



2007 Drug Situation in the Czech Republic

Annual Report Summary

Contents

- 1 INSTITUTIONAL FRAMEWORK OF DRUG POLICY**
- 2 DRUG USE AND ITS CONSEQUENCES**
 - 2/1** Drug Use in the General Population
 - 2/2** Problem Drug Use
 - 2/3** Characteristics of Drug Users in Treatment
 - 2/4** Drug-Related Deaths
 - 2/5** Drug-Related Infections
- 3 PREVENTION, TREATMENT, AND HARM REDUCTION**
 - 3/1** Primary Prevention
 - 3/2** Treatment and Aftercare
 - 3/3** Harm Reduction
- 4 LAW ENFORCEMENT DATA**
 - 4/1** Drug-Related Crime
 - 4/2** Drug Seizures, Prices, and Purity

NOVEMBER - DECEMBER 2008

Main Trends in 2007

Drug use among the general population has stabilised; the growing trend in cannabis consumption has stopped and the level of ecstasy use has been declining.

There has been an increase in the proportion of people using pervitin (methamphetamine) and, in particular, cocaine in the nightlife setting; the use of ecstasy has decreased slightly.

The number of problem opiates and pervitin (methamphetamine) users has remained at a level of approximately 30-31 thousand in the long term. The incidence of HIV among drug users has risen, while the prevalence of HIV and HCV remains at a relatively low level.

The relatively low number of fatal overdoses on drugs remains unchanged.

The proportion of problem drug users who maintain contact with low-threshold programmes has increased to approximately 70%.

Low-threshold programmes recorded a year-on-year increase in contacts, and there has been a continuous rise in the number of needles and syringes distributed in exchange programmes.

The average age of drug users engaged with drug services and in treatment has been increasing in the long term.

The number of substitution programmes, as well as clients receiving substitution treatment, has risen.

The number of tests for HIV and viral hepatitis performed on drug users continues to decline.

No major changes have been identified as far as drug crime, prices, and purity are concerned.



INSTITUTIONAL FRAMEWORK OF DRUG POLICY

The year 2007 was the third year of the implementation of the National Drug Policy Strategy for the Period 2005 to 2009. The Action Plan for the Implementation of the National Drug Policy Strategy for the Period 2007 to 2009 was adopted, and in April and June 2008 the Government Council for Drug Policy Coordination (GCDPC) made an interim assessment of the fulfilment of the tasks set out in the Action Plan and concluded that their implementation was generally successful. Regional

drug policy strategies, which have been drawn up in all regions except the Pilsen region, are derived from the national strategy. Having changed its statute and been enlarged, in addition to the ministers, by other members in July 2007, the GCDPC currently has 13 members.

Public expenditure on drug policy reached a level of CZK 557.6 million (€ 20,084 thousand) in 2007. This amount included CZK 367.0 million (€ 13,217 thousand) provided from the state

MAP 1: Drug policy expenditures from state and local budgets in regions of the Czech Republic in 2007 (€ per 100,000 inhabitants)

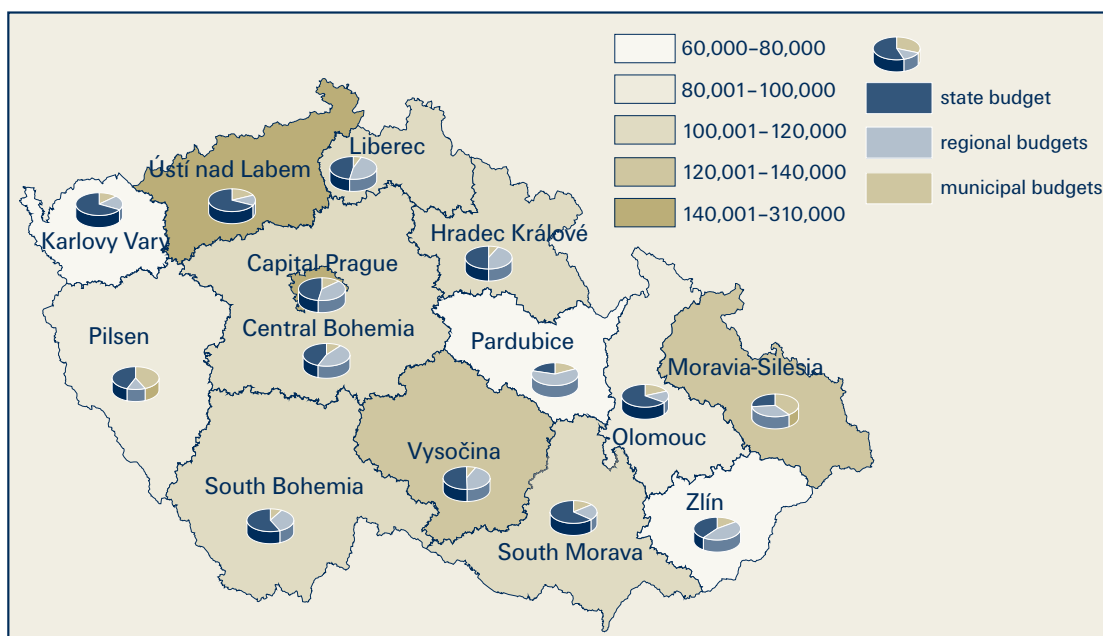


TABLE 1: Drug policy expenditures from the state and local budgets in 2002–2007 (€ thousand)

| Department | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 |
|---------------------------------------|--------------|---------------|---------------|---------------|---------------|---------------|
| GCDPC | 3,310 | 3,741 | 3,623 | 3,806 | 3,919 | 3,762 |
| Ministry of Education | 342 | 336 | 364 | 338 | 389 | 452 |
| Ministry of Defence | 143 | 169 | 125 | 143 | 176 | 129 |
| Ministry of Labour and Social Affairs | 1,266 | 1,595 | 1,521 | 1,659 | 1,790 | 2,054 |
| Ministry of Health | 927 | 794 | 953 | 1,205 | 648 | 801 |
| Ministry of Justice | 347 | 507 | 491 | 1,323 | 1,486 | 454 |
| General Customs Headquarters | 990 | 813 | 335 | 522 | 846 | 963 |
| National Drug Headquarters* | n.a. | 3,466 | 3,115 | 3,421 | 3,836 | 4,601 |
| Total State Budget | 7,326 | 11,421 | 10,527 | 12,417 | 13,090 | 13,217 |
| Total Regional Budget | 1,057 | 1,732 | 2,939 | 3,615 | 3,419 | 4,624 |
| Total Municipal Budget | n.a. | n.a. | 2,266 | 1,823 | 1,734 | 2,243 |
| Total | 8,383 | 13,153 | 15,733 | 17,854 | 18,243 | 20,084 |

NB: * Expenditures of the National Drug Headquarters in 2003-2005 only include so-called current expenditures.

budget, and the regions and municipalities contributed the amounts of CZK 128.4 million (€ 4,624 thousand) and 62.3 million (€ 2,243 thousand) respectively. In comparison to 2006, total expenses increased on all three levels; on the central level, there was a decrease in expenditure on the part of the Ministry of Defence and, in particular, the GCDPC and the Ministry of Justice. On the regional level, the expenditures declined in the Ústí nad Labem and Liberec regions especially, as well as in the Pilsen Region. Out of a total of CZK 557.6 million (€ 20,084 thousand), CZK 160.8 million (€ 5,792 thousand) (28.8%) was spent on law enforcement, CZK 152.6 million (€ 5,496 thousand) (27.4%) on treatment, CZK 141.0 million (€ 5,078 thousand) (25.3%) on harm reduction, CZK 48.7 million (€ 1,753 thousand) (8.7%) on primary prevention, and CZK 20.5 million (€ 739 thousand) (3.7%) on aftercare. An overview of expenditures from public budgets earmarked for the implementation of drug policy programmes in regions is provided in Map 1. Drug policy expenditures from the state budget in 2002-2007 are summarised in Table 1.

The developments in drug policy expenditure on demand and supply reduction between 2002 and 2007 are summarised in Table 2.

In proportion to GDP and the total state expenses, expenditure on drug policy from the state budget has seen a relative decline since 2005. If, for example, the 2007 expenditure on demand reduction was 0.065‰ of GDP (the minimum in 2002-2005) or 0.21‰ of the state budget expenditure (the minimum

in 2002-2005), in 2007 the labelled expenditure would amount to approximately CZK 230 million (€ 8,285 thousand), i.e. approximately CZK 25 million (€ 901 thousand) more than the actual expenditure that took place.

The major general changes to the drug policy in 2007 involved the following actions:

- The Action Plan for the Implementation of the National Drug Policy Strategy for the Period 2007-2009 was adopted.
- The Government of the Czech Republic updated the Rules for Granting Financial Resources from the State Budget on Drug Policy.
- The Drug Policy Action Plan of the Prison Service of the Czech Republic for the Period 2007-2009 was developed.
- In February 2008 the Government passed the Czech National HIV/AIDS Programme for the period 2008-2012.
- The Czech Government approved the bill for a new Penal Code which was submitted to the Parliament in February 2008. First and foremost, the bill introduces changes in terms of the greater differentiation between individual types of drugs according to their health and social risks. For example, a relatively lower punishment range should apply to people who possess cannabis for personal use. The bill provides a new definition of the growing of plants containing a psychotropic substance; the cultivation of a small quantity of such plants would not be subject to criminal prosecution. The bill passed the Chamber of Deputies of the Parliament of the Czech Republic on 11 November 2008.

TABLE 2: Drug policy expenditures on demand and supply reduction provided from state and local budgets in 2002-2007 (€ thousand)

| Year | Demand reduction* | | | | Supply reduction** | Czech Republic Total |
|----------|-------------------|------------------|-------------------|--------|--------------------|----------------------|
| | State budget | Regional budgets | Municipal budgets | Total | State budget | |
| 2002*** | 5,989 | 1,057 | n.a. | 7,046 | 1,337 | 8,383 |
| 2003 | 6,635 | 1,732 | n.a. | 8,367 | 4,786 | 13,153 |
| 2004 | 6,586 | 2,939 | 2,266 | 11,792 | 3,942 | 15,733 |
| 2005 | 7,151 | 3,614 | 1,823 | 12,588 | 5,266 | 17,854 |
| 2006 | 6,922 | 3,419 | 1,734 | 12,075 | 6,167 | 18,243 |
| 2007**** | 7,425 | 4,624 | 2,243 | 14,292 | 5,792 | 20,084 |

NB: * expenditures indicated for the period 2002-2006 are those of the GCDPC, the Ministry of Health, the Ministry of Labour and Social Affairs, the Ministry of Education, and the Ministry of Defence; ** the amounts indicated for the period 2002-2006 represent the expenditures for the operation of the National Drug Headquarters, the General Customs Headquarters, and those from the budget of the Ministry of Justice; *** the expenditures of the National Drug Headquarters are not included; **** in 2007, the Ministry of Justice's expenditures were divided into those intended for demand reduction and those intended for supply reduction in order to reflect their actual purposes.

2 DRUG USE AND ITS CONSEQUENCES

2/1 Drug use in the General Population

No general population survey focusing on the scope of drug use among the adult population was conducted in 2007. According to the surveys carried out in 2002 and 2004, approximately 20% of the adult population had used an illicit drug and it is estimated that approximately 2.6% of the adult population use cannabis at least once a week. The results of these surveys indicate that the growing trends from the previous decade have stopped or even been reversed.

A significant rise in cocaine use and a slight increase in pervitin consumption have recently occurred among dance party-goers, while the prevalence of ecstasy use has shown a slight decline. Young people show a higher prevalence of experiences with illicit drugs than the adult population (approximately 35% of pupils in the final grades of basic schools and 45% of first-year secondary school students). The most commonly used illicit drugs include cannabis, hallucinogens, ecstasy, and inhalants. The ESPAD study carried out among 16-year-olds confirmed the trends shown by the 2006 HBSC survey among 15-year-olds: the dramatic increase in experiences with drug use observed since the mid-1990s has stopped; the situation has stabilised in terms of cannabis, and a decline in the prevalence of experiences with other illicit drugs, including ecstasy and hallucinogenic mushrooms, has been observed.

A decline in experiences with pervitin and opiates has been apparent since the late 1990s; experiences with cocaine remain at a minimum level; see Figure 1.

2/2 Problem Drug Use

The central estimate of the number of problem drug users grew slightly in 2007 and reached approximately 30.9 thousand (it was 30.2 thousand in 2006). This number includes approximately 20.9 thousand pervitin users and approximately 10 thousand opiate users. In comparison to the year 2006, there was a decline in the number of problem users of opiates (both heroin and Subutex®), but the number of problem users of pervitin increased. Approximately 29.5 thousand people are injecting drug users; see Table 3. The estimated numbers of problem drug users are highest in Prague (10 thousand) and the Ústí nad Labem region (4.1 thousand); at the same time, these two regions also have the highest estimated number of problem users of opiates; see Map 2.

FIGURE 1: Trends in lifetime prevalence of experiences with illicit drugs – 2007 ESPAD Survey (in %)

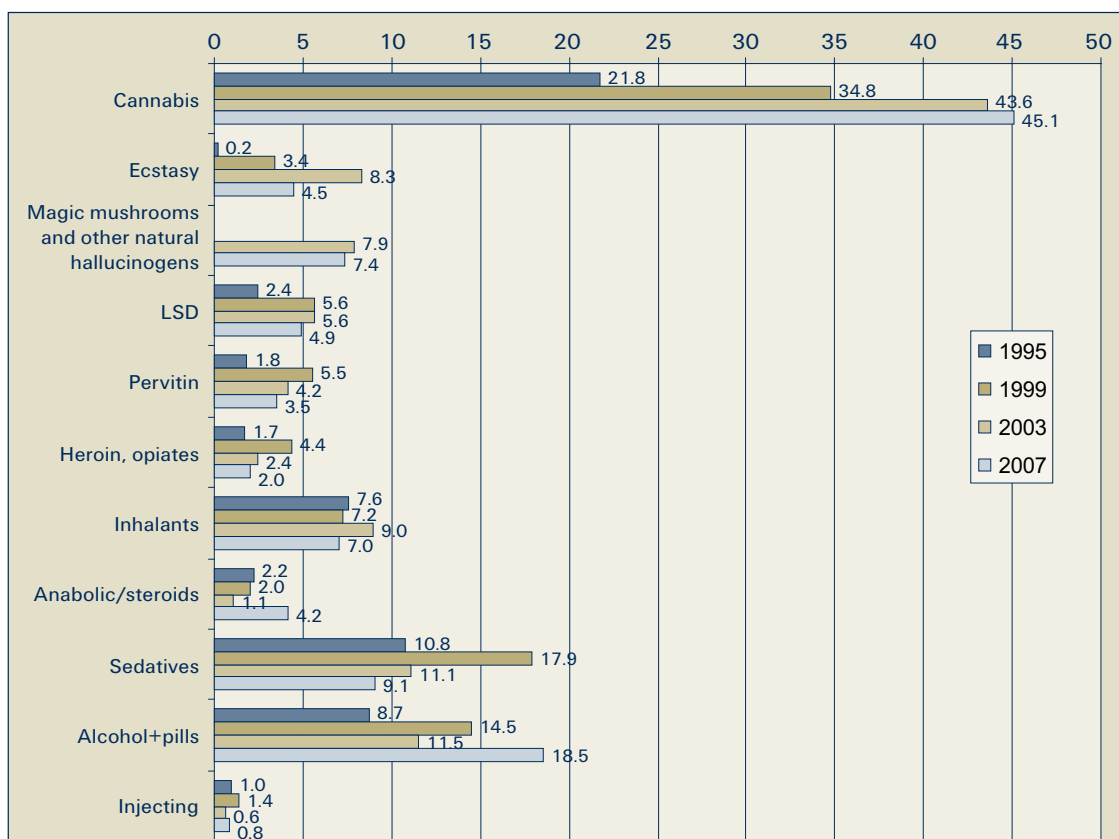
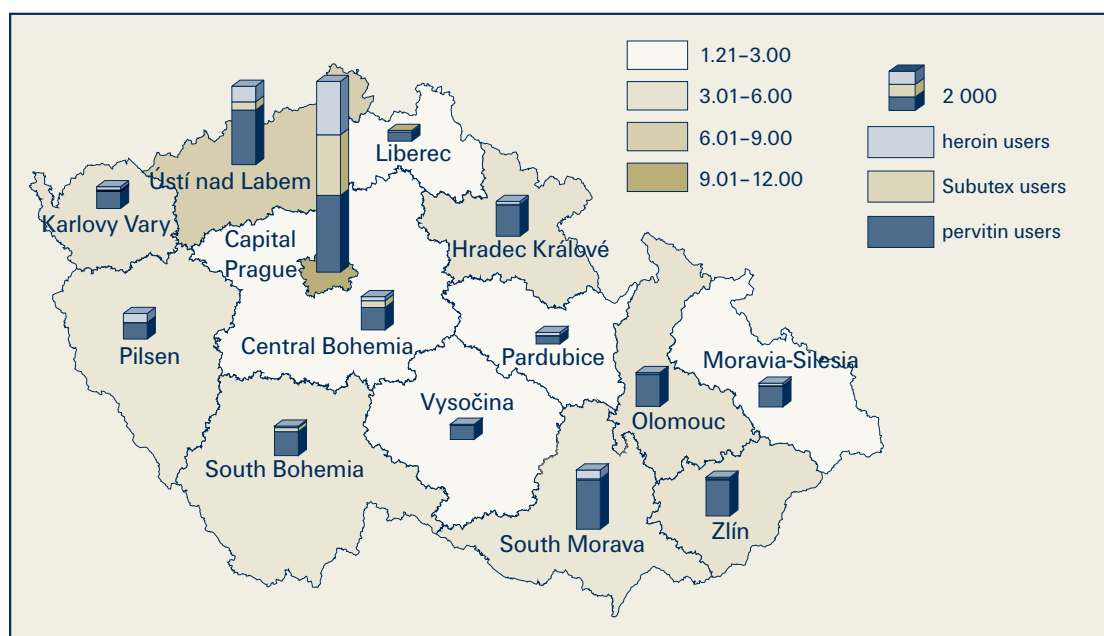


TABLE 3: Development of prevalence estimates of problem drug use carried out by means of a multiplication method using data from low-threshold programmes in 2002–2007

| Year | Total number of problem drug users | | Opiate users | | Pervitin users | | Injecting drug users | |
|------|------------------------------------|------------------------------|--------------|------------------------------|----------------|------------------------------|----------------------|------------------------------|
| | Abs. | Per 1,000 persons aged 15–64 | Abs. | Per 1,000 persons aged 15–64 | Abs. | Per 1,000 persons aged 15–64 | Abs. | Per 1,000 persons aged 15–64 |
| 2002 | 35,100 | 4.89 | 13,300 | 1.85 | 21,800 | 3.04 | 31,700 | 4.41 |
| 2003 | 29,000 | 4.02 | 10,200 | 1.41 | 18,800 | 2.61 | 27,800 | 3.86 |
| 2004 | 30,000 | 4.14 | 9,700 | 1.34 | 20,300 | 2.80 | 27,000 | 3.73 |
| 2005 | 31,800 | 4.37 | 11,300 | 1.55 | 20,500 | 2.82 | 29,800 | 4.10 |
| 2006 | 30,200 | 4.13 | 10,500 | 1.44 | 19,700 | 2.69 | 29,000 | 3.97 |
| 2007 | 30,900 | 4.20 | 10,000 | 1.36 | 20,900 | 2.84 | 29,500 | 4.01 |

MAP 2: Number of problem drug users per 1,000 inhabitants aged 15-64 and the number of problem users of opiates and pervitin in regions of the Czech Republic in 2007



Problem Drug Use

The EMCDDA defines problem drug use as injecting drug use or long duration/regular drug use of opioids/opiates, cocaine, and amphetamines (except for ecstasy – MDMA). In the Czech Republic, the estimated numbers of problem drug users include those using pervitin (methamphetamine) and opiates, i.e. heroin and buprenorphine (Subutex®).

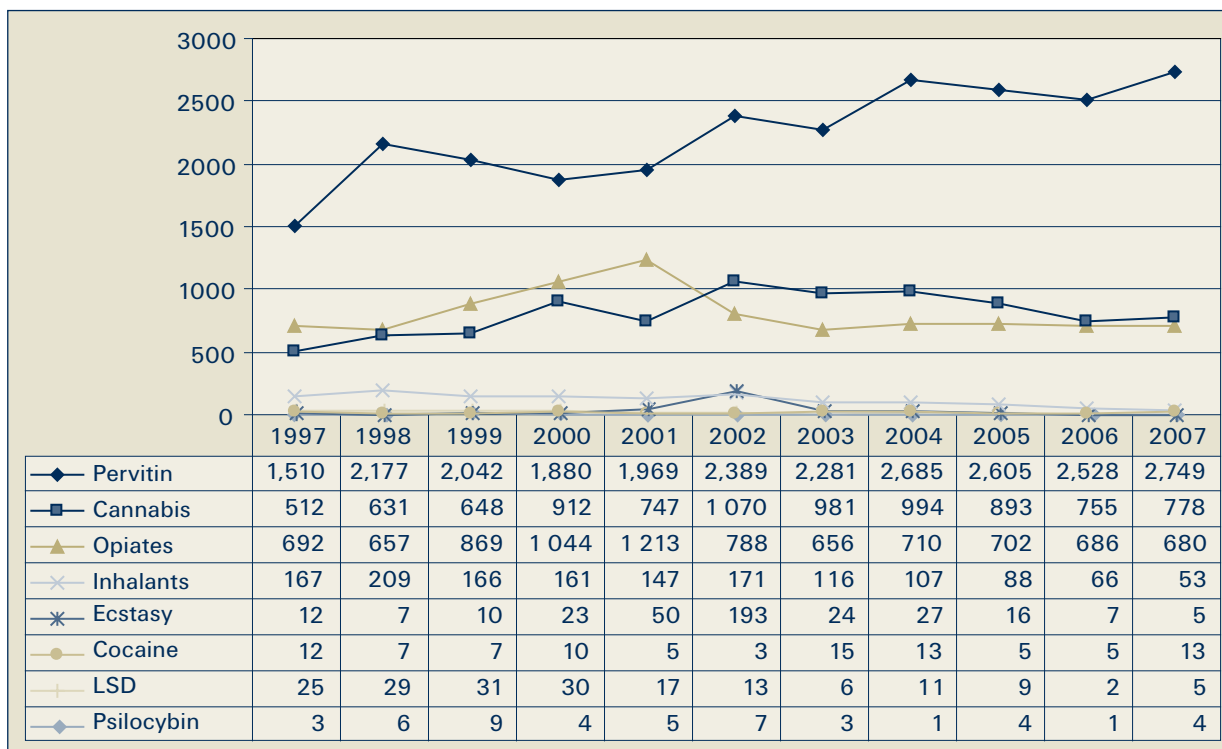
The year 2007 saw a slight increase in the central estimate of the number of problem drug users; the central estimate of the number of problem pervitin users rose slightly, while the central estimate of the number of problem users of opiates (heroin and Subutex®) showed a slight decline. Similar year-on-year trends – an increase in the case of pervitin and a decrease in that of opiates – were identified in most of the sources of data obtained from treatment and counselling facilities.

Apart from the group of problem drug users, the level of opiate use in the population is very low. However, pervitin has been used in the nightlife setting (e.g. at dance parties) in the past several years, and this trend is growing. A significant increase in cocaine use among dance party-goers has been observed recently.

2/3 Characteristics of Drug Users in Treatment

In 2007, the Public Health Service's Register of Treatment Demands received data from 228 centres (68 low-threshold, 110 outpatient, and 50 inpatient facilities). The number both of all demands and of first treatment demands grew slightly

FIGURE 2: Number of first treatment demands by drug type in 1997–2007



in 2007. In particular, there was an increase in the number of pervitin users, as well as, to a certain degree, cannabis users, while opiate users' treatment demands declined; see Figure 2. Treatment services provided by the above-mentioned facilities were sought by a total of 8,487 drug users, i.e. 1% more than in 2006. Of these, 4,346 individuals sought treatment for the first time, i.e. 2.2% more than in 2006. As in the previous years, the clients of low-threshold centres, which have traditionally been the most sought-after type of facilities, comprised more than a half of the treatment demands.

The highest relative prevalence and incidence of treatment demands were recorded in the Ústí nad Labem, Prague, and South Moravia regions. Pervitin users predominated in all regions (from 50.1% in Central Bohemia to 85% in South Bohemia) in 2007. Opiate users accounted for a significant number of demands in Prague (35.7%), Ústí nad Labem (30.8%), and Central Bohemia (29.8%); cannabis users sought treatment most frequently in the Vysočina (31.5%) and Moravia-Silesia (22.2%) regions; see Map 3.

In 2007, the total of treatment demands involved 7,137 problem drug users (84.1%) and that of first treatment demands involved 3,429 problem drug users (i.e. mainly opiate and pervitin users). Women accounted for approximately one third of (first) treatment demands; the male-to-female ratio in 2007 among all treatment demands was 2.1:1, and among first treatment demands it was 2.0:1. The proportion of males was lowest in the 15-19 age category. Intravenous application of drugs was indicated in 6,109 (72%) of all treatment demands, and in 2,753 (63%) of first treatment demands; the proportion of injecting drug users among (first) treatment demands has been stable for the past few years; see Figure 3.

MAP 3: Number of all 2007 treatment demands by drug type in regions of the Czech Republic (per 100 thousand inhabitants)

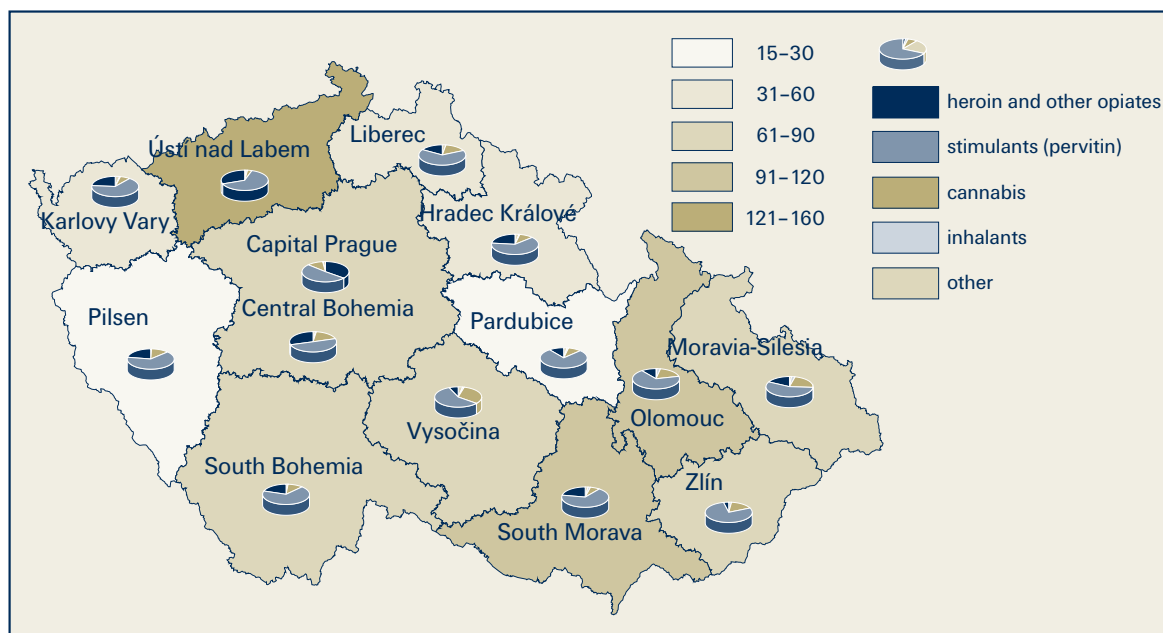
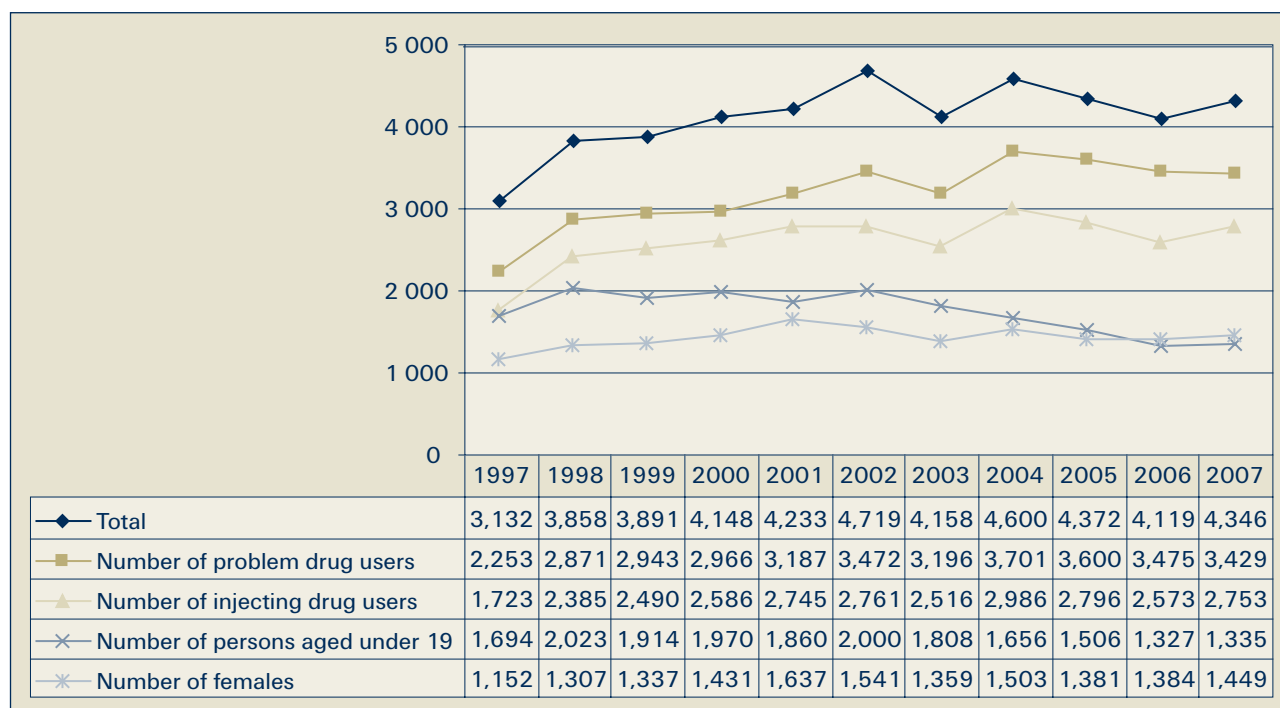


FIGURE 3: Selected characteristics of first treatment demands in 1997–2007



2/4 Drug-Related Deaths

Two hundred and thirteen deaths resulting from overdoses on illicit drugs, inhalants, and psychotropic medicaments were detected in 2007 (212 in 2006). Forty of these cases involved overdoses on illicit drugs and inhalants (37 in 2006), while psychotropic medicaments were responsible for 173 overdoses (170 in 2006); 58 cases of medication overdose were caused by benzodiazepines. A total of 14 cases of fatal overdoses on (illicit) opiates was identified (10 in 2006). Pervitin was the cause of an overdose in 11 cases (12 in 2006). Fourteen cases involved overdoses on inhalants (the same figure as in 2006), and two of the cases involved lighter gas. As in the past, no overdose with the presence of buprenorphine was identified in 2007. In relation to an overdose, MDMA was found in one case in combination with heroin and ethanol. As in the previous years, no fatal overdoses on hallucinogens and THC were reported in 2007; see Figure 4.

In addition, a total of 163 deaths with the presence of a drug, where the death was not caused by an overdose, was identified in 2007 (145 in 2006); one case involved an illness (4 in 2006), 74 involved accidents (69 in 2006), 80 involved suicides (64 in 2006), 6 were cases of manslaughter or murder (5 in 2006), and 2 deaths were due to other causes (3 in 2006). As regards illicit drugs, pervitin and THC were identified in a total of 32 (42 in 2006) and 25 (18 in 2006) cases respectively.

In 2007, 33.2% of active road users who died in traffic accidents tested positive for ethanol (drivers accounted for 20.9%). As far as the three most common non-alcohol drugs are concerned, there was an increase in the proportion of positive tests for

benzodiazepines (6.0%) and a decline in the proportion of people who tested positive for pervitin (3.9%) and THC (4.0%).

2/5 Drug-Related Infections

HIV seroprevalence among injecting drug users (IDUs) remains far below 1%. However, a total of 12 new cases among IDUs and 3 cases in the mixed high-risk category of IUDs/homo-/bisexuals were reported in 2007. Although still low in absolute terms, the number basically tripled in comparison to 2006, when 6 cases involving IDUs were registered. As of 31 December 2007, a total of 1,042 HIV-positive persons with a permanent place of residence in the Czech Republic had been identified; 53 of them were IDUs and 16 were IUDs/homo-/bisexuals. The proportion of IDUs in all the previously identified HIV-positive people in the Czech Republic was 6.6% overall; in 2007, the figure was 12.3%; see Table 4.

The number of all cases of type C viral hepatitis (HCV), including those reported for drug users, decreased, following an artificial increase in 2006, but growth was still recorded in comparison with 2005; see Figure 5. Given the shortage of rapid HCV tests which the low-threshold facilities have been experiencing since early 2006, only 24 facilities carried out HIV testing in 2007 (compared to 62 facilities in 2006); see Table 5. For the year 2007, results were available from 9 facilities in 6 regions (Central Bohemia, Pilsen, Karlovy Vary, Ústí nad Labem, Pardubice, and Vysočina). Of the total of 259 HCV tests performed, 50 (19.3%) were positive. It is difficult to assess any new trends in the new cases (HCV), as a large number of cases from the previous years were newly added to the register.

FIGURE 4: Fatal overdoses on selected drugs in 2001-2007

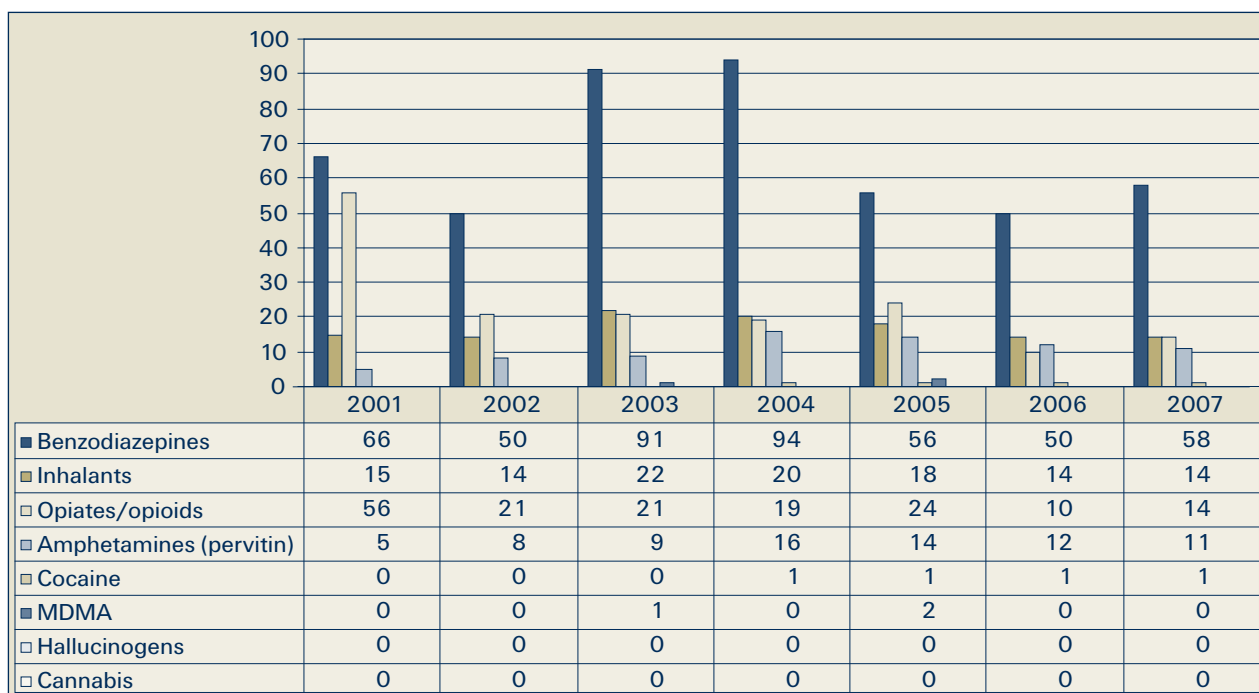
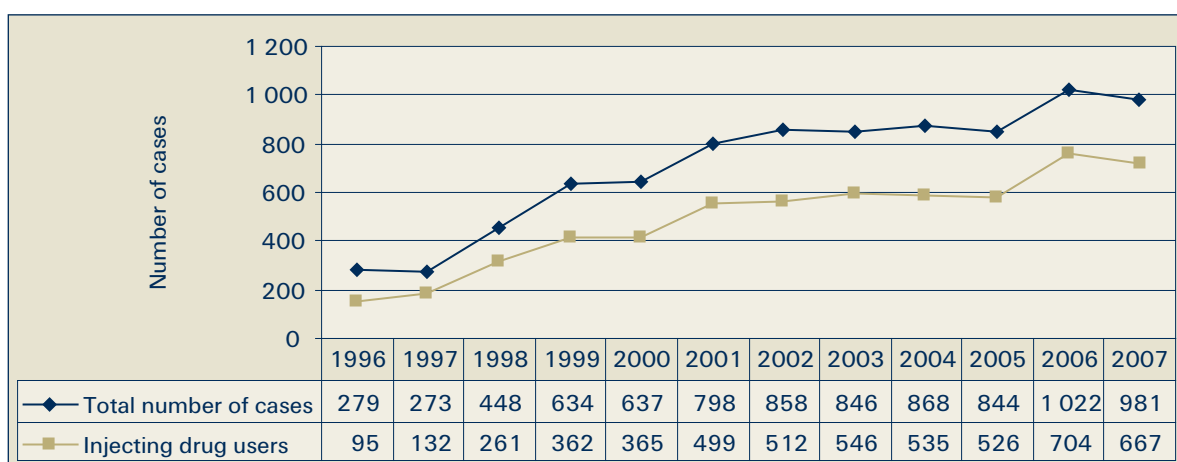


TABLE 4: HIV incidence in the Czech Republic up to 2007

| Route of transmission (risk group) | Before 2000 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | Celkem |
|------------------------------------|-------------|------|------|------|------|------|------|------|------|--------|
| Injecting drug use (IDU) | 15 | 4 | 3 | 2 | 3 | 6 | 4 | 4 | 12 | 53 |
| IDU and homo-/bisexual intercourse | 5 | 0 | 2 | 1 | 1 | 1 | 1 | 2 | 3 | 16 |
| Others | 423 | 54 | 46 | 47 | 59 | 65 | 85 | 87 | 107 | 973 |
| Total of new HIV+ | 443 | 58 | 51 | 50 | 63 | 72 | 90 | 93 | 122 | 1,042 |

FIGURE 5: Reported incidence of acute and chronic HCV among all patients and injecting drug users in the Czech Republic in 1996-2007

The number of newly reported cases of acute type B viral hepatitis (HBV) among injecting drug users increased in 2007; a total of 307 new cases of HBV was reported (the same figure as in 2006), including 103 cases identified among IDUs (in 2006, there were 87 cases among IDUs).

The number of cases of type A viral hepatitis (HAV) has increased sharply in the Czech Republic/Prague in 2008, especially among drug users. A total of 174 cases of HAV had been reported in the Czech Republic by August 17, 2008 (approximately three times the number in the same period of 2007); seventy-five of these cases (43%) were among injecting drug users. In May and June 2008, the incidence of HAV reached epidemic level; altogether, 113 diseases caused by the virus, i.e. 65% of the cases in the Czech Republic, were reported in Prague. In response to this epidemic, the vaccination of drug users against HAV was introduced in Prague in July 2008.

A negative long-term trend is the decline in the number of tests for infectious diseases (both for HIV and HCV) performed on IDUs in low-threshold settings; see Table 5.

TABLE 5: Number of tests for infections and the number of testing low-threshold facilities in 2002-2007

| Year | HIV | | HBV | | HCV | | Syphilis | |
|------|-------|----------|-------|----------|-------|----------|----------|----------|
| | Tests | Facility | Tests | Facility | Tests | Facility | Tests | Facility |
| 2002 | 1,158 | 35 | 515 | 26 | 1,202 | 33 | 176 | 2 |
| 2003 | 2,629 | 64 | 739 | 21 | 2,499 | 60 | 209 | 4 |
| 2004 | 2,178 | 58 | 932 | 25 | 2,582 | 53 | 84 | 1 |
| 2005 | 2,425 | 54 | 1,370 | 28 | 2,664 | 55 | 54 | 2 |
| 2006 | 1,253 | 46 | 693 | 56 | 1,133 | 62 | 209 | 3 |
| 2007 | 609 | 53 | 370 | 19 | 401 | 24 | 62 | 4 |

Incidence of infections among drug users from the former Soviet republics



A study focusing on HIV, HBV, and HCV testing among drug users from former Soviet republics was carried out in 2007. The study covered 59 individuals. Two drug users were found to be HIV-positive (3.5%). Forty-nine study participants (83.1%) tested positive for HCV. Active HCV infection was detected in 37 of the 56 cases (66%). Thirty-one cases out of the 58 tested positive for a past course of HBV (53.3%); 7 persons (11.9%) tested positive for a current acute or chronic HBV infection (HBs antigen present), and 5 persons (8.5%) tested positive for HBV virus replication, which is a case of a high contagiousness of the disease. The study provided evidence of the higher incidence of infections among this group of drug users and the high risk of the spread of infections among the users and the general population of the Czech Republic.

3 PREVENTION, TREATMENT, AND HARM REDUCTION

3/1 Primary Prevention

The Minimum Preventive Programme is the basic tool for primary prevention in the Czech Republic. It is implemented in all basic and secondary schools. Schools deliver this programme themselves or complement it with programmes arranged by external bodies, especially NGOs.

The selective and indicated prevention programmes focus on groups of children (and/or young people) who are expected to show a higher level of risk behaviours. In the Czech Republic,

these programmes are provided by NGOs or specialised institutions; these programmes focus especially on working with individuals and families.

The process of certification of specific primary drug prevention programmes started in 2006. The certificate of professional competence may be awarded to a single programme or a set of programmes. Thirty-eight facilities with 51 programmes had applied for certification by 10 April 2008. Thirty-three facilities and 45 programmes were certified; 5 facilities with 6 programmes failed to meet the certification requirements; see Table 6.

TABLE 6: Certified programmes of specific primary prevention by type in the period 2006–2008

| Programme type | Number of programmes |
|---|----------------------|
| Programmes of specific primary prevention provided within the framework of school curricula | 30* |
| Programmes of specific primary prevention provided extracurricularly | 4 |
| Early intervention programmes | 3 |
| Specific primary prevention educational programmes | 4 |
| Publication activities in the field of primary prevention | 2 |
| Total | 43* |

NB: * The on-site inspection of two additional programmes has taken place and the final result is awaiting the decision of the Certification Committee.

3/2 Treatment and Aftercare

Treatment and social reintegration are provided by a wide range of services, whose availability is relatively high; a summary of the services is given in Table 7. Selected trends in relation to individual types of treatment are summarised in Table 8. The number of outpatient healthcare facilities reporting the provision of AT care decreased in 2007, as did the number

of patients registered in the live files of such facilities for drug-related disorders. In that year, outpatient treatment was provided to users of legal and illegal drugs at 372 outpatient healthcare facilities, which is 4% fewer in relation to 2006. In 2007, outpatient treatment was also available from 13 NGOs funded by the Government Council for Drug Policy Coordination (there were 15 in 2006). Their services were provided to a total of 1,642 users of illegal drugs (2,428 in 2006), and the average age of the clients was 26.3 years. 43% of the clients injected drugs, 31% used pervitin, 16% heroin, 7% used other opiates,

mainly buprenorphine (Subutex®) obtained without prescription, and 6% used cannabis. In comparison to 2005 and 2006, there was a significant decline in the number of clients using cannabis and pervitin.

Inpatient psychiatric care is provided by psychiatric hospitals and psychiatric departments in hospitals. In 2007, the network of psychiatric hospitals did not change. These facilities reported 4,738 hospitalisations for disorders related to the use of other psychoactive substances, except tobacco (4,858 in 2006).

In 2007, residential treatment was provided in 11 therapeutic

TABLE 7: Programmes providing services to drug users in 2007

| Programme type | Number | Capacity (places, beds) | Take-up/occupancy (number of persons) |
|---|--------|-------------------------|---------------------------------------|
| Sobering-up stations | 15 | n.a. | n.a. |
| Detoxification units | 19 | n.a. | n.a. |
| Outpatient healthcare facilities | 372* | n.a. | 15,684* |
| Day-care centres | 1 | 10 | 40 |
| Specialised substitution centres | 15 | n.a. | 1,064 |
| Psychiatric hospitals | 16 | 9,307** | 3,423 |
| Psychiatric departments of hospitals | 32 | 1,419** | 1,299 |
| Psychiatric hospitals for children | 3 | 320** | 16 |
| Therapeutic communities | 15 | 169*** | 472*** |
| Aftercare programmes | 18 | 325**** | 883 |
| Detoxification units in prisons | 2 | n.a. | n.a. |
| Departments for differentiated serving of sentence | 6 | 258 | 419 |
| Departments for serving of compulsory (drug) treatment in prisons | 3 | 114 | 200 |
| Drug-free zones in prisons | 35 | 1,877 | 3,524 |

NB: * this involves psychiatric outpatient facilities (i.e. not only AT clinics) and the number of persons in the so-called "live files", i.e. drug users who have visited the facility at least once in that year; ** number of all psychiatric beds; *** data only from 11 communities; **** data involve the capacity of intensive care programmes.

TABLE 8: Trends observed in 2006-2007 according to individual types of treatment

| | |
|---|--|
| Outpatient facilities | Decline in the number of outpatient clinics providing care for drug users. Slight decrease in the total number of drug users receiving treatment in outpatient healthcare facilities (growth in the proportion of pervitin users). |
| Psychiatric inpatient facilities | Decline in the number of admissions to psychiatric departments in hospitals, slight increase in the number of admissions to psychiatric hospitals. The prevailing diagnoses include F19 (polydrug use), F11 (opioids), and F15 (stimulants). |
| Therapeutic communities | Slight decrease in the overall capacity of places in therapeutic communities (TCs). Slight increase in the number of clients receiving treatment in TCs (including a slight increase in the number of pervitin users and a slight decrease in the number of opiate users). |
| Aftercare programmes | Slight decline in the number of clients in aftercare. Slight increase in the number of clients using sheltered housing and sheltered workshops. |
| Substitution programmes | Rise in the total number of substitution programmes. Rise in the total number of opiate users participating in substitution treatment. |

communities funded by the Government Council for Drug Policy Coordination (the Czech Republic has 15 such communities in total). The capacity of these 11 communities was 169 beds, and a total of 472 drug users, whose average age was 24.2 years, were treated there. 68% of the clients in treatment used pervitin, 16% used opiates and 3% were treated for the use of cannabis. The treatment programme was successfully completed by 124 clients (26.3%) and the average duration of a successful (completed) treatment was 285 days.

Medicines available in the Czech Republic for the substitution treatment of opiate addiction include methadone, Subutex® and, since 2008, also Suboxone®. Out of the 15 substitution treatment centres, there were four in Prague and two in the Prague-Pankrác and Příbram prisons. A new substitution centre was opened in the town of Jičín (Hradec Králové region) in January 2007 and the Prison Service of the Czech Republic identified eight prisons where substitution treatment will be introduced in 2008. There are still no substitution centres in the Pilsen, Liberec, Pardubice, Vysočina, and Zlín regions. In 2007 the number of patients in specialised substitution centres rose to 1,064 individuals (there were 949 in 2006), of whom 620 were treated with methadone and 444 with Subutex®. In the Czech Republic, it is estimated that Subutex® is prescribed by approximately 150 psychiatrists and 240 general practitioners

for adults; the number of people treated with Subutex® outside the specialised centres may be estimated at between 3,500 and 3,800, and any further increase in the number of Subutex® users in 2007 was very unlikely. Having been tested in 2007, an electronic internet substitution register was put into routine operation in 2008.

In 2007, aftercare was provided by 18 facilities funded by the Government Council for Drug Policy Coordination, 11 of which supplied both outpatient and intensive aftercare, 4 did exclusively intensive aftercare, and one facility delivered outpatient aftercare only. A total of 13 facilities offered their clients sheltered housing and 5 also protected employment. Aftercare services were used by 883 clients in total (in 2006, there were 904 clients). The overall capacity of the facilities offering sheltered housing was 126 places, which were taken by 261 clients (there were 235 clients in 2006). Forty-four clients worked in sheltered workshops (there were 40 in 2006). 2007 experienced an increase in the number of drug-free zones in prisons to 35 departments (in 2006, there were 31) and the number of individuals placed in these units rose to 3,524 (3,201 in 2006). The overall capacity of treatment departments in prisons declined in 2007 to 372 places (391 in 2006) and the total number of offenders receiving treatment in such departments was 619 (787 in 2006).

Services Provided in Prisons by NGOs

Additional services are provided to imprisoned drug users by non-governmental organisations. These issues are exclusively dealt with by NGOs grouped in the Association of Non-Governmental Organisations' Section for Drug Services in Prison. In 2007 there were 6 projects (by SANANIM Praha, Sdružení Podané ruce Brno, Sdružení Podané ruce Olomouc, Laxus Hradec Králové, Semiramis Nymburk, and CPPT Pilsen) implemented in 15 establishments – 6 remand centres and 9 prisons. Counselling was provided to 936 clients in 2007 (compared to 720 in 2006). The average age of the clients was 29. Most services were provided in the area of individual counselling/therapy, followed by social work. Other services provided in prisons included 150 group therapy sessions and 62 training workshops for 740 individuals. A total of 14 NGO staff members participated in activities carried out directly in the prisons. Negotiations were held in 2007 regarding the co-operation of NGOs with the bodies involved in criminal proceedings and the Probation and Mediation Service of the Czech Republic.

3/3 Harm reduction

In 2007, a total of 109 low-threshold programmes – low-threshold centres and outreach (streetwork) programmes – were operating in the Czech Republic. It is estimated that in 2007 the services provided by low-threshold facilities were used by approximately 27,200 drug users. The proportion of problem drug users in contact with these programmes has risen from approximately 60% to approximately 70% in the past 5 years. The structure of clients according to selected indicators is given in Table 9.

In comparison to the previous year, the number of exchanged injection kits distributed in exchange programmes increased, to 4.5 million; see Table 10.

TABLE 9: Clients of low-threshold facilities in 2002-2007, extrapolated to the total number of programmes in the Czech Republic

| Indicator | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 |
|------------------------------------|---------|---------|---------|---------|---------|---------|
| Number of low-threshold facilities | 92 | 93 | 92 | 92 | 90 | 109 |
| Number of drug users | n.a. | 25,200 | 24,200 | 27,800 | 25,900 | 27,200 |
| – injecting drug users | 19,000 | 16,700 | 16,200 | 17,900 | 18,300 | 20,900 |
| – pervitin users | 12,900 | 11,300 | 12,200 | 12,300 | 12,100 | 14,600 |
| – opiate users | 8,000 | 6,100 | 6,000 | 6,800 | 6,900* | 7,300** |
| – cannabis users | 3,400 | 5,500 | 4,100 | 3,600 | 2,700 | 2,000 |
| – inhalant users | n.a. | 705 | 560 | 470 | 450 | 390 |
| Average age of drug users (years) | 22.0 | 23.2 | 23.4 | 25.0 | 25.3 | 26.1 |
| Total number of contacts/visits | 290,000 | 315,000 | 317,900 | 403,900 | 322,900 | 338,100 |

NB: * of these, 4,000 were heroin users and 2,900 were Subutex® users; ** of these, 4,100 were heroin users and 3,200 were Subutex® users.

TABLE 10: Exchange programmes in the Czech Republic, 1998–2007

| Year | Number of exchange programmes | Number of syringes and needles distributed |
|------|-------------------------------|--|
| 1998 | 42 | 486,600 |
| 1999 | 64 | 850,285 |
| 2000 | 80 | 1,152,334 |
| 2001 | 77 | 1,567,059 |
| 2002 | 88 | 1,469,224 |
| 2003 | 87 | 1,777,957 |
| 2004 | 86 | 2,355,536 |
| 2005 | 88 | 3,271,624 |
| 2006 | 93 | 3,868,880 |
| 2007 | 107 | 4,457,008 |

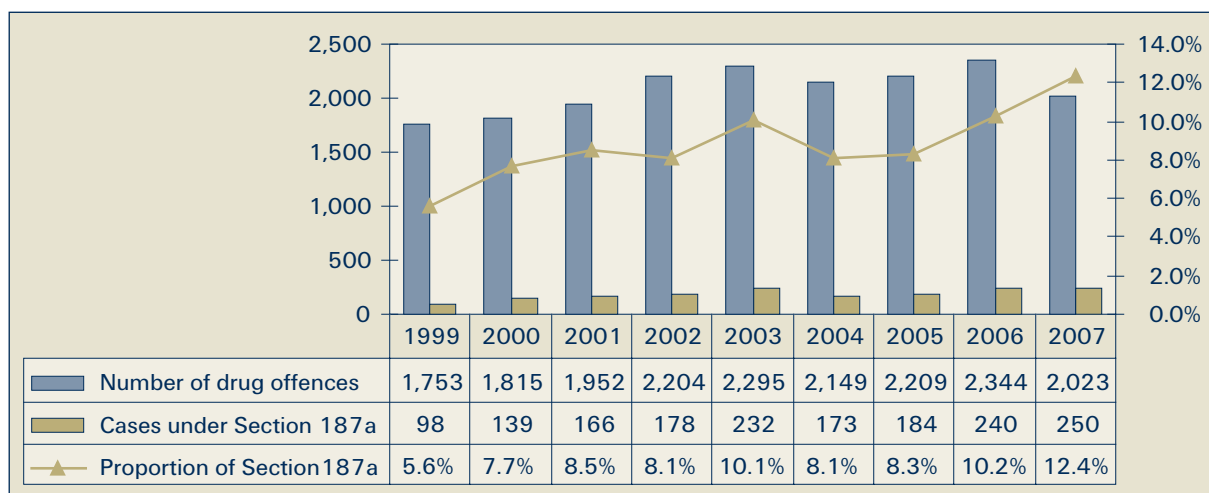
4 LAW ENFORCEMENT DATA

4/1 Drug-Related Crime

The number of drug offences in the Czech Republic has remained relatively stable in recent years. The number of people prosecuted for drug offences in 2007 was the lowest in the past four years and ranged, depending on the source, from 2,023 to 2,282. The proportion of the number of people prosecuted for the illegal possession of drugs for personal use (Section 187a of the Penal Code) in the total number of people prosecuted for drug-related offences is growing; it reached 12.4% in 2007; see Figure 6.

2,042 people were charged with drug offences, which represent a decrease of 12% in comparison to 2006. In 2007, courts passed final sentences on 1,382 individuals convicted of drug offences, i.e. approximately two thirds of the number of those

FIGURE 6: Percentage of offenders prosecuted for the possession of drugs for personal use (Section 187a of the Penal Code) among all drug offenders prosecuted in 1999–2007



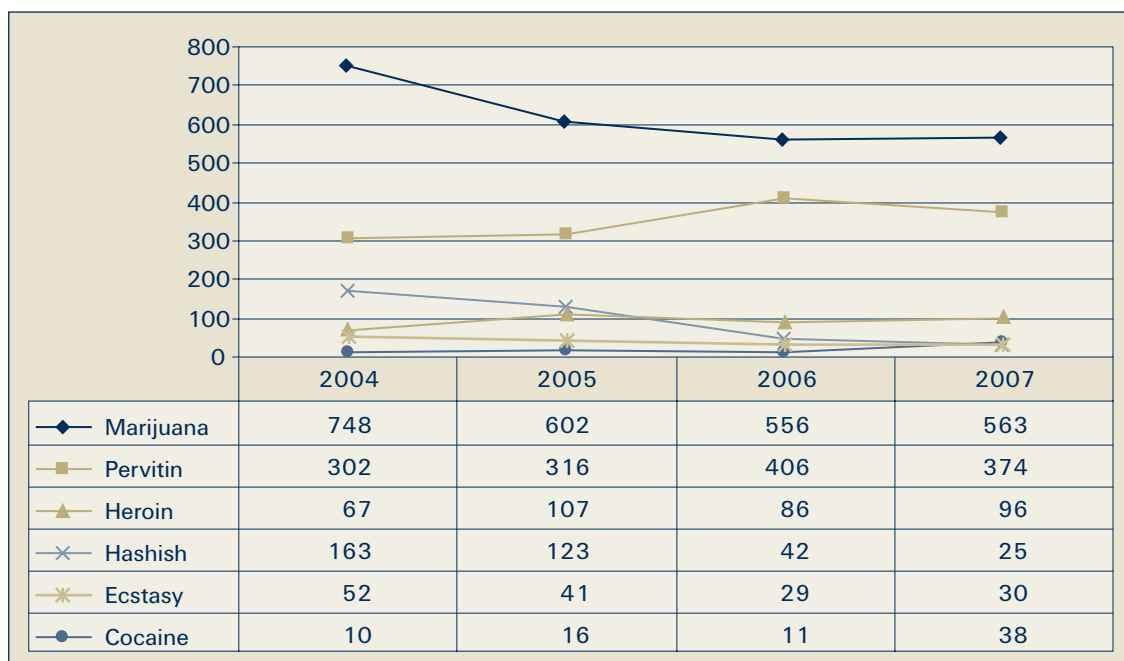
charged. The most frequent drug-related offences were associated with pervitin (50–70%), followed by cannabis (20–30%); the proportion of cocaine has been increasing, although, accounting for less than 3%, it remains at a low level. The structure of the sentences for drug offences has not changed significantly in the past four years; in 2007, a total of 1,149 unsuspended and suspended prison sentences (suspended and unsuspended prison sentences accounted for 64% and 36%, respectively) was imposed, while community service orders were passed in 107 cases.

966 misdemeanours involving the possession of a small quantity of drugs (for personal use) were detected in 2007, which is about four times the number of individuals prosecuted for drug possession.

4/2 Drug Seizures, Prices, and Purity

Marijuana was the most commonly seized drug in 2007 (563 seizures). Neither the number nor quantity of seizures of this drug saw a dramatic change in comparison to the year 2006, but the number of cannabis plants seized tripled against 2006 (from 2,276 to 6,992). Pervitin remains the second most commonly seized drug (374 seizures); there was a slight decrease in the number of seizures of the drug compared to 2006 but the quantity seized rose to 6 kg (5.2 kg in 2006). Cocaine seizures increased markedly in terms of both number and quantity; 38 seizures with a total quantity of 37.6 kg were reported in 2007. A considerable increase was reported in the number of ecstasy tablets seized; 30 seizures of 62,226 tablets in total were reported in 2007. With a quantity of 20.3 kg seized, the heroin situation is stable. The number of seizures of LSD doses dropped and no crack was seized. Other substances seized included 310 tablets of Subutex®, 1.2 kg of ephedrine, and 35 tablets of Rohypnol; see Figure 7. The prices of the basic drug types did not change significantly in 2007; in comparison with 2006, the slight reduction in the price of cocaine and the slight increase in that of pervitin are noteworthy.

FIGURE 7: Number of seizures of selected drug types in 2004–2007



Every year, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), in association with national monitoring centres, selects the issues to be addressed by special chapters. The special chapter for 2007 is entitled "Sentencing Statistics" and describes the legislation on illicit drug handling, driving under the influence of drugs, and the practical application of the legal regulations to these areas. This chapter also describes the systems employed to collect data on such illegal activities.

Table 11: Summary of general information on drug use and its consequences in the Czech Republic in 2007

| Indicator | Variable | Trend 2006–2007 |
|---|---------------|-----------------|
| Estimated number of problem drug users | 30 900 | ↻ |
| Estimated number of injecting drug users | 29 500 | ↻ |
| Estimated number of problem pervitin users | 20 900 | ↑ |
| Estimated number of problem opiate users | 10 000 | ↻ |
| - including problem users of Subutex® | 4 250 | ↓ |
| Number of treatment demands (including new demands) | 8 487 (4 346) | ↔ |
| Proportion of persons under 19 years of age among first treatment demands | 31 % | ↔ |
| Proportion of heroin users among first treatment demands | 16 % | ↔ |
| Proportion of pervitin users among first treatment demands | 63 % | ↻ |
| Proportion of cannabis users among first treatment demands | 18 % | ↔ |
| Proportion of problem users in contact with low-threshold programmes | 70 % | ↑ |
| Number of exchange programmes | 107 | ↑ |
| Number of syringes and needles exchanged | 4 457 008 | ↑ |
| HIV incidence among injecting drug users | < 1 % | ↻ |
| HCV incidence among tested clients of low-threshold programmes | 19 % | ↻ |
| Number of fatal overdoses on illicit drugs and inhalants | 40 | ↔ |
| Number of individuals prosecuted for drug offences (Section 187-188a of the Penal Code) | 2 282 | ↻ |
| - proportion of individuals prosecuted for drug possession (Section 187a of the Penal Code) | 12 % | ↻ |
| Number of individuals charged with drug offences | 2 042 | ↻ |
| Number of individuals convicted of drug offences | 1 382 | ↻ |
| - proportion of individuals convicted of heroin-related offences | 7,6 % | ↔ |
| - proportion of individuals convicted of pervitin-related offences | 49 % | ↔ |
| - proportion of individuals convicted of cannabis-related offences | 18,7 | ↻ |

NB: ↑ Increase, ↻ Slight increase, ↔ Almost no changes, ↻ Slight decrease, ↓ Decrease.

Sources of information

This issue was drawn up on the basis of the annual report on the 2007 drug situation in the Czech Republic [Mravčík, V., Chomynová, P., Orlíková, B., Pešek, R., Škařupová, K., Škrdlantová, E., Miovská, L., Gajdošíková, H., Vopravil, J. (2008). Annual Report: The Czech Republic – 2007 Drug Situation. Prague: Office of the Government of the Czech Republic. ISBN 978-80-87041-47-5]. The references to individual sources of information are mentioned in the annual report according to quoting standards.

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