

4th Meeting

EXASS Network

30 - 31 October 2008
Moscow



Report

P-PG/COOP (2008) 10



EXASS Net

European network of partnerships between stakeholders at frontline level
responding to drug problems providing experience and assistance for
inter-sectoral cooperation

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EXASS Net

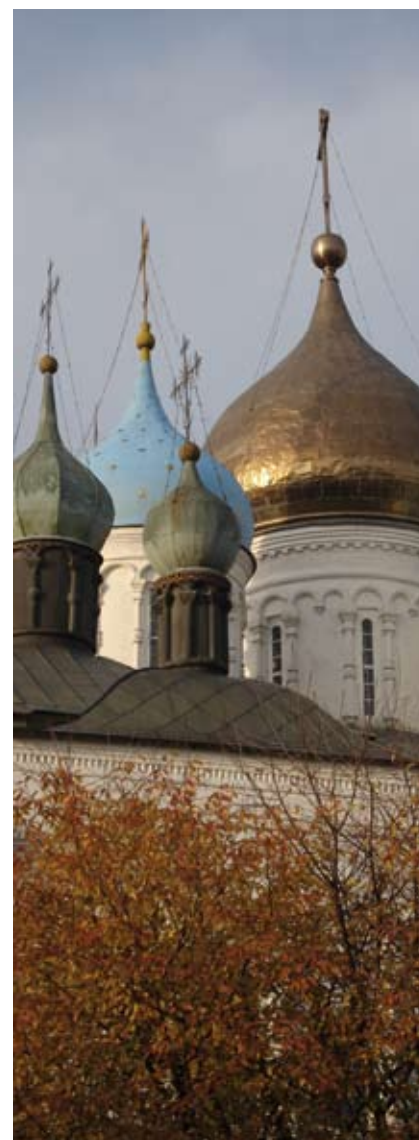


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Introduction

During the Finnish EU Presidency in 2007 the issue of cooperation between the various actors in the law-enforcement, health and social sectors in tackling drug-related problems was addressed at a major conference which took place in Turku, Finland in September 2006. The aim of the conference, which was organised in close cooperation with the Pompidou Group, was to promote a constructive dialogue, provide information and share experiences between drug policy authorities in order to improve the effectiveness of their work. As a result, the Finnish EU Presidency suggested setting up a European network, based with the Pompidou Group, for multi-agency partnerships tackling drug problems at front-line level. During the 2006 Ministerial Conference of the Pompidou Group on 27 and 28 November 2006 the 2007 – 2010 Work Programme was adopted. This Work Programme includes the mandate for the Pompidou Group to set up the network proposed by the Finnish EU Presidency. This proposal was adopted by the by the Bureau of the Pompidou Group on 22 March 2007. The network is called EXASS Net.



A view from the Moskva river

Background

The Federal Drugs Control Service of the Russian Federation (FDCS) was established in 2003 to coordinate and implement comprehensive measures to combat illicit drug trafficking and use. The FDCS has sub-divisions in each region of the Federation. It is staffed with 40,000 officers organised in different departments dealing with administrative, operational and coordination tasks. The FDCS was created by presidential decree; it has police powers and reports directly to the President of the Russian Federation. It also coordinates other agencies in relation to anti-narcotic activity. The service oversees relevant activities between federal government authorities and exercises an implementation and coordinating function at regional level throughout its branch offices. The centralised coordination at federal level of all demand and supply reduction policies creates a uniform approach for the whole country. A uniform national anti-narcotics policy is implemented at regional level by operative units and through branch offices with executive powers whose task it is to ensure that local and regional authorities comply with the national action plan and its implementation.

The FDCS also maintains a database containing data on drug-related crime, drug use and prevention activity. All agencies are legally obliged to submit data to this database. In addition the FDCS is the interface for international cooperation with the Russian Federation in the field of illicit drugs.

The aim of the network is to create a link between existing inter-agency partnerships bringing together different stakeholders such as institutions, municipalities, service providers, non-government organizations (NGOs) and individuals to help respond to drug-related problems more effectively. This will facilitate the exchange of knowledge and experiences about what is happening at front-line level in individual countries and promote good practice. The constituting meeting of EXASS Net was held in Helsinki on 26-27 April 2007 and it focussed on Drug-related health problems¹. The 2nd meeting of EXASS Net was held in Preston, Lancashire in the United Kingdom². The 3rd meeting of EXASS Net, was held in Frankfurt/ Main, Germany in May 2008³. The 4th meeting of EXASSSS net, the subject of this report, was held in Moscow, Russian Federation, in October 2008⁴.



Photo – EXASS Net Steering group members are welcomed by A.V.Federov, State Secretary, Deputy head of the Federal Drug Control Service of Russia at its Moscow Headquarters

The two-day programme included visits to the Clinic of the National Research Centre on Addiction, the Moscow Scientific and Practical Centre on Addiction, the Moscow State Technical University and a number of presentations on different aspects of the Russian Federations' response to drug use and misuse. Representatives of the EXASS Net Steering Group also made presentations on the activities of the Pompidou Group, the European Forum for Urban Safety and the European Correlation Network.

¹ Connolly J (2007) Report of the constituting meeting of EXASS Net

² Connolly J (2008) Report of the second meeting of EXASS Net

³ Connolly J (2008) Report of the third meeting of EXASS Net

⁴ The author would like to thank the other members of the EXASS Net steering group and the secretariat of the Pompidou Group for their assistance in the preparation of this report.

Visit One – Clinic of the National Research Centre on Addictions

The first visit of the programme was to the Clinic of the National Research Centre on Addictions. The centre is divided into four main departments: Medical and biological studies; Prevention (dealing with addiction); Clinical studies and Rehabilitation. The centre operates as a form of 'think tank' for the Ministry of Health.



some patients there was a concern that where methadone was allowed on a wider scale throughout the country it might get out of control with general practitioners prescribing it for all opiate users as 'a path of least resistance' or 'quick-fix' solution. It was reported that the clinic sought to identify more sustainable approaches.

The combination of physical therapy orientated elements and psychological counselling approaches are a core element of the treatment and rehabilitation programmes which were demonstrated in the clinic and centre which we visited. This approach apparently allows patients to be stabilised and enter a period of abstinence that can last several months while in institutional care.

The average stay in the clinic is three weeks with the emphasis on detoxification and psychosocial therapeutic treatment. Where patients were hospitalised in the centre, it was reported that the results were good. However, although people

A question and answer session with the heads of the four departments (*Photo*) addressed a range of issues including source of referral and access to treatment, treatment funding which can be public or private, treatment approaches, through-care treatment and case follow-up.

Most of the clients involving illicit drug use are opiate dependent, injecting drug users. Substitution treatment such as methadone is illegal under Russian legislation except for experimental pilot projects on a small scale that are scientifically approved, controlled and supervised. There was no information available on whether such a project had been implemented or planned so far. Although staff in the centre reported that they were not strictly opposed to substitution treatment for



Photo: A doctor outlines treatment care procedures at the Moscow Scientific and Practical Centre on Addictions

Visit Two – Moscow Scientific and Practical Centre on Addictions

were discharged in good condition, abstinence was short-lived and relapse rates were high. The importance of after-care and social supports post-release was emphasised. Patients often tend to relapse in situations after they have left in-patient treatment and returned to their native environment, particularly when this is at a significant distance away. Similar corroborating experiences were reported from the penitentiary system where patients had abstained for often 3 – 6 years and then relapsed shortly after release.

It became apparent that patients with alcohol problems are treated in the same clinics together with those suffering from the addiction of illegal drugs. In this sense it appears to be a concept that allows for a poly-drug use approach in treatment, as far as cases of alcoholism and opiate addiction are concerned. Information on how addictions to prescription drugs, performance enhancing drugs etc. are addressed was not available since they were not treated in the institutions visited. A tour of the hospital wards gave an opportunity for brief exchanges with staff. The staff for all drug users (including alcohol and illicit drug dependency) number approximately 250 including physicians, gynaecologists, neuropharmacologists, nurses, administrative and security staff. The clinic typically caters for 1700-1800 patients per year. Other wards visited included an acute unit for 3-4 day detoxification.

The second visit was to the Moscow Scientific and Practical Centre on Addictions. The centre was developed at the municipal level under the auspices of an anti-drug commission headed by Moscow's Mayor.



The centre incorporates a number of structures and initiatives aimed at reducing the demand for drugs. It includes a research centre for drug addiction studies and a clinical facility which provides emergency care, in-patient treatment and out-patient rehabilitation services. The visit began with a short presentation of the drug situation in Moscow using the data compiled by the FDCS which considered trends in registered drug users and also mortality rates (*Photo above*).

It was acknowledged that many drug users did not appear in the official statistics. It was also reported that there has been a large increase in drug-related fatalities since 2003. The centre provides a government-funded programme which is free of charge for treatment and rehabilitation services. The centre also develops prevention strategies for government committees and provides training for teachers and parents in relation to drug education and prevention. It was reported that approximately 10-15% of school students have experimented with drugs.

During a subsequent question and answer session a number of important themes emerged. An important issue from the perspective of EXASS Net was the role of Non Governmental Organisations in relation to drug prevention programmes and locally-based harm reduction initiatives in the Russian Federation. Relations with NGOs appeared to be of no significant relevance to the professionals encountered during the visits, nor do NGOs appear to play a significant role in the overall stakeholder cooperation at federal level facilitated by the FDCS. One possible explanation, delegates were informed, was the concern of the Russian authorities that organisations

might try to promote (safe) drug use and actively lobby for harm reduction methods which are presently illegal in the Russian Federation.

In response to questions from delegates it was reported that Russia's long history of public service health care provision has contributed to a situation where private health care provision is weak. Harm reduction initiatives such as condom provision or needle-exchange are also viewed negatively in Russia, it was reported. In the Moscow Scientific and Practical Centre on Addictions approaches informed by religious teaching are sometimes used in support of broader drug prevention



Photo – A security guard at the center

initiatives. Religion is seen as a protective factor in dealing with drug addiction and is consequently incorporated into integrated treatment approaches as for example applied in the Moscow municipal centre. It was reported that 20-25% of treated drug users are HIV positive.

The visit concluded with a tour of some of the clinical and therapeutic services provided in the centre. The centre is ten years old and is in the process of being renovated. There are currently fifty beds available for inpatient treatment. Most patients are being treated for alcohol and illicit drug use. In general,

patients undergo thirty days inpatient treatment which involves psychotherapeutic work usually in groups which the staff at the centre believes is more effective. Individual work and family support is also incorporated into the treatment approach. The patients are approximately 80% male and 20% female. Referrals are voluntary and patients sign a consent form which states that they can stop treatment at any time. Despite these assurances, delegates were informed that treatment regulations in Moscow provide for a list system whereby people who enter treatment for alcohol and/or drugs must have their names entered on to a list where it remains for three to five years for alcohol and drugs respectively.

It was reported that this list is often viewed negatively by people entering treatment as it can have negative consequences for them in the future whereby local treatment centres can follow up on their case. As a consequence and so as to ensure the voluntary nature of treatment, staff at this centre informed delegates that they do not provide names of their clients to this list system. Delegates were later informed that there are currently proposals to change this list system so that it becomes anonymous and used for data purposes only.

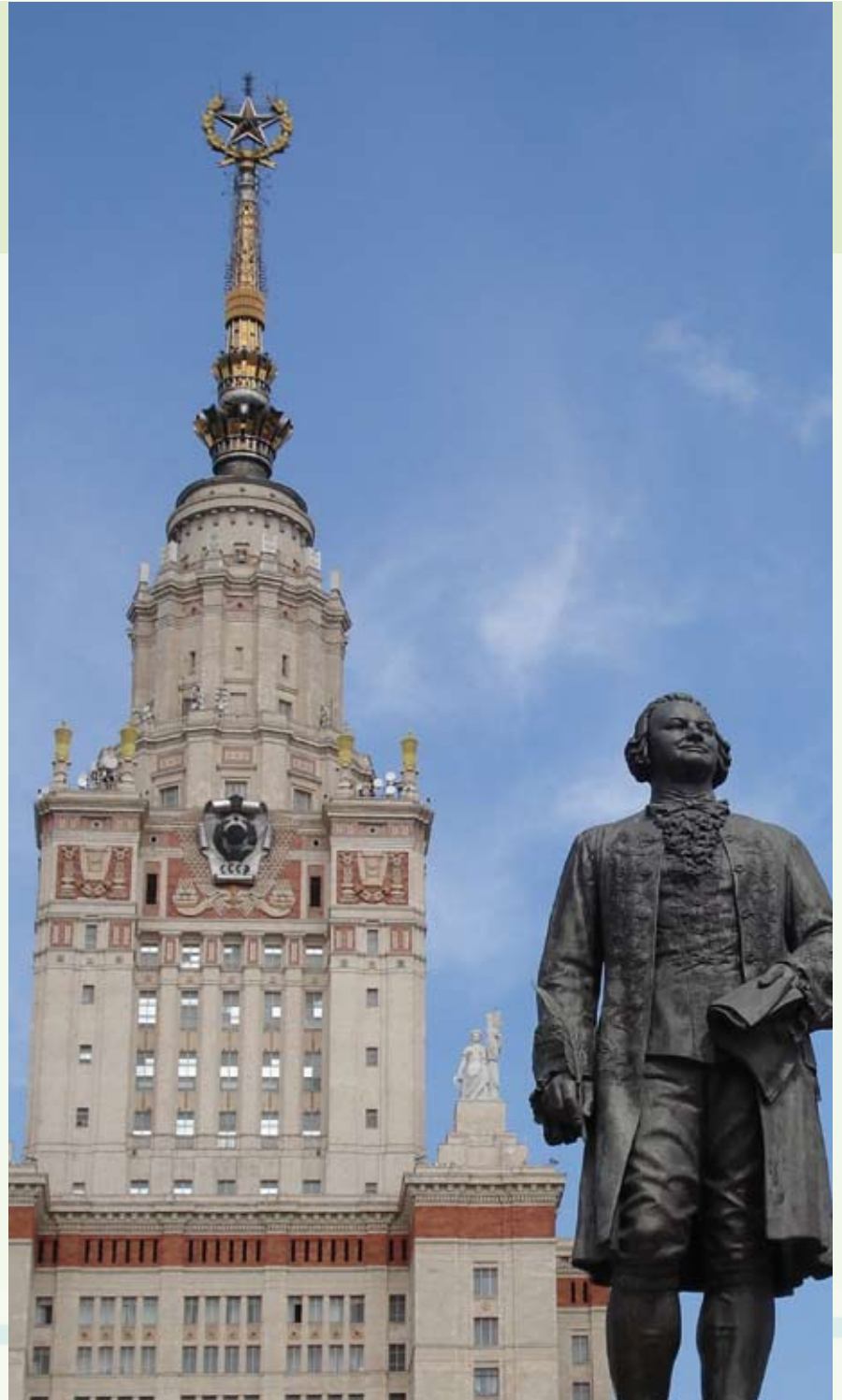
The centre can also cater for patients who need day care only, either for binge drinkers or for drug users trying to deal with craving. Clients can come in the morning and leave in the evening. There is currently no waiting list. The centre deals mostly with Muscovites and it has a department for minors (under 15 years), teenagers, senior patients, people with psychiatric disorders many of whom have dual diagnosis. The centre also houses a resuscitation unit available 24 hours per day and an intensive care unit for people in an acute condition. A physiotherapy department including an electronically induced sleep procedure which can assist patients in the withdrawal stage is also provided. Massage and oxygen spa treatment is also available at the centre.

It was suggested that community-based care facilities like the municipal centre of the city of Moscow can better integrate patients after in-patients therapy into subsequent out-patients follow-up programmes because of community proximity and the availability of out-patients and in-patients services under one roof. While the treatment in the centres visited in Moscow is free of charge, this might not be possible to ensure throughout all regions and municipalities. This is taken into account by offering care to all people irrespective of their regional origin. However vast geographical distances make it difficult for many problematic drug users, in particular those most in need and those most at risk to themselves and communities, to seek help.

Visit Three – Moscow State Technical University

The Moscow State Technical University presented its contributions to health-protection and drug abuse prevention strategies.

A new drug testing device based on the bio-resonance method with the capability of demonstrating the previous use of a variety of psychotropic substances, including alcohol and nicotine, was demonstrated. One of the acclaimed features was said to include the capability of tracing substance use over the previous two months. Drug testing in schools, university and the army, it was explained, forms the main basis for specific primary and secondary drug prevention. It was said to be a medium-term goal to introduce drug testing in schools and universities on a broad scale. Experiences with drug testing of army recruits had apparently delivered results that justified an expansion of this method. However it remained unclear under what conditions drug tests are conducted and what the consequences for positive testing students or those who refuse to be tested were. In addition there was no information as to who had access to the test results and how they could be further used or transferred.



Day Two - presentations

The second day of the meeting was dedicated to speeches and presentations by different government bodies on the approaches to dealing with the different dimensions of drug related problems in the Russian Federation. Inter-agency co-operation by the FDCS in organising and implementing methods of drugs prevention and social rehabilitation was outlined, as were the main activities and strategies employed in the educational sphere. Campaigns on the negative effects of drugs and demonstrations of law enforcement capacities continue to be seen as the principle method for general primary prevention. An additional emphasis has been put into promoting healthy life-styles campaigns which focus on illegal substances.



Photo – Delegates listen to presentations on the final day of the meeting.

Available power point presentations can be viewed on the EXASS Net website at www.exass.net.

Presentations included the following:

- Comprehensive measures and practical results of activities in the frame of the anti-drug strategy of the Russian federation by A.V.Federov, State Secretary, Deputy head of FDCS of Russia
- Prevalence of addiction diseases in Russia by Professor E.A. Koshkina, Chief of Epidemiology and addiction aid division, National Research Center on Addictions.
- Treatment of convicted drug abusers in prisons by O.I. Trifonov, Chief psychiatrist-narcologist of medical specialists unit, Medical Directorate, Federal Service of Execution of Sentences of Russia
- Narcotisation tendencies in the Russian Federation 2003-2008 – role of agencies of internal affairs in drug threat counteraction by O.A. Dvoryankin, Chief of unit, Department of organised Crime and terrorism, Ministry of Internal Affairs of Russia
- Presentation of mobile scanner for fingerprint and palm printing by FDCS
- Interagency co-operation, addiction prevention and social rehabilitation by FDCS
- Guidelines for prevention of diseases in the field of education by A.A. Gerish, Deputy chief of unit, Department for state policy in nurturing, Addiction Education and Social safety of children, Ministry for education and Science of Russia

Presentations were also made about the work of the Pompidou Group by Thomas Kattau, Deputy Executive Secretary of the PG, and the Pompidou Group Life Skills Training Programmes by Olga Federova. Teuvo Peltoniemi, PG Expert made a presentation on New information and communication technologies for drug prevention and treatment.



The session concluded with presentations on the work and objectives of the European Forum for Urban Safety/Democracy, Cities & Drugs Network by EXASS Net Steering group member Thierry Charlois, and the European Correlation Network by Eberhard Schatz of the Foundation De Regenboog Group in Amsterdam (*Photo above*). These presentations are also available on the EXASS Net website at:

www.exass.net



Steering Group meeting –

Following the presentation of a number of gifts to the visiting delegates by our Russian hosts, all participants of the 4th EXASS Net meeting expressed their sincere gratitude to them for their generosity and hospitality.



Photo – Thomas Kattau, on behalf of the Pompidou Group and EXASS Net exchanges gifts with A.V.Federov, State Secretary, Deputy head of the Federal Drug Control Service of Russia

Conclusion and recommendation

Although the meeting in the Russian Federation was of great interest, many members of the EXASS Network expressed concern about the absence from the program or visits of representation from the Non Governmental Organisation sector. This was despite assurances given to the EXASS Network Steering Group in Paris in September 2008 that such meetings would be arranged. This omission meant that delegates were not provided with the opportunity to hear potentially critical voices from NGO stakeholders working at frontline level, something which is fundamental to the objectives of EXASS Net. As reported above, it was apparent to delegates that NGO's appeared to be of no significant relevance to the professionals encountered during the visits, nor do NGO's appear to play a significant role in the overall stakeholder cooperation at federal level facilitated by the FDCS. One possible explanation, delegates were informed, was the concern of the Russian authorities that organisations might try

to promote (safe) drug use and actively lobby for harm reduction methods which are presently illegal in the Russian Federation. Given the very serious drug problems being encountered in the Russian Federation, and in particular the acute situation regarding the incidence of drug-related infectious diseases including the growing HIV epidemic, it would have been extremely valuable to have had an opportunity to discuss these issues.

The figure below which was included in the presentation to the delegates by Professor Koshkina, head of the department of epidemiology at the National Scientific Center for Narcology, shows that over 10% of injecting drug users are HIV positive. It is also important to acknowledge that as this only includes those IDU's who are registered it is an underestimation of the total number of HIV-infected injecting drug users.

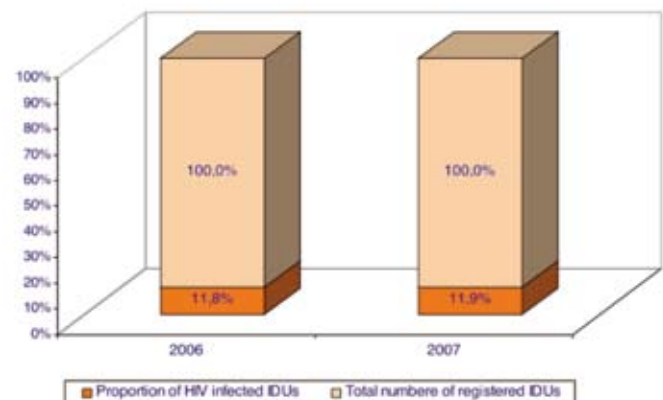


Figure: Proportion of registered injecting users who are HIV positive.

Source: Professor Koshkina, Head of head of the department of epidemiology at the National Scientific Center for Narcology. Power point presentation to EXASS Net meeting, Moscow, October 2008.

Furthermore, the time given to presentations during the final session, both by representatives of the various drug agencies of the Russian federation and by members of EXASS Net, meant that there was no time for reflection, discussion or feedback. It is proposed that these issues should be addressed at the next steering group meeting in Budapest. Specific suggestions put forward through email correspondence included the following:

- 'The introduction of some general proceedings e.g. to discuss the programme in advance within the Steering Committee, to make sure that NGO involvement is guaranteed'
- 'Have a more formalised feedback round at the end

moving forward together

of each meeting. Conclusions and recommendations (which does not mean that we need to agree just one point of view) could then be gathered and included as an integral part of the EXASS Net meeting reports. In the best case, such a report could then be used by the local organisers to stimulate new developments, as well as by the participants, to stimulate similar approaches in their local setting'

- To evaluate the meeting use an 'evaluation questionnaire containing a full range of questions and practical details concerning the topic of the meeting in line with the rules and values of the Pompidou Group accepted as indicators of success prior to the event. The Budapest meeting in May can be a trial of this.'
- 'Perhaps it could be useful to write guidelines or criteria for the next hosting cities, clarifying the needs of the EXASS net partners'
- 'Use the group for discussions in order to seek solutions at local level in areas where we have little or no success. This could be an interesting challenge in addition to the success stories the hosts will pass on to us'

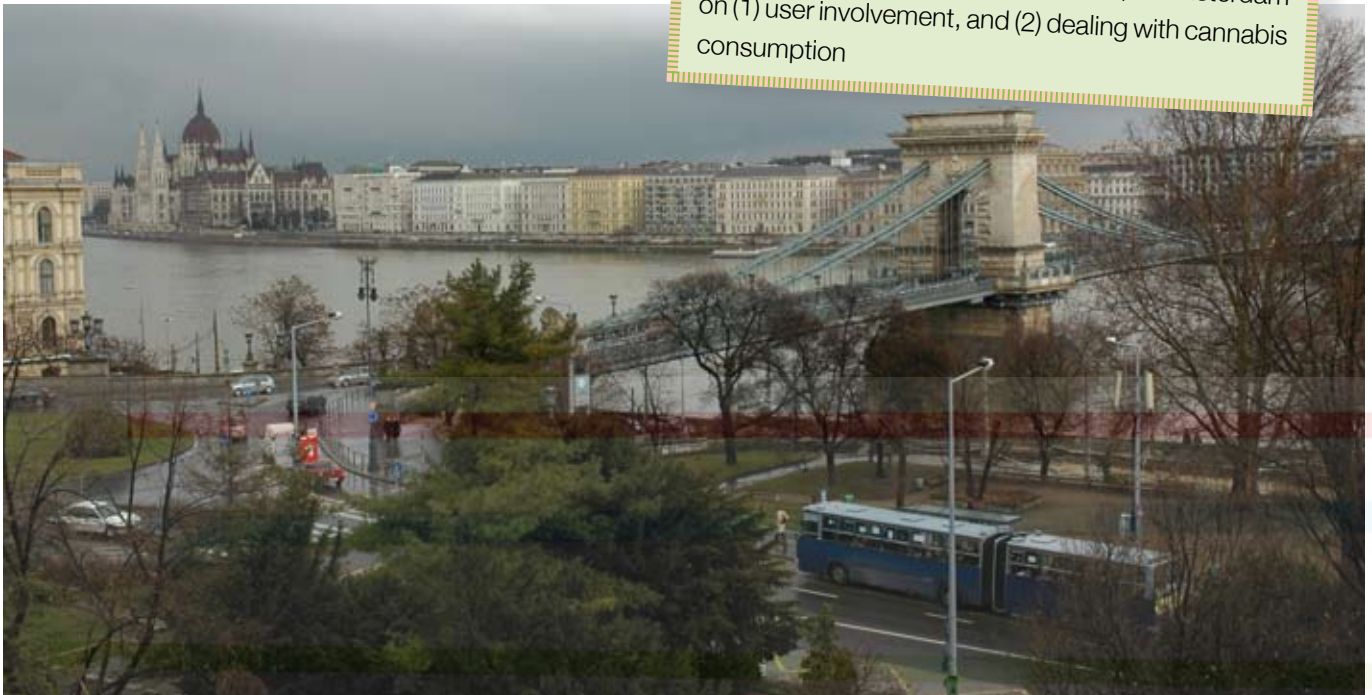
These issues and suggestions could be considered and advanced by way of a review of the EXASS Net - Objectives and working methods (Appendix two). For example, the objectives could be amended so as to highlight the central importance to EXASS Net of the input of the NGO sector. Secondly, the tasks of the Steering Group could be reviewed with a view to clarifying procedures or guidelines for the organisation of future meetings.

Following the meeting, the Steering group and partners had a brief meeting to discuss future meetings of EXASS Net. The following events were agreed:

5th EXASS Net meeting (spring 2009) in Budapest on youth drug cultures, party drugs and club scenes

6th EXASS Net meeting (autumn 2009) in Oslo on the role of outreach work in responses to drug problems

7th EXASS Net meeting (spring 2010) in Amsterdam on (1) user involvement, and (2) dealing with cannabis consumption



5th EXASS Net meeting (spring 2009) in Budapest

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