ways the organisation and implementation of the selective and targeted prevention of psychoactive substance use seeking to reduce and stem prevalence of psychoactive substance use among the persons in risk groups.

By Decree No. T 1-22, of February 7, 2006, the Director of the Drug Control Department under the Government of the Republic of Lithuania approved *Regulations* for the organisation of tendering projects of psychological and social rehabilitation for persons dependent on psychoactive substances that establish tendering criteria for the projects of psychological and social rehabilitation for persons dependent on psychoactive substances.

By Decree No. V-215, of September 21, 2006, the Director of the Prisons Department under the Ministry of Justice of the Republic of Lithuania approved the *Methodological Recommendations* concerning the work with the juveniles applied respite of servicing one's sentence or probationary indemnity from imprisonment before the term based on Articles 92 and 94 of the Penal Code of the Republic of Lithuania, aiming at more efficient enforcement, by the officers of the correction inspectorates subordinate to the Prisons Department under the Ministry of Justice of the Republic of Lithuania, of the court judgements regarding respite of servicing one's sentence or probationary indemnity from imprisonment before the term for the juveniles present in records of the corrective inspectorates, also individual educational or social work with them.

By Decree No. 1A-349, of June 27, 2006, the Head of the State Medicine Control Service under the Ministry of Health of the Republic of Lithuania obliged the producers of medicines, wholesale enterprises and retail enterprises (pharmacies) having licenses to engage in pharmaceutical activities with drugs and psychotropic substances and pharmaceutical substances, also the pharmacies of health care institutions, health care institutions providing the services of substitution treatment of dependence disorders to provide the reports regarding received and sold medical preparations containing drugs and psychotropic substances included in the List of drugs and psychotropic substances *Drugs and Psychotropic Substances Prohibited for Medical Use*, in compliance with the forms established in the above Decree.

International agreements

Bilateral agreements on Cooperation in Combat against Organized Crime and Other Crimes and Cooperation in the Border Territories between the Governments of the Republics of Lithuania and Poland, of the Republics of Lithuania and Poland. Based on these agreements the states committed to strengthen the cooperation between respective institutions ensuring the society's safety and public order, in combat against organised crime and other crimes, and to implement joint actions in the border territories of both states. The countries cooperate, in particular combating crimes posing threat to human life or health, related to terrorism, illicit production and trafficking of drugs, psychotropic substances and their precursors, illegal crossing of the state border and illegal transportation of people through the border, also other crimes. It is agreed to exchange information regarding drug circulation, sites of drug production and storage, drug destinations, transportation routes, to transmit samples of new drugs and other toxic substances to each other.

1.2. Institutional Framework, Strategies and Policies

Coordination Structure in Lithuania

No significant changes applied in coordination structure in the reporting year. The Drug Control Department under the Government of the Republic of Lithuania is delegated the responsibility to effect the drug prevention and drug control policy, to organize implementation of drug prevention and control measures, to set the scope of the drug prevention and control policy, and to coordinate the drug prevention and drug control activities on the national and local levels. The latter is very important in

seeking to ensure effective collaboration between public institutions and different organizations involved in drug prevention and drug control activities.

More information about coordinating institutions is available in 2006 LITHUANIA NATIONAL REPORT

National plan and strategies

Within the last three years, Lithuania has been formulating the country's drug policy in compliance with the international requirements and standards in terms of drug control and drug prevention with assistance by the UN organizations, the WHO, EUROPOL, EMCDDA, Northern Dimension, the EU Phare program, the EC Pompidou Group and other bilateral support. The National Drug Strategy is based on the *National Drug Prevention and Drug Control Strategy for 2004–2008*¹ and the *National Programme on Drug Control and Prevention of Drug Addiction 2004–2008*². These documents are the main strategic programmes for the drug control and addiction policy in Lithuania for the coming years. The main objectives of the country's drug policy strategy are as follows: a drug-free society to the extent possible; prevention of drug abuse among young people; drug supply reduction; care of drug addicts; international multilateral, bilateral and inter-institutional co-operation in the field of drug demand and drug supply reduction; and emphasis on the development of co-ordination systems at the local and national levels. Linked to its objectives the Programme contains a list of measures concerning drug demand reduction, drug supply reduction, drug use monitoring, information, coordination, and international cooperation. Additional information also available in Structured Questionnaire 32 Policy and Institutional Framework (submitted in 2006).

Decree No. ISAK-494 of March 17, 2006, of the Minister of Education and Science of the Republic of Lithuania approved *The Programme on Prevention of Use of Alcohol, Tobacco and other Psychotropic Substances* (Žin., 2006, Nr. 33-1197). The purpose of this Programme is to ensure efficiency of the universal (primary) prevention activities. This Programme aims at the implementation of prevention of harmful and psychotropic substances, i.e. domestic chemicals, pharmaceuticals, alcohol, tobacco, drugs and other psychotropic substances, in educational establishments.

Implementation of policies and strategies

Government institutions are responsible for the implementation of the National Programme on Drug Control and Prevention 2004-2008. The local governments are merely advised to follow the Programme statements when implementing drug control and prevention strategies at the local government level. The actions included in the annual action plan of the National Programme on Drug Control and Prevention 2004-2008 are legally binding. The annual action plan facilitating the implementation of the National Programme on Drug Control and Prevention 2004-2008 is adopted by the Government of the Republic of Lithuania. Each year having collected information on the previous year's activities regarding the implementation of the National Programme on Drug Control and Prevention 2004-2008 from the implementing agencies the Drug Control Department produces a report which is submitted to the Government.

Evaluation of policies and strategies

In 2006, the National Audit Office of Lithuania carried out performance audit and on 21 December 2006 provided an audit report "Organisation of Drug Addiction Prevention and Assistance"³. In the Audit Report the auditors offered recommendations to the Government, the Drug Control Department and the Ministry of Health.

¹ Resolution on the approval of the national drug prevention and drug control strategy for 2004-2008 (EN). URL: <http://www.emcdda.europa.eu/index.cfm?fuseaction=public.AttachmentDownload&nNodeID=6406&slanguageISO=EN>

² Resolution of the Parliament of the Republic of Lithuania on Approval of the National Programme for Control of Drugs and Prevention of Drug Addiction 2004–2008 (EN). URL:

<http://www.emcdda.europa.eu/index.cfm?fuseaction=public.AttachmentDownload&nNodeID=7285&slanguageISO=EN>

³ http://www.vkontrole.lt/veikla_ataskaitos_archyvas.php?v

1.3. Budget and Public Expenditure

In 2006, for the implementation of measures related to the National Strategy on Drug Addiction Prevention and Drug Control 2004–2008 the Government of the Republic of Lithuania allocated 4238,27 thousand euros (in 2005 - 3514,9 thousand euros; in 2004 – 2958 thousand euros; in 2003 - 3133 thousand euros; in 2002 - 2516 thousand euros).

The reports regarding the use of budgetary funds of the Republic of Lithuania submitted by the institutions executing the implementation measures of the Program in 2006 included the following information:

- allocations for primary prevention accounted for ca. 2,9 million Litas, with the biggest share used to fund prevention projects, raising of qualification, information dissemination;
- allocations for treatment and rehabilitation accounted for nearly 7 million Litas. The biggest share was allocated to the Centres for Addictive Disorders, 920 thousand Litas – to the development of social psychological services for quality improvement, 250 thousand Litas – to renovation of premises for rehabilitation of drug addicts of the Lithuanian AIDS Centre.
- allocations for strengthening of illicit trafficking control accounted for nearly 3 million Litas.

It is necessary to underline that the activities of prevention of drug addiction and drug control are funded, in addition, from programs executed by other institutions, the EU, international organizations, as well as other funds. Besides, other funds received in compliance with the procedure established in laws are used to finance the implementation measures of the Program.

In Lithuania no survey has been conducted to assess drug-related expenditures.

1.4. Social and Cultural Context

Public Opinions on Drug Issues and Attitudes to Drugs and Drug Users

In late 2004, the first research on harmful addiction prevalence among the general population was conducted in Lithuania. It provided nationally a vast amount of valuable information on the drug problem and prevalence of other harmful addictions such as alcohol abuse and smoking, revealed the largest risk groups as well as their social and demographic characteristics and attitudes of the Lithuanian population towards drug addiction. According to the Lithuanian Population Survey 2004 the majority of Lithuanian population (61 percent) regards drug dependent people as patients/sick. One-fifth (20 percent) of the respondents regard drug dependent individuals as both criminals and sick people. The majority of the Lithuanian population follow the view that legal smoking of cannabis should not be allowed. 66 percent of the Lithuanian population are firmly against "people smoking grass, i.e. hashish or marihuana, legally". Another 7 percent are less categorical, but are also against people smoking grass anywhere. Even a larger part of the Lithuanian population disagree that people should be allowed to use heroin legally. 85 percent of the Lithuanian population are firmly against "people legally using heroin". Another 4 percent are less categorical, but are also against people using heroin.

The majority of the general public tend to believe that drug use shall be prosecuted as a criminal activity, and that heavier sentences would help to reduce the drug use levels. 74 percent of the respondents fully or partially agree that "drug users should be criminally prosecuted". 70 percent of the respondents fully or partially agree that "heavier sentences would facilitate drug use reduction".

The respondents also were asked to assess the prevalence of alcohol and drug use in Lithuania nationally and locally (in their resident area - a city or village). The residents tend to point out that the alcohol and drug problem in Lithuania is national, rather than local. This opinion is particularly distinct in the evaluation of drug use prevalence. Only 1 percent of the Lithuanian population believe that a drug problem does not exist in Lithuania; meanwhile, 26 percent believe that drug use poses no problem in their locality. 24 percent of the Lithuanian population think that drugs are highly prevalent in Lithuania, whereas 45 percent state that drugs are moderately prevalent. Most of the Lithuanian residents (92 percent) think that alcohol use in Lithuania is either highly prevalent or at least moderately prevalent (46 percent and 46 percent, respectively). In their own locality, people see slightly lower prevalence of alcohol use. 80 percent believe that the prevalence of alcohol in their locality is very high or moderate (33 percent and 47 percent, respectively).

The aim of the Social Tolerance Study 2005 organised through round table discussions in the municipalities by the Coalition I Can Live together with the National Health Board was to survey the tolerance level of staff of local governments, health care, educational and social sectors towards

vulnerable groups. The survey was conducted based on a questionnaire including 23 questions prepared modifying the Bogardus social tolerance scale. The questionnaire distinguished four vulnerable groups: drug users, released from imprisonment, individuals HIV positive and engaged in prostitution. The Social Tolerance Study was conducted in the municipalities of Vilnius, Kaunas, Klaipeda, Siauliai, Alytus, Ignalina, Druskininkai and Mazeikiai. 1000 of respondents were surveyed.

Analysis of the Study data showed the respondents are most tolerant to individuals released from imprisonment, relatively less- to individuals HIV positive and engaged in prostitution, an least tolerant – to drug users. The respondents indicated they would strictly disagree to live in a neighbourhood of: a drug user - 47,8%, an individual engaged in prostitution - 33,2%, an individual HIV positive - 27,4%, a person released from imprisonment - 26,6% of the surveyed. Analysis of the distribution of the answers to the social tolerance questionnaire revealed that the highest intolerance to the vulnerable groups above is paid by professionals of health care, pharmaceutical, nursing and obstetrics sectors. 54,5% of health care professionals, 46,9% of educational professionals (primary, pre-schooling, special education and other schooling professionals), 41,6% of social workers and 33,3% of managers and representatives of other occupations. The Study data evidence that in tolerance education and improvement of discriminatory approach integral actions have to be oriented primarily towards health care professionals as their opinion towards socially vulnerable groups is most intolerant at present. Analysis of the distribution of the answers to the social tolerance questionnaire by age show differences among age groups – younger respondents are more tolerant towards the vulnerable groups compared to the age group above 45 years. A numerous group of the respondents recognized that negative approach towards these groups would change if “this distress affected their families, relatives or close people”, if the vulnerable groups were better integrated into the society, a system of social support, health and other services were established subsequently “the undesirables” would not cause threat to the society.

Parliamentary Initiatives

By Resolution No X-54 of December 16, 2004, the Parliament of the Republic of Lithuania established a permanent Commission for Prevention of Drug Addiction consisting of 11 members of the Parliament. The key long-term goal of this Commission is to secure the interests of the state and to provide favourable conditions for implementation of the national policy objectives aimed at drug control and prevention of drug addiction. In 2006, the Commission organized 11 meetings, with participation of officers from responsible institutions, persons having drafted proposals, representatives from NGOs and other organizations. The Commission analysed problems as follows: Laws on control of drugs and psychotropic substances, control of precursors of drugs and psychotropic substances, protection of juveniles against negative impact of public communications, minimum and medium care of juveniles, draft amendments to the Penal Code; combat against illicit trafficking of synthetic drugs in Lithuania, protection of juveniles against propagation and advertising of drugs and psychotropic substances; effective and coordinated support in strengthening youth health and its development; identification of persons intoxicated with alcohol, drugs, psychotropic and other substances steering transport means; identification of intoxications with alcohol, drugs, psychotropic and other substances; prevention of drug addiction and drug distribution in the Roma labor in Kirtimai (Vilnius). The Commission helped to organise workshops and conferences on prevention of drug addiction, drug control and drug policies and actively participated in them.

Mass Media Campaigns

A role of mass media in the opinion formation regarding drug harm reduction, consequences of using is notably big, thus it is important that information in mass-media would not encourage curiosity or become concealed promotion of drugs. In 2006, the total number of information pieces on drug themes accounted for 3510; these were in 99 mass communications (24 national and 75 regional publications), 5 TV channels, 5 radio stations, 2 news agencies 8 news portals. The most active type of mass communication was press, having published over half (65 percent) of all information pieces, i.e. 2278 publications. Among all types of mass communication press prevailed in analytical articles providing analysis of causes of events, extended comments by professionals, along with collected data. Meanwhile, radio stations followed the drug theme least (136 communications). The biggest share of radio communications included criminal news. In 2006, criminal news prevailed, i.e. 2227 communications (63%) which reported on drugs confiscated by police, detained persons distributing, trafficking or transporting drugs and psychotropic substances, investigations executed by officers, court cases, etc. Non-criminal communications accounted for 37% of all communications, including:

information on prevention activities - 34% of all communications, treatment and rehabilitation - 20%, investigation and their results - 13%, policy – 12%, other themes - 16%.

Mass Media Campaigns - At National Level

National prevention campaign „FORGET“

The Drug Control Department under the Government of the Republic of Lithuania aiming at providing information on drug harm to youth implemented the first national prevention campaign “FORGET” which encourages young people to think before adopting decisions and provides objective arguments why it is not worth starting to use drugs.

Main Message

The main idea of the campaign focuses on dreams of young people. All young people dream of love, true friends, money and recognition but one may “forget” all the above after started to use drugs. The campaign “FORGET” addresses Lithuanian youth aged 15-25, not using drugs. It consists of 3 TV clips, 4 outdoor promotion posters and a website page www.benarkotiku.lt (Eng. *without drugs*). It aimed at making this communication means primarily visually attractive to youth, excluding didactics which is typical for prevention, using slight youth jargon. Besides, here space was left for a young person to think of his choice. Those wishing to find more information are invited to visit a website page for youth www.benarkotiku.lt.

Evaluation and Results

The information campaign for youth “FORGET” of the Drug Control Department received especially positive feedback from professionals and youth. In 2007, in the Lithuanian marketing contest “Password 2007” the campaign “FORGET” was awarded as the most effective social campaign in Lithuania implemented in 2006. The key aim of the campaign was to inform, thus accessibility of the audience was evaluated primarily. The campaign presentation received high interest from the national and regional mass media. Over 30 journalists participated in the press-conference. Concerning TV, the research showed that the TV clips accessed 51% of the target audience (aged 15 – 25).

For the website activities, promotional banners were showed on the website portals most popular among youth. During the campaign 38.000 individuals visited the website page www.benarkotiku.lt. The Project website page www.benarkotiku.lt received the highest score from the website visitors in the website poll. In November 2006, the number of website users to this page exceeded 60 thousand.

For the outdoor promotion activities, the posters accessed all major cities of Lithuania, with the total population exceeding 1,5 million.

Taking into consideration that information campaign for youth “FORGET” created in 2006 received much support it is continued on TV, the website and outdoor promotion in 2007 (stage 2). Stage 3 of the information campaign “FORGET” has been prepared, i.e. 3 new outdoor promotion posters which will convey the same communication “Forget your dreams if you start using drugs” through new visual aids.

Media and Costs

The main mass media included as follows: TV promotion, outdoor promotion in the cities and promotion on website. Stage 1 was implemented in October - December 2006 (the budget – 100.000 Litas) , stage 2 – in May - June 2007 and stage 3 – in October – November 2007 (the budget – 77.000 Litas).

Information campaign in night clubs

Continuing the prevention Project *Clubbing without Drugs* in 2007 the information campaign about drug harm oriented towards youth having a liking for a nightclub culture was created for the first time in the country. This campaign seeks to provide factual data on drug harm to youth in order they could adopt a decision supported by true information instead of being guided by myths or other misleading stereotypes encouraging to try drugs. The campaign covered website promotional banners, 4 announcement stickers, a film on drug harm. The information material of the campaign was distributed to 64 most popular nightclubs and bars (the budget – 6 000 Litas).

2. Drug Use in the Population

2.1 Drug Use in the General Population

More information for this chapter is available in 2005 LITHUANIA NATIONAL REPORT (2004 data) and Standard Table 01 Basic results and methodology of population surveys on drug use (2005)

Before 2005, Lithuania was among a few countries, where the prevalence of drug use in the general population was not surveyed. The general population survey on the prevalence of drug use in the country was carried out in 2004, according to the methodology of the European Monitoring Centre for Drugs and Drug Addiction (hereinafter referred to as EMCDDA). The target group of the study was permanent residents of Lithuania aged 15 to 64.

8.2 percent of Lithuanian population used drugs at least once in their lifetimes. 13.1 percent of men and 3.8 percent of women indicated that they had tried drugs at least once in their lifetimes. Younger Lithuanian population (aged 15 to 34) more frequently than older population (aged 35 to 64) indicated that they had tried drugs at least once in their lifetimes (14.1 percent vs. 3.8 percent, respectively). It was noted that young men three times more frequently than young women indicated that they had used drugs at least once in their lifetimes (20.8 percent vs. 7.3 percent, respectively). Increasingly more young women tried drugs at least once in their lifetimes compared to older women (Table 2-1).

Table 2-1. Prevalence of any drug use, by gender and age (percent), 2005

Age	15-64			15-34			35-64		
	M	F	Total	M	F	Total	M	F	Total
Lifetime prevalence (LTP)	13, 1	3, 7	8, 2	20, 8	7, 4	14, 1	6, 8	1, 2	3, 8
Last year prevalence (LYP)	3, 9	1, 3	2, 6	7, 5	3, 0	5, 2	0, 1	0, 0	0, 1
Last month prevalence (LMP)	1, 6	0, 2	0, 9	3, 3	0, 4	1, 9	0, 0	0, 0	0, 0

Cannabis is the most prevalent drug, 7,6 percent of Lithuanian population reported having used it at least once in their lifetimes. Men indicated three times more frequently than women having tried cannabis at least once in their lifetimes - 12,1 percent of men and 3,4 percent of women. Besides cannabis, in Lithuania the most prevalent drugs are amphetamine and ecstasy. Their prevalence rates are very similar. 1,1 percent of Lithuanian population used amphetamine at least once in their lifetimes, 1,0 percent - ecstasy, 0,5 percent – hallucinogenic mushrooms, 0,4 percent – cocaine, 0,3 percent – heroin and LSD each. The most prevalent hallucinogenic substance is hallucinogenic mushrooms tried by 0,5 percent of Lithuanian population (Table 2-2).

Table 2-2. Distribution of drug use prevalence, by gender (percent), 2005

	Lifetime prevalence (LTP)			Last year prevalence (LYP)		
	M	F	Total	M	F	Total
Cannabis	12,1	3,4	7,6	3,4	1,1	2,2
Amphetamine	1,8	0,5	1,1	0,5	0,2	0,3
Ecstasy	1,5	0,5	1,0	0,7	0,1	0,4
Hallucinogenic mushrooms	0,8	0,2	0,5	0,4	0,0	0,3
Cocaine	0,8	0,1	0,4	0,5	0,0	0,3
Heroin	0,6	0,1	0,3	0,2	0,0	0,1
LSD	0,4	0,1	0,3	0,2	0,0	0,1

Note: Distribution of drug use in the last month is not included due to extremely low distribution

The highest prevalence rate of drug use is among Lithuanian population aged 15 to 24 (Table 2-3). In this subgroup the prevalence rate of cannabis use at least once in lifetime accounts for 15,7 percent, in the recent year – 7 percent and in the last month – 2 percent.

Table 2-3. Distribution among young respondents having used any drug, by age and gender (percent)

Age group	Lifetime prevalence (LTP)			Last year prevalence (LYP)			Last month prevalence (LMP)		
	males	females	total	males	females	total	males	females	total
15-17 years	11,6	7,1	9,5	7,2	3,9	5,7	2,8	0	1,5
18-19 years	25,9	11,2	19,2	9,5	7,1	8,4	4,3	2	3,3
20-21 years	35,8	17,6	26,5	18,5	8,2	13,3	8,6	1,2	4,8
22-24 years	30,3	9,3	19,3	10,1	0,9	5,3	3	0	1,4
25-34 years	18,5	4,3	11,1	4,4	1,1	2,7	2,1	0,2	1,1
35-44 years	10,4	2,6	6,4	2,1	0	1	0,6	0	0,3

The prevalence levels of cannabis, ecstasy, amphetamine and cocaine use in the age subgroup of 15-24 exceed the general prevalence of drug use nationally by two-three times (Figure 2-1, Figure 2-2, Figure 2-3, 2-4).

Figure 2-1. Distribution of cannabis use prevalence, by age (percent)

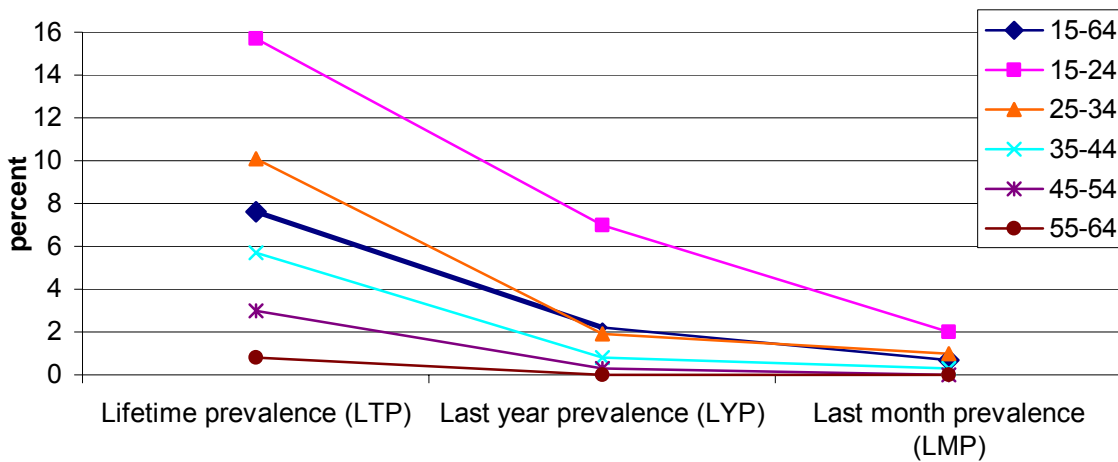


Figure 2-2. Distribution of ecstasy use prevalence, by age (percent)

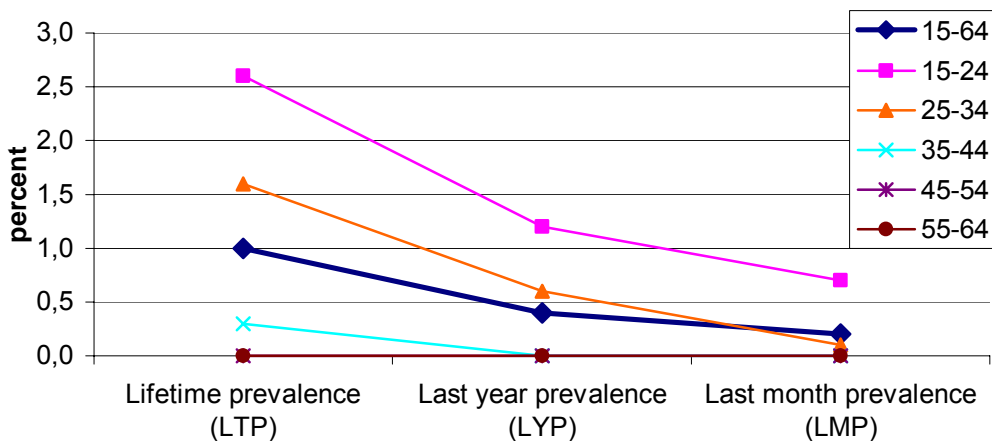


Figure 2-3. Distribution of amphetamine use prevalence, by age (percent)

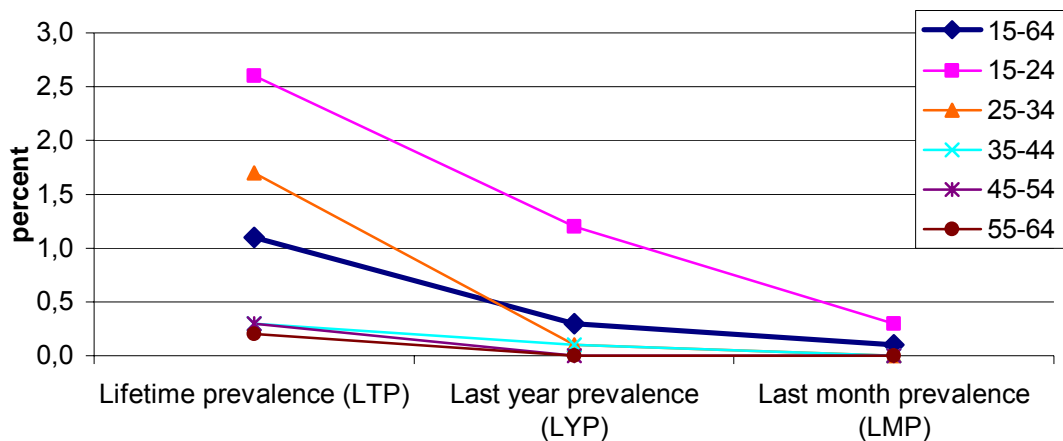
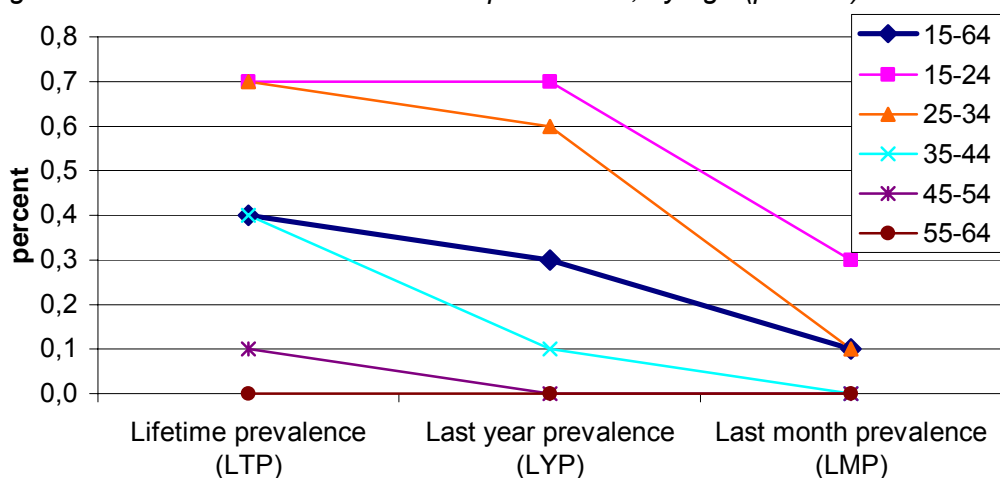
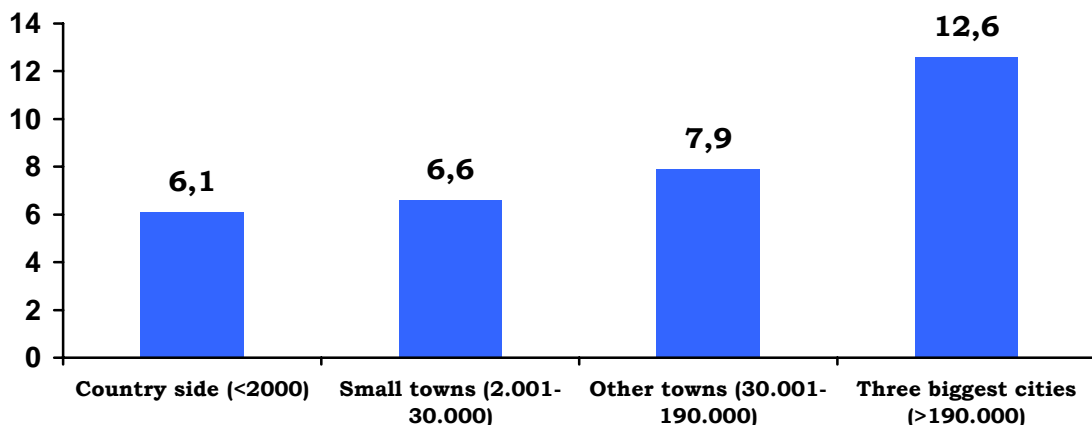


Figure 2-4. Distribution of cocaine use prevalence, by age (percent)



City dwellers use drugs more often than people from rural areas and smaller towns. 6.1 percent of rural residents, 6.6 percent of people living in district centres, 7.9 percent of people living in other towns, and 12.6 percent of people living in three biggest cities (Vilnius, Kaunas and Klaipeda) tried using drugs at least once in their lifetime (refer to Figure 2-5).

Figure 2-5. Lifetime prevalence of any drug use by residence (percent)



Next national general population survey will be conducted in 2008.

2.2. Drug Use in School and Youth Population

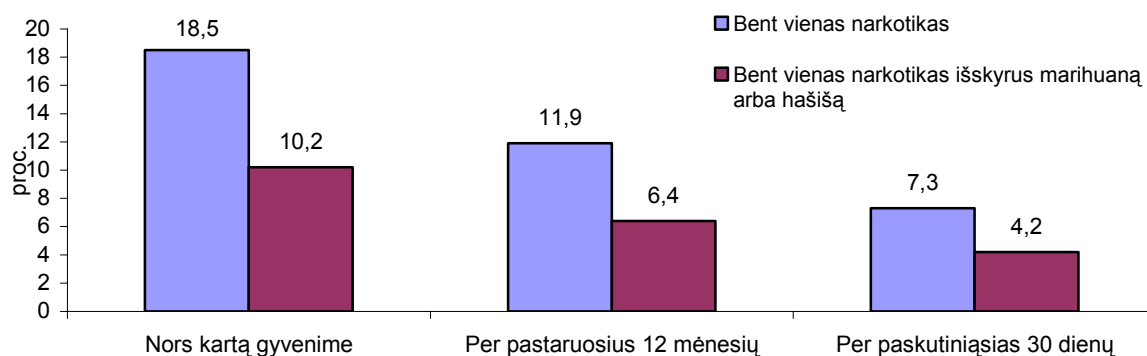
Prevalence of psychoactive substance use among youth population

Taking into consideration interactive risk factors (abuse of psychoactive substances by parents, family disintegration, weak family relations, no attending school) inmates of children foster homes are ascribed to an at-risk children group. In 2006, aiming at purposeful and consistent implementation of the measures for targeted at-risk groups in compliance with the National Strategy on Drug Addiction Prevention and Drug Control 2004–2008, by order of the Drug Control Department under the Government of the Republic of Lithuania a survey of prevalence of psychoactive substance use in children foster institutions was carried out. This survey sought to identify the prevalence and reasons of use of psychoactive substances among teenagers 15–17 years of age.

The findings of the survey are comparable to the results of the European School Survey Project on Alcohol and Other Drugs (ESPAD). The comparison of the results of the surveys among schoolchildren in secondary schools and at-risk groups of teenagers grants a possibility to identify differences of prevalence of psychoactive substance use, simultaneously helping to ground prevention measures for use of psychoactive substances for this target at-risk group.

The survey of prevalence of psychoactive substance use in children foster homes showed that every fifth (18,5%) teenager living in children foster homes of local governments and counties (21,1 percent of schoolboys and 15,9 percent of schoolgirls) had tried at least one drug at least once in their lifetimes. 11,9 percent (14,0 percent of schoolboys and 10,0 percent of schoolgirls) reported using at least one drug in the last 12 months, 7,3 percent (10,4 percent of schoolboys and 4,4 percent of schoolgirls) - in the last 30 days (Figure 2-6).

Figure 2-6. Distribution of respondents by length of drug use of at least one drug and at least one drug excluding marihuana or hashish

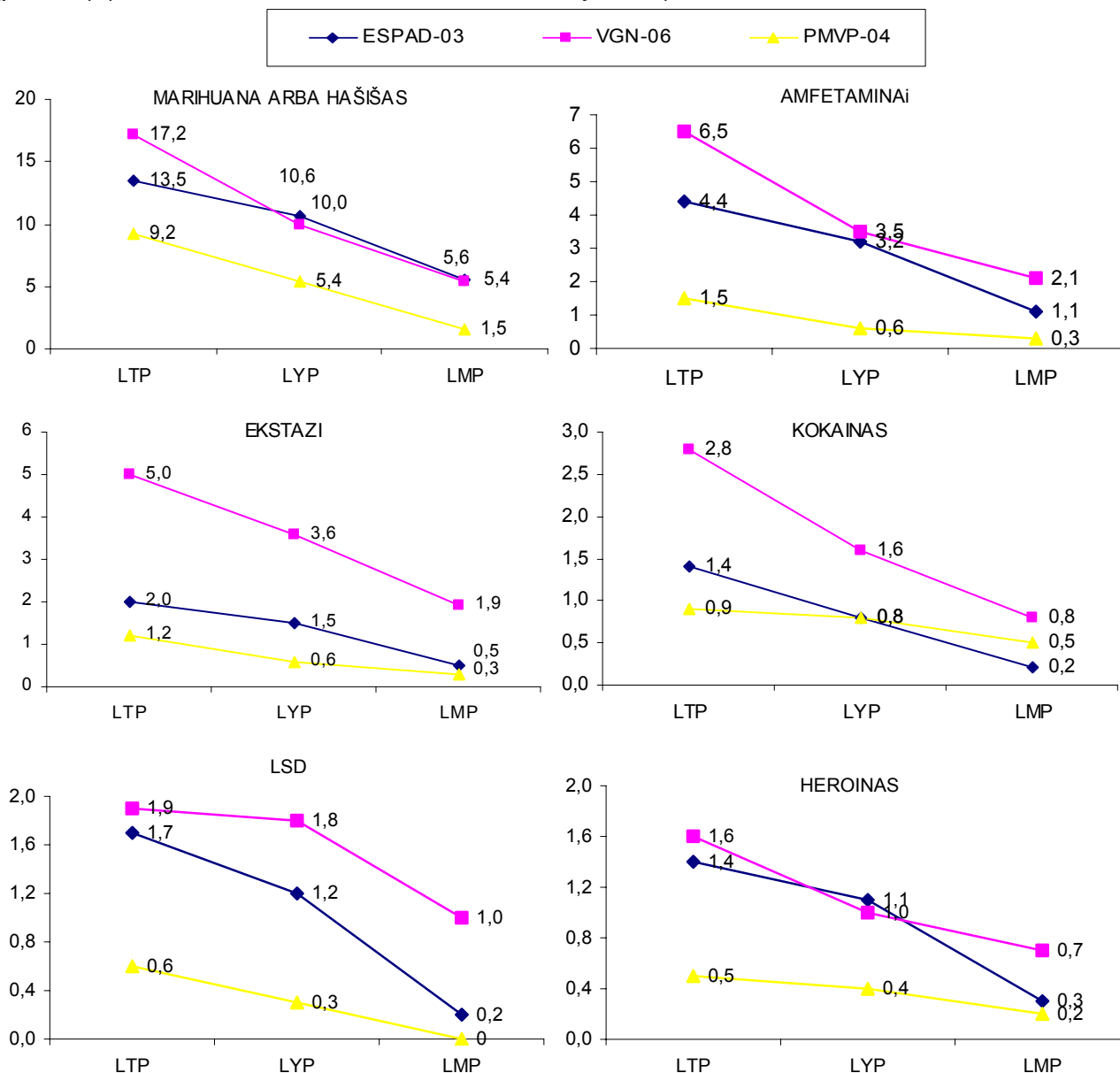


In foster homes of the cities 20,5 percent of schoolboys (7,7 percent of schoolgirls) used at least one drug in the last 30 days, while in foster homes of other cities - 12,9 percent of schoolboys (3,5 percent of schoolgirls). By age and sex, schoolboys aged 16 and 17 come to notice – 12,9 percent and 9,9 percent compared to schoolgirls of the same age (4,6 percent and 3,4 percent).

9,6 percent of respondents (10,2 percent of schoolboys and 9,1 percent of schoolgirls) used at least one drug excluding marihuana or hashish at least once in their lifetimes. 6,0 percent (7,6 percent of schoolboys and 4,4 percent of schoolgirls) used at least one drug excluding marihuana or hashish in the last 12 months, 4,0 percent (6,0 percent of schoolboys and 2,2 percent of schoolgirls) - in the last 30 days. Among users of at least one drug excluding marihuana or hashish in the last 30 days statistically significant are schoolboys aged 17 accounting for 5,1 percent (schoolgirls – 1,1 percent). By geographical location of foster homes – male respondents of other towns accounted for 8,1 percent (schoolgirls – 1,8 percent).

Among juveniles in foster homes the most distributed drugs following marihuana and hashish are amphetamine and methamphetamine, ecstasy and cocaine (Figure 2-7).

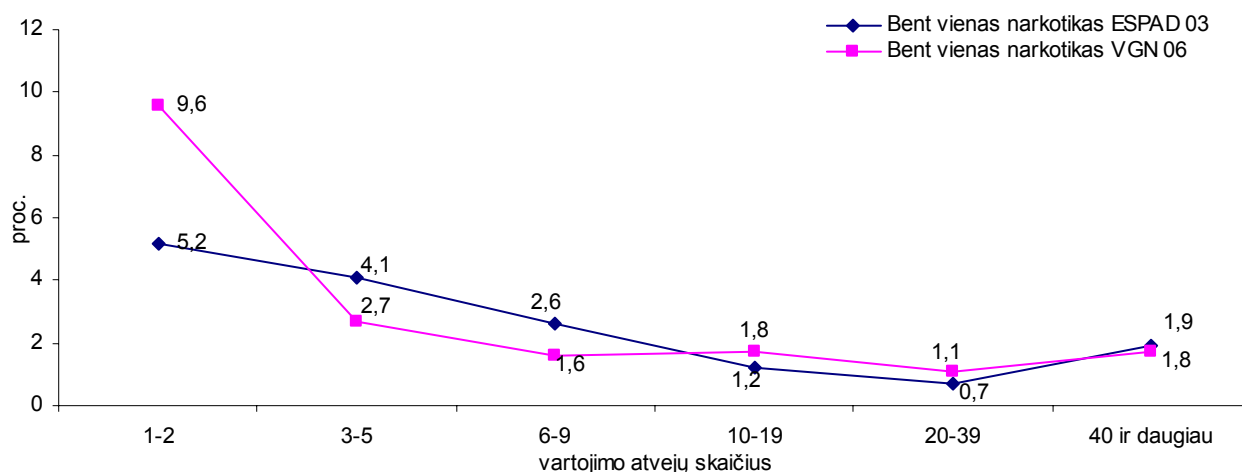
Figure 2-7. Distribution of respondents who used the most distributed drugs, by categories of use length (percent) (VGN 06, ESPAD 03 and PMVP 04 survey data⁴).



The biggest share (9,6 percent) includes those who had tried drugs at least once or twice in their lifetimes (ESPAD 03 – 5,2 percent) (Figure 2-8). 1,9 percent of VGN 06 respondents and 1,8 percent of ESPAD respondents used at least one drug 40 times and more.

⁴ **ESPAD 03** –European School Survey Project on Alcohol and Other Drugs (ESPAD) carried out in Lithuania in 2003; **VGN 06** –Survey of prevalence of psychoactive substance use in children foster homes of local governments and the counties in 2006; **PMVP 04** – Survey on prevalence of psychoactive substances (respondents aged 15-17) carried out in Lithuania in 2004.

Figure 2-8. Distribution of respondents by the number of cases when at least one drug was used (ESPAD 03 and VGN 06 survey data)



By sex, 84,4 percent of schoolgirls and 78,6 percent of schoolboys did not use any drug in their lifetimes. Based on a number of use cases schoolboys prevail, i.e. 2,6 percent at least one drug in their lifetimes 40 times or more. 0,9 percent of ESPAD 03 respondents and 0,6 percent of VGN 06 respondents used at least one drug, with the exception of marihuana or hashish, in their lifetimes. 79,5 percent of the foster home respondents in cities, 91,1 percent in other towns and 95,7 percent in districts did not use any drug, with the exception of marihuana or hashish, in their lifetimes.

In Lithuania, every tenth respondent (10,6 percent) living in the biggest cities and other towns used at least one drug, with the exception of marihuana or hashish, in their lifetimes (10,6 percent), 2,6 percent of the respondents in children foster homes in the biggest cities used the above drugs 40 times or more.

In 2007, in Lithuania ESPAD survey was carried out and its data will be included in National Report 2008.

Additional statistical information also available in the Standard Table 02 „Methodology and results of school surveys on drug use“ (2003 ESPAD data).

2.3. Drug Use among Specific Groups

Drug Use among Army Soldiers and Conscripts

Since 2002, each year in Lithuanian Army military units tests of biologic fluids regarding drug, psychotropic and other psychoactive substance use have been carried out. The target group covers individuals suspected in using drugs, assigned to the supervised group due to potential use of drugs and psychotropic substances, also randomly sampled conscripts and soldiers from the Professional Military Service (PMS).

The number of tested conscripts and PMS soldiers in 2004 - 2006 is provided in *Table 2-4*. In 2006, 88 percent of the military units implementing drug addiction prevention measures in the national defence system tested their conscripts. Instant drug identification tests regarding use of drugs and psychotropic substances were used to test 1417 conscripts, including 1005 conscripts (70,9 percent of all tested conscripts) based on planned preventive testing and 412 conscripts – based on sudden preventive testing.

In 2006, the national defence system included 224 conscripts (7,5 percent of all conscripts), assigned to the supervised group due to use of drugs and psychotropic substances. This group was also assigned 48 conscripts who had positive tests for use of drugs and psychotropic substances at instant drug identification tests regarding use of drugs and psychotropic substances (1,6 percent of all conscripts).

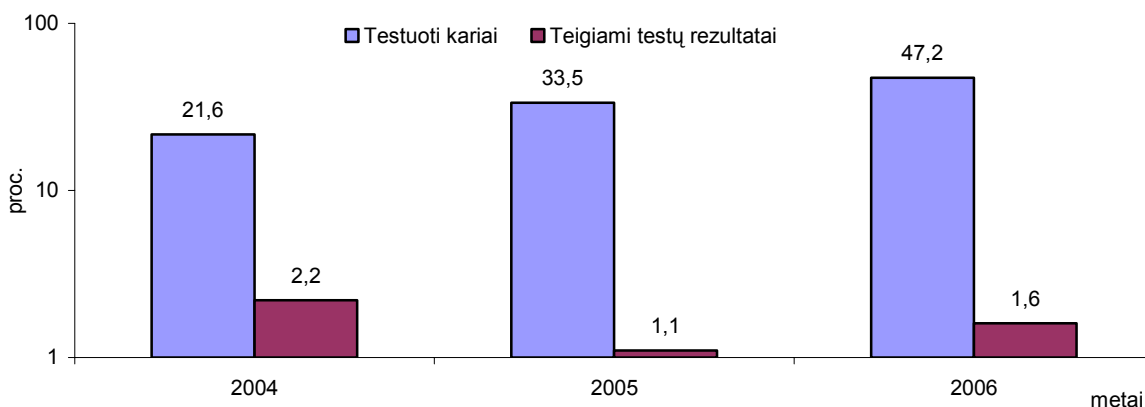
In 2006, 75 PMS soldiers (1,1 percent of all PMS soldiers) were tested in 17 percent of military units, including 8 PMS soldiers based on planned preventive testing and 67 PMS soldiers – based on sudden preventive testing. No positive PMS soldiers identified.

Table 2-4. The number of tested conscripts and PMS soldiers in 2004 - 2006

Year	2004		2005		2006	
	conscripts	PMS soldiers	conscripts	PMS soldiers	conscripts	PMS soldiers
Total number soldiers	3363	7370	3258	6985	3000	7300
Tested soldiers	729 (21,6 %)	60 (0,8 %)	1177 (36,1 %)	162 (2,3 %)	1417 (47,2 %)	75 (1,1 %)
Positive tests	73 (10% of the tested)	0	36 (3,1% of the tested)	0	48 (3,4% of the tested)	0
Assigned to the supervised group due to potential use of drugs	323 (9,6% of all soldiers)	0	379 (10,6% of all soldiers)	0	224 (6,9% of all soldiers)	0
Released from military service due to dependence on drugs	4	0	5	0	4	0

Compared to 2005, the number of tested conscripts increased by 11 percent (in 2005 -1177 conscripts tested), the number of positive tests in 2006 remains low compared to testing results in 2004. The share (percentage) of tested soldiers and soldiers with positive tests of all conscripts in 2004, 2005 and 2006 is provided in *Figure 2-9*. In 2006, out of all registered 48 drug use cases in the Lithuanian Army 31 case (65 percent) was identified during the Basic Soldier's Training.

Figure 2-9. The share (percentage) of tested soldiers and soldiers with positive tests of all conscripts in 2004, 2005 and 2006



In 2006, the number of soldiers assigned to the supervised group due to potential drug use reduced (in 2006– 224 conscripts; 6,9 percent of all conscripts; in 2005– 379 PPKT conscripts; 10,6 percent of all conscripts). In 2006, as in 2004, due to dependence on drugs and psychotropic substances 4 conscripts were released from the service. In 2005, due to dependence on drugs and psychotropic substances 5 conscripts were released from the service.

3. Prevention

Additional information also available in the Standard Table 19 „Universal school based prevention programmes“, Structured Questionnaire 22/25 „Universal prevention“ and Structured Questionnaire 26 „Selective and indicated prevention“.

Overview of the National Drug Prevention Policy

The implementation of drug addiction prevention measures is tailored in the *National Program on Drug Control and Prevention of Drug Addiction 2004–2008*, which stipulates that primary prevention of drug addiction shall be coordinated with prevention of alcohol and tobacco use and shall be based on sustainable education in the family, at school and in the community, by paying particular attention to prevention among high-risk children and youth. Another important document, the *National Strategy on Drug Addiction Prevention and Drug Control 2004–2008*, points out one of the priorities of this Strategy – primary prevention of drug use in the family, among children and youth. The drug prevention projects executed in Lithuania in 2006 were most commonly concerned with universal prevention in local communities and schools so as to protect young people from drug use. Since 2007, the distribution of support to prevention projects has changed: tenders for providing support to prevention projects have been announced, with focus on individual prevention support directions and channelling support separately for general prevention projects, selected and earmarked prevention projects, as well as the implementation of early intervention.

In 2006, upon the initiative by the Drug Control Department an inter-institutional Commission for evaluation of executed projects aiming at prevention of psychoactive substance use was set up. The Commission evaluated 523 projects on prevention of psychoactive substance use implemented in 2006 based on a report format and provided recommendations regarding the quality improvement of prevention projects. Information on the best 10 projects was proposed to place in the EDDRA Information System.

Having evaluated the implemented projects on prevention of psychoactive substance use the Commission pointed out the advantages and disadvantages of the projects and produced its proposals.

Advantages of the projects:

Compared to the Reports on the projects implemented in 2005 the quality of description of goals and objectives improved substantially. A number of projects based on the developed programs approved by the Ministry of Education and Science of the Republic of Lithuania increased. More frequently professionals from the Public Health Care Centres, police commissariats, etc. are invited to speak, discuss and deliver lectures on psychoactive substances and related topics, along with an initiatives by school (school teachers and other professionals). As a positive change the Commission members assess the fact that prevention events are organized and managed by the school staff and conducted by professionals who are able to answer the questions posed by the children. A greater number of projects make efforts to involve parents into the implementation of prevention of psychoactive substance use. In some cases involvement measures were targeted.

Disadvantages of the projects:

Observations on duration of the projects: The majority of implemented prevention activities are short-term and lack long-term impacts. It should be noted that duration of a project is often related to a schooling year period. Solely in rare cases one or another project extends beyond working days or a schooling year. Project duration is mainly connected to duration of and preparation for an after-lesson activity. If a project is implemented in the course of three months and will unlikely contribute to changing children's mentality, in other words, its efficiency causes doubts.

Observations on a target group: Numerous project reports lack information on how project executors involved/motivated children experimenting with psychoactive substances or those using frequently to participate in the project and how identified that the above children were experimenting or using psychoactive substances at least once a month.

Observations on project efficiency assessment: An assumption could be made that project executors continue to consider project efficiency assessment being not an important component of a project. Another assumption concludes that project executors lack knowledge on how to perform project

efficiency assessment. Solely few provided projects selected adequate assessment criteria and very few projects described assessment results. In many cases factors absolutely unrelated to the assessment process are treated as assessment criteria. The lack of knowledge is evidenced by the fact that often factors absolutely unrelated to the implementation of the main goal or objective are selected as assessment criteria. Also, projects of qualification raising of professionals were provided. However, the essential shortage provides that project organisers did not follow whether the acquired qualification and knowledge were used in some way or dissemination of knowledge and ideas was enacted.

Observations on project contents and impact measures: The provided project reports show that in 2006 many projects lacked integrity of the activities, also new and attractive forms and methods of the activities. Concern is caused because day-to-day campaigns, events, camps are supported the impact of which is short-term, as well as projects not based on informal education methods or those based on methods of passive activities, i.e. inadequate methodology is used. It should be pointed out that in many cases the activities of the project implementing agencies, institutions or organizations according to the functions authorised to them coincide with the project activities.

3.1. Universal Prevention

The National Strategy on Drug Addiction Prevention and Drug Control 2004–2008 prioritises primary prevention of drug use in the family, among children and youth. Drug prevention projects executed in Lithuania in 2006 were most commonly concerned with universal prevention in local communities and schools aiming at protection of young people against drug use.

The Ministry of Education and Science is responsible for universal prevention of psychoactive substance use in schools. Aiming at ensurance of efficiency of universal prevention in schools Decree No. ISAK-494 of March 17, 2006, by the Minister of Education and Science approved the *Program on Prevention of Use of Alcohol, Tobacco and Psychoactive Substances* (hereinafter – Program). Taking into consideration specifics of the educational experience and needs of respective prevention activities the contents of the Program was adapted to each age period and covers preschool, primary, basic and secondary education. This Program is a component of the educational content, integrated into the activities of the preschool education groups, lessons of subjects. At least 5-6 hours per school year should be devoted to the Program implementation.

In 2006, the Professional Development Centre for Pedagogues organised 28 seminars in which 1754 pedagogues participated. Improvement of the pedagogues' qualification was carried out in three directions:

Activities I: to introduce universal prevention directions, methods and ways. Aiming at adequate preparation of teachers to implement universal prevention in school raising their qualification was organised, the teachers were presented the latest methods and ways of prevention work. 4 seminars were organised in which 167 pedagogues raised their qualification.

Activities II: to train school communities to work as set forth in the *Program on Prevention of Use of Alcohol, Tobacco and Psychoactive Substances*. Seminars for school communities (teachers and parents) in different types of educational establishments were organised in the towns of Siauliai, Vilnius, Druskininkai, Alytus and districts of Utena, Kasiadorys, Plunge, Salcininkai, with 1480 participants, including teachers of 315 preschool establishments, 256 – primary forms, 802 – secondary and basic schools, 107 representatives of parents' communities.

Activities III: to prepare teachers acting as lecturers competent to work in the primary (general) and early intervention.

In 2006, the Ministry of Education and Science announced a tender for programs of primary drug addiction prevention with a budget of 428,9 thousand euros. The funds were allocated to the applicants as follows:

a) schools, NGOs and other institutions operating on the territories of local governments, provide programs to administrations of local governments (allocated 318,6 thousand euros, 410 projects funded); the funds were distributed based on the following criteria: the number of schoolchildren on the territory of a local government, the number of children growing in at-risk families on the territory of a local government, funds allocated by a local government for prevention of psychoactive substance use in the educational area, and active participation of municipal educational establishments and other institutions in the tender of programs. The majority of funded programs submitted to local government

administrations were implemented in Lithuanian schools, and prevention activities were focused on being occupied with and leisure time.

b) children foster homes and schools (allocated 28,9 thousand euros, 42 projects funded). the funds were distributed based on the following criteria: the number of participants in the programs, active participation of the county's educational establishments in the tender of programs for primary drug addiction prevention and the need for funds to implement the programs. Out of 42 funded programs 17 programs were for the implementation of universal prevention in specialised schools and 16 programs – for prevention in children foster homes. In the implementation of the projects prevention activities were mainly focused on improvement of engagement of at-risk children, education of healthy lifestyle, formation of social abilities, psycho-social sessions for problem children individually and in a group.

c) institutions implementing programs in at least 3 counties and those covering children at least from 3 counties and institutions, also institutions the founder of which is the Ministry of Education and Science (allocated 81,4 thousand euros, 23 projects funded).

In total, in the programs funded by the Ministry of Education and Science 145 thousand children and youths participated, 5 thousand pedagogues worked with them.

Having analysed the project Reports a conclusion may be drawn that an increasing number of projects seeks to involve parents into prevention of psychoactive substance use. According to the Report submitted by the Ministry of Education and Science in the programs funded by this Ministry in 2006 only 330 parents participated. For the implementation of universal prevention of psychoactive substance use more attention should be paid to the involvement of families, parents should be encouraged more strongly and motivated to more actively to participate in the prevention programs. In 2007, it is planned to prepare and approve a training program concerning primary prevention of psychoactive substance use for parents of schoolchildren .

In 2006, the implementation of universal prevention of psychoactive substance use was also supported by the Department for Youth Affairs at the Ministry of Social Affairs and Labour. In 2006, the Department for Youth Affairs launched a tender for projects for youth organisations or organisations working with youth the founders of which are not public or local government institutions. Out of 46 projects funds were allocated for 6 projects seeking to propose a positive alternative to harmful habits, to promote healthy lifestyle, to teach organising leisure time free of alcohol and drugs, to provide information and advice on social assistance to youths, their parents, friends and fellow-men, to assist contacting for respective and professional assistance of specialists or any other support, encouraging preventive assistance to youth. When implementing the prevention projects 252 trainings, seminars, conferences, camps, leisure and other events were organised. 129 persons (youths, their parents, fellow-men and friends) were provided counselling and information. The funded projects covered 2993 participants, including 2751 young people (14–29 years); the total number of the project executors was 67 individuals, including 53 young people (14–29 years).

In 2006, the Ministry of Education and science organised qualification raising course on issues related to prevention of psychoactive substance use and early intervention, with participation of 5020 pedagogues and ca. 2000 parents. The training sought to prepare pedagogues able to cultivate children's life skills, to implement prevention of psychoactive substance use and early intervention in a school community in a sustainable manner; to introduce policies of prevention of psychoactive substances in educational establishments, its principles, methods and ways of integration of prevention material into teaching subjects, specifics of prevention activities in families. 150 seminars, 55 lectures, 26 discussions, 38 group trainings, 28 events including practical work were organised. 58 were organised in educational centres, 30 – in preschool establishments, 3 – in primary schools, 154 – in secondary schools, 230 – in basic schools, 21 – gymnasiums, 8 – vocational schools, 1 – in a youth school.

Taking into consideration better public accessibility of internet services the Drug Control Department under the Government of the Republic of Lithuania prepared a specialised website for three target groups, i.e. parents, pedagogues and mass-media; its address is www.nkd.lt/visuomene. This specialised website provides information regarding a role of parents, pedagogues and mass-media in prevention, as well as practical advice what has to be focused on when talking to children and youth about psychoactive substance use, how to recognise in an early stage that a child uses these substances, what to do having suspected that a child may have used psychoactive substances and whom to address for assistance. The parents may check their knowledge using a special test. It is expected that this website for parents, pedagogues and mass-media will become an easily assessable information source about the latest prevention methods.

Information about Mass Media Campaigns on drug use prevention is provided in chapter 1.4 „Social and Cultural Context“.

3.2. Selective/Indicated Prevention

Recreational settings – (Prevention project *Clubbing without Drugs*)

In 2005, the Drug Control Department started the implementation of the Project *Clubbing without Drugs* on prevention of drug distribution and use in nightclubs. The main goal of this project is to establish cooperation among representatives of respective institutions and nightclubs based on the implementation of drug use and distribution prevention in nightclubs and to implement information campaigns concerning drug harm, primarily focusing on youth. *Clubbing without Drugs* is a selective prevention project aiming at a specifically defined target group, i.e. youth having a liking for nightclubs and other public entertainment settings. For the first time nationally, with participation of the best foreign experts this Project solves drug distribution and use problems in nightclubs in a complex manner, also it involves the private sector into solving this problem, i.e. management of nightclubs and organisers of entertainments for youth.

In 2006, the implementation of the Project *Clubbing without Drugs* was very active, its results received positive evaluation among the targeted groups and experts. The project was recognised by the highest award in the contest *PR FORMOS 2007* organised by the Lithuanian Union of Public Relations Specialists as the best project of public relations of a public institution implemented in 2006

The measures and achieved results of the Project *Clubbing without Drugs* implemented in 2006 are presented below.

- Meetings with heads of nightclubs: individual meetings-discussions were organised with representatives of the municipalities, the chief police headquarters and nightclubs of Vilnius, Kaunas, Klaipeda and Siauliai. In total 25 nightclubs participated supporting the cooperation idea and measures of the Project *Clubbing without Drugs*. The nightclubs recognised for the first time the existence of a drug problem (anonymous survey was carried out) and started to participate in discussions (problems hindering the implementation of prevention measures were identified). Nightclubs of Siauliai were the first ones to sign cooperation agreements.

- Counselling of nightclubs: a work group was set up, and its goal is to enter into contacts with representatives of nightclubs and to provide confidential counselling. The group activities are coordinated by the Drug Control Department, in its activities representatives of the Lithuanian Police Training Centre, the Chief Police Commissariat of Vilnius, the municipality of Vilnius, the Chief Police Commissariat of Kaunas, the municipality of Kaunas, the Chief Police Commissariat of Klaipeda participate. In June 2006, the Municipality of Siauliai and the Chief Police Commissariat of Siauliai joined the Project. The best results in providing individual counselling to the representatives of nightclubs were achieved in the city of Klaipeda.

- Work with police officers: the first training was organised for officers of the Lithuanian police seeking to provide specific information on communication with nightclubs. The training was conducted by officers of a special police unit of Stockholm *Commission of Clubs* having an exceptional experience in Europe that acts in nightclubs' environment who shared their knowledge how to cooperate with nightclubs. 470 police officers participated in this training and received knowledge on specifics of the cooperation with nightclubs and the project *Clubbing without Drugs*. It was the first specialised training of this nature in Lithuania.

- Training for personnel of nightclubs: in five biggest cities of Lithuania training for security staff of nightclubs was organised with the purpose to communicate practical knowledge on how to solve drug use and distribution problems in youth entertainment places. It was the first training of this nature in Lithuania. This training was conducted by public and criminal police officers. During the training 171 security employees working in nightclubs in Vilnius, Kaunas, Klaipeda, Siauliai and Panevezys received professional knowledge on how to solve problems caused by drugs. 80 percent of the participants evaluated this „excellent“ or „very good“.

- Communication with mass-media: together with managers of nightclubs one national and 3 regional press-conferences were organised to introduce the initiatives of the Project *Clubbing without Drugs*, 4 press releases regarding problem links between drugs and nightclubs, drug harm were

communicated. In 2006, in mass-media (TV, radio, press, website) the Project was mentioned over 50 times.

- Information for youth: the information campaign *Forget* concerning drug harm was prepared covering outdoor promotion, TV clips and a website www.benarkotiku.lt.

In 2007, the initiatives of the Project *Clubbing without Drugs* for the development of cooperation with nightclubs and providing information on drug harm to youth are planned. The latest information on the Project *Clubbing without Drugs* may be found on website at address www.benarkotiku.lt and www.nkd.lt.

At-risk groups (risk families, children, etc.)

Social risk families

Based on the data by the Statistics Department under the Government of the Republic of Lithuania in 2006 the number of children from social risk families who attended day care Centres was 7,6 thousand. Besides, social, psychological and other support was provided to 13,9 thousand of social risk individuals. In 2006, in day care centres social services were provided by 2,4 thousand employees and 1,7 thousand volunteers.

For the implementation of the National Program on Children Day Care Centres 2005–2007, aimed at social problems of children growing in social risk families in relation to their care and education, the Ministry of Social Affairs and Labour seeks to organise education of children attending day care centres, engagement after lessons, to ensure social work, and thus to establish adequate conditions for a child to grow in his/her biological family; in 2006, the Ministry provided co-funding to 120 projects of children day centres. In 2006, for the implementation of the Program ca. 1,47 million euros were provided. In 2006, the average project duration was 10 months. Children from social risk families were able to visit a day care centre 5 times a week with an average stay of 5,6 hours/day.

According to the project Reports of 2006, the children day care centres engaged in projects funded from the Program were attended in 2006 by ca. 4,2 thousand children, including 3,6 thousand children provided social and educational services on permanent basis. Compared to the project Reports of 2005, the number of children provided permanent care in 2006 increased by nearly 10 percent. The biggest share of the children provided care covered primary schoolchildren (from 7 to 11 years), i.e. 49,5 percent, whereas in 2005 – teenagers (from 11 to 15 years) – 43,1 percent. In 2006, the distribution of children provided permanent care, by age, is provided in Fig. 2.8. In 2006, 48 of the total number of children provided permanent care were referred to by Services of the Protection of the Child's Rights.

In the average, a day care centre included 8 professionals working directly with children (social workers, social pedagogues, pedagogues, psychologists and health care staff) and 5 other professionals. In the average, in 2006 the ratio was 5 children per one professional working directly with children, and ca. 9 children per one full-time contracted employee. 68 percent of the children provided long-term care were provided with material support, 48 percent – psychological help in a centre, 10 percent - referred to a specialised institution, and nearly 70 of the children were provided services based on individual plans.

According to the project Reports of 2006, care was provided to ca. 2,5 thousand families, including 2,1 thousand – long-term care. Compared to 2005, the number of families provided care increased by 32 percent, including long-term care – by 40 percent. Material support was provided to 65 percent (in 2005 – 56 percent) of long-term care families, psychological help – to 49 percent (in 2005 – 33 percent). Mainly the services were provided based on the family needs, i.e. counselling, providing information regarding a child and other issues, intermediation concerning arrangements of documents or daily affairs. Over 92 percent of the project executors organised arrangements in groups, i.e. lectures, discussions, meetings; 88 percent – attended families at home, 85 percent – invited for individual meetings in a centre.

Children playing truant and not attending school

Based on the information provided by the Ministry of Education and Science the total number of children under 16 years of age not attending school has been increasing (in 2005 the above total number accounted for 631 children, in 2004 – 505 children). In 2005, the biggest share of such non-attending children (47 percent) were schoolchildren of forms 6, 7 and 8, without ability of critical thinking, unable to resist to negative influence by the peers, to judge on threats of psychoactive substances, to solve faced problems in a constructive manner. Thus, in this educational phase especially much focus and efforts should be placed on the social skills of the children, development of appropriate behaviour and formation of a positive approach. No national model has been developed how to motivate the schoolchildren to return into the educational system, to remove the reasons of non-attendance, thus it is planned to prepare by 2008 a *Program for Return of Non-attending Children to School*.

Since March 2005, the Centre for Special Pedagogics and Psychology of the Ministry of Education and Science of the Republic of Lithuania has been implementing the *Project for Return of Dropouts to School*. The Project activities will continue for 3 years. The project goal is to return the dropouts to the general educational system through increasing accessibility, efficiency and quality of pedagogical-psychological help, improvement of professional qualification of professionals in pedagogical-psychological services, strengthening of methodological basis of these services.

The principle directions of this Project:

1. Development of a model for return of dropouts into the educational system and prevention of dropping out from school.
2. Increasing accessibility, efficiency and quality of pedagogical-psychological help through improvement of qualification of professionals in pedagogical-psychological services and strengthening of methodological basis of these services.

As a particular risk factor encouraging children not to attend school is referred to low-income families. Seeking to reduce this risk factor the Ministry of Social Affairs and Labour implements the *Program of Social Support to Schoolchildren Learning in General Education Schools* with the aim to provide support to families growing schooling age children and seeking to provide more favourable conditions for education of children from low-income families in general education schools. One of the measures included in the above Program is providing breakfast, lunch and meals in the summer vocation period for children from low-income families. In 2006, in the average free lunch was provided to ca. 99 thousand of schoolchildren, i.e. 19 percent of the total number of schoolchildren in general education schools, free breakfast – ca. 39 percent of schoolchildren, i.e. 7 percent of the total number of schoolchildren in the general education schools. In 2006, in the day summer leisure camps organised during summer vocation by general education schools free meals were provided to ca. 19 thousand schoolchildren, i.e. 4 percent of the total number of schoolchildren in general education schools. Another important measure of the above Program is provide schoolchildren from low-income families with necessary schooling kits. In 2006, support was provided to ca. 79 thousand schoolchildren, i.e. 15 percent of the total number of schoolchildren in general education schools. The schoolchildren were provided with school textbooks, exercise books, drawing-blocks, writing and drawing kits, dictionaries, atlases, different paper, slipcovers for books and notebooks, satchels, sports outfits and footwear, clothing. Some local governments provided such support having social workers of the wards and supervising instructors attended each poor family individually and collected information on the schoolchild's needs for necessary schooling kits.

4. Problem Drug Use

4.1. Prevalence and incidence estimates of PDU

No information available.

A survey regarding prevalence of problematic drugs in Lithuania is planned to carry out at the end of 2007 m. The survey data shall be included in the National Report 2008.

4.2. Treatment Demand Indicator

Drug addicts' registration system overview

The *Law on Addiction Treatment* of the Republic of Lithuania (Žin., 1997, No. 30-711) establishes that addict patients and individuals abusing alcohol, drugs, psychotropic and other psychoactive substances must be entered into the drug addicts' registration system. The criteria of presence in the registration system are established by the Ministry of Health of the Republic of Lithuania. Following Decree No. 544 *On Approval of Implementing Legal Acts to the Law on Addiction Treatment* of the Republic of Lithuania issued by the Ministry of Health of the Republic of Lithuania (Žin., 1998, No. 86-2407) individuals abusing alcohol, drugs, psychotropic and other psychoactive substances must be entered into the drug addicts' registration system in compliance with the following criteria:

- A dependence disorder of the individual has been diagnosed by a medical doctor;
- Disorders of mental and/or physical health due to abuse of alcohol, drugs, psychotropic and other psychoactive substances;
- Disorders of social adaptation;
- Disarray of work activities;
- Legislation offences.

The same Decree establishes criteria for removal of drug addiction patients from the addiction registration system as follows:

- Long-term remission: alcohol (3 years), drugs (5 years), psychotropic and other psychoactive substances (3 years);
- Good social adaptation;
- Stable work activities;
- Absence of legislative offences;
- Death.

The State Mental Health Centre under the Ministry of Health administers the registration system of mental diseases and mental disorders, collects and analyses data on prevalence of mental diseases and mental disorders of the population. The data included in this chapter should be estimated cautiously as data to the State Mental Health Centre is provided by 74 health care institutions out of 268 eligible to engage in health care activities providing health care services of psychiatry, dependence disorders' psychiatry, psychotherapy, child's and juvenile psychiatry. On the other hand those 74 health care institutions have bigger capacity than the private treatment centres.

Drug addicts' registration system and TDI development

In 2005, the Department carried out analysis of the system for collection of information on the Treatment demand indicator (TDI) and identified that the official statistical data collected in the health care institutions reflect solely a minor scope of the problems in relation to dependencies on psychoactive substances. The statistics of registered disorders records only tendencies for contacting specialists of mental health care, though not the actual prevalence of mental and behavioural disorders, thus not complying with the common European data collection standards for this indicator established by the EMCDDA. Thus, it was necessary to basically review the information system for collection, provision and use of the Lithuanian mental health statistical data, and having established inconsistencies to modify it and approach to the established standards in order to make them comparable to the information collected in the EU members.

Based on Decree No. 1.2-54 of September 13, 2005, a working group was established which analysed the existing system for collection of statistical data and prepared a draft *Statistical Record Form of Persons with Mental and Behavioural Disorders Using Psychoactive Substances* (hereinafter – *Form*). The Form covers standards of the routine statistical system and is used to collect data on each individual who starts or continues treatment against psychoactive substances. The Drug Control Department addressed in writing the Ministry of Health Care proposing to approve the above. Based on Decree No. V-566 of 1 July, 2006, a working group was established which assessed the monitoring system of epidemiological indicators for dependence on drugs and psychoactive substances, as well as opportunities for the implementation of a new data collection Form. Based on Decree No. V-636 of

August 1, 2007, of the Minister of Health of the Republic of Lithuania *On Approval of the Profile of the Monitoring Procedure of Individuals Contacting Health Care Institutions Regarding Mental and Behavioural Disorders* (Žin., 2007, Nr. 88-3496) validated the new monitoring system in Lithuania enabling to collect more comprehensive data for TDI from 2008.

Definitions

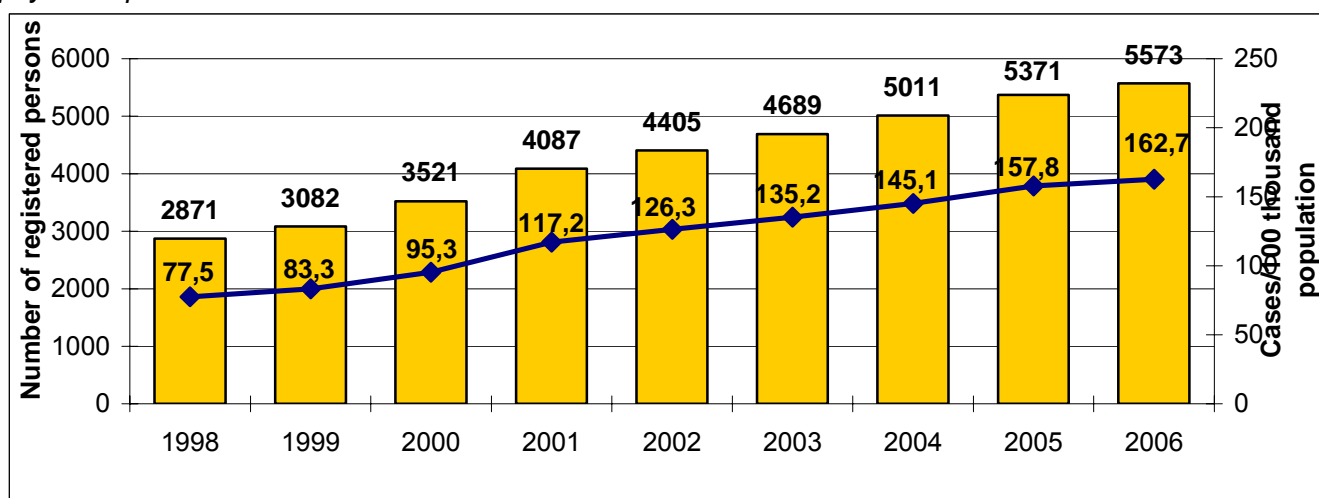
All treatments – refers to the number of all individuals who were treated for a drug problem and were registered in the registration system according the criteria provided above. It should be noted that these individuals might not being treated during the reporting year.

First treatments – refers to the number of individuals who were treated for a drug problem for the first time in their lifetime and were registered during a reporting year.

All Treatments of Drug Addiction

As of December 31, 2006, the healthcare institutions registered 68.951 individuals with mental or behavioural disorders caused by psychoactive substances, including 5.573 individuals with dependence disorders caused by drugs and psychotropic substances. In the last 5 years the number of registered individuals increased on a permanent basis, and from 2000 to 2006 the number of registered individuals with mental or behavioural disorders caused by drugs and psychotropic substances increased by 2052 individuals, or 1,6 times. In 2006, the rate of all treatments per 100 thousand population (morbidity) of drug dependence nationally accounted for 162.7 cases/100 thousand population, whereas in 2004 – 145.1 cases/100 thousand population) (Figure 4-1).

Figure 4-1. Dynamics of all treatments per 100 thousand of population of drug dependence and the number of all individuals registered due to mental or behavioural disorders caused by drugs and psychotropic substances in 1998-2006



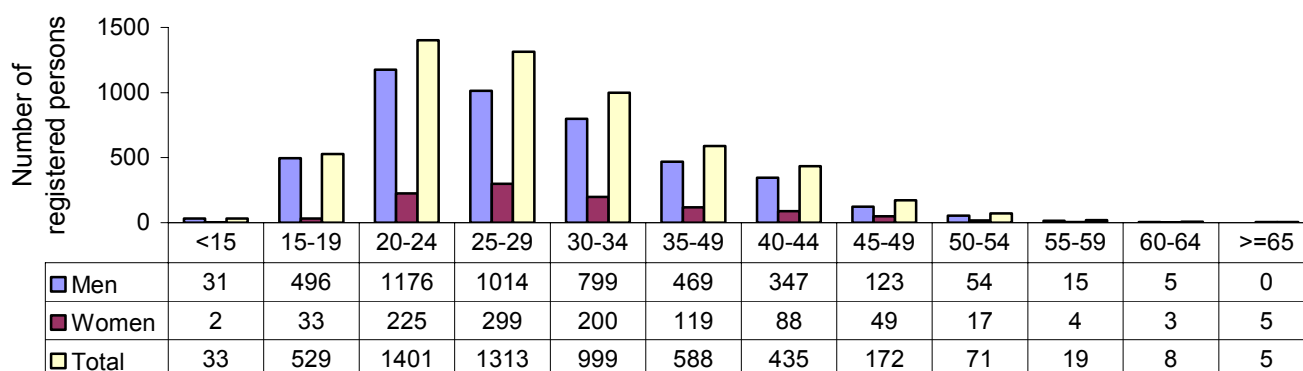
In 2005, out of the total number of registered individuals with mental or behavioural disorders caused by psychoactive substances men accounted for 81,3 percent (4529 men) and women – 18,7percent (1044 women). In 2005, male drug dependence morbidity accounted for 287,2 cases/100 thousand population, and female drug dependence morbidity – 57,7 cases/100 thousand population (Table 4-1).

Table 4-1. Drug dependence morbidity and distribution of registered individuals in Lithuania, by gender (number of cases/100 thousand population) 2000-2006

Year	2000	2001	2002	2003	2004	2005	2006
All treatments (registered individuals)							
Total	3521	4087	4405	4689	5011	5371	5537
Men	2868	3352	3600	3824	4094	4372	4529
Women	653	735	805	865	917	999	1044
Drug dependence morbidity (number of cases/100 thousand population)							
Total	101,0	117.6	127.2	136.1	145.4	157.8	162.7
Men	175.9	206.3	222.6	237.7	254.2	273.6	287.2
Women	35.2	39.7	43.6	47.0	50.1	54.6	57.7

In 2006, the biggest share of individuals registered for drug dependence treatment were in the subgroup aged 20 to 29 and accounted for 48,7 percent of the total registered number; the subgroup aged 30 to 34 – 999 registered persons (799 men and 200 women), i.e. 17,9 percent of the total registered number (Figure 4-2); in the subgroup of children (under 18 years of age) – 19 individuals registered (15 – males, 4 females).

Figure 4-2. Distribution of all registered individuals for drug dependence treatment, by gender and age, 2006



By counties, in 2006 the biggest number of individuals registered due to mental and behavioural disorders using drugs and psychotropic substances was in the county of Vilnius, i.e. 2857 individuals (336,7 cases/100 thousand population), in the county of Klaipeda – 785 persons (205,4 cases/100 thousand population), Kaunas – 578 individuals (84,3 cases/100 thousand population), in the county of Panevezys – 357 individuals (122,1 cases/100 thousand population), in the county of Siauliai – 241 individuals (66,8 cases/100 thousand population), in the county of Utena – 251 individuals (140,2 cases/100 thousand population), in the county of Alytus – 206 individuals (112,7 cases/100 thousand population), in the county of Telsiai – 146 individuals (82,5 cases/100 thousand population), in the county of Taurage – 80 individuals (60,8 cases/100 thousand population). By cities, the biggest number of individuals registered due to mental and behavioural disorders using drugs and psychotropic substances was in Vilnius – 2624 individuals (474,5 cases/100 thousand population), Klaipeda – 693 individuals (367,1 cases/100 thousand population). However, among the cities nationally the highest morbidity level exceeding the national average was in Visaginas – 170 individuals (591,7 cases/100 thousand population).

In 2006, as in previous years the biggest share of all registered individuals with mental or behavioural disorders caused by drugs and psychotropic substances accounted for opioid users. In 2006, the number of registered individuals with mental or behavioural disorders caused by using opioids accounted for 4481 individuals (80,4 percent); cannaboids – 30 individuals (0,5 percent); tranquillizers

and sedatives – 80 individuals (1,4 percent); cocaine – 8 individuals (0,1 percent); stimulants including caffeine – 1,39 individuals (2,5 percent); hallucinogenic – 8 individuals (0,1 percent); volatile substances – 158 (2,8 percent); multiple drugs and other psychoactive substances – 668 individuals (12 percent).

Route of administration

The same as in previous years 91,8 percent of the individuals registered due to mental or behavioural disorders caused by drugs and psychotropic substances were injecting users (Table 4-2). The registered injecting users mainly used opioids (78,8 percent), other drugs (11,2 percent) and stimulants including caffeine (1,4 percent).

Table 4-2. Route of administration of narcotic and psychotropic substances in 2006 (all registered drug addiction cases)

Drug group	Route of administration, number of individuals (percent)				Total
	Injected	Smoked	Ingested	Sniffed	
Opiates	4390 (78,8%)	-	60 (1,1%)	5 (0,1%)	4481 (80,4%)
Volatile substances	9 (0,2%)	26 (0,5%)	4 (0,1%)	117 (2,1%)	158 (2,8%)
Stimulants and caffeine	78 (1,4%)	-	37 (0,7%)	7 (0,1%)	139 (2,5%)
Tranquillizers/ sedatives	22 (0,4%)	-	52 (0,9%)	-	80 (1,4%)
Cannaboids	-	20 (0,4%)	10 (0,2%)	-	30 (0,5%)
Hallucinogens	-	-	6 (0,1%)	1 (0,02%)	8 (0,1%)
Cocaine	2 (0,04%)	1 (0,02%)	1 (0,02%)	4 (0,1%)	8 (0,1%)
Other drugs	622 (11,2%)	1 (0,02%)	31 (0,6%)	19 (0,3%)	668 (12%)
Total	5123 (91,9%)	48 (0,9%)	202 (3,6%)	155 (2,8%)	5573 (100%)

Treated persons for drug addiction in 2006

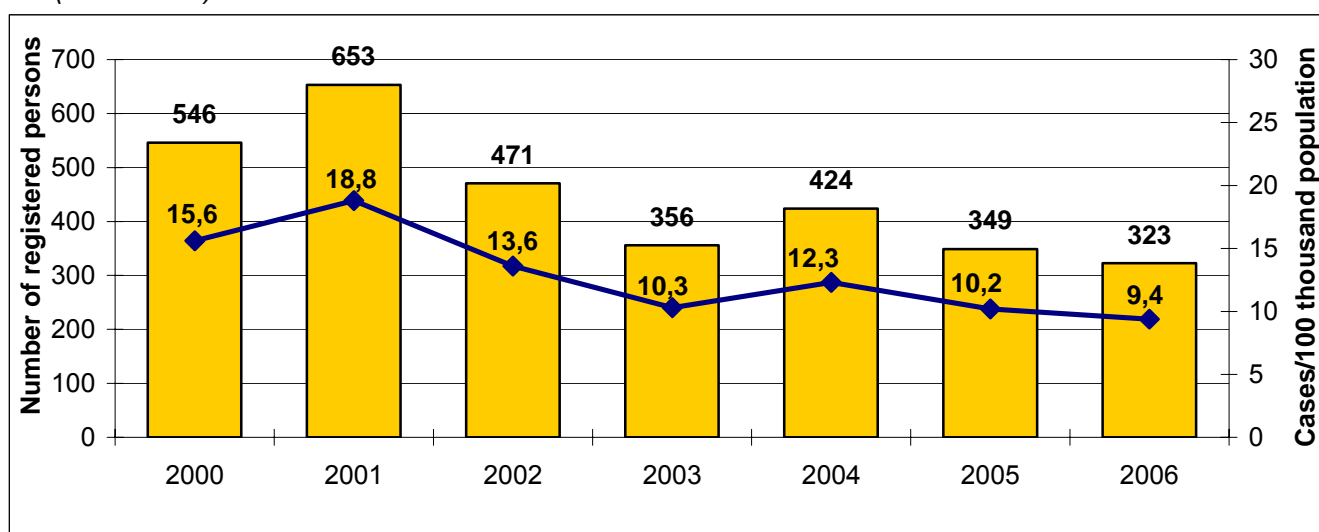
According to the data provided by the State Mental Health Centre in 2006 the total number of in-patients accounted for 1294 individuals due to mental and behavioural disorders using drugs as follows:

- Opiates (ICD-10 code „F11“) - 921 individuals, including 672 individuals first time (165 women, 756 men and 16 individuals under 18 years of age);
- Cannaboids (marihuana, hashish and others) (ICD-10 code „F12“) - 12 individuals, including 11 individuals first time (all men);
- Cocaine (ICD-10 code „F14“) - 2 individuals, both first time (1 woman and 1 man);
- Stimulants (ICD-10 code „F15“) - 33 individuals, all first time, including 3 individuals under 18 years of age;
- Multiple drugs (ICD-10 code „F19“) - 326 individuals, including 203 individuals (41 women, 285 men and 11 individuals under 18 years of age).

New treatments for drug addiction

In 2006, the health care institutions registered 323 new cases due to mental or behavioural disorders caused by drugs and psychotropic substances, i.e. 26 individuals (7,5 percent) less compared to 2005 (Figure 4-3). The new treatments level per 100 thousand population tends to be stable in the last 4 years, and in 2005 it accounted for 9,4 cases/100 thousand population.

Figure 4-3. Level of new drug addiction rates per 100 thousand population and the number of new registered cases due to mental or behavioural disorders caused by drugs and psychotropic substance use (2000-2006)



Information source: data of the State Mental Health Centre

New treatments by gender and age

In 2006, new cases registered by health care institutions were as follows: 258 men (79,9 percent) and 65 women (20,1 percent); the rate of male drug addiction per 100 thousand population accounted for 16,4 cases/100 thousand population, the rate of female drug addiction – 3,6 cases/100 thousand population (Table 4-3).

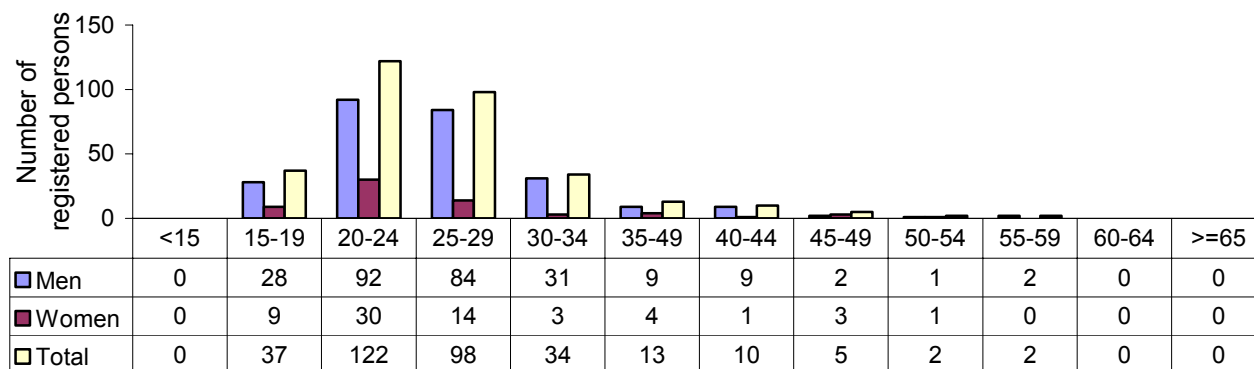
Table 4-3. New registered cases and dynamics of drug dependence rate per 100 thousand population in Lithuania, by gender, 2000-2005 (number of cases per 100 thousand population)

Year	2000	2001	2002	2003	2004	2005	2006
Number of new treatment cases							
Total	546	653	471	356	424	349	323
Men	481	553	383	282	359	273	258
Women	85	100	88	74	65	76	65
Number of cases per 100 thousand population							
Total	15,6	18,8	13,6	10,3	12,3	10,2	9,4
Men	29,4	34,0	23,6	17,5	22,2	17,0	16,4
Women	4,6	5,4	4,8	4,0	3,5	4,1	3,6

Data of the State Mental Health Centre

In 2006, the health care institutions registered new cases for the first treatment as follows: 37 individuals aged 15 to 19 (11,5 percent); the biggest group accounted for 68,1 percent in age groups 20 to 24 and 25 to 29 - 122 and 98 individuals, respectfully (Figure 4-4).

Figure 4-4. Distribution of registered new cases for the first treatment due to mental or behavioural disorders caused by drugs and psychotropic substances, by gender and age, 2006



In 2006, the biggest number of new registered cases of dependence on drugs and psychotropic substances was in the county of Vilnius – 217; in the counties of Klaipeda and Kaunas – 28 in each; in the county of Utena – 27. The average addiction morbidity in Lithuania was - 9,4 cases/100 thousand population; in the county of Vilnius– 25,6 cases/100 thousand population; in the county of Utena – 15,1 cases/100 thousand population; in the county of Klaipeda – 7,3 cases/100 thousand population; in the county of Kaunas – 7,3 cases/100 thousand population.

In 2006, the distribution in the cities was as follows: in the municipality of Visaginas - 20 new drug addiction cases, i.e. 69,6 cases/100 thousand population; in Vilnius – 36,9 cases/100 thousand population, in Ignalina – 18,5 cases/100 thousand population, in the district of Panevezys – 13,9 cases/100 thousand population, in Klaipeda – 11,1 cases/100 thousand population, in the district of Vilnius– 8,6 cases/100 thousand population, in Kaunas – 5,8 cases/100 thousand population.

Additional statistical information also available in the Standard Table „TDI data“.

4.3. PDUs from non-treatment sources

No information available

4.4. Intensive or frequent patterns of uses

No information available

5. Drug Related Treatment

5.1. Treatment System

Information on Lithuania Treatment System and Legal Framework is available in LITHUANIA NATIONAL REPORTS 2006 and 2004. No significant changes were made in 2006.

According to the data of the Lithuanian Health Information Centre in Lithuania medical assistance is provided by 1066 out-patient institutions providing respective services and 196 institutions providing in-patient medical assistance services. General practitioners, therapists, paediatricians working in primary health care institutions, having suspected a patient of dependence on psychoactive substances of having identified any symptoms of such disorders send the patient to a psychiatrist for counselling. In Lithuania, primary mental health care is being implemented by 73 mental health care institutions, including 17 mental health centres with a juridical person status, 48 – mental health centres being elements of the primary health care centre, 8 – private institutions. The staff positions of all 73 institutions include 147 psychiatrists for adults, 39 juvenile psychiatrists, 395 medical nurses, social workers and psychologists.

According to data of the State Service for Accreditation of Health Care Activities under the Ministry of Health of the Republic of Lithuania, as of beginning 2007, 256 institutions possessed the right to engage in individual health care activities including services of psychiatry, dependence disorders' psychiatry, psychotherapy, juvenile psychiatry. According to information of the State Mental Health Centre statistical data was provided only by 74 individual health care institutions of (27,6 percent) of all accredited institutions.

Out –patient treatment is provided in primary health care institutions, mental health Centres or psychiatric clinics and private Centres. According to data of the State Mental Health Centre out-patient services were provided by 64 Mental Health Centres. Besides, out-patient treatment is provided in out-patient units in the Centres for Addictive Disorders.

In-patient treatment is provided by 5 specialised Centres for Addictive Disorders in Vilnius, Klaipeda, Siauliai, Panevezys and Kaunas.

First aid treatment in case of intoxication or comma is provided in toxicology or intense treatment units. Instant detoxication to psychoactive substance users is applied in toxicology units and private toxicology clinics.

In recent years detoxication and short-term rehabilitation divisions and units for children using psychoactive substances were established in the existing health care institutions. The treatment period may last up to one month and include detoxication, treatment with pharmaceuticals and development of motivation. Currently, the Centres for Addictive Disorders have 18 beds treatment and short-term rehabilitation of children dependent on psychoactive substances (9 – in the Vilnius Centre for Addictive Disorders; 4 - in the Klaipeda Centre for Addictive Disorders, 5 – in Kaunas the Centre for Addictive Disorders). The rehabilitation services continue from 1 to 3 months. In 2006, the Centres for Addictive Disorders treated children as follows: 17 – in Vilnius, 11 – in Kaunas, 4 – in Klaipeda.

A child having undergone short-term rehabilitation should be provided an opportunity to receive long-term rehabilitation services of adequate quality. Living in an rehabilitation community based on an approved program and under supervision of professionals the child continues learning, is assisted to develop his social skills and self-esteem. The rehabilitation course may last up to 1,5 years. Currently, the only long-term rehabilitation community Public Institution „Apsisprendimas“ operates in the district of Ukmerge, its activities are cofunded from the state budget. The Community may provide rehabilitation services for 12 children who used drugs and undergo treatment against dependence. In 2007, it is planned to establish a state juvenile centre for psychological and social rehabilitation.

5.2. Drug Free Treatment

In 2006, as in the previous years, in-patient treatment and rehabilitation services to drug addicted individuals were provided by 5 Centres for Addictive Disorders in Vilnius, Kaunas, Klaipeda, Siauliai and Panevezys. In-patient treatment methods include short-term in-patient treatment under the Minnesota Pattern lasting for 4-6 weeks, and medium- to long-term in-patient treatment (lasting up to 14 months) at a rehabilitation centre. These treatment programs are based on application of therapeutic community principles implying an active involvement of patients in the treatment and rehabilitation process. In recent years, alongside the patients with alcohol problem, Minnesota Programs admit increasingly more drug addicted individuals.

In 2006, out-patient treatment Minnesota Programs were executed in Centres for Addictive Disorders in Vilnius, Panevezys and Kaunas. Services provided under this program include a drug-free treatment, i.e. the out-patient program of Minnesota Pattern lasting for 1-3 months, building of social skills, group psychotherapy, acupuncture and counselling services provided to the family members. The program is intended for patients who had undergone withdrawal treatment. The program has a strict structure; patients must participate in group and individual sessions with a doctor, psychologist and social worker. A certain focus is made on adaptation of a 12-step program for anonymous drug users, therefore a patient is recommended to join mutual assistance groups for anonymous drug users. Patients participating in the program are screened for the use of drugs. Sessions for family members are common.

In 2006, rehabilitation services for addicted persons were provided in 16 long-term rehabilitation centres with 280 beds. The state budget provided financial support to the rehabilitation centres that are mainly private through projects. In 2005, projects of rehabilitation services were allocated 208,2 thousand euros, in 2006 – 225,47 thousand euros, in 2007 – 220,69 thousand euros. In 2008, it is planned to provide ca. 290 thousand euros from the state budget to rehabilitation projects. In 2006, financial support was provided to 10 projects, its average accounted for 22 thousand euros per project.

For the implementation of state supported projects providing rehabilitation services, the biggest share (exceeding 70 percent) was allocated to cover remuneration costs of the professionals. This created prerequisites for receiving services of better quality and at lower cost, and these aspects are of particular importance to clients of the rehabilitation services. In 2005, financial support to cover the wages accounted for only 11 percent, while the biggest share of the allocation was used to cover other costs, i.e. mainly events and honorarium agreements. In 2006, with help of the projects psychological rehabilitation services were provided to 478 persons dependent on psychoactive substances, including those in rehabilitation communities, i.e. 426 persons, also assistance was provided to 214 family members of dependent persons.

In 2006, efficiency evaluation of the rehabilitation process of persons dependent on drugs and psychotropic substances was carried out. According to the data collected from the rehabilitation institutions, in 2006 successful long-term rehabilitation program was accomplished by 65 persons the biggest share of which (82 percent) was employed or learned. It was identified that in Lithuania up to 40 percent of persons treated against drug dependence accomplish rehabilitation programs successfully.

In recent years big financial support to rehabilitation of dependent persons is provided from the EU structural funds. In 2006, institutions providing rehabilitation services signed 13 agreements to obtain support amounting to over 3 million euros.

5.3. Pharmacologically Assisted Treatment

Withdrawal Treatment

No new information available.

Substitution Treatment

Information on substitution treatment legal framework is available in LITHUANIA NATIONAL REPORTS 2005 and 2004

In Lithuania, availability of substitution treatment is rather limited geographically. Lithuania is among the countries with limited application of such treatment, high requirements are applied to it. Substitution methadone treatment is used only for treatment of opioid addiction. In Lithuania, the number of persons registered due to mental or behavioural disorders caused by opioids made up the major share of all registered due to mental or behavioural disorders caused by drugs and psychotropic substances (ca. 78- 80 percent) throughout the years. The treatment is based on prescription of methadone solution taken under observation of the medical personnel. Subject to approval of the medical examination commission, stable and socially adapted patients are usually allowed to take a dose of medication on weekends or upon arrival at a healthcare institution twice or three times a week. Patients in unstable condition, who use illegal psychotropic substances, are required to arrive at a healthcare institution on a daily basis. Substitution methadone treatment is integrated with the treatment of all types of addiction conditions at the Centres for Addictive Disorders and Mental Health Centres. At the end of 2006, the methadone program was conducted by the Vilnius Centre for Addictive Disorders and Mental Health Centres of the primary health care institutions in the City of Vilnius, the Klaipeda Centre for Addictive Disorders, the Kaunas Centre for Addictive Disorders and Mental Health Centres of the primary health care institutions in the town of Druskininkai.

In Lithuania, the methadone program for treatment of opioid addiction was started in September 1995. Prescription of substitution treatment and its implementation procedures are regulated by decrees of the Minister of Health issued in 1997 and 2002. Decree No. V-653 of August 6, 2007, of the Minister of Health of the Republic of Lithuania On Approval of Procedure Profiles Regarding Prescription and Application of Substitution Treatment against Opioid Dependence, and Prescription, Delivery, Keeping and Accounting of Substitution Opioid Pharmaceuticals in Health Care Institutions (Žin., 2007, Nr. 90-3587) (effective from September 7, 2007) allowed to use methadone hydrochloride and buprenorphine hydrochloride in Lithuania for substitution treatment and revised the requirements for substitution treatment. The aims of substitution treatment are as follows:

- To improve gradually somatic and psychic condition of opioid addicts, to improve their social adaptation and integration into the society;
- To better organize prevention of HIV and hepatitis B and C, as well as other infectious diseases among drug users;

- To have more efficient treatment of correlate diseases;
- To have more efficient treatment of drug injection complications;
- To provide improved conditions for prenatal and post-natal care of pregnant drug users.

In Lithuania, the process of maintenance methadone treatment continues to lack a distinguished feature – whether methadone maintenance treatment is service or a program. Currently, the organizational and costs structure points to a mixed concept. However, this unclear concept maybe deemed to be a disadvantage than an advantage. In the future it is necessary to choose procedures regarding payment for maintenance treatment services to the medical institutions in order to encourage development of maintenance treatment services and development in all Lithuanian towns where needs for such services arise.

As of January 1, 2006, methadone treatment was applied to 392 persons. In 2006, methadone maintenance treatment was terminated by 143 persons and started by 132 persons.

As of January 1, 2007, methadone treatment was applied 381 persons, including 90 (24%) women and 291 (76%) men. The age distribution of the participants in the maintenance methadone treatment was as follows: 1 person (0,3%) was under 20 years of age, 93 (24.4 %) - 21-30 years of age, 126 (33.1%) 31-40 years of age, 134 (35.2%) 41-50 years of age, 23 (6 %) 51-60 years of age and 4 (1 %) over 60 years old.

Drug testing of participants in the maintenance treatment program

Currently, effective legal acts do not establish frequency of tests for participants in the maintenance treatment program regarding potential use of other psychoactive substances. So far participants in the maintenance treatment program are tested only in cases if a treating doctor suspects his patient in having used other psychoactive substances. Thus, in 2006 only 790 tests of participants in the maintenance treatment program were tested. Due to targeted selection, i.e. patients in treatment having been suspected in using drugs were tested, instead of all or randomly selected ones, positive tests of use of drugs and psychotropic substances among randomly selected participants were identified in 312 cases, or 44,5 percent of all tests, including: 100 cases (32,1%) – use of opioids, 35 cases (11,2 %) – stimulants, 199 (63,8 %) – tranquilisers and sedatives, 9 (2,9%) – hallucinogens, 28 cases (8,9%) – other psychoactive substances. Among participants in the maintenance treatment program no positive tests for cocaine were identified.

Survey of the maintenance methadone treatment program

In December 2006, the Drug Control Department under the Government of the Republic of Lithuania together with the Public Health Institute of the Medical Department of Vilnius University and the Public Institution *Training, Development and Research Centre* carried out a survey *Characteristics of Persons in Maintenance Methadone Treatment*.

A targeted survey group included participants in the maintenance treatment program throughout Lithuania. Sampling of the survey was based on the data June 2006, i.e. 392 persons participated in the maintenance treatment program. All patients receiving maintenance treatment program services or those coming to consume methadone during the survey period were proposed to participate in the survey. In total 288 patients receiving methadone services who agreed to answer the questionnaire and gave consent to specify some data in their personal medical records were surveyed.

The biggest share 75 percent (n=217) of the participants in the maintenance treatment program were treated in the Centres for Addictive Disorders and 24 percent (n=71) in the Mental Health Centres. 76 percent (n=220) of the interviewed were men and 24 percent (n=68) were women. The average age of the surveyed participants the maintenance treatment program was 37,3 years, the most frequent age of the sampled patients (moda) was 43 years, half of the surveyed were younger than 38 years old, and the other half of the surveyed - 38 (mediana). The youngest participant in the program was 20 years old, and the eldest – 63.

Nearly 2/3 of the patients (n=197) receiving maintenance methadone treatment earlier underwent treatment against dependence on drugs and psychotropic substances, another group of 30 percent stated they had never been in treatment and 1 percent (n=4) did not answer this question.

The survey identified that 25 percent of the participants in the methadone program have permanent jobs (n=71) or are registered with labour exchange (n=70), ca. 20 percent (n=53) are unemployed, 18 percent (n=53) – disabled, 9 percent (n=25) have part-time jobs and 5 percent (n=14) are schoolchildren, retired, housewives or another unemployed group. The data analysis by gender identified that a bigger number of women have permanent jobs (28 percent) or part-time jobs (12 percent)

compared to men (24 and 8 percent respectively), and among men the number of unemployed (21 percent) and disabled (20 percent) was higher compared to women (12 and 13 percent respectively). Though the employment result of the participants in the methadone program depends on their presence duration in the program the data show that more than half of the able-bodied patients did not work during the survey. This high unemployment level could be related to many factors, such as motivation, education or other external factors, i.e. stigmatisation and others. It may firmly be stated this problem of the patients should be paid more attention and analysed how such patients could be integrated into the labour market.

Absolutely all 288 participants in the methadone program addressed treatment against dependence on opioids. Before the treatment the biggest share of them, i.e. 77 percent (n=223) used extract of poppies and a smaller share, i.e. 22 percent (n=64) – heroine, also 1 patient stated use of other opioids. The average age when the patients started to use these substances is 21 years, most frequently the first use of the main substance was indicated by the patients at the age of 18 years (moda). 97 percent (n=279) of the surveyed patients said that before the treatment the main pattern of use of drugs and psychotropic substances was injection and 94 percent (n=270) indicated daily use of these substances.

The surveyed show that nearly all, i.e. 98 percent (n=283) were tested against HIV. 10 percent (n=29) were HIV positive, 2 percent (n=5) of the patients said they had never been tested against HIV, the same percentage said they were tested but their infection status was not known.

The collected data show that the average participation time if the methadone program was 49 months, the surveyed sample included most frequently participants in the treatment ca. 30 months (moda) and one part of the participants in the methadone program was in the treatment for 38 months while the other – more than 38 months (mediana).

The doses of this pharmaceutical recorded in the accounting journal for all participants of the methadone program were written into the questionnaires. The average methadone dose prescribed to a participant is 54,7 ml, the most frequent dose is 60 ml. (moda), and one part of the program participants are prescribed under 50 ml, and the other part - over 50 ml (mediana). The smallest prescribed dose was 10 ml, and the biggest – 170 ml. Recommendations by the World Health Organisation (WHO) regarding maintenance methadone treatment say the most effective methadone dose is 60-80 ml. However, the survey data show that the average prescribed methadone dose is 55 ml. no correlation was identified between a methadone dose and use of illegal drugs and injecting, though clinical research show direct correlation.

The survey showed that 14 percent of the participants in the methadone program used in addition drugs or psychotropic substances within last 30 days and 12 percent injected within the same period. However, longer period of participation in the program reduces risk to of inject drugs. Among the participants of the first year in the program 28 percent used additional drugs, while among the participants who stayed in the program longer than one year - only 10 percent, and among those of extensive duration – 5 percent

High correlation exists between drug use and injecting, and positive urine tests regarding drugs could be used as an indicator to adjust treatment and providing services. Optimal treatment results depend on sufficient duration of its application, its continuity and adequate doses of the pharmaceutical. Interventions targeted against prevention of relapses or behaviour could make a positive impact on HIV prevention as the data show that several HIV positives behave with risk.

Other Medically Assisted Treatment

Buprenorphine (Subutex) was registered for treatment of opiate addiction in late 2002. Until 2005, Buprenorphine was on the list of psychotropic medications and available at drugstores with a doctor's prescription. By order of the Minister of Health, strict control of Buprenorphine was enacted, i.e. the medication can now be prescribed by mental healthcare institutions and consumed under observation of medical staff only. The use of Buprenorphine for substitution treatment of opiate addiction was validated from September, 2007.

Naltrexon tablets (REVIA), antagonist of opiate receptors, was registered in Lithuania for treatment of opiate addiction in 2000. Naltrexon may be acquired by patients in drugstores with a doctor's prescription. The medication should be avoided during substitution treatment and prevention of relapses. The availability of treatment is restricted due to a relatively high price of the medication, which is not remunerated by the state.

6. Health Correlates and Consequences

6.1. Drug Related Deaths and Mortality of Drug Users

Direct drug related deaths

Information Source: the Department of Statistics under the Government of the Republic of Lithuania; the Institute of Forensic Medicine of Mykolas Riomeris University

According to data of the Department of Statistics under the Government of the Republic of Lithuania the morbidity rate the main cause being drug and psychotropic substance use was highest in 2006 throughout the last five years. In 2006, 62 deaths due to drugs and psychotropic substance use were registered (in 2005 m. – 31 cases), and this level accounts for 0,14 percent of all deaths registered in Lithuania (44813 deaths). Increase of drug related deaths in 2006 could be both due to subjective causes (total increase of mortality in Lithuania) and objective ones – in recent years new and more accurate laboratory equipment, methodologies, staff trainings and raising of qualification, IT implementation in the Institute of Forensic Medicine, inter-institutional cooperation, exchange of information and other factors enabled to improve quality and comprehensiveness of collected data.

According to age distribution in 2006, the biggest number of deaths was in the young subgroup aged from 20 to 34 (45 individuals) (Table 6-1), with the average age of 29,7 years (for men – 29,78, women – 29,5). In Lithuania, in 2006 the expected life expectancy for men was 65,3 years, and for women – 77,1 years.

Table 6-1. Number of deaths caused by drug and psychotropic substance use, by age 2001-2006

Age group	2001	2002	2003	2004	2005	2006
Under 15	-	-	-	-	-	-
15–19 years	4	5	2	1	3	2
20–24 years	6	4	14	9	6	11
25–29 years	9	7	7	6	6	23
30–34 years	7	8	10	9	6	13
35-39 years	4	5	3	6	2	10
39 years and more	5	4	4	7	8	3
Total	35	33	40	38	31	62

Information Source: the Department of Statistics under the Government of the Republic of Lithuania

According to the statistical data the rate of male deaths continues to exceed the rate of female deaths, i.e. in 2006 – 57 male deaths and 5 female deaths, reasoned by the fact the number of men using drugs and psychotropic substances exceeds that of women. Higher death rates are registered in cities (59 deaths), most of them in Vilnius (36 deaths), and in 2006 the main death cause was intoxication with drugs and psychotropic substances (44 deaths) (Table 6-2).

Table 6-2. Number of deaths caused by drug and psychotropic substance use, by age and death cause, 2006

Death causes by ICD-10 code/ age group	Total	Under 15	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	39 years and more
F11	2	0	0	0	1	1	0	0
F19	16	0	0	3	3	4	5	1
X42	36	0	2	6	15	7	4	2
X62	1	0	0	0	0	0	1	0
Y12	7	0	0	2	4	1	0	0
Total - deaths	62	0	2	11	23	13	10	3

Information Source: the Department of Statistics under the Government of the Republic of Lithuania

Note:

F11 – Mental and behavioural disorders using opiates; **F19** - Mental and behavioural disorders using several drugs and other psychoactive substances; **X42** – Incidental intoxication with drugs and other psychodysleptics and their effect, unclassified elsewhere; **X62** – Deliberate intoxication with drugs and other psychodysleptics and their effect, unclassified elsewhere; **Y12** - Intoxication with drugs and other psychodysleptics and their effect, unclassified elsewhere, motivation unknown.

The Department of Statistics collects data in a centralised manner from different institutions regarding all deaths, also deaths of Lithuanian citizens outside Lithuania. In 2006, the above 62 deaths were issued death certificates indicating drug related death being the main cause; the certificated were issued as follows: 56 – the Institute of Forensic Medicine of Mykolas Romeris University, 3 – by Lithuanian hospitals, 2 death certificates were issued in the UK, 1 – in Norway.

In 2006, in registered 56 cases the Institute of Forensic Medicine of Mykolas Romeris University at post-mortem examination based on identification of drugs and psychotropic substances in body organs and biological fluids (urine, blood, gastric lavage, rinse from face, hands, etc.) referred the direct cause to incidental or deliberate intoxication with drugs or psychotropic substances. Analysis of the information in relation to the above 56 deaths provided by the Institute of Forensic Medicine of Mykolas Romeris University identified presence of morphine in 18 cases, morphine and other substances - in 15 cases (diazepam, codeine, amphetamine and others.), diazepam, oksazepam and analgin - in 6 cases, non-specified drugs or psychotropic substances – in 17 cases, alcohol along with drugs – in 24 cases (43 percent).

Other indirect Drug Related Deaths

Information Source: the Institute of Forensic Medicine of Mykolas Romeris University

In 2006, according to data by the Institute of Forensic Medicine of Mykolas Romeris University for 23 deaths drug and psychotropic substance use was not recorded as direct cause, however, the tests evidenced occurrence of drugs and psychotropic substances in organs and biologic fluids of the deceased. The most frequent direct causes of death were asphyxiation, heart failure, injuries at accidents, intoxication with alcohol and others. Chemical tests in the above deaths most frequently evidenced presence of amphetamine and methamphetamine in biological fluids of the organism (13 cases), morphine (7 cases). Alcohol was identified in 15 cases out of registered 23 cases (65 percent). The average age of the deceased was 27,9 years, the biggest number of deaths registered in the subgroup aged 20 – 29 years – 12 persons.

In 2006, in Lithuania 760 persons died in accidents (76 deaths caused by intoxicated persons), including 7 cases (5 men among them) where residual drugs detected (residual amphetamine or methamphetamine in all cases), 5 cases – drugs with alcohol. The average age of persons killed in accidents with detected drugs in body organs was 26,3 years. This statistics shows that young people steer having consumed both alcohol and drugs, and it results sometimes in dire calamities and deaths.

Mortality of Drug Users

Information Source: the State Mental Health Centre

The State Mental Health Centre collects data regarding persons registered in the Lithuanian health care institutions due to mental and behaviour disorders using dugs and psychotropic substances (ICD codes: F11-F14, F15, F18 , F19). As of January 1, 2007, the total number of registered was 5573 persons (in 2006 – 5371 persons). According to the State Mental Health Centre, in 2006, 42 individuals registered as patients dependent on drugs and psychotropic substances died, i.e. 35 men and 7 women (Table 6-3). As before, in 2006, among the deaths the biggest number was opioid dependent persons. According to distribution by age the biggest number of deaths was in age group 30 to 49 (21 individuals) (Table 6-4), the average age of the deceased was 39 years (for men – 40,2 years, women – 33,4 years), the most frequent death causes – somatic illnesses and accidents (Table 6-5).

Table 6-3. Distribution of death cases of patients dependent on drugs and psychotropic substances, by gender and dependence diagnosis, 2003 -2006

	2003	2004	2005	2006
Total - deaths	48	39	38	42
Incl. men	41	33	33	35
Incl. women	7	6	5	7
Codes of diseases according to TLK-10				
F11	38	29	20	33
F12	1	-	-	-
F13	1	1	-	2
F14	-	-	-	-
F15	-	-	1	-
F18	-	2	2	1
F19	8	7	15	6

Information Source: the State Mental Health Centre

Note:

F11 - Mental and behavioural disorders using opiates, F12 - Mental and behavioural disorders using cannabis, F13 - Mental and behavioural disorders using tranquillisers and sedatives, F14 - Mental and behavioural disorders using cocaine, F15 - Mental and behavioural disorders using stimulants, also caffeine, F18 - Mental and behavioural disorders using volatile substances, F19 - Mental and behavioural disorders using multiple drugs and psychoactive substances

Table 6-4. Distribution of death cases of patients dependent on drugs and psychotropic substances, by age groups, 2002-2006

Age/ years	2002	2003	2004	2005	2006
Under 15	-	-	-	-	-
15-19 years	-	-	-	-	-
20-24 years	4	3	3	3	6
25-29 years	4	5	7	5	5
30-34 years.	8	16	9	8	2
35-39 years	14	5	4	4	8
40-44 years	4	8	8	5	9
45-49 years	3	10	7	11	4
50-54 years	3	-	1	1	4
55 years and more	-	1	-	1	-
Total	40	48	39	38	42

Information Source: the State Mental Health Centre

Table 6-5. Distribution of death cases of patients dependent on drugs and psychotropic substances, by death cause, 2002 -2006

Causes/year	2002	2003	2004	2005	2006
Suicides	5	5	4	3	2
Accidents	1	1	5	5	-
Intoxication with drugs or psychotropic substances	5	4	4	2	7
Infections	3	2	0	1	6
Somatic diseases	2	10	9	8	5
Unknown	24	26	17	19	22

Information Source: the State Mental Health Centre

6.2. Drug Related Infectious Diseases

This chapter provides registered HIV positive and HIV illness cases, acute viral hepatitis B and C cases and their epidemiological specific features related to injecting drug use. The data regarding morbidity of acute viral hepatitis B and C are collected and analysed by the Infection Prevention and Control Centre at the Ministry of Health of the Republic of Lithuania. HIV positive and HIV illness cases are registered with the Lithuanian AIDS Centre.

Registered acute viral Hepatitis B

Information Source: the Infection Prevention and Control Centre under the State Public Health Service

In 2006, the Lithuanian health care institutions registered 107 cases of acute viral hepatitis B (hereinafter – HBV). The morbidity rates of acute viral hepatitis B tends to consistently decline over the last decade. Compared to 2004, the morbidity rate of acute viral hepatitis B continued to decline from 5,42 cases/100 thousand population in 2004 to 3,14 cases/100 thousand population in 2006. Out of 107 HBV infected individuals 16 were injecting drug users (14 men and 2 women). In 2001-2006, among all registered new HBV cases the share of injecting drug users continues to decline from 42,4 percent (2001) to 14,9 percent (2006). However, the number of cases with not known transmission factor causing this infection increased each year: in 2004, such cases accounted for 38 percent of all new HBV cases, in 2006 – nearly 50 percent. Taking into consideration the above, the reduced rate of injecting drug users among all registered HBV cases should be assessed cautiously.

Registered acute viral Hepatitis C

Information Source: the Infection Prevention and Control Centre under the Public Health Service

In 2006, the Lithuanian health care institutions registered 62 cases of acute viral hepatitis C (hereinafter – HCV). The morbidity rates of acute viral hepatitis C tends to consistently decline over the last 5 years. Compared to 2004, the morbidity rate of acute viral hepatitis C continued to decline from 2,41 cases/100 thousand population to 1,82 cases/100 thousand population in 2006. A big number of cases (51,6 percent) implied an unidentified contraction factor causing HCV. Out of 62 registered acute HCV cases 13 individuals were injecting drug users. In 2001-2006, the share of injecting drug users among all registered HCV cases reduced from 59 percent (2001) to 21 percent (2006).

Registered HIV/AIDS cases

Information Source: the Lithuanian AIDS Centre

In 2006, in Lithuania 100 new HIV cases were diagnosed, i.e. by 20 individuals less compared to the last year (in 2005 – 120, in 2004 – 135, in 2003 – 110). Among the new HIV cases men prevailed – 88 individuals. Within the period since 1988 when the first HIV case was diagnosed in Lithuania to January 1, 2007, 1200 HIV infected individuals were diagnosed. The number of HIV infected men exceeds that of women by 7 times, however, the comparative rate of infected female increases. The ratio of newly infected men and women in 2002 was 12:1, in 2003 - 7:1, 2004. 5:1, in 2005 reduced to 3:1, and in 2006 - 3,5:1. In 2006, among new HIV cases 62 individuals (62 percent) were infected HIV by using injecting drugs. Within the last three years a trend that more persons were infected with HIV through sexual intercourse was observed. The average of new HIV infected men decreases each year: the average age of HIV infected men at the infection detection moment was 31 years (in 2004 – 32, in 2003 – 34). By counties, in 2006 (as in previous years) the biggest number – 40 new HIV infection cases – were detected in the county of Klaipeda, the majority of them (77 percent) were infected injecting drugs. In 2006, in the county of Vilnius 20 cases were detected (in 2005 – 20), in the county of Kaunas – 12, in the county of Siauliai – 6, in the county of Panevezys – 3, in the county of Alytus – 6, in the county of Telsiai – 1, in the county of Utena – 5 cases and in the county of Taurage – 1 HIV infection cases. The total HIV infection prevalence indicator in Lithuania was 29,41 cases per 100 thousand population in 2006 (26,13 cases – in 2005, 22,78 cases – in 2004).

HIV, HBV and HCV seroprevalence among tested injecting drug users

Information Sources:

Currently, Lithuania does not have approved unified surveillance system procedures of prophylaxis checkups on communicable diseases for injecting drug users based on which epidemiological care could be carried out in this risk group. This chapter provides information on prevalence rates of serological markers among injecting drug users who agreed to be tested with serological tests.

Data collection methodology

According to data of the Drug Control Department, in Lithuania 4 institutions executed prophylaxis tests with a purpose to identify prevalence of serologic markers to HIV, HBV and HCV infection among persons attending low threshold services units, on their territories. Data collection from these institutions was collected with a standard statistical form (STD9) requesting information on prevalence of infections among injecting drug users, prevalence levels by gender, age groups, injecting experience and use of opiates, risk behaviour, etc. The methodological part requested to submit information on the survey place, data collection methods (i.e. continuous or random sampling) and a selection method for random sampling, if any, data collection regularity, verification of data by a laboratory, if any, a type of tested sample (serum or saliva) and researched serologic response. Finally, if information was published a publication source was requested, and for unpublished information – to name the information provider (institution) as well as the name of a person responsible for the research. Also, complementary information concerning any issues not included in the standard form, potential bias on prevalence facilitating data interpretation could be provided.

Results

In 2006, staff of Anonymous Counselling Centre for Social Diseases "Pasitikejimas" of the Alytus Red Cross Society provided information on the existing situation in Alytus, in Klaipeda the prevalence survey was conducted by the Klaipeda Public Health Centre together with the Klaipeda Centre for Addictive Disorders and the Klaipeda Branch of the Public Institution National Blood Centre, in Vilnius – by the Vilnius Centre for Addictive Disorders (VCAD) and the Lithuanian AIDS Centre.

In the above institutions no random sampling procedure for selecting of injecting drug users was made – all injecting drug users were proposed to be tested for certain serologic marker, and data was provided solely concerning those who agreed to participate. Due to the above reason prevalence of these infections should be treated as prevalence among the tested IDU's.

The institutions provided data on tests regarding age, gender, injecting experience (period up to 2 years and more than 2 years). The personnel of the Alytus and Lithuanian AIDS Centre's institutions propose the injecting drug users to be tested twice a year, and the personnel of the Blue Bus of the Klaipeda and Vilnius Centres for Addictive Disorders executed single test campaigns in the course of 3-5 months.

It should be pointed out that the Lithuanian AIDS Centre provided data of new HIV positive cases (incidence) among the sample, and the staff of the Centres for Addictive Disorders in Klaipeda, Alytus and Vilnius surveyed the prevalence frequency of serologic markers in the tested sample of injecting drug users irrespective whether the tested individuals knew about their infection status.

HIV prevalence among injecting drug users

In 2005, the Anonymous Counselling Unit *Pasitikėjimas* of the Alytus Red Cross Society made HIV tests of 78 individuals; 1 HIV positive cases (1,3 percent) were diagnosed (Table 6-7).

The Klaipeda Centre for Addictive Disorders tested 56 injecting drug users, 2 HIV positive cases (3,57 percent) were diagnosed.

For the clients of the mobile needle syringe exchange unit Blue Bus of the Vilnius Centre for Addictive Disorders 158 tests for HIV were conducted. Before and after the test the clients were provided counselling. Blood for testing was taken at the Blue Bus parking sites accommodated at gathering places of injecting drug users. Positive HIV result was diagnosed for 2 individuals (1,27 percent).

The Lithuanian AIDS Centre diagnosed 3 new HIV cases (0,57 percent) among 522 individuals who contacted a their low threshold unit in 2006.

Table 6-7. Prevalence of HIV among tested injecting drug users

City	Year	Annual number of persons	Number of tested	Incl. infected		Type of test
				Number	Percent	
Alytus	2001	89	44	0	0	Serological test
	2002	132	128	0	0	
	2003	156	144	4	2,78	
	2004	172	156	7	4,49	
	2005	158	95	6	6,32	
	2006	112	78	1	1,28	
Klaipeda	2005	1358	174	47	27,01	Serological test
	2006	1300	56	2	3,57	
Vilnius (LAC)	2002	n/a	641	4	0,62	Diagnostic test
	2003	1971	375	4	1,07	
	2004	2259	469	1	0,21	
	2005	2723	345	4	1,16	
	2006	2760	522	3	0,57	
Vilnius (VCAD)	2005	2181	681	22	3,23	Diagnostic test
	2006	2063	158	2	1,27	

Prevalence of HBV and HCV among tested injecting drug users

In 2002 – 2004, in Alytus the prevalence rate of positive HBsAg antibodies cases among the tested injecting drug users continued stable, but in 2006 it increased double – up to 13,9 percent compared to 2005. In total HBsAg prevalence among tested injecting drug users since 2004 increased 4 times. Among the attendants of the mobile unit Blue Bus of the Vilnius Centre for Addictive Disorders the prevalence rate of HBsAg antibodies was 4,43 percent (in 2005 - 10,72 percent). Both in Vilnius and Alytus, the serologic tests to detect antibodies to HCV among individuals visiting low threshold units evidence the level of infection with this virus in 2005 varied from 82 percent to 94 percent among tested injecting drug users, and in 2006 slightly decreased (Table 6-8 and Table 6-9)

Table 6-8. Prevalence of antibodies to HBV (HBsAg) among injecting drug users

City	Year	Annual number of persons	Number of tested	Incl. infected		Type of test
				Number	Percent	
Alytus	2001	89	44	0	0	Serologic test
	2002	132	78	4	5,13	
	2003	156	151	6	3,97	
	2004	172	144	5	3,47	
	2005	158	95	9	9,47	
	2006	412	78	11	13,9	
Vilnius (LAC)	2006	2760	422	14	3,32	Diagnostic test
Vilnius (VCAD)	2005	2181	681	73	10,72	Diagnostic test
	2006	2063	158	7	4,43	

Table 6-9. Prevalence of antibodies to HCV among injecting drug users

City	Year	Annual number of persons	Number of tested	Incl. infected		Type of test
				Number	Percent	
Alytus	2001	89	44	37	84,09	Serologic test
	2002	132	78	70	89,74	
	2003	156	151	147	97,35	
	2004	172	144	131	90,97	
	2005	158	95	89	93,68	
	2006	412	78	70	89,74	
Vilnius (LAC)	2006	2760	422	168	70,29	Diagnostic test
Vilnius (VCAD)	2005	2181	681	557	81,79	Diagnostic test
	2006	2063	158	87	55,06	

6.3. Psychiatric Co-Morbidity (Dual Diagnosis)

No information available

6.4. Other Drug-Related Health Correlates

Poisonings with Narcotic and Psychotropic Substances

According to data by the State Patients' Fund under the Ministry of Health, in 2006 Lithuanian healthcare institutions recorded 287 cases of poisoning with drugs and psychodysleptics (hallucinogens) (245 individuals), i.e. ca. 30 cases more compared to 2005 (257 cases). As in 2004, majority of poisonings involved opium - 55 cases. Reanimation services in relation to intoxication with drugs and psychodysleptics (hallucinogens) were provided 89 times to 85 persons. Comparison of the statistical data in the course of 3 years shows significant increase (in 2004 – 6 cases, in 2005 – 17 cases, 2006 – 40 cases), slight reduction of intoxication with cannabis was observed (in 2005 – 17 cases, in 2006 – 9 cases) and opium (in 2005 – 75 cases, in 2006 – 55 cases) (Table 6-10).

Table 6-10. Distribution of poisoning with drugs and psychodysleptics (hallucinogens), by treatment institutions and poisoning diagnosis, 2004 - 2005

ICD-10 Code	Diagnosis	Number of cases					
		Out-patient		In-patient		Total	
		2005	2006	2005	2006	2005	2006
T40	Poisoning with drugs and psychodysleptics	7	9	11	19	18	28
T40.0	Opium	0	1	75	54	75	55
T40.1	Heroin	2	7	34	42	36	49
T40.2	Other opioids (codeine, morphine)	1	7	16	15	17	22
T40.3	Methadone	0	2	2	3	2	5
T40.4	Other synthetic drugs (Petidin)	0	0	8	15	8	15
T40.5	Cocaine	14	39	3	1	17	40
T40.6	Other and non-specified drugs	3	8	39	38	42	46
T40.7	Cannabis (derivatives)	0	0	17	9	17	9
T40.8	Lysergic acid derivatives (LSD)	2	0	2	2	4	2
T40.9	Other and non-specified psychodysleptics, (hallucinogens) (Mescaline, Psilocin, Psilocybe)	3	7	18	9	21	16
Total		32	80	225	207	257	287

Information Source: the State Patient Fund under the Ministry of Health

According to the statistical data, the number of men registered at in-patient medical institutions (hospitals) due to poisonings with drugs and psychotropic substances exceeded the number of women 3 times: men – 211 cases (189 persons), women – 76 cases (56 persons). Women were registered mainly intoxicated with cocaine - 32,9 percent, with opium – 18,4 percent. Mainly young people (aged 15-29) were registered intoxicated with drugs and psychotropic substances – 155 cases (Table 6-11), though analysis of the statistical data observes that in 2006 cocaine intoxications were registered for elder women: aged 40-44 – 14 times (7 persons), over 65 years of age – 5 times (4 persons). Men were registered intoxicated mainly with heroin – 22,3 percent and opium – 19,4 percent, and men intoxicated with cocaine accounted for only 7,1 percent of all registered men. The highest number of intoxication registrations was observed in health care establishments in the biggest cities in Lithuania: Vilnius – 94, Kaunas – 35, Klaipeda – 29 cases.

Table 6-10. Distribution of poisoning with drugs and psychodysleptics (hallucinogens), by age and poisoning diagnosis, 2006

Age group	Codes of diseases according to International Statistical Classification of Diseases and Health Disorders (TLK-10)											
	T40	T40.0	T40.1	T40.2	T40.3	T40.4	T40.5	T40.6	T40.7	T40.8	T40.9	Total
Males												
under 15	-	-	-	-	-	2	-	4	-	-	6	12
15-19 years	1	4	3	1	-	5	-	9	4	1	7	35
20-24 years	3	10	11	1	-	-	-	11	1	-	1	38
25-29 years	3	12	18	-	-	1	1	5	-	-	-	40
30-34 years	3	7	7	3	1	2	2	6	-	-	1	32
35-39 years	8	4	1	5	-	-	1	2	-	-	-	21
40-44 years	3	1	7	1	-	-	2	-	-	-	-	14
45-49 years	3	-	-	3	-	-	4	1	-	-	-	11
50-54 years	-	3	-	-	-	-	-	-	-	-	-	3
55-59 years	-	-	-	-	-	-	3	-	-	-	-	3
60-64 years	-	-	-	-	-	-	2	-	-	-	-	2
Over 64 years	-	-	-	-	-	-	-	-	-	-	-	0
Total	24	41	47	14	1	10	15	38	5	1	15	211
Females												
under 15	1	-	-	1	3	-	-	-	1	-	-	6
15-19 years	1	-	-	1	1	2	-	3	2	1	-	11
20-24 years	1	3	-	-	-	2	6	1	1	-	-	14
25-29 years	-	7	2	-	-	-	-	-	-	-	-	9
30-34 years	-	2	-	1	-	-	-	-	-	-	-	3
35-39 years	-	-	-	-	-	-	-	-	-	-	-	0
40-44 years	-	-	-	1	-	-	14	-	-	-	-	15
45-49 years	-	1	-	-	-	-	-	-	-	-	-	1
50-54 years	-	-	-	4	-	-	-	-	-	-	-	4
55-59 years	-	-	-	-	-	1	-	4	-	-	-	5
60-64 years	-	1	-	-	-	-	-	-	-	-	1	2
over 64 years	1	-	-	-	-	-	5	-	-	-	-	6
Total	4	14	2	8	4	5	25	8	4	1	1	76
TOTAL (M+F)	28	55	49	22	5	15	40	46	9	2	16	287

Information Source: the State Patient Fund under the Ministry of Health

Note: T40 – Intoxication with drugs and psychodysleptics (hallucinogens); T40.0 – Opium; T40.1 – Heroin; T40.2 – Other opioids (codeine, morphine); T40.3 – Methadone; T40.4 – Other synthetic drugs; T40.5 – Cocaine; T40.6 – Other and non-specified drugs; T40.7 - Cannabis (derivatives); T40.8 – Lysergic acid derivatives (LSD); T40.9 – Other and non-specified psychodysleptics (hallucinogens) (Mescaline, Psilocin, Psilocybe).

Somatic co-morbidity (as abscesses, sepsis, endocarditis, dental health etc.), other health consequences

In 2005, the Vilnius Centre for Addictive Disorders carried out a survey of health problems of opiate dependent patients receiving substitute methadone treatment in this Centre. Health problems of 120 patients (including 35 women) were analysed. Among the patients participating in the substitute methadone treatment hepatitis C (105 cases), thrombophlebitis of legs (28 cases), hepatitis B (19 cases), trophic sores on legs (17 cases) were diagnosed (Table 6-11).

Table 6-11. Health problems of patients receiving substitute methadone treatment in the Vilnius Centre for Addictive Disorders, 2005

Health problem	Number of patients
HIV infection /AIDS	12
Hepatitis C	105
Hepatitis B	19
Lung tuberculosis	2
Thrombophlebitis of legs	28
Trophic sores on legs	17
Strong dependence on alcohol	8
Other somatic diseases (cardio-vascular diseases, lung diseases, kidney deficiency, digestion disorders, etc.)	9

Information Source: the Vilnius Centre for Addictive Disorders

7. Responses to Health Correlates and Consequences

7.1 Prevention of drug related deaths

In Lithuania, a few prevention measures of drug related deaths exist, mainly these are prevention measures based on information, i.e. information brochures, leaflets, etc. Medical personnel, medical first aid staff in particular, is trained to provide medical first aid to a person intoxicated with drugs. In 2006, few Low-threshold services provided a safer use training programs for drug users. The consumption rooms in Lithuania did not exist.

7.2 Prevention and treatment of drug-related infectious diseases

Based on Decree No. V-646 of September 16, 2004, of the Minister of Health of the Republic of Lithuania *On Approval of Children's Vaccination Calendar* (Žin., 2004, Nr. 142-5210), infants and 12 year-old children are vaccinated against viral hepatitis B at the expense of the state, however, in Lithuania no vaccination programs against viral hepatitis B for injecting drug users exist. Also, Resolution No. 1253 of November 21, 2005, of the Government of the Republic of Lithuania *On Approval of the National Program for Prevention and Control of Sexually Transmitted Diseases 2006-2009* (Žin., 2005, No. 138-4973) establishes prophylaxis of hepatitis B for persons in penitentiaries and interrogation units.

Resolution No. 1273 of October 14, 2003, of the Government of the Republic of Lithuania approved the *National HIV/AIDS Prevention and Control Program 2003-2008* (Žin., 2003, Nr. 98-4399), prioritizing HIV prevention measures among high risk groups, injecting drug users in particular. The Program targets to achieve that "80 percent of injecting drug users visiting harm reduction units should have anonymous checkups and counselling" and that "85 percent of injecting drug users should not use repeatedly used syringes". The implementation measures of the *National HIV/AIDS Prevention and Control Program* foresees to establish more "low threshold" units taking into consideration HIV status and epidemiological situation of infections related to the above, to prepare and approve model regulations for their operations.

In 2006, implementation of the project *HIV/Aids Prevention and Supervision among Injecting Drug Users and Prisoners in Lithuania, Estonia and Latvia* of the United Nations Office on Drugs and Crime was started. It aims at stopping and reduction of HIV/AIDS epidemics among injecting drug users

and prisoners in three Baltic states. The total budget of the project accounts for 5 million US dollars. The main goal of the projects is to establish favourable environment in all three countries participating in the project in order to better implement HIV/AIDS prevention and supervision activities among injecting drug users and prisoners taking into account regulating policies, capacity strengthening and program aspects in relation to the national HIV/AIDS prevention activities.

In Lithuania, the implementation of syringe/needle exchange programs for injecting drug users were started a decade ago, however, until this year these programs were not regulated by legislation. A legal basis for these programs was established in Decree No. V-584 of July 5, 2006, of the Minister of Health of the Republic of Lithuania *On Approval of Profile of the Implementation Procedure of Drug and Psychotropic Substance Drug Reduction Programs* (Žin., 2006, No. 77-3020). This legislation establishes the mandatory package of services for injecting drug users: syringe/needle exchange, distribution of disinfecting tools, distribution of condoms, health education to reduce risk behaviour, providing of information and counselling. This legislation seeks for attraction of drug users and their partners to institutions and organizations providing health and social services, services of adequate quality and qualification, and their integration into the society. This legislation is expected to facilitate development of harm reduction services in Lithuania.

In 2006, in Lithuania harm reduction programs expanded geographically compared to previous years. Syringe and needle exchange was available in Alytus, Druskininkai, Klaipeda (2 units), Mazeikiai, Siauliai and Vilnius (2 units). Since 2006 a new „low threshold“ services unit started to operate in Kaunas, however, it limited its activities mainly to providing social services, as until now the staff was not successful in attracting injecting drug users. observed. In 2006, the number of distributed syringes and additional needles increased compared to 2005 (Table 7-1).

Table 7-1. Number of syringes and needles distributed in Lithuanian cities in 2004-2005

City	2005		2006	
	Syringes/Needles		Syringes/Needles	
	Distributed	Collected	Distributed	Collected
Alytus	30 240 / 31 700	30 692 / 31 420	33 169	33 169
Druskininkai	N/A	N/A	4 800	4 800
Klaipeda	104 453	106 487	49 616	51 542
Mazeikiai	4600 / 3075	N/A	800 / 450	860 / 500
Siauliai	5033	3372	n.d.	n.d.
Vilnius (Lithuanian AIDS Centre)	12 808 / 15 275	14 512 / 17 204	26 031 / 27 577	32 348 / 35 658
Vilnius (Centre for Addictive Disorders)	101 516 / 126 694	336 230	82 536 / 126 285	215 991 / 215 991
Total:	258 650 / 176 744		196 952 / 154 312	338 710 / 251 619

Higher collections of syringes and needles show that repeated use of a syringe or harm to other community members were prevented. The annual scope of health care services increased, a greater number of drug users is reached, more information is provided on availability of medical care. Based on data of the Lithuanian AIDS Centre and the Centre for Control and Prevention of Infectious Diseases, according to the number of registered acute hepatitis B and C, diagnosed HIV cases a decreasing number of injecting drug users becomes infected with these infections.

7.3. Interventions Related to Psychiatric Co-Morbidity

No information available

7.4. Interventions related to other health correlates and consequences

By Decree No. V-652 of August 6, 2007, of the Minister of Health of the Republic of Lithuania (Žin., 2007, No. 90-3586), the Standards for Substitution Treatment extend a requirement at least 2 times annually to make analysis regarding HIV infection, tuberculosis, sexually transmitted diseases, general blood and urine tests of the patients participating in the substitution treatment programs. Also, in 2007,

state budget allocations amounting to 14,48 thousand euros were provided to test intravenous drug users to identify HIV positive and communicable diseases (viral hepatitis B and C, syphilis, tuberculosis). Testing is organised in low threshold services units.

Currently, according to the effective legislation all human health care institutions must have opiate antagonists in their first aid medicine chests. In July – September 2007, random inspections of human health care institutions were carried out to identify their compliance with the established procedures and presence of opiate antagonists and other tools there necessary for providing first aid in cases of overdosing in them. Besides, training of staff in first aid services is carried out on a regular basis instructing how to act in overdosing cases.

In 2007, officers of the Police Department organised special safe traffic campaigns at which drivers of transport means were checked for intoxication with alcohol or drugs.

8. Social Correlates and Consequences

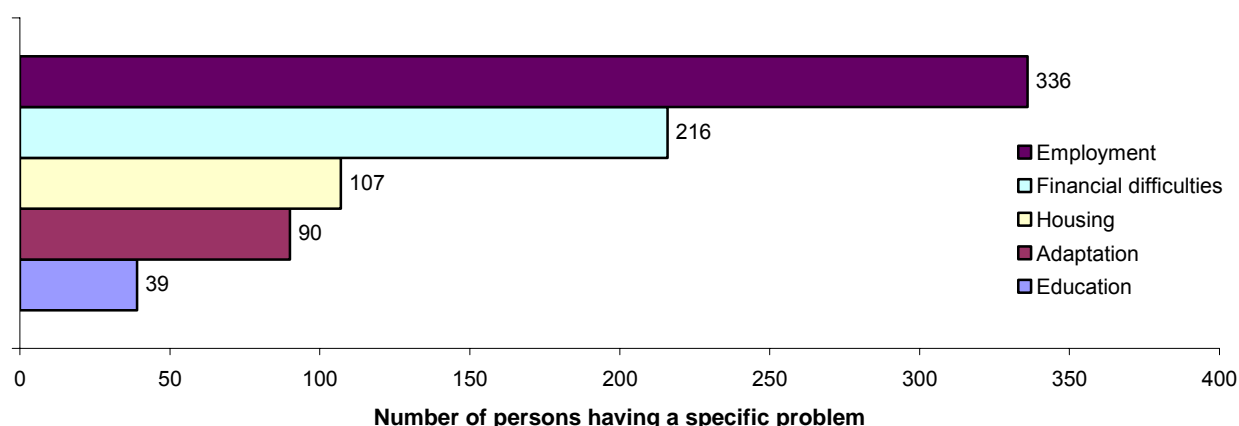
8.1. Social Exclusion

In 2006, the Drug Control Department under the Government of the Republic of Lithuania aiming at analysis of persons dependent on psychoactive substances and problems of social rehabilitation and social integration and their solution methods address 18 Lithuanian institutions and organisations providing psychological and social rehabilitation services to persons dependant on psychoactive substances. (At present In Lithuania 16 long-term communities of psychological and social rehabilitation and 4 day centres for persons dependant on psychoactive substances operate). For data collection two questionnaires were used, i.e. one aimed at examination of social rehabilitation and social integration problems, and the other aimed at identification of services. Answers to these questionnaires were provided by 14 institutions and organisations, 461 persons dependent on psychoactive substances filled in the questionnaires. For generalisation purposes other methods were too, i.e. reports analysis, interview with heads of the rehabilitation establishments.

The survey showed that the most acute problem was unemployment, and 336 persons were unemployed in 2006 (Figure 8-2). Lack of elementary work skills, absence of qualification and specialization reduces competitiveness of persons dependent on psychoactive substances on the labour market. On the other hand, some persons hinder their search of permanent job by themselves due to their psychological instability and reluctance to work. Finally, solution of employment problem is encumbered by inauspicious attitude of employers towards dependent on psychoactive substances.

Another topical problem is financial difficulties, reported by 216 persons. Growing debts, lack of elementary skills to manage one's financial matters in some cases encourage criminal behaviour (thefts), in many cases deprive of accessibility to rehabilitate due to the fee to the rehabilitation programs, and the treatment period extends in 8 – 12 months or longer.

Figure 8-1. Problems of persons dependent on psychoactive substances, 2006



Information Source: the Drug Control Department under the Government of the Republic of Lithuania

The third acute problem for socially excluded persons is absence of permanent residence (reported by 107 individuals). Acquisition or maintenance of housing are hindered not only by financial

but also by socio-psychological and legal obstacles. Destitution or loss of a permanent residence place in numerous cases resulted from disturbed family relationships and inadequate knowledge of legislation, inability to preserve immovable property (arrears for utilities or rent).

The fourth topical problem is inadaptability to the community (90 individuals). The main causes hindering persons dependent on psychoactive substances to integrate into the community are as follows:

- inability to seek for a legitimate way to create personal welfare;
- asocial system of values;
- psychological and social problems;
- inability to meet basic needs;
- negative approach from the society.

The above persons simply lack social, natural and communication skills. In the rehabilitation process difficulties also arise due to adaptation problems: the mental and emotional state of some inmates in the community is not fully stabilised and preconceived approach results in dissatisfaction with other community members, internal regulations of the order. All this may provoke conflicts that are usually solved by sending undated persons into other communities. The wish to resume earlier life habits, a lack of motivation to change encumber their adaptation in the community and the society as well.

Education problem is also very topical (39 individuals). School age persons dependent on psychoactive substances do not attend school. Weak motivation or absolute lack of motivation is reported as the most frequent reason of such non-attendance. Besides, negative approach by the school, a wish "to get rid" of youths using drugs are also reported.

A number of clients of rehabilitation institutions possess no profession, work experience due to drug use in early age.

8.2. Drug Related Crime

Drug offences

Drug offences by Penal Code

The number of criminal acts related to illicit drug circulation continues to increase in Lithuania. In 2006, there were 1673 acts of this kind registered, i.e. it is greater by 73 acts or 4.6 percent in comparison to 2005 (1600 acts). In 2006, the number of all criminals acts registered in Lithuania is lower by 8.5 percent in comparison with 2005 (82 255 and 89 815 respectively). Criminal acts regarding illicit possession of drugs in the general criminal context made up 2.03 percent and almost the same (i.e. 2.02 percent) in 2005, 1.7 percent in 2004 and 1.2 percent in 2003. In 2006, the nature of criminal acts regarding illicit circulation of drugs remained the same: possession of drugs with no aim for distribution (Article 259 of the Criminal Code of the Republic of Lithuania) and with an aim to distribute them or their distribution (Article 260 of the Criminal Code of the Republic of Lithuania). Only several criminal acts were registered according to other Articles of the Criminal Code of the Republic of Lithuania. In accordance with the statistics provided by the Information Technology and Communications Department under the Ministry of the Interior, 1673 of the registered criminal acts in 2006 included the following: 966 criminal acts due to unlawful possession of narcotic and psychotropic substances without an intent for their distribution (in 2005 - 808); 673 criminal acts due to unlawful possession of narcotic and psychotropic substances with an intent for their distribution (in 2005 - 977); 3 criminal acts due to unlawful possession of 1st category precursors of narcotic and psychotropic substances (in 2005 - 2 criminal acts of this kind);

1 criminal act due to theft of narcotic or psychotropic substances (in 2005 there were 6 of them); 1 criminal act due to production of equipment meant to produce narcotic or psychotropic substances (in 2005 - 2); 4 due to unlawful growing of poppies or cannabis (in 2005 - 8); 5 due to distribution of narcotic or psychotropic substances to minors (in 2005 - 2); 8 due to smuggling of drugs (in 2005 there were 2 of them). Nationally, distribution of criminal acts related to illicit circulation of drugs and psychotropic substances continued nearly at the same level as in the previous three years, 62 percent of the actions were committed in 3 biggest cities: Vilnius – 40 percent, Kaunas – 12 percent, Klaipeda – 10 percent.

In 2006, there were 1042 (1010 in 2005, 869 in 2004) persons registered, who committed criminal acts related to possession of narcotic or psychotropic substances, including 149 women, 10 citizens of foreign countries, 7 persons with the status of alienage. There were 320 persons (329 in 2005) detained for illicit trafficking in narcotic and psychotropic substances, including 58 women (53) and 3 foreign

citizens (7)7. According to some data providers, the age of people involved in the circles of distributors is becoming younger: 3 schoolchildren of a basic school were detained in Panevezys. In 2006, as well as in 2005, there was the same number of minors registered who committed criminal acts regarding illicit drug circulation, i.e. 47 or almost 5 percent of all persons detained for these criminal acts (46 in 2005, 49 in 2004, 37 in 2003, 15 in 2002). More than half of the people detained in the recent years make up young people under 30 (65 percent in 2006, 63 percent in 2005) (See Picture No. 5). There has been a gradual decrease in the number of persons over 30 years old detained in proportion with the number of young people detained (2 percent). The biggest increase (4 percent) was in the number of detainees aged from 25 to 29 but there were fewer of people aged from 18 to 20 who committed crimes. In 2006, 65 percent of persons detained for illicit acts related to the circulation of drugs were socially unoccupied (63 percent in 2005). People engaged in some kind of studies were less apt to commit crimes: 8.5 percent in 2006, 11 percent in 2005.

Drug offences by Administrative Code

Before the new Penal Code in May 2003, possession of very small amounts of drugs was offence under the Administrative Law Violations Code, and subject to administrative measures (fines of up to 1000 Litas, or 290 euros). In 2006, 3043 administrative offences related to illicit trafficking of drugs or psychotropic substances were registered, including 34 one committed by juveniles. The biggest number of administrative offences, i.e. 2194 cases (72 percent), were committed due to use of drugs or psychotropic substances without doctor's prescription (see Table 8.1).

Table 8-1. Registered administrative offences related to illicit trafficking of drugs or psychotropic substances, 2006

Administrative offence	Number of offences	
	total	Including juvenile
Illicit acquisition or disposal drugs or psychotropic substances in small amounts without intention to sell or distribute otherwise (part 1 of article 44, RL Administrative Code)	207	7
Use of drugs or psychotropic substances without doctor's prescription (part 2 of article 44, RL Administrative Code)	2194	26
Illicit acquisition or disposal drugs or psychotropic substances in small amounts without intention to sell or distribute otherwise, by juveniles aged 14 to 16 (part 3 of article 44, RL Administrative Code)	10	—
Illicit growing of opioid poppies, cannabis or coca trees article (107 ² , RL Administrative Code)	632	1
Total	3043	34

Information Source: the Police Department under the Ministry of Interior of the Republic of Lithuania

Other drug related crime

Property crimes, violence under the influence

In 2006, on the national level 24831 physical persons were suspected (accused) in having committed criminal acts, whereas in 2005 – 26048, i.e. 7,7 percent less compared to 2005. Among those individuals detected in 2006, 192 individuals were intoxicated with drugs or psychotropic substances at the moment of crime commitments (in 2005 -144) (Table 8-1). These persons committed different criminal acts, such as murders, robberies, property destruction, etc.

Table 8-2. Detection of persons suspected (accused) having committed criminal acts intoxicated with drugs or psychotropic substances, 2004 - 2005

Date	2005	2006
Detected persons suspected (accused) having committed criminal acts, including:	26048	24831
- crimes	23304	22136
- criminal offences	427	2648
- by persons intoxicated with drugs or psychotropic substances	144	192
- murders, incl.:	377	313
- intoxicated with drugs or psychotropic substances	2	5
- thefts, incl.:	8224	8801
- intoxicated with drugs or psychotropic substances	42	35
- robberies, incl.:	2854	2459
- intoxicated with drugs or psychotropic substances	10	28
- property destruction or damage, incl.:	913	1022
- intoxicated with drugs or psychotropic substances	10	7

Information Source: the Department of Informatics and Communications under the Ministry of Interior of the Republic of Lithuania

Driving offences

In 2006, in Lithuania 6658) traffic accidents were registered (in 2005 – 6790, including 920 (in 2005 – 754) accidents due to the fault of intoxicated with alcohol or drugs and psychotropic substances. In 2006, 116 drivers (in 2005 - 105) were identified driving vehicles intoxicated with drugs, medicines or other intoxicating substances.

Drug crime in prisons

According to the data by the Information Technology and Communications Department under the Ministry of the Interior, 123 criminal acts related to the possession of drugs were registered in places of imprisonment in 2006, i.e. by 79 percent less in comparison with the previous year (202 in 2005). This decrease was conditioned by the amendments of the Penal Code which came into force as of January 1, 2006, which revoked the right of the prisoners to receive parcels with food. The main way of penetration of drugs and psychotropic substances into premises of penitentiaries was slinging. A fair amount of drugs and psychotropic substances was detained checking small postal packages, postal wrappers, parcels containing clothes and footwear for prisoners. Also, drugs gain access to these institutions through dishonest staff. In 2006, in prisons the demand for types of drugs changed places, and most frequently confiscated drugs distributed as follows: heroin (39 cases, 119 g), amphetamine and methamphetamine (25 cases each, 123 g and 73 g respectively), cannabis (28 cases, 164 g). Most of attempts to deliver drugs to penitentiaries were detected in the Penitentiaries Institutions of Marijampole (32), Alytus (26) and Vilnius (18).

8.3 Drug Use in Prison

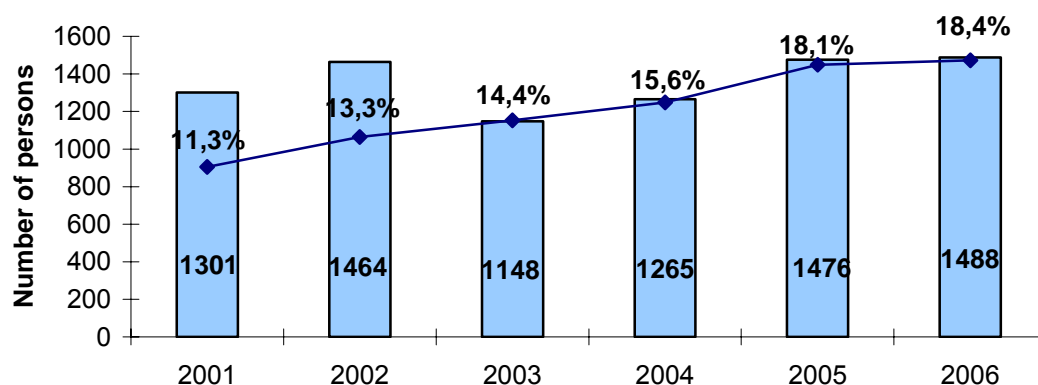
Information Source: the Department of Prisons under the Ministry of Justice

In 2006, out of total number of 8079 persons 18,4 percent (1488 persons) were registered as users of or dependent on drugs or psychotropic substances (use identified by testing of self-confession) and this number increased compared to 2005 (18,1 percent, 1476 persons) or earlier years (Figure 8-2; Table 8-2). The increased number of registered persons using drugs may be assessed, on one hand, as an increasing problem, whereas, on the other hand, the situation may reflect positive consequences of applied prevention and education measures among prisoners in last years involving information on harm of drug and psychotropic substance use on human health, availability of medical aid, and a number of such persons having become aware of their problems contact medical personnel of prisons for help. This increase could also result from the preventive measures imposed on access of drugs and psychotropic substances into prisons (more prudent control on delivered parcels, introsopes, trained dogs, increased level of qualification and knowledge of the personnel, technical security facilities, etc.) which reduced external availability of drugs and psychotropic substances, and a number of prisoners having not

consumed a dose of drugs or psychotropic substances and upon abstinence were forced to contact medical personnel of the imprisonment institutions for help.

Though the number of male users of drugs and psychotropic substances is higher more than 15 times compared to that of females, however, the proportional drug use among all imprisoned women is higher compared to men, i.e. in 2006 - 28,4 percent of all imprisoned women used drugs and psychotropic substances, while this indicator among men was lower - 17,8 percent. The statistical data show that the biggest share (48,4 percent) of all imprisoned drug and psychotropic substance users was a group of young people aged 25-34. 1238 persons out of total 1488 (83 percent) were injecting users.

Figure 8-2. Number of imprisoned persons dependent on drugs and psychotropic substances and their share (percent) of all imprisoned persons, 2001-2006



Information Source: the Drug Control Department under the Government of the Republic of Lithuania and the Department of Prisons under the Government of the Republic of Lithuania

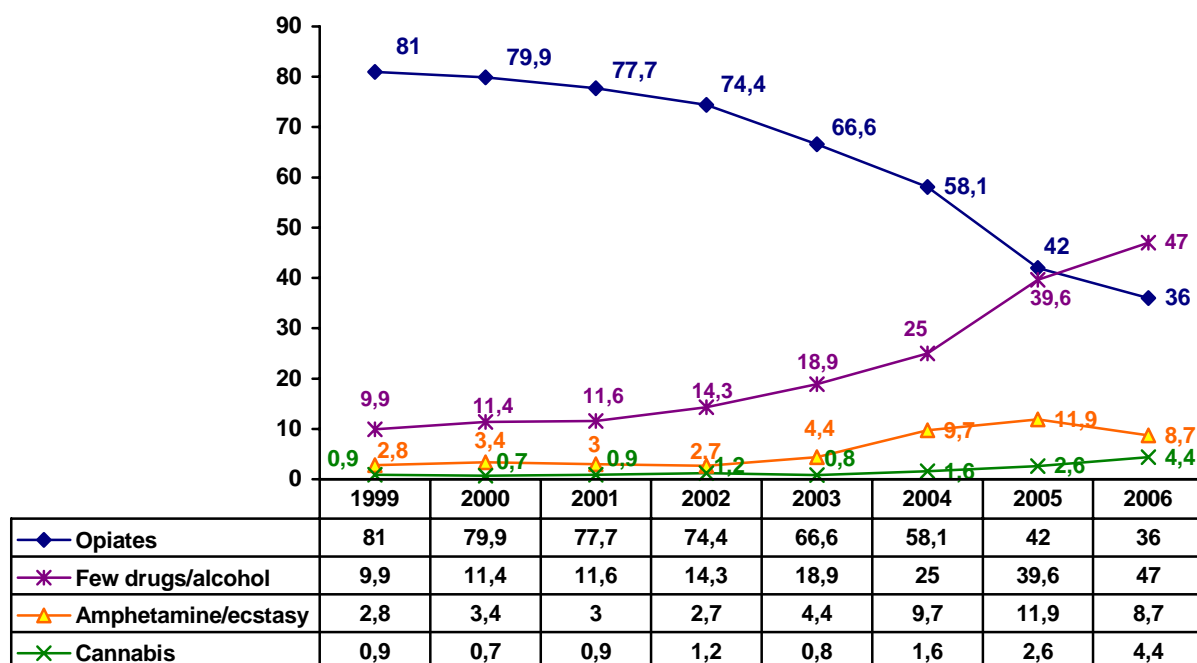
Table 8-2. Number of imprisoned persons dependent on drugs and psychotropic substances, 2004 – 2006

Item	2005		2006	
	Total number of drug addicts, including:	1476	18,1%	1488
- men	1414		1399	
- women	62		89	
<i>Detained (before sentence), including:</i>	157		181	
- men	149		166	
- women	8		15	
<i>Convicts, including:</i>	1319		1307	
- men	1265		1233	
- women	54		74	

The statistical data concerning use of drugs and psychotropic substances in imprisonment in 2006 produced final verification of the tendency in recent years that the number of opioid users decreased while the number of multi-drug users and users of stimulants (amphetamine, ecstasy) increased. In 2006, imprisoned persons rather rarely used cannabis (4,4 percent), cocaine (0,3 percent) and hallucinogens (0,5 percent) (Figure 8-3).

Presumably, increased popularity of stimulants is related to a number of reasons, i.e. a low acquisition price, availability in illicit trafficking outside prisons, compactness (tablets, powder) and light weight constrain detection by the personnel, a relatively small quantity (1-2 tablets) is sufficient to achieve desirable stimulating effect, no any extra tools (for example, a syringe) are needed, oral consumption reduces risk of infections, etc. The increase of multi-drug users could also result from the preventive measures implemented in prisons (constrains on receiving parcels, trained dogs to detect drugs and psychotropic substances, increased level of qualification and knowledge of personnel, the use of introsopes to inspect parcels, traps for slinging into premises of penitentiaries) that significantly limited availability of drugs or psychotropic substances for the prisoners.

Figure 8-3. Trends of drug using among drug users in prisons, 1999 - 2006 (percent)



Information Source: The Department of Prisons under the Ministry of Justice of the Republic of Lithuania

In 2006, health care services operating in imprisonment institutions were provided with tools for instant drug identification in body fluids, with total costs amounting to 79 thousand Litass. 2060 tests for detection of drugs in urine were acquired. In 2006, using the above tools 1392 prisoners were tested, and 713 persons (51 percent) had positive tests. The tests provided information that the imprisoned persons mainly used amphetamine, methamphetamine, marihuana and opioids.

Prevalence of drug use among juvenile detainees and convicts

In June 2007, the Department of Penitentiaries carried out a survey of behaviours and approaches among juvenile arrestees and convicts. The goals of the survey was as follows: 1) to ascertain approaches of imprisoned juveniles (under 18) towards drugs and psychotropic substances and alcohol; 2) to ascertain the impact of approaches towards drugs and psychotropic substances on behaviour of juvenile detainees or prisoners. The survey was based on a questionnaire and interview with a respondent.

The survey respondents were 106 juveniles, including 6 girls serving their sentence in the Panevezys Penitentiary Institution, 42 arrested pre-trial juveniles and 58 juvenile convicts serving their sentence in the Kaunas Juvenile Inquisition-Penitentiary Institution. The questionnaire was processed with the arrestees individually, groups of 10 persons were invited into school classrooms.

The distribution of the respondents based on schooling education was as follows: 24 percent - 8 years, 23,1 percent - seven, 19,2 - nine, 13,5 percent graduated basic school, 4,78 percent - 12-year secondary school, and only 1,9 percent of the surveyed were in the fifth form. 77, 9 percent of the surveyed juveniles served their sentence for the first time, 18,3 percent - the second time, 1,9 - the third time and 1 percent - the fourth time. It should be pointed out that 1 percent of the respondents did not know the ordinal number of their imprisonment. 3,8 percent of the surveyed juveniles were imprisoned in relation to drugs at the time of the survey or earlier.

The survey disclosed that 56 percent of the respondents used drugs at least once in their lifetimes, 27 percent reported using drugs on a permanent basis before imprisonment. The biggest share of the juvenile drug users (40 percent) could not specify duration of their drug use. Concerning causes of their drug use, 44 percent of the respondents could not name them, 25 percent reported drugs being a way to play, 10 percent started to use because their friends used, 50,8 percent felt disappointed in life. 57 percent of the surveyed declared their approach that they would like to live without drugs, 26 percent reported not knowing their intentions, and 4,8 percent said they would not like to live without drugs. Analysis of the answers to this question clearly shows approaches of the juveniles towards drugs, i.e. 2/3

of the juvenile drug users and non-users would like to live without drugs in the future. 36,5 percent of the juvenile arrestees tried to quit using drugs, 20 percent – did not do it in their lifetimes. The fact that the juveniles estimate the dependence problem inadequately and have no sufficient knowledge of dependence consequences is supported by their unreasonable self-confidence. Nearly 70 percent of the juveniles think they have enough will to help themselves in refusing drugs, 7 percent reported they lack will to refuse drugs. 44,2 percent of the respondents treat drug use being a direct cause of degenerated behaviour, 42,3 percent did not have their opinion on this. 4,8 percent were convinced that behaviour did not change having started to use drugs, and 6,7 percent stated drug use determined better behaviour. 99 percent of the juveniles would not like a person close to them to use drugs, 1 percent – had no answer to this. 78,8 percent of the juveniles responded it was very easy to get drugs outside imprisonment. Only 3,8 percent think acquisition of drugs being problematic.

8.4. Social Costs

No information available

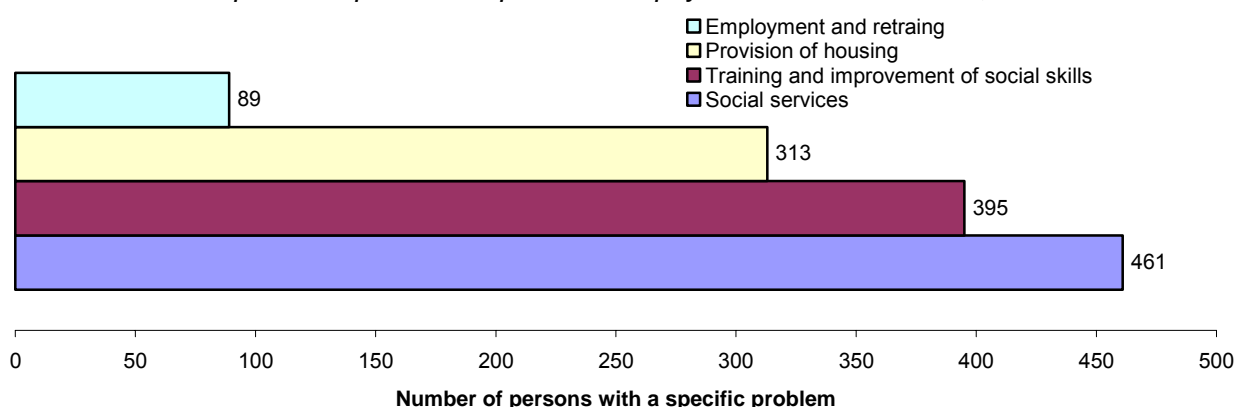
9. Responses to Social Correlates and Consequences

9.1. Social Reintegration

Provision of social services

According to the data submitted by the Lithuanian rehabilitation institutions regarding services provided to persons dependent on drugs and psychoactive substances in 2006 (Figure 9-1) social services prevailed (provided to 461 persons), i.e. counselling by social workers, development of social skills, counselling to family members, etc.

Figure 9-1. Services provided persons dependent on psychoactive substances, 2006



Information Source: the Drug Control Department under the Government of the Republic of Lithuania

Training and improvement of social skills

Based on the information submitted by the rehabilitation institutions the most frequent provided services are as follows: development of healthy lifestyle values, work therapy, arts therapy arrangements, computer literacy courses and other trainings of professional skills. In many rehabilitation communities their customers are engaged in repair works, acquire skills of carpenters, brick-layers and other building occupations. In the community „Pilnu namu bendruomene“ (the district of Varena) the customers grow herbs used for their own treatment and delivered for wider consumption, attend secondary school, if not finished. Figure 9-1 shows that services of training and improvement of social skills followed the social services in the second place (services received by 395 persons).

Work placement and retraining

In 2006, work placement and retraining services compared to other services accounted for a minor share, 89 persons were employed or retrained. Seeking to ensure successful search for work placements for persons dependent on drugs participating in rehabilitation programs the rehabilitation institutions have to cooperate with social support institutions and territorial labour exchanges. In a number of cases persons having completed rehabilitation courses successfully and acquired specialities in professional training Centres found work placements based on these specialities, established their own companies or found jobs abroad. A number of dependent persons possessing the ability to engage in social work as assistants to social workers work in the area of dependence disorders, also find jobs in construction companies.

In 2004, in Vilnius the cafe *Mano Guru* was established being the only return-to-work place for drug dependent persons. Upon completion of a rehabilitation course a person is granted a possibility to work in the above café for six months and to acquire profession of a cook or waiter. Since 2005, this social project is supported by the EU EQUAL initiative. 70 percent of the cafe staff are persons dependent on psychoactive substances who completed successfully rehabilitation programs in communities. The project owners encourage dependent persons to develop self-confidence and responsibility commitment. Working in the cafe that requires communication with people teaches them to constructively resolve encountered problems. Also, this project aims at positive public awareness building towards recovering drug addicts, their opportunities and abilities. The methodology prepared, adapted and tested by 2009 will be applied in enterprises of at least two regions in Lithuania working with dependent persons. Within two years of its existence 80 percent of the participants successfully accomplished the working rehabilitation program and half of them (45 percent) took up jobs.

Currently, in Lithuania another EU EQUAL initiative project, i.e. Lithuanian youth occupation development community, is under implementation (project implementation December 2004 - December 2007). The main aim of the to reduce the social exclusion of the youth in risk groups through development and putting in practice a model for employment and (re)integration into the labour market and society, to integrate proved methods into practice and public policy. Supported by youth NGO sector and with Youth Work Centres (operating at territorial labour exchanges in 6 biggest cities of Lithuania) to facilitate (re)integration of the youth in risk groups into the labour market. The project target group is youth aged 14-29. The project aims to establish a system facilitating a youth in the targeted risk groups to (re)integrate into the labour market using the services. Individuals at social risk from the Correction Work Inspectorate, labour exchange and rehabilitation centres for dependent persons are sent to 6 Youth Work Centres under territorial labour exchanges where services are provided, such as individual counselling, sessions of self-help groups, work and learning placement, open counselling and information providing. Afterwards, persons intending to be employed participate in the activities of 13 NGOs for motivation, involvement, development of general skills and, finally, through intermediation of the project coordinators they are placed at work. During the implementation period 150 persons will participate.

In 2006, the Law On the Support to Employment of the Republic of Lithuania (see chapter 1) which established additional support to work placement of dependent persons, i.e. subsidizing work placement when the employer is paid a monthly subsidy from the Employment Fund to pay remuneration to the employed persons. Thus, it seeks to encourage interest of employers to give jobs to ex-dependent persons after their rehabilitation. In their turn, the rehabilitation institutions may use this privilege to receive subsidies if they employ a person who accomplished a rehabilitation program, as in practice a number of such cases is very minor.

Providing housing

Seeking for facilitation to dependent persons to solve the problem of losing housing rehabilitation institutions intermediate in finding counselling professionals, intermediate with local governments in finding suitable premises. If the customers of rehabilitation institutions have arrears an institution makes efforts to suspend the arrears for the rehabilitation period. Living in a community with all provisions it becomes difficult to return to a reality environment, self-dependence is lost. Upon accomplishment of a rehabilitation program dependent persons are provided housing in adaptation institutions. In these institutions provisional housing services can be provided. In 2006, the Drug Control Department organising a tender for psychological and social rehabilitation projects aimed at encouragement of the establishment of adaptation housing. The tendering criteria said that projects of

social adaptation and work reintegration shall be prioritised for public funding. However, no adaptation projects were accepted for funding.

9.2 Prevention of Drug Related Crime

In 2006, aiming at prevention of accessing drugs and psychotropic substances into prisons the following measures were organised:

1. Since 2006 the convicts do not have the right to receive postal or delivered parcels containing food, as in most cases, narcotic and psychotropic substances, mobile telephones and other prohibited items were attempted hidden in such parcels.
2. In 2006, 7 imprisonment units had introsopes (X-ray device to inspect things).
3. The Department of Prisons under the Ministry of Justice of the Republic of Lithuania organised a workshop regarding training of dogs, work with dogs trained to detect drugs and psychotropic substances.
4. Training and use of trained dogs was organized to carry out general searches and targeted on drugs and psychotropic substances. 3 dogs trained to detect drugs and psychotropic substances were acquired.
5. Patrol of public police and prison personnel was organized in risk areas for slinging of prohibited items to convicted/detained persons.
6. A station to impede mobile communication was acquired and installed in the Marijampole Correction Institution.
6. Cooperation and information exchange among the penitentiaries and Police Department under the Ministry of Interior of the Republic of Lithuania is developed regarding new methods of access of drugs and psychotropic substances into imprisonment units.

Assistance to drug users in prisons

In 2006, in Lithuanian penitentiaries the following prevention measures against drugs were implemented:

1. The convicts in penitentiaries were provided information regarding harmful use of drugs and psychotropic substances; in penitentiaries and correction inspectorates staff of the institutions organised 60 educational lectures and sessions according to the drug prevention programs with participation of 4000 persons from penitentiaries, a contest of drawings was organized, prevention films were watched by 1393 convicts.

2. Information publications on drug prevention topics were prepared and distributed.

3. Based on Decree No. 4/07-174 of September 24, 2003, of the Minister of Justice, in all penitentiaries legal and social education program for persons to be released from penitentiaries was implemented envisaging providing information to the convicts on drug harm to mental health, potential negative legal and social consequences, also ways of spreading HIV/AIDS and preventive measures against the infection. Besides, in penitentiaries three mandatory social rehabilitation programs are implemented: the Program for adaptation of new inmates of a penitentiary, the corrective Program of the convicts and the Program for integration of convicts into the society. All the above Programs include elements related to drug problems in penitentiaries. In communication with new inmates information on their health status, dependence on alcohol drugs and psychotropic substances is collected. Assistance is provided, as necessary. The convicts to be released are given references regarding further treatment and rehabilitation in relation to dependence disorders after they leave a penitentiary.

10. Drug Markets

10.1. Availability and Supply

Availability and Supply of Drugs in the General Population

Based on the survey data in 2004, 11,8 percent of Lithuanian population indicated that at least one of their friends or acquaintances used drugs. Younger people aged 15 to 34 had a bigger number of such friends and acquaintances than respondents aged 35 to 64 (20.8 percent vs. 4.7 percent, respectively), men had more such friends and acquaintances than women (14.7 percent vs. 8.9 percent, respectively). 15.5 percent of Lithuanian population aged 15 to 64 indicated that they personally knew

people who used cannabis. In three biggest cities almost every fourth resident (23.9 percent) knew cannabis users, whereas in small towns - every tenth. The rate in the younger subgroup who personally knew cannabis users (29.1 percent) was higher compared to the older subgroup.

Cannabis is the most easily obtainable drug in Lithuania. As many as 14.3 percent of Lithuanian population reported that it would be fairly easy (9.5 percent) or very easy (4.8 percent) for them to obtain cannabis in 24 hours. 12.9 percent of the respondents indicated that it would be fairly difficult (6.2 percent) or very difficult (6.7 percent) for them to obtain cannabis in 24 hours. Every third (29.2 percent) Lithuanian resident claimed that it would be impossible for them to obtain cannabis in 24 hours. More than half (52.0 percent) of Lithuanian population claimed that they had no idea/did not know whether they could obtain cannabis in 24 hours.

Reportedly, residents of three biggest cities could most easily obtain drugs. 23.8 percent of population in Vilnius, Kaunas and Klaipėda reported that they could fairly easily or very easily obtain cannabis in 24 hours, if they wanted it. Similar trends were observed with regard to availability of other drugs.

18.5 percent of Lithuanian population reported that they were offered drugs at least once in their lifetimes. Every tenth Lithuanian resident (10.7 percent) was offered cannabis at least once in their lifetimes; 6.5 percent were offered cannabis in the last 12 months. Cannabis was more frequently offered to men rather than women. Out of those respondents, who were offered cannabis in the last 12 months, every fourth (25.7 percent) reported that this drug was last offered to them at a private party, 16.9 percent - at a club/disco, 15.1 percent - at a friend's place, 11.7 percent - on the street, 6.1 percent - at school/college/university, 3.0 percent - in a pub/bar/restaurant, 2.5 percent - at home. 8.0 percent of those, who were offered marijuana or hashish in the last 12 months, reported other places. 4.4 percent of Lithuanian population were offered ecstasy at least once in their lifetimes; 2.7 percent were offered the drug in the last 12 months. 2.9 percent of Lithuanian population were offered amphetamine at least once in their lifetimes; 2.0 percent were offered amphetamine in the last 12 months. Hence, ecstasy was more frequently offered drug compared to amphetamine. Of those respondents, who were offered ecstasy in the last 12 months, every fourth (26.1 percent) reported that this drug was last offered to them at a club/disco, 22.8 percent - at a private party, 12.5 percent - at a friend's place, 11.7 percent - on the street/park, 3.4 percent - in a pub/bar/restaurant, 2.4 percent - at work. 7.52 percent of those, who were offered ecstasy in the last 12 months, reported other places. Out of those respondents, who were offered amphetamine in the last 12 months, every fifth (21.5 percent) reported that this drug was last offered to them at a friend's place or at a club/disco (20.7 percent). 15.4 percent claimed that amphetamine was last offered to them at a private party, 13.4 percent - on the street/park, 2.2 percent - at their academic institution, 2.0 percent - at a concert; 4.3 percent of the respondents reported other places.

Circulation of illegal narcotics and psychotropic substances

Based on analysis of seized amounts of drugs and psychotropic substances in the last years the following trends were observed:

a) *Amphetamine type substances and cannabis remain to be the most popular psychotropic substances in Lithuania, especially among new users.* Amphetamine and methamphetamine are produced in the country illegally, the price of the substance is relatively low. Amphetamine type stimulant substances gained their ground in Lithuania quite easily and quickly, thus producing a subculture of the youth. Failure to comprehend the consequences, to cope with a fast pace of life, also failure to relax naturally, e.g. going in for sports, healthy way of living, can be pointed out in this respect. Since 1997 at least one illegal laboratory of these substances was dismantled every year in the country. In 2000, ATS substances made up 6 % of drug market, and in 2006 - 36 %. The increase was sudden, especially that of methamphetamine. In 2000, the latter substance was seized in the country for the first time and now it is in competition with amphetamine. One underground laboratory of methamphetamine was disclosed in 2006 in Lithuania. Contrary to the European tendency, illegal laboratories in Lithuania are not large and do not contain professional equipment acquisition or production of which could lead to more information on producers or providers of the equipment. Ecstasy tablets are brought to Lithuania from the Netherlands and Belgium. Ecstasy tablets are shipped to Belarus and Russia via Lithuania by transit.

b) *Circulation of heroin and other opioids is increasing;* growing global supply, efforts of organized criminal groups to develop the market, high concentration of the substance, rapid and strong heroin addiction are observed. In 2006, the amount of 221 g of phentanyll (3-methyl phentanyl) was seized in Lithuania. It is a substance having a much stronger effect than heroin. Almost all seized quantity was

detained at the attempt to ship this substance from Lithuania to the Kaliningrad Region, the Russian Federation. It is suspected that this substance is produced in illegal laboratories in Russia.

c) *Poppies and their concentrate are loosing their consumer market, the circulation decreased by 14 %.* The substance has a defined circle of consumers (strongly addicted individuals). The market is going to become stable in the short run, later on there may be a slight increase in the number of individuals strongly addicted to heroin. The substance is grown and produced in local areas, the price is low, the consumers are able to produce the concentrate by themselves.

d) *The local market of cocaine remains stable.* It is the most expensive drug in the country; it is possible to use amphetamine in a similar way which is twice cheaper.

e) *Even though the route of hashish smuggling goes through the country, the demand for hashish is not high.* There are no traditions for its use; it is not a club party drug.

f) *Illegal consumption of psychotropic medicines is slightly rising.* Along with increasing use of various medicines and rising number of cases of depression and mental illnesses, the number of cases of addiction to psychotropic substances is rising as well.

g) *Active transit of the precursor BMK via Lithuania.* A part of the production remains in illegal laboratories of the country.

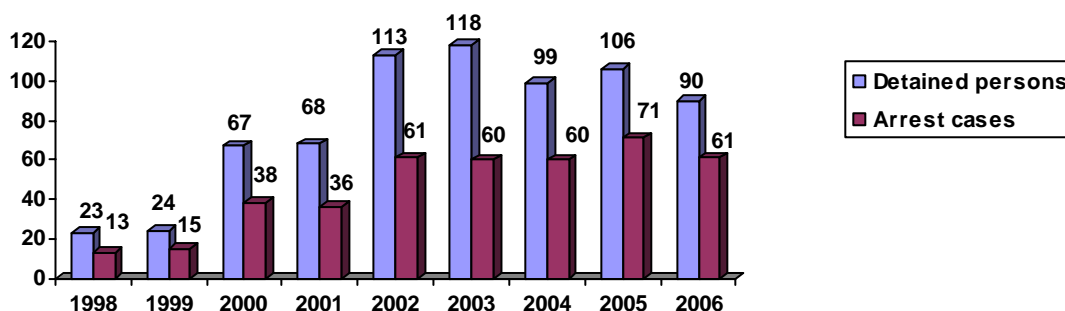
The quantity of seized substances is growing and it is evidenced by the quantity of a substance per detention (the quantity of a substance seized is divided by the number of detentions). One detention in 2006 included 36 g of heroin and 20 g in 2005, 223 g and 58 g of cocaine, 239 g and 74 g of amphetamine, 152 g and 37 g of methamphetamine, 480 and 212 tablets of ecstasy respectively. Prices of narcotic and psychotropic substances in recent years in Lithuania decreased.

Sources of supply and trafficking patterns within countries

Criminal activities of the Lithuanian nationals is related to illicit international drug circulation. It is well organized and is becoming more professional each year due to stable, reliable contacts with foreign "associates" as well as due to new and broader circle of acquaintances, more experience gained (years spent in prisons abroad, information about measures implemented and methods used by law enforcement officers) and possibilities to invest into more sophisticated ways of concealment.

In 1998, Lithuanian law enforcement institutions were reported of 23 Lithuanian citizens arrested for trafficking or smuggling of drugs and psychotropic substances abroad, whereas in 2005 this number grew: 61 arrests registered, 90 individuals arrested. It is found that within the last 4 years the number of arrests of Lithuanian citizens stabilized (Figure 10-1). The age of detainees varies a lot: the youngest detained was 18 years old and the oldest - 63; the arithmetical average age of the detainees was about 37; most often the detainees (34) were aged from 22 to 29.

Figure 10-1. Ratio of the number of citizens of the Republic of Lithuania arrested and arrests abroad, 1998-2006



Information Source: the Drug Control Department under the Government of the Republic of Lithuania

In 2006, the biggest number of detentions (19 cases) regarding cocaine shipments were registered, 13 cases indicate amphetamine shipment, 8 cases – hashish, 5 cases of BMK and methamphetamine each. Motor cars or cargo vehicles are usually chosen for drug shipment, air traffic, however, is chosen almost thrice as less. For instance, it was observed that consignments of methamphetamine and amphetamine of up to 10 kg are shipped by motor cars and larger consignments are shipped by cargo vehicles. However, it is not a "strict" rule, it happens that consignments exceeding

10 kg are also shipped by motor cars. Concealment patterns are constantly changing, even though ordinary ways continue too, i.e., ATS substances are usually concealed inside a motor car (e.g. under dashboards and seats), fixed outside a car (e.g. under wings, etc). Cocaine is usually transported in stomach or fixed to a body outside, in a hand luggage; in case it is transported by a motor car, it is concealed in the usual places of concealment. In 2006, a new way of drug packaging was observed, i.e. plastic bottles wrapped up by some adhesive tape. This is done on a purpose not to be detected by dogs.

Analysis of arrests of citizens of the Republic of Lithuania in 1998 – 2006 related to illicit trafficking of drugs and psychotropic substances abroad leads to a conclusion that Lithuanian citizens are hired as drug “couriers”, smuggling organisers or traffickers as at detentions big amounts of drugs are confiscated, and it means these substances were acquired not for personal use. In 2006, as previously, various drugs and psychotropic substances were confiscated from detained Lithuanian citizens abroad, i.e. cocaine, amphetamine, heroin and others (Table 10-1).

Table 10-1. Number of cases, arrested people and confiscated amount of substances when Lithuanian citizens were arrested abroad for illegal circulation of drugs, 2006

Country	Number of detained	Substance	Quantity	Number of detains
Germany	10	Amphetamine Hashish Heroin Kath Cocaine Ecstasy Cannabis	3,5 kg 0,4 kg 0,8 kg 563 kg 12 kg 45574 tab. 17 kg	11
France	6	Cocaine Hashish	4 kg 4,2 tons	12
Sweden	6	Amphetamine Methamphetamine Heroin	18,6 kg 2 kg 1,1 kg	9
Norway	6	Amphetamine Rohypnol Cocaine Methamphetamine Hashish	23,6 kg 1 6 kg 0,9 kg 6 kg 6,7 kg	8
Belarus	5	Methamphetamine Cocaine Ecstasy Methadone	1,6 kg 0,2 kg 730 tab. 59 g	5
Latvia	4	Amphetamine Cocaine Diazepam Methamphetamine Ecstasy	5,1 kg 0,05 kg 30331 tab. 0,06 kg 150 tab.	8
Island	4	Amphetamine Amphetamine base	17 kg 2 bottles	5
Netherlands	3	Cocaine BMK	2 kg 118 litres	6
Russia	3	Hashish BMK	20 kg 400 ltr	5
Belgium	3	Cocaine	19 kg	5
United Kingdom	3	Cannabis Cocaine	0,8 kg 2 kg	4
Poland	2	BMK	947 ltr	2
Spain	1	Marihuana	39 units	4
Morocco	1	Hashish	117 kg	2
Estonia	1	Hashish	200 kg	1
Ukraine	1	Marihuana	1,19 g	1
Ireland	1	Ecstasy	500 tab.	1
Venezuela	1	Cocaine	1 kg	1
Denmark	1	BMK	500 ltr	1
Total	62	Heroin Cocaine Amphetamine Amphetamine base	1,9 kg 39 kg 68 kg 2 bottles	91

		Methamphetamine	9,6 kg	
		Ecstasy	46 954 tab.	
		Rohypnol	16 kg and 10 tab.	
		Cannabis	18 kg	
		Kath	563 kg	
		Hashish	4,6 tons	
		BMK	1 965 ltr	
		Diazepam	30 331 tab.	

Analysis of the information available discloses trends of crimes by the citizens of the Republic of Lithuania related to illicit international circulation as follows:

Amphetamine and methamphetamine smuggling from Lithuania to Scandinavia; This criminal activity was broadly discussed in the overview 2005. Routes of smuggling did not change, however, the way of concealment and handover acquired new patterns; in order to avoid tracing of handover drugs are buried in an appointed place near motorways or in a forest. It is characteristic of smuggling executed not only but citizens of the Republic of Lithuania but also by organized criminal groups of other countries.

BMK smuggling from Russia to the Netherlands; As mentioned before, the route of BMK smuggling was disclosed in 2006 by joint efforts of officers in several countries. There is a "leakage" of this substance into illegal circulation from a BMK factory in Russia producing this substances legally. Members of organized criminal groups of the Republic of Lithuania have reliable contacts with members of Russian organized crime groups that provide BMK from the factory using fictitious companies. Organized criminal groups of the Republic of Lithuania actively cooperate with Polish organized criminal groups. In September 2006, during a joint operation Russian officers detained organizers of BMK smuggling in Russia. This smuggling channel was expected to close, nevertheless, the profiling of BMK implemented by forensic specialists of the Polish police, taken from 2 detentions in their country (also including the last shipment of 600 litres of BMK detained in October 2006) proved that BMK came from the same source. Based on the results of BMK profiling the route of smuggling of this substance becomes clearer. BMK is transported from Russia to Poland via Belarus and Lithuania and is further transported to Western Europe in two ways: a) part of it is left in Poland and having changed (or without changing) the vehicle is transported from Poland further; b) it is diluted with acetophenone in Poland, part of it is left in illegal Polish laboratories, while another part is transported further to Western Europe. During 2006, during a joint investigation in Russia, Poland, Denmark and the Netherlands about 2 tones of BMK were detained.

Hashish smuggling from South and/ or Western Europe to Russia and Scandinavia. Several successful detentions of hashish in Lithuania and abroad confirmed our guess that hashish is transported to Russia and Scandinavia via Lithuania and that organized criminal groups of the Republic of Lithuania also contribute to the organization of smuggling hashish. At the end of 2006, a ship with a Lithuanian crew was detained near the shores of France and it was transporting 4 tones of hashish from Morocco. The ship was going from Germany. Portugal was its transit stop. According to the crew hashish was freighted in the open sea near Morocco. Except for the captain of the ship, for whom it was not the first cargo smuggled, the crew did not know about the illegal activity and they were told that the ship would be sold in Portugal. In 2006, in Estonia a Lithuanian citizen who contributed to smuggling of few hundred kilograms of hashish was in the contraband. A hashish shipment of 78 kilograms was arrested in Lithuania; it was prepared for transportation to Estonia and further to Scandinavia and Russia.

Smuggling of Ecstasy from the Netherlands into/ via Lithuania. More and more information is received that members of the organized criminal groups of the Republic of Lithuania made reliable contacts with the producers of Ecstasy tablets in the Netherlands, i.e. tablets are bought without intermediate agents at particularly low prices. They are brought to Lithuania in shipments not smaller than 100 thousands tablets. It is supposed that one organized criminal group can transport such an amount once every two months. Part of the tablets is distributed among the Lithuanian users; the other part is transported to Scandinavia or Russia.

Smuggling of ATS substances to Belarus and Russia. This criminal activity is determined by the geographical situation and historic connections among Lithuania, Russia and Belarus.

Smuggling of cocaine from South America and Caribbean Sea region to Europe (including Lithuania). In 2006, the first case of citizens of the Republic of Lithuania smuggling cocaine from/ via Africa was registered. Three citizens of the Republic of Lithuania were detained, who flew back to European airports from the capital of Guinea - Conakry. The persons returning from Guinea were transporting unusually large shipments of cocaine: 10 kg, 8 kg and 3 kg. Smaller amounts of cocaine are transported from Latin America by couriers, who hide cocaine in their stomachs. During the last two years

more Lithuanian citizens who transport cocaine in their stomachs are detained; in 6 out of 8 cases (when cocaine was transported by plane) drugs were transported in stomach. Intelligence information suggests that part of the cocaine couriers detained were hired in Lithuania. "Employers" of the persons detained were not known though it is possible to suspect that those could be foreign citizens or the citizens of the Republic of Lithuania residing abroad (that is confirmed by detentions of citizens of the Republic of Lithuania who were transporting cocaine to the United Kingdom from other West European countries).

In 2006, cocaine tea sent by mail from Peru was seized in Lithuania for the first time. In Peru it is a legal product, nevertheless, according to our laws that is drug smuggling. Lithuanian Customs registered the first case when cocaine was transported to Lithuania in liquid form, i.e. in a wine bottle. The liquid contained 240,411 grams of cocaine (33 percent). Such mode of cocaine transportation is not new in Europe (Holland) and South America. In accordance with the possessed data the above mentioned "wine bottles" are prepared before the latter arrive to Europe.

Smuggling of various narcotic substances to Iceland, Germany. Since 2003, information is received concerning possible amphetamine smuggling into Iceland organized by citizens of the Republic of Lithuania. Within three years 9 persons were detained, who were related to drug smuggling into this country. In 2006, in Iceland 4 detentions of citizens of the Republic of Lithuania took place. An interesting fact is that amphetamine is often transported to Iceland in a liquid form, i.e. one more chemical reaction is necessary before manufacturing a product suitable to use. Such pattern shows that the smugglers have necessary facilities to accomplish amphetamine production in Iceland, moreover, it is aimed to cause less suspicion by inspecting officers. Previously criminal activities by citizens of the Republic of Lithuania related to illegal circulation of drugs were very active in Germany, however, during the last few year such information was received more rarely.

10.2. Drug seizures

In 2006, some changes were reported on the illicit use and trafficking market of drugs and psychotropic substances. Table 10-3 provides comparison of seized drugs and psychotropic substances in 2005 and 2006. In most cases a quantity of seized substances became bigger and it is evidenced by the quantity of a substance per detention (the quantity of a seized substance is divided by the number of detentions). One detention in 2006 included 36 g of heroin and 20 g in 2005, 223 g and 58 g of cocaine, 239 g and 74 g of amphetamine, 152 g and 37 g of methamphetamine, 480 and 212 tablets of ecstasy respectfully (Table 10-2).

Table 10-2. Comparison of amounts of drugs and psychotropic substances seized in Lithuania in 2005-2006

Drug name	2005	2006	ncrease / decrease
Poppies and their parts	167 kg	51 kg	↓
Extract and concentrate of poppies and their parts	184 litres 100 g	48 litres 104 g	↓
Marihuana	104 kg 961 kg (stock)	72 kg 55 tones (stock)	↑
Hashish	68 kg	106 kg	↑
Heroin	1, 95 kg	4,8 kg	↑
Cocaine	0,7 kg	3 kg	↑
Amphetamine	8,3 kg+2 580 tab	35 kg + 1870 tab	↑
Methamphetamine	3,5 kg	22 kg + 235 tab	↑
Ecstasy	18 483 tab + 75 g	~58 509 tab	↑
BMK	2 824 ml	3 677 ml	↑

10.3. Price/Purity

Prices of narcotic and psychotropic substances in recent years in Lithuania decreased, some of them about 3 times (Table 10-3).

Table 10-3. Comparison of Prices of narcotic and psychotropic substances in 2000 and 2006

Name of the substance	Highest and lowest street price (euro)	
	2000	2006
Marihuana (1 g)	11,6-17,4	5,8-12,7
Hashish (1 g)	8,7-17,4	4,3-7,2
Methamphetamine (1 g)	-	11,6-13,6
Amphetamine (1 tab.)	8,7-11,6	1,7-8,7
Amphetamine (1 g)	17,4-34,8	1,7-11,6
Ecstasy (1 tab.)	7,2-14,5	2,3-4,3
Heroin (1 g)	43,4-57,9	23,2-52,1
Cocaine (1g)	57,9-101,4	46,3-72,4

Heroin and poppies

In 2006, the purity of heroin seized ranged from 4 percent to 88.7 percent in powder and from 0.2 percent to 16 percent in liquid; average concentration of heroin amounted to 34 percent. In 2005, the heroin average purity was 52 percent, in 2004 – 36 percent, but heroin sold on the street was noticed as having high purity, last year it remained the same: heroin sold in the street had the purity amounting to even 76 percent. Better quality products enter the street market and it determines their increasing demand among users. Even though heroin sold in the street has high purity, the price remains stable.

The price of heroin doses in the street was 11 euros per dose (in 2005 – 11,6 euros) or 46,4 euros/gram (in 2005 – 34,8 euros). The average price of a bigger amount exceeding 50 g was 25 euros/gram compared to 23,2 euros/gram in 2004. Occurrence of high concentration heroin in the street trade and failure of prices to rise may increase the number of users.

Cocaine

Cocaine is not a very marketable drug in Lithuania; this fact is determined by its high price. Cocaine is not sold in the street, it is most often used in private parties, while lower income people use amphetamine instead of cocaine which has a similar effect. Cocaine is imported into Lithuania in small quantities, i.e. up to few kilograms. In 2006, the average purity level of cocaine confiscated in Lithuania was 46 percent (min. 10 percent, max. 88 percent, i.e. 13 percent higher compared to 2005 (33 percent). The average street price continued stable – about 57 euros/gram.

Amphetamine, Methamphetamine, Ecstasy

In 2006 the purity of Amphetamine seized ranged from 0,3 percent to 68 percent in powder and from 0.18 percent to 21 percent in tablets; average concentration of Amphetamine amounted to 24 percent in powder and 7,4 percent in tablets. The average street price continued stable – about 8,4 euros/gram or 3,2 euros/tablet. The average purity of methamphetamine powder was 31percent (min. 1 percent - max. 68 percent), its price – 11,58 euros/gram. The average purity of ecstasy was 25percent (min. 0.17 percent - max. 42 percent), its price – 3.48 euros/tablet.

PART B - SELECTED ISSUES

11. Public expenditures

No information is available. Lithuania did not make calculations on country public expenditures in 2007.

12. Vulnerable groups of young people

Information source: the Centre of Special Pedagogics and Psychology

Children not attending school and truants

For the formation of the drug prevention policy and aiming at efficient implementation of drug prevention measures it is important to evaluate target groups of drug prevention, risk factors increasing opportunities for the group to start using psychoactive substances, also preventive factors facilitating mitigation of the impact of the risk factors both on an individual or the group.

For strengthening of the impact of preventive factors and reducing the impact of risk factors on an individual, a school plays an important role in the socialisation process of a child, i.e. the school conveys social values, social norms and regulations to a child, develops social skills of a child, teaches healthy lifestyle, positive behaviour, etc.

As evidenced by scientific research in foreign countries and Lithuania, schoolchildren having learning disorders, adapting to an educational system with difficulties and children who stopped attending school face threats to fall into an at-risk group facing an opportunity to start experimenting or using psychoactive substances.

The data of the survey of prevalence of psychoactive substance use in children foster homes of local governments and the counties 2006 (hereinafter – VGN 06 Survey) and the survey of use of alcohol and other drugs in schools 2003 (hereinafter – ESPAD 03 Survey) evidenced direct relation between the use of psychoactive substances and non-attending school. VGN 06 and ESPAD 03 Surveys showed statistically significant relations between non-attending school in the last 30 days and smoking (VGN 06 Spearman's $\rho=0,318$, $p<0,001$, ESPAD 03 Spearman's $\rho=0,37$), alcohol use (VGN 06 Spearman's $\rho=0,308$, $p<0,001$, ESPAD 03 Spearman's $\rho=0,29$) and marijuana or hashish (VGN 06 Spearman's $\rho=0,271$, $p<0,001$, ESPAD 03 Spearman's $\rho=0,22$) used at least once in a lifetime. It means that teenagers with more frequent non-attendances within the last 30 days used these psychoactive substances more often.

According to data of the Ministry of Education and Science (hereinafter – Ministry)⁵ the number of children under 16 who do not attend school increases (in 2005 the total number of children under 16 who do not attend school was 631; in 2004 – 505). In 2005, the biggest share of non-attendants (47 percent) were schoolchildren of forms 6, 7 and 8 who are not able yet to have critical thinking, to resist a negative influence by their peers, to evaluate threats of psychoactive substances, to constructively solve encountered problems. Thus, in this educational stage a particular attention and efforts have to contribute to development of social skills and adequate behaviour, formation of positive approaches.

However, on the national level no model has been developed to return schoolchildren to schools and how to motivate their return to the educational system, to remove the reasons for non-attendance of school. Measure 90 included in the measures for the implementation of the Program 2006–2008 of the Republic of Lithuania approved by Resolution No. 1020 of October 17, 2006, of the Government of the Republic of Lithuania, foresees drafting a program for return of schoolchildren not attending school to schools (I quarter of 2008), and the Ministry of Education and Science, the Ministry of Social Protection and Labour, the Ministry of Interior are responsible for its implementation.

Also, no data basis on schoolchildren not attending school exists which would enable to monitor a child for a longer period of time, to accumulate other useful data important when returning a child into the educational system (Decree No. ISAK-2571 of December 14, 2005, of the Minister of Education and Science of the Republic of Lithuania On Approval of Guidelines for Return of Children to Schools).

⁵ *Information source: www.smm.lt*

In March 2005, the Centre of Special Pedagogics and Psychology of the Ministry of Education and Science of the Republic of Lithuania started the implementation of the Project *Return of Dropout Schoolchildren to School* according to SPD measure 2.4 Development of Conditions for Life-Long Learning⁶. The Project activities will continue for 3 years.

The Project aims at return of dropouts into the general educational system through increasing availability, efficiency and quality of pedagogical psychological assistance, improvement of professional qualification of the pedagogical psychological services, strengthening of the methodological basis of these services.

The main activities of the Project are as follows:

1. *Development of a model for return of dropout schoolchildren into the educational system and prevention for dropping out.*

Pilot activities were carried out in six municipalities (the cities of Panevezys, Siauliai, Vilnius, the districts of Ukmerge, Pasvalys and Akmene) to survey reasons of non- attending schools and to survey the network of institutions providing assistance to children.

Draft models for return of dropout schoolchildren into the educational system and prevention for dropping out were developed for schools in the districts of Ukmerge, Pasvalys, Akmene and the cities of Panevezys, Siauliai, Vilnius.

A software for the data basis on non-attending schoolchildren is under development (a work group was established, a profile of the information in the data basis is under preparation) which will be tested in the municipalities with the pilot activities.

In May-June 2006, groups of after-school activities for non-attending schoolchildren and schoolchildren attending school irregularly started to operate. The above groups were facilitated with furniture, educational tools, teachers and special pedagogues (one position in a group) were employed. In 2006, the above groups were attended in the II quarter by 94 schoolchildren, the III quarter - by 111, the IV quarter – by 138; in the I quarter 2007 - 130 schoolchildren. In 2005-2006, 368 socially supported children were provided with clothes and footwear, text books of foreign languages and exercise books.

In December 2005 – February 2006, educational groups for children with special educational needs started to operate. The above groups are equipped with furniture, software and computers, special pedagogues (one position in a group) were employed. In 2006, the above groups were attended in the I quarter by 32 children, II quarter – by 93, III quarter – by 92, IV quarter – by 98; in the I quarter 2007 - 100 children.

2. Increasing availability, efficiency and quality of pedagogical psychological assistance, improvement of professional qualification of the pedagogical psychological services, strengthening of the methodological basis of these services.

Aiming at improvement of pedagogical psychological services and professional qualification of psychologists in schools and increasing availability and efficiency of psychological assistance trainings and workshops for the above specialists are organised. In different cities of Lithuania 125 workshops and 6 conferences were organised, 280 specialists of pedagogical psychological services, 1566 social pedagogues, special pedagogues, psychologists, teachers of schools, 11 police officers, 51 representatives of municipalities raised their qualification.

The team of specialists (special pedagogue, psychologist, speech therapist and team leader) provide counselling to specialists of the newly established pedagogical psychological services. Counselling was provided to 25 specialists of the newly established pedagogical psychological services.

Methodological recommendation for teachers and specialists of pedagogical psychological services concerning specifics of education of schoolchildren with special needs and cooperation in educating such schoolchildren.

As a separate risk factor encouraging children not to attend school may be considered low-income families. Aiming at reduction of this risk factor the Ministry of Social Protection and Labour implements a project for social assistance to schoolchildren in general schools targeting to provide support to families growing children of school age and to seek that children growing in low-income families were provided more favourable conditions for their education in general schools.

The above program provides free breakfast, lunch and food during summer vacations to schoolchildren from low-income families. In 2006, the average monthly number of schoolchildren who were provided with free lunch was ca. 99 thousand or 19 percent of all schoolchildren in general schools

⁶ Informacijos šaltinis: www.sppc.lt/index.php?191675597

(vs. 22 planned), free breakfast – ca. 39 thousand or 7 percent of all schoolchildren in general schools (vs. 4 planned). The average daily allocation per schoolchild accounted as follows: for lunch - 2,9 Litas, for breakfast – 1,17 Litas. In 2006, during summer vocation free meals were provided to 19 thousand schoolchildren in summer day camps organised by general schools, that accounted for 4 percent of all schoolchildren in general schools. The average daily allocation for meals per schoolchild accounted for 6,5 Litas in summer day camps.

Another important measure of the Program is providing schoolchildren from low-income families with necessary school materials. In 2006, support was received by ca. 79 thousand pf schoolchildren or 15 percent of all schoolchildren in general schools (vs. 10 planned). The average allocation per schoolchild accounted for 104 Litas. The support was provided in the form of a cheque for acquisition of school materials in a specified trade chain; or single allowances to pay for school materials chosen by schoolchildren. Schoolchildren were provided with text books, exercise books, notebooks, drawing-blocks, writing and drawing materials, dictionaries, atlases, different paper, slipcovers, schoolbags, sports clothes and shoes, and other clothes. Some municipalities provided support after municipal social workers together with form masters visited each poor family and collected information on the needs for necessary school materials for a child.

13. Drug-related research in Europe

1. Research structures

Lithuania's national policy on drug control and prevention of drug addiction is established in the National Strategy on Drug Addiction Prevention and Control 2004–2008 adopted by the Resolution of the Government of the Republic of Lithuania and in the National Program on Drug Control and Prevention of Drug Addiction 2004–2008 adopted by the Parliament of the Republic of Lithuania. One of these program priority directions in drug control and drug addiction prevention is scientific research and development of the information system by applying more widely state-of-the-art, scientifically grounded and efficient early diagnostics, treatment and rehabilitation methodologies and educational programmes to persons using narcotic drugs and psychotropic substances. National Program on Drug Control and Prevention of Drug Addiction 2004–2008 says, that "Drug addiction prevention may be maximally efficient, provided that measures are based on scientific research, and they are implemented by specialists who have the necessary qualifications. Scientific activities, training of specialists and development of the information system in the field of drug addiction prevention are carried out in the following directions:

1. by conducting scientific research which helps to determine the efficiency and application possibilities of drug addiction prevention and drug control measures;
2. by implementing scientifically grounded risk assessment methodologies applied to persons using narcotic drugs and psychotropic substances, by developing scientific research on reasons leading to drug addiction;
3. by analyzing reasons for dependence in children and young people using narcotic drugs and psychotropic substances, suitability of diagnosing, treatment and rehabilitation, reasons for the spread and use of narcotic drugs and psychotropic substances;
4. by ensuring the collection, storing and analysis of statistical, documentary and technical information so that competent institutions would have reliable data on the general situation of the spread of drugs and drug addiction and could rely on them when making decisions or implementing measures;
5. by ensuring that necessary information on the spread of drug addiction and its prevention would be provided to the public, competent Lithuanian and foreign institutions, and international organizations;
6. by developing promotion of professional skills in the field of drug addiction prevention by implementing the efficient preparation, training and qualification enhancement system for specialists working within the field of drug addiction prevention and drug control;
7. by ensuring the implementation of modern measures and methods in crime laboratories examining narcotic drugs and psychotropic substances.

2. Main recent studies and publications

1. D. Reingardienė. Ecstasy toxicity. – Medicina, Kaunas, 2006; Nr. 42

Summary: The substance, 3,4-methylenedioxymethamphetamine (MDMA) or ecstasy, is an amphetamine derivate. A mistaken belief that it is a safe drug of low toxicity and a long duration of action

has led to its widespread popularity among teenagers and young adults in recent years. Unfortunately, ecstasy use has increased to epidemic proportions. In this review article pharmacokinetics and pathophysiology of MDMA, general medical adverse effects, cardiovascular effects, serotonin syndrome, hyponatremia, neurologic effects, hepatotoxicity, and long-term neuropsychiatric effects, clinical features of toxicity, prehospital and emergency department care problems, and mortality/morbidity, prophylactic advices are discussed.

2. I. Čaplinskienė, S. Čaplinskas, A. Griškevičius. Drug use and HIV in prisons. – *Medicina*, Kaunas, 2003; No. 8, P. 797-803.

Summary. Number of drug using people in Lithuanian prisons has been growing every year: in the beginning of 2001, 1010 people in total were on a record of dispensary care, which made 8.8% of all imprisoned persons at that time. The same percent has increased in the beginning of 2002 reaching 12.25%, and growing up to 13.3% in the beginning of 2003. Drug availability and unsafe use of illegal drugs, especially sharing of needles and syringes in one of the fourteen country's penal establishments – Alytus strict regime correctional facility – resulted in a rapid HIV outbreak in spring 2002. Three hundred prisoners infected with HIV were identified during the voluntary testing. Though majority of prisoners are quite well informed about HIV, their knowledge does not alter the risky behavior. The well-informed on HIV prisoners, nevertheless, use drugs despite the risk of HIV infection. Furthermore, shortage in treatment of drug use, in rehabilitation and occupation of prisoners provide benevolent conditions for rapid spread of HIV and other blood-born infections in the Lithuanian penitentiaries. Many prisoners are not able to reintegrate into society after their release because of broken social relationships, lack of social services in the country, therefore they do often relapse into a drug use, and endanger not only their close people but also society in whole. HIV and virus hepatitis might be transmitted from them to a general population by a variety of transmission modes.

3. D. Reingardienė, J. Vilčinskaitė. Opioid overdose. – *Medicina*, Kaunas, 2002; No. 9, P. 948-955.

Summary: The dangers of opioid overdose have been recognized for as long as the use of opium itself. When used correctly for medical purposes, opioids are remarkably safe and effective agents. However, excessive dosing, whether with therapeutic, suicidal, or euphoric intent, may results in significant toxicity. In a number of countries the use of heroin and other opioids in nonmedical contexts is associated with an increasing rate of overdose and often of fatal opioid overdose. This review article discusses opioid-receptor pharmacology, which is necessary for understanding of the signs and symptoms of opioid ingestion and management principles, clinical and toxic effects mediated with the opioids, the diagnosis and management guidelines in opioid intoxication, a clinical prediction rule to identify patients who can be safely discharge from hospital, the problems of the significant morbidity and mortality associated with opioid overdose.

4. Eglė Latauskienė. "Conception of the methodics of pre-trial investigation of crimes related to narcotic and psychotropic substances: the theoretic model and criminalistic opportunities" [not published in public journal].

The object of the research – application of the possibilities of criminalistics, criminal acts related to narcotic or psychotropic substances in pre-trial investigation: theoretical and practical problems, perspectives for improvement of investigation. Hypothesis. The level of maturity of criminalistic theory and the trends of development, the reform of pre-trial investigation of crimes, new technologies of investigation expand the contemporary fields of application of criminalistic possibilities that ensure successful disclosure of the crimes related to illicit circulation of narcotic or psychotropic substances and have direct impact to the development of the new criminalistic theory – Narcotic Research. The Methodology of the Research. Preparing the scientific work the following methods of research were applied in a complex way: historical, logical-analytic, comparative, systematic-structural analysis and observation, questionnaires, statistical, descriptive and that of modelling. The first part „The criminalistic characteristics of crimes related to illicit circulation narcotic or psychotropic substances in Lithuania“ discloses the criminalistically valuable contemporary information of such crimes the whole of which makes up the contents of criminalistic characteristics. The second part „Theoretical conception of criminalistic methodology of the investigation of crimes related to narcotic or psychotropic substances“ examines criminalistic issues of pre-trial investigation of organization and conduction of crimes related to

circulation of narcotic or psychotropic substances, it is particularly devoted to criminalistic tactical traits of investigation of the specific crimes related to narcotic substances.

Conclusions of the Thesis. The criminalistic methodology of investigation of crimes related to narcotic or psychotropic substances is a separate system of the general criminalistic methodology which investigates the consistent patterns of criminalistic information that is related to narcotic or psychotropic substances and creates effective and rational technologies for its detection, collection, keeping, handover and use and criminalistic tactical recommendations: It is foreseen that criminalistic teaching on narcotic or psychotropic substances (Narcotic Research) is developing – an institute of the criminalistic science which examines criminalistic patterns of public relations that emerge upon illicit circulation of narcotic and psychotropic substances and their influence on the mechanisms of criminal acts, and strives for developing and improving of efficient methodological recommendations for investigation of criminal acts.

3. Collection and dissemination of research results

Drug Control Department under the Government of the Republic of Lithuania, nominated to act as REITOX National Focal Point since 2004. Drug Control Department functions related with data collection and scientific studies are: coordinate exchange of information on an implementation of the measures of drug prevention and drug control among interested state and municipal institutions and organizations; organize monitoring of consumption of narcotic and psychotropic substances, collect and analyze information on an implementation of the measures of drug prevention and drug control, its trends in the country and abroad, the consequences of consumption of narcotic and psychotropic substances and provide it to interested institutions, develop methodical recommendations; cooperate with public organizations, mass media, scientific and training as well as other institutions. Drug Control Department each year collects information from various government and NGO, universities, institutes about newly implemented projects and studies in drug field. Drug Control Department also implements various projects and researches, mainly public groups surveys (General Population survey in 2004, Psychoactive substance use among inmates in foster homes in 2006, Problem drug users estimation study, 2007) also participates implementing various European and international studies such as ESPAD. Information usually is published in the annual national report and Internet.

PART C - BIBLIOGRAPHY, ANNEXES, STANDARD FOR BIBLIOGRAPHIC REFERENCES

14. Bibliography

1. Annual Report of the Drug Control Department under the Government of the Republic of Lithuania, 2006; prepared by Drug Control Department under the Government of the Republic of Lithuania - Vilnius, 2006.- P. 190.
2. Annual Report of the Drug Control Department under the Government of the Republic of Lithuania, 2005; prepared by Drug Control Department under the Government of the Republic of Lithuania - Vilnius, 2005.- P. 207.-ISSN 1822-0576
3. Annual Report of the Drug Control Department under the Government of the Republic of Lithuania, 2004; prepared by Drug Control Department under the Government of the Republic of Lithuania - Vilnius, 2004.- P. 123.-ISSN 1822-0576
4. Bertasiūte, B., Klaipeda Public Health Centre, Klaipeda, 2006 (data unpublished)
5. Cikanienė, R., Anonymous Counselling Centre for Social Diseases "Pasitikejimas" of the Alytus Committee of the Lithuanian Red Cross Society, Alytus, 2006 (data unpublished)
6. Gelzinyte, S., Klaipeda Centre for Addictive Disorders, Klaipeda, 2006 (unpublished data)
7. Kulsienė, J., Lithuanian AIDS Centre, Vilnius, 2006 (unpublished data)
8. Subata, E., Malinauskaite, A., Kriksciukaityte, R., Vilnius Centre for Addictive Disorders, Vilnius, 2006 (unpublished data)

15. Annexes

List of Standard Tables and Structured Questionnaires used in the text

List of Graphs used in the text

- Figure 2-1. Distribution of cannabis use prevalence, by age (percent);
- Figure 2-2. Distribution of ecstasy use prevalence, by age (percent);
- Figure 2-3. Distribution of amphetamine use prevalence, by age (percent);
- Figure 2-4. Distribution of cocaine use prevalence, by age (percent);
- Figure 2-5. Lifetime Prevalence of Any Drug Use by Residence (percent);
- Figure 2-6. Distribution of respondents by length of drug use of at least one drug and at least one drug excluding marijuana or hashish ;
- Figure 2-7. Distribution of respondents who used the most distributed drugs, by categories of use length (percent) (VGN 06, ESPAD 03 and PMVP 04 survey data);
- Figure 2-8. Distribution of respondents by the number of cases when at least one drug was used (ESPAD 03 and VGN 06 survey data);
- Figure 2-9. The share (percentage) of tested soldiers and soldiers with positive tests of all conscripts in 2004, 2005 and 2006
- Figure 4-1. Dynamics of all treatments per 100 thousand of population of drug dependence and the number of all individuals registered due to mental or behavioural disorders caused by drugs and psychotropic substances in 1998-2006;
- Figure 4-2. Distribution of all registered individuals for drug dependence treatment, by gender and age, 2006;
- Figure 4-3. Level of new drug addiction rates per 100 thousand population and the number of new registered cases due to mental or behavioural disorders caused by narcotic and psychotropic substance use (2000-2006);
- Figure 4-4. Distribution of registered new cases for the first treatment due to mental or behavioural disorders caused by drugs and psychotropic substances, by gender and age, 2006;
- Figure 8-1. Problems of persons dependent on psychoactive substances, 2006;
- Figure 8-2. Number of imprisoned persons dependent on drugs and psychotropic substances and their share (percent) of all imprisoned persons, 2001-2006;
- Figure 8-3. Trends of drug using among drug users in prisons, 1999 - 2006 (percent);
- Figure 9-1. Services provided persons dependent on psychoactive substances, 2006;

- Figure 10-1. Ratio of number of citizens of the Republic of Lithuania arrested and arrests abroad, 1998-2006.

PART D - STANDARD TABLES AND STRUCTURED QUESTIONNAIRES (2007)

Standard Table 05 Acute/direct related deaths

Standard Table 06 Evolution of acute/direct related deaths

Standard Table 09 Prevalence of hepatitis B/C and HIV infection among injecting drug users

Standard Table 10 Syringe availability

Standard Table 11 Arrests/Reports for drug law offences

Standard Table 13 Number and quantity of seizures of illicit drugs

Standard Table 14 Purity at street level of illicit drugs

Standard Table 15 Composition of tablets sold as illicit drugs

Standard Table 16 Price in Euros at street level of illicit drugs

Standard Table 18 Overall mortality and causes of deaths among drug users

Standard Table 24 Drug related treatment availability

TDI data

Structured Questionnaire 22/25 Universal prevention

Structured Questionnaire 26 Selective and indicated prevention