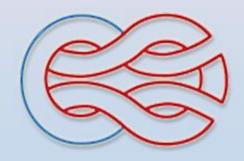
Drug Policy Network South East Europe



Member organisations

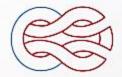
- 4Life, Podgorica, Montenegro
- Aksion Plus, Tirana,Albania
- Aliat, Bucharest, Romania
- Alliance of NGOs for Drugs and Addictions, Slovenia
- ARAS, Bucharest,
 Romania
- Cazas, Podgorica, Montenegro
- Centre for Humane
 Policy, Sofia, Bulgaria
- Coalition 'Margini', Skopje, North Macedonia

- Centre for Life, Athens,
 Greece
- Diogenis, Athens, Greece
- Duga, Šabac, Serbia
- HOPS, Skopje, North Macedonia
- Initiative for Health Foundation, Sofia, Bulgaria
- Juventas, Podgorica, Montenegro
- Labyrinth, Prishtina, Kosovo*
- Margina, Tuzla, Bosnia
 Herzegovina
- Positive Voice, Athens,Greece

- Prevent, Novi Sad, Serbia
- Proi, Sarajevo, Bosnia Herzegovina
- Prometheus, Athens,
 Greece
- Re Generation,
 Belgrade, Serbia
- RHRN, Bucharest,
 Romania
- SEEAN, Ljubljana,
 Slovenia
- Terra, Rijeka, Croatia
- Timok Youth Centre,
 Zaječar, Serbia
- Viktorija, Banja Luka, Bosnia Herzegovina

Type of data that are available to us

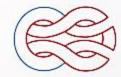
- National or local indicator-based monitoring
- Activity reports of harm reduction/treatment programmes
- PWUD community expert opinion
- General trends on patterns and type of substance use, as well as setting



DPNSEE documents



- Addressing the acute funding crisis facing harm reduction services in South-East Europe
- Documenting drug related cases of discrimination



DPNSEE documents

Budget advocacy and monitoring in countries of South East Europe

Monitoring



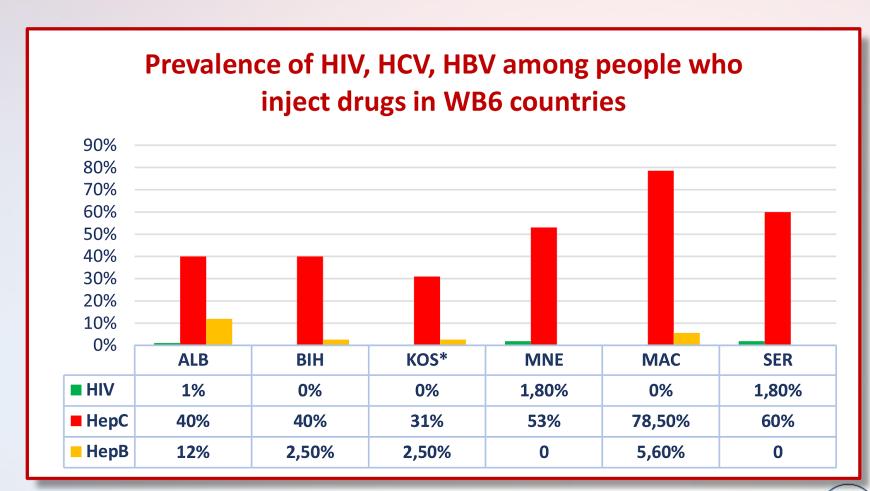


Situation in the Western Balkan



Situation in the Western Balkan





Albania

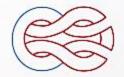


- Action Plus implements the Methadone Maintenance
 Treatment program (in Tirana, Durrës, Vlorë, Shkodër,
 Elbasan, Berat, Korçë, Sarandë and Fier), as well as condoms,
 lubricants, IEC materials
- Stop AIDS implements needle and syringe programming (in Tiranë, Durrës, Vlorë, Shkodër, Elbasan, Berat and Korçë)
- Outreach services are also available, using mini-vans and operating daily or weekly
- Provision of harm reduction services via "storage" approach is employed

Albania



- Global Fund funded NGOs provide other STI testing through both outreach and drop-in centres
- In the framework of the GF Grant, implemented by the Ministry of Health and Social Protection, there are HIV prevention interventions in place for PWID. The packages of services fall under two main strategies:
 - a) preventing / reducing injecting drug use
 - b) reducing harm related to drug injection



Albania



- Uncertainty of funding for activities for KAP after the GF
- It is expected that the Albanian Government will be committed to support already initiated projects by the GF
- Lack of local NGO networks to address the transition issues adequately



Bosnia Herzegovina



- There is limited availability of on-site testing of KAPs
- There are limited harm reduction services available in Zenica and Tuzla depending on non-paid work of CSOs staff of Margina:
 - Needle and syringes with additional materials water, citric, cookers, etc.
 - Hygiene packages and condoms for the other two populations (sex workers and prisoners)
- Services closed in Sarajevo (capitol), Banja Luka,
 Mostar, Bihać and outreach



Bosnia Herzegovina



- A complex administrative structure no national (state)
 Ministry of Health, Public Health Institute and Health
 Insurance Fund
- Challenges on the side of the government which is continuously failing to address the sustainability
- Challenges with the legal framework and political willingness to address the HIV and AIDS related issues
- Withdrawal of the TGF
- Loss of trust and low level of cooperation amongst the CSOs resulting with hesitancy of potential donors to support projects and services



- Nearly 79% of PWID knew of HIV prevention programs and services in their area, nearly 2/3 had actually utilized them
- Harm reduction programmes are available in Gjilan, Peja,
 Pristina and Prizren, run by NGO Labyrinth for approximately 835 people
- Males utilized the services twice more than females, which shows a poor coverage of programs for female PWIDs
- 83% of PWID in Prishtina and 95% in Prizren reported using sterile needles or syringes at last injection
- 40% in Prishtina and 49% in Prizren reported being tested for HIV in 2017



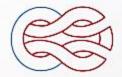
- Coverage of OST is quite low if compared to the estimates of PWID (280 clients/month out of 5000 estimated PWID)
- Outreach programme, performed by peers and social worker, with:
 - Distribution of kits with condoms, auto-disable syringes, alcohol swabs, distilled water and needles for three days, and a storage pouch;
 - Collection of used needles and syringes in special containers later delivered to a health facility for destruction;
 - Mapping of hotspots/shooting galleries
- No harm reduction services are available in the north of Kosovo



- Public health authorities, health-care providers, specialists and other stakeholders do not consider the current figures to be an accurate portrait of the HIV situation
- Procurement and supply management remains a continuous challenge in the task of ensuring timely provision of services
- Kosovo has no baseline scenario and no plan for the prevention and control of viral hepatitis, and the overall response is currently fragmented



- Services provided by Labyrinth are not sufficient in reach and quantity to assist the entire area
- Increase coverage to PWID of a comprehensive package services, including OST, needle and syringe programmes, testing for viral hepatitis and other infections, and linkage to care
- Limitation of being funded by an international donor and not by a public organization does no good for the accountability and ownership of the awareness, prevention, diagnosis and follow-up provided by the NGO
- Of those who got arrested, 11% injected drugs in prison



Montenegro

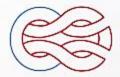


- 70.3% of PWID reached with HIV prevention programs (2015)
- Needle and syringe exchange are available in capitol Podgorica and Bar for approximately 800 users
- 10.3% of PWID have received an HIV test during the reporting period and know their results (2017)
- HIV testing is available only in Public health centres in 8 cities. Hep C testing has to be demanded by family doctor – rate is very low resulting in very high prevalence among PWUID

Montenegro



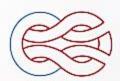
- Methadone and buprenorphine substitution therapy in available in 8 Montenegrin cities, financed by state
- In 2017, there were 259 PWID on Methadone and 426 on Buprenorphine (data from 5 OST sites)
- Buprenorphine users are not provided by additional support other than pills, which has a negative influence on the situation, and resulted in uncontrolled influx of prescribed buprenorphine to black market
- Harm reduction programs in prisons



Montenegro



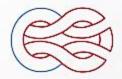
- No official population size estimate of PWUD/PWID
- No available data on overdose and no program of its prevention
- Access to testing and treatment (HIV, HCV) for PWUID is very limited
- Lack of strong system for sustainable funding
- Limited number of available places in methadone treatment combined with law quality of operations within buprenorphine treatment
- Lack of coordination between institutions



North Macedonia



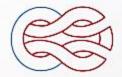
- 15 harm reduction programs in 13 cities (Tetovo was closed in March this year)
- OST is available in 10 cities in the country, including Skopje (2 with methadone, 1 with buprenorphine in the Clinic for toxicology)
- OST is available in the prisons



North Macedonia



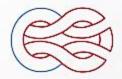
- Sustainable mechanism for funding of needle exchange programs
- Absence of naloxone
- Political general elections next year
- Lack od programs for rehabilitation and resocialization for drug users
- Absence of program for children and youth who use drugs



Serbia



- OST is available in 22 cities (slightly centralised)
- Needle and syringe exchange coverage in 2 cities (approximately 3%)
- Testing for HIV and Hepatitis C exists in drop in centers and in outreach activities, as well as counseling by social workers and psychologists



Serbia

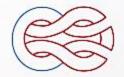


- In the capital, there were no harm reduction programs from 2015 to 2018 and in Niš, the third largest city, there are no programs since 2015
- After the Global Fund left in 2014, the state did not took over funding of the services. Currently, this is being done through co-financing of the GF project.
- Take home Naloxone is not allowed by the law
- Drug testing is prohibited by the Criminal Code
- New protocol and rule book on harm reduction being drafted

Relevant policies in the Western Balkan



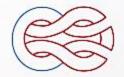
- Healthcare law, Social protection law, Criminal Code
- National drug strategies
- Lists of psychoactive controled substances
- National Health Strategies; National strategies for the prevention and control of HIV infection; National youth strategies
- Transition plans after the GF



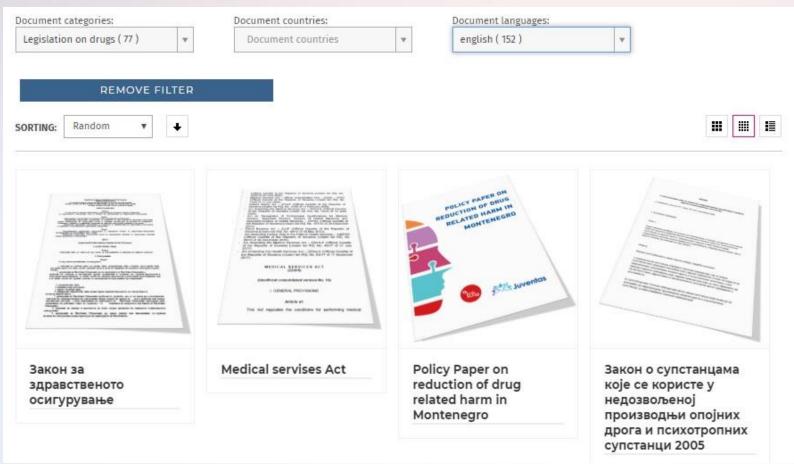
Relevant policies in the Western Balkan



- Action Plan Against Cannabis Cultivation and Trafficking (ALB)
- Strategy on Prison System (MNE)
- Protocol for Early Warning System (SER)
- Memorandum of understanding with the Office for Combating Drugs (SER)



DPNSEE Resource centre





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