

Expert Seminar

Drugs, Law enforcement and public health and social services in South Eastern Europe

Sofia – Bulgaria, June 6th 2014

The expert seminar on "Drugs, Law enforcement public health and social services in South eastern Europe", organized by Diogenis Association and co-hosted by the Center for the Study of Democracy, took place in Sofia Bulgaria, on June 6th 2014. The seminar was funded by the European Commission and the Open Society Foundations.

The objective of this seminar was to exchange best practices regarding cooperation among authorities, law enforcement agencies, public services and civil society organisations offering treatment and harm reduction services. Participants included policy makers, police officers, professionals from the area of drug dependencies, representatives of NGOs (in particular, ones founded by drug-users), and field experts. The seminar primarily focused upon a discussion on innovative methods of cooperation between the police and social service agencies, aspiring to achieve evidence-based, successful, and effective prevention, especially of HIV and other infectious diseases among injecting drug-users, sex workers, and other vulnerable social groups. Its goals included the articulation of tangible recommendations on effective cooperation and joint programmes, as well as the development and implementation of best relevant practices in the South-Eastern European countries.

The seminar hosted experts and professionals from Albania, Bosnia and Herzegovina, Bulgaria, Former Yugoslav Republic of Macedonia, Germany, Greece, Cyprus, Romania, Serbia, Montenegro and Slovenia.

The program included presentations regarding police practices in Frankfurt and Cyprus, and briefings by NGOs regarding accumulated experience in their homelands on the interaction between police authorities and service-provision agencies.

Session I

The conference opened with a welcoming address on behalf of the Diogenis Association and the Center for the Study of Democracy, followed by a concise presentation of the participants.

Law Enforcement and harm reduction: the "Frankfurt way"

During the morning session, the representative of the Drug Crimes Division of the Frankfurt am Main Police presented the model of "cooperation between Organizations and the Police on drug related problems", the so-called "Frankfurt way", an initiative assumed in 1992 that resulted in a decline both in drug—related mortality and criminality.

Frankfurt am Main is the largest city in Hessen, counting 43 local municipalities and a population of 688.191 residents. The so called "Frankfurt Resolution" was introduced in 1990 at the First Conference of "European Cities at the Centre of Illegal Trade in Drugs", as a drug policy declaration that incorporated the "Frankfurter way" model. Frankfurt is often described as the city that managed to quite effectively solve its problems with the open drug scene.

During the '60s and until the mid-'70s, the social reaction to Frankfurt's drug problem was illustrated by student protests in open scenes, police repression, together with an absence of policy orientation. From the mid-'70s and up until the '90s, the situation could be described as chaotic, with numerous police crackdowns, conflicts, and policy changes (either liberal or restrictive) that unfortunately contributed to the intensification of the existing complications. In the late 1980s, the city saw a dramatic increase in social depression. Widespread misery and overdose issues among drug users together with the 147 drug-related deaths of 1991 pushed the city to its extreme limits of problem management. The "Taunusanlage" open scene, located near a Frankfurt park, was frequented by almost 1.000 addicts on a daily basis; the availability of heroin rose, while prices fell.

When these issues peaked, it became evident that police alone could not resolve them. A differentiated, acceptance-oriented approach was developed, aiming at both the protection of the population and harm reduction. After that, police repression turned only against the trafficking of illicit drugs and not against drug-dependent individuals, while police authorities started to collaborate with social-services agencies handling drug users. In 1988, a multi-agency and interdisciplinary cooperation in local drug policy was initiated. The "Frankfurt Monday's Round" was a committee created by the mayor in order to bring together experts working on drugrelated issues. It held bi-monthly meetings in order to adjust the policy and practice of judges, police, prosecutors, the municipal drug policy coordination office and representatives of the local drug services. Harm reduction services were also expanded. In 1989, the attention shifted to low-threshold drop-in centers, while needle exchange was introduced by all drug-service agencies, including mobile units. In 1992, the biggest drug-service center in Europe (the so-called "Eastside") was founded in Frankfurt, to provide services such as methadone substitution programs, needle exchange, counseling, night shelters, and labor projects. Furthermore, a night shelter bus for drug dependent women was also put to use. Four drug consumption rooms (including injecting and smoking) were established between 1994 and 1996.

Over the next years, a policy was applied that combined prevention, treatment and harm reduction measures, by simultaneously reducing criminal repression against drug users. Special task forces were created, and practice quickly showed that the solutions suggested by the "Monday Round" committee were simply based on bringing people together. However, these had to be applied as rapidly as possible; therefore, the so-called "Friday Round" committee was established at the City of

Frankfurt am Main Drug Unit, for the direct implementation of decisions at an operational level.

In 1990, representatives from Amsterdam, Zurich, Hamburg and Frankfurt, teamed up to produce the so-called "Frankfurt Resolution", which underlines the failure in criminally prohibiting drugs. Since then, a conference is held annually in different cities. Over twenty cities from eight countries have joined European Cities on Drug Policy (ECDP) and added themselves to the Frankfurt Resolution.

Since 2004, the local police apply a social program called "OSSIP" (Offensive Sozialarbeit, Sicherheit, Intervention, Prävention - Proactive Social Work, Safety, Intervention, and Prevention) for "a living together in Frankfurt/M". It aims to prevent drug use, enforce harm reduction and social (re)integration, offer additional support to drug-abstinence aiming to a drug-free life, and reduce the number of public nuisance incidents. Police and other municipal officials, occasionally assisted by outreach workers, are in charge of preventing public drug-use and the development of open drug scenes. OSSIP's primary target groups are young individuals (up to 28 years of age), drug-dependents and users with problematic consumption patterns, users wanting to quit, and also dealers, delinquent drug-dependents, and those causing public nuisance. OSSIP is part of the "Frankfurt Way", aiming to balance social order with service-provision to those most vulnerable.

As of 2010, the city police also implement the drug warning system, with the goal of minimizing casualties and analyzing new substances in order to articulate warnings on available drugs. Drugs circulated in the market are systematically monitored, with the purpose of confiscation of questionable substances, their toxicological analysis, qualitative feedback to facilities and drug users, and consultation to paramedics and rescue personnel on case-specific optimal treatment protocols.

The "Frankfurt Way" is always up-to-date with research and monitoring, for improved quality of services. The drug policy model of Frankfurt am Main is built on 4 pillars: 1) prevention, 2) crisis and survival, 3) abstinence programs, 4) repression. Frankfurt's project Drug Aid to Kick the Habit runs: (a) methadone treatment, (b) counseling and therapy, (c) education, job orientation qualification, and employment programs.

In this agenda, the police try to become partners rather than enemies of drug-users, and are officially committed to uphold that the Frankfurt am Main Police will not criminally detain a drug-dependent individual prior to medical treatment (methadone administration). Dependence is a mandatory element in considering someone's sensitivity to imprisonment. When the police arrest a perpetrator, his/her drug-dependence is tested. If it tests negative, custody normally ensues. On the contrary, if it tests positive, a substitute-based treatment is offered by a methadone clinic, after which follows delivery and detention. The delinquent is then transferred to the penitentiary with a notification of drug-dependence, with continuation of methadone treatment in custody.

Under the "Frankfurt way", drug-related casualties have been significantly reduced from 147 in 1991 to only 3 in 2014 (as of 30.05.2014). For the drug division of the city police, prevention is a major challenge for the future: the question is not about "when" a person encounters drugs, but how the person reacts to the offering of narcotics. The objective is to render people "strong" and proactively elucidate them on drugs: rationality must prevail over curiosity.

The NGOs experience on the interaction between police authorities and health or/and harm reduction services

During this session, NGO representatives were called to share knowledge regarding their association with law enforcement agencies, according to a set of questions on the following critical issues:

- 1. Regular contacts between NGOs and the police: actions/incidents for which NGOs and the police normally contact each other.
- 2. Level of NGO satisfaction regarding police response patterns, areas for future improvement.
- 3. Police replies on NGO requests, based on the means and methods employed by NGOs to present cases of complaints, human rights violations, etc.
- 4. Cases of mistreatment of drug users by the police that were widely and publically disputed in recent years (media coverage, etc.), and the role of NGOs in such occurrences.
- 5. Possible law reforms regarding the acts of law enforcement agencies against drug users and other vulnerable groups, and governmental initiatives in this field.
- 6. Other important matters.

Participants from Romania, Serbia, and Bosnia & Herzegovina took the floor.

The Romanian experience

According to the "Romanian Harm Reduction Network", some regular contacts have been established between the police and NGOs. Occasionally, the police approach NGOs workers during outreach sessions with the purpose of gathering information on their clients, and may also ask for consumable supplies (e.g. gloves, condoms and alcohol pads). Moreover, there have been reported incidents of the police hassling clients, by parking in front of drop-in centers and using intimidation.

As a general rule, when incidents occur —both in outreach or drop-in centers— the police do not interfere, and everyone tries to settle things within their own organization. There have not been reported cases where the police had to intervene to settle a conflict, while all recent contacts are related to information requests.

In general, Romanian NGOs are not satisfied with police response manners, and pinpoint many issues that require improvement, such as approaching and handling Injecting Drug Users (IDUs) (i.e. to view them less as a source of information on "big

players" and more like human beings deserving respect), officer's awareness on HIV and other drug related diseases, and their level of comprehending and respecting fundamental human rights.

Commonly, police responses on NGO requests are indifferent and condescending. A handful of police officers understand harm reduction values, and even fewer agree with them. At higher levels of police administration, many debates have always risen on harm reduction and its importance for public health, but such notions do not reach field officers, who do not view harm reduction as a justifiable means to reduce the HIV spread and other related harms, but as a system that encourages drug use and endorses such behavior. Police leadership seems to understand and approve NGO's street-work, but somehow this mindset does not infiltrate lower-ranked field officers. In their everyday practice, the general rule is that the drug user enjoys almost zero rights.

In general, the police authorities have not challenged actions of officers against drug users, as the majority of the general population agrees with the methods employed. Stories of police brutality against individuals in pre-trial custody usually do not make the front pages. The media are either uninterested in such cases or unable to substantially prove them. Several organizations try to publicize acts of abuse against drug users, but nobody takes interest if such deeds are not thoroughly documented, which is almost impossible due to vast lack of resources. The relevant NGOs had provided training to members of the media and police officers, but scarcity of funds and follow-up deficiencies have rendered these efforts weak.

No discussion has sprung in recent years on legislative reforms regarding actions of law enforcement agencies against drug users and other vulnerable groups in Romania. A few years back, a dialogue on decriminalizing sex work was initiated in the parliament, followed by a fairly extensive public debate; nothing actually changed, and the discussion was eventually dropped.

As a rule, when it comes to vulnerable groups, the Romanian church disputes such initiatives. In a country where 90% of the population puts its trust in church, it is typical that politicians will not deviate from the beaten path.

Inevitably, there have been reported cases of injection drug users receiving clemency from justice after enrolling in methadone treatment programs. At times, the police confiscate injecting material provided by the harm reduction programs, while drug users are harassed in search for information, or framed with possession and blackmailed in order to entrap others ranking higher in the hierarchy (large-scale dealers). On other occasions, policemen park across the street from the drop-in centers and take notes about visitors. There have also been cases of drug users battered during pre-trial custody and left in withdrawal without medical assistance, unless they declared themselves drug users or dealers, which is profoundly self-incriminating. According to the law on drugs and in the pre-trial investigative stage, if

a perpetrator of one of its offences provides information or otherwise facilitates the identification and incrimination of other drug-related offenders, he/she shall benefit from a reduction to half of the relevant sanctioning thresholds.

The Romanian criminal justice system needs to promote evidence-and-human-rightsbased approaches in support of harm reduction interventions and drug policy reform. Some of the related suggestions include: (a) proposals on amendments to the Law 143/2000 on the prevention and control of illicit drug traffic and consumption, in order to reduce the negative impact of the current legislation over drug users' access to health care and social reintegration, focusing on solutions for small-scale possession of drugs for personal consumption or cases of micro-trafficking; (b) promotion of continuity of care in police and penitentiary pre-trial detention facilities; (c) increase in the awareness of criminal justice professionals on human rights issues, aiming to improve judicial practices and mind-sets towards drug-users and their rights within the criminal justice system; relevant training programs for judges, prosecutors, police officers, and attorneys, that promote practical applications, procedures and experience-sharing between participants and are built upon partnerships with state institutions and run by experts; (d) efforts to interrupt the spreading of HIV among drug-users in Romania; increase public consciousness of the HIV/AIDS epidemic among drug-users in Romania as a means to advance positive changes in national policies on HIV control among high-risk groups, especially injecting users.

Protocols with the National Administration of Penitentiaries and the General Inspectorate of Police to monitor the detention conditions in police facilities and penitentiaries (in cooperation with APADOR-CH) should also be encouraged. With a couple of exceptions, the general rule is the absence of Syringe Exchange Programs (SEP), Opioid Substitution Therapy (OST), and supply of condoms.

On March 4th 2014, 26 year-old Gabriel-Daniel Dumitrache also known as "Dinte" (Tooth), resident of Bucharest's District 3 lacking official address, left the house he shared with his mother and other family members around 7 p.m. to go for work in Unirii neighborhood. An ethnic gypsy, Daniel had no education or steady job, but earned a living parking cars and carrying odd-jobs. On the same night (March 4th to 5th), policemen showed up at his mother's house asking for Daniels's ID card. About 20 minutes after the officers left with Daniel's birth certificate, the police informed his family of his death. The Association for the Defence of Human Rights in Romania – the Helsinki Committee (APADOR-CH) has asked for a thorough investigation of this case. See the report: (http://www.apador.org/en/raport-asupra-cazului-gabriel-daniel-dumitrache-decedat-in-incinta-garajelor-sectiei-10-politie/).

The Serbian experience

According to a bio-behavioral survey conducted in Serbia in 2013, an average of 15% of heroin users had been tried by criminal courts in the previous year (28% in Belgrade and 8% in Nis and Novi Sad). Serbian law considers any possession of

drugs an offence. In practice, though, due to prison overpopulation, only users proven guilty of severe violations are actually sentenced.

The police often manipulate drug users arrested for small-scale possession into accepting to aid several police operations. Sometimes policemen also –and probably on purpose– dispose of sterile utensils supplied to users by NGOs within their regular harm reduction operations.

The Serbian "Association Prevent" has no regular dealings with the police. Usually, the NGO will contact them, when it organizes training courses for police officers. The singular occasion of police initiating contact with the organization involved an interception of phone-calls by an organization's customer to the "Association Prevent". The police have also conducted inspections on drug users gathered outside the NGO's drop-in center, during bio-behavioral research.

In the field, though, the roles are distinct: police represses, while NGOs work towards harm reduction. This constructs two models of approach taking totally opposite directions, with the police liable to strive to respect human rights of drugusers. Moreover, "Association Prevent" lacks in thorough interaction with the police, due to limited resources for such activities.

In Serbia, no major acts of police coercion against drug-users have been widely debated in the public domain. "Association Prevent" maintains a regular appearance on Serbian media, constantly aspiring to contribute to the drop in discrimination against drug-users.

Currently, there is no ongoing discussion for any sort of relevant reform in Serbia. According to the government, the only active project deals with establishing the so-called "Office for Drugs".

The Bosnian & Herzegovinian experience

Two representatives from respective NGOs ("Association Margina" and "Viktorija") presented the situations in Bosnia and Herzegovina.

"Association Margina" cooperates with the police on harm reduction since 2010. To begin with, the reality was fairly similar to the Romanian experience, but collaboration brought many positive changes. In 2003, and for a couple of years, there was no contact with the police, and scores of problems emerged. Frequently, the police would seize harm reduction utensils, and drug-users would be detained and treated as common criminal offenders. In 2005, "Association Margina" took a strategic decision to begin providing training for police officers, voluntarily and free of charge at first. Later on, training was included in relevant funded programs and received special financing.

Nowadays, there is excellent collaboration between the organization and the police. NGO workers maintain regular contact with police officers. If a dependent drug-user is arrested, the police contact the organization and encourage him/her to benefit from its harm reduction services. The organization's street-workers are registered at local police stations, so as to implement utensil distribution smoothly and uncomplicated, unhindered by law-enforcement inspections.

There is no specific or characteristic drug-related case that received extended media coverage in Bosnia and Herzegovina. One of the next strategic steps for "Association Margina" is to work closely with the media, and reach a level of collaboration similar to that with the police. On that area, education and training of the police is now a routine in the police curriculum, and even special police forces are trained on the rights of drug users. In general, the police are quite active, and police officers follow protocol, avoiding meaningless arrests of dependent drug-users who try to get help by harm reduction programs. Additionally, "Association Margina" also provides legal assistance to drug users, and its legal professionals closely collaborate with the police on many levels.

As regards national law reforms, the Ministry of Security has recently asked for the evaluation report on the implementation of the national strategy and the national action plan for the period 2009-2013, while a new national strategy and action plan are currently prepared. Also, in the immediate future, a new collaboration with the Ministry of Justice is about to initiate, with emphasis on alternatives to incarceration for drug-users and primary prevention.

The Government of Republika Srpska has established the Republic Srpska's Committee for the Prevention of Drug Abuse with 13 members, among which the NGO "Viktorija". The Ministry of Internal Affairs also hosts the Strategy implementation Team, which provides professional, administrative and technical support to the Commission (i.e proposing control strategies over narcotic drugs and the prevention of drug-abuse for 2010-2012 and their relevant Action Plans, drawing the new control strategy for 2014-2020, as well as the Action Plan 2014-2016). This unit also prepares strategic documents currently in the process of legislative adoption and incorporation. Furthermore, it develops Operational Guidelines for Therapeutic Communities in the Republika Srpska, Standards and Operational Procedures of Drop-in Centres for IDUs. More specifically, in the Banja Luka region, there is collaboration in developing drug-abuse prevention protocols.

Inter alia, several activities are pursued, mainly focused on increasing public awareness and sensitivity on the issue of drug-abuse (e.g. naming an International Day against Drug-Abuse and Illicit Drugs, the "Month against Addiction" events, organizational and executive partner to the 1st and 2nd International Symposiums on Substance Abuse for "multi-sectoral contribution in the fight against addiction", publication of educational material and relevant literature).

As to harm-reduction policy on law enforcement area, Bosnia & Herzegovina run a Global Fund program (Round 5 and 9) for the training of police officers on harm reduction programs, the training of police officers and border police on "HIV and high-risk occupations", the development of training toolkits for civil and border police, follow-up of training, etc. One of the program's interesting aspects is that, between two trainings, participants are required to organize on-the-job training with their colleagues. During the implementation of the needle and syringes exchange programs among injecting drug-users within the outreach and drop-in centres, there is uninterrupted support of and communication with the Ministry of the Interior. Within the above frame, police support is also encouraged during the implementation of bio-behavioural studies on the prevalence of HIV, hepatitis B and C, and syphilis, as well as high-risk behaviours in injecting drug-user populations.

Generally speaking, the best way to provide effective responses to the question of solving the drugs issue in a society is to link public policy, civil society, and professionals to a singular, integrated, and multi-disciplinary structure that acts on different levels and has shared responsibility.

Discussion

The discussion that followed the first part of the morning session focused mainly upon the way Frankfurt gained from the cooperation between police authorities and health service providers. It started upon a police initiative, after they acknowledged and realized that they alone could not solve the city's drug problem. Of course, open-scene consumption still exists to a point, but it is only limited to a specific place, where 10 to 20 individuals use on a daily basis. Police intervenes to escort users to safe consumption rooms, not detention facilities.

The group also discussed how easy or hard it was to bring about this change in police mentality towards the intended scope. It is true that it was quite hard, and plenty of interventions were held in the beginning. However, even today police officers still find it difficult to comprehend the police's preventive agenda and its place in the social field. Nevertheless, cooperation would be unheard of 25 years ago, yet today the police collaborate well with health and harm-reduction services. Still, a lot of work is expected. It should be stressed that the legislative amendment propped the mentality shift when it came into force in the early 90's.

Moreover, training at a practical level was provided for both police officers and social workers, and a discussion was held on whether Frankfurt police has developed cooperation with police authorities in Germany or other European countries.

Additionally, the "Frankfurt way" was analyzed in how active its contribution and involvement are in rendering harm-reduction services or medical care, similar to models followed elsewhere. In Frankfurt, methadone treatment is exclusively administered by medical doctors in hospitals, while the police simply hands users

over to these medical facilities. However, a program has recently initiated that allows police officers to administer Naloxon in spray form.

The Protocol of Cooperation between the Drug Law Enforcement Unit of Cyprus Police and the ministry of Health, for the referral of young offenders to Mental Health Services Treatment Centers.

In the same session, a representative of Cyprus Police presented another effective model: the Protocol of cooperation for the referral of young offenders to the Mental Health Services Treatment Centers between the Cyprus Police Drug Law Enforcement Unit (D.L.E.U) and the Ministry of Health (Mental Health Services).

The Drug Law Enforcement Unit is a former part of the "Criminal Investigation Department" of Cyprus Police. It was established as a separate Unit in 14/02/1991, aiming to prevent and combat illicit drug trafficking and consumption at a national and international level. This operates through the reduction of supply and demand, and also via international cooperation.

Members of the Unit participate in EU and Council of Europe working groups, as well as United Nations International Forums on combating drug-related crime. The EU and International cooperation office of the D.L.E.U. receives and transmits relevant information/intelligence through to the Europol National Unit, the Central Interpol Bureau, the Police Cooperation Office of the EU and International Police Cooperation Directorate, and the Drug Liaison Officers/Police Attachés.

The main finding of the national statistical data reveals an increase in Cypriots involved in drugs cases during the last years. The number of arrests and confiscations of illegal drugs remains high, while there is also an increase in import and consumption of new psychoactive substances, as well as new entries in the synthetic-drug market. Most drug-related deaths were attributed to opioids, and specifically heroin. According to the same data, the typical profile of such deceased is: male, Greek-Cypriot, 30.8 years old, multi-drug user. The majority of offences still concern the possession and use of herbal cannabis, the most widespread illicit substance in Cyprus. Seized quantities of cannabis plants had significantly increased compared to the previous year, while ecstasy continued the previous declining trend, though it seems to have been replaced by methamphetamine. In recent years, cocaine seems to be the second drug of choice for Cypriot users, together with a decrease in the availability of heroin, a phenomenon also observed in other EU Member-States. However, heroin is the most prevalent drug of abuse.

The Prevention Office of the Drug Law Enforcement Unit takes drug awareness actions and implements programs for members of social networks, students and teachers, parents, military personnel, and other organized groups. Police and social intervention officials provide initial guidance to those seeking counseling and

treatment for drug addiction. Their aim is to motivate youth with drug problems and their families, to ask for help from experts.

As of November 2007, a new approach was introduced in Cyprus with the adoption of a European program of selective prevention. The Antidrug Council adopted the pioneering and evaluated EU program "FreD goes net", as an Early Intervention for Young drug users in Cyprus, "FreD goes net" is the European development and transferred equivalent of the German project "FreD – Early intervention in first-time drug offenders" to 17 EU member-states. "FreD" was developed in the late 1990s to address the issue of growing numbers in young drug users who did not regard themselves in need of any help. It activates and utilizes the existing support system to reach after their first-time arrest for illegal drug use (usually of cannabis), by conducting a counseling session followed by a short intervention curriculum. To "FreD", local drug-advice centers are beneficial when in co-operation with the police, juvenile court representatives, and the judiciary. An objective of "FreD goes net" was to establish cooperation between involved institutions and individuals, through collaboration between the police, judicial authorities, GOs and NGOs active in the field of drug treatment. At a behavioral level, the course (intake interview and eight hours of group intervention) aimed to encourage young drug users -of illicit or even legal drugs- to reflect on and possibly change their consumption patterns to halt them from drifting into dependency.

Between December 2008 and December 2010, a trial implementation of the relevant program was initiated in Cyprus that addressed young individuals (14 to 24 years old) that were arrested for first time arrestees for drug-using. The main objective was to offer early intervention through Counseling Centers for Adolescents and Family run by the Mental Health Services of the Ministry of Health of Cyprus in partnership with the Drug Law Enforcement Unit, to increase knowledge and facilitate behavioral shifts among young drug users, thus avoiding or even delaying dependence. Upon completion of the trial phase in January 2010 and following the evaluation outcomes of March 2010, new protocols have been established between the Drug Law Enforcement Unit and Mental Health Services to improve the existing project, and also the Ministry of Education and Culture to introduce early intervention programs in schools, to tackle the issue of legal substance use alone. In February of 2011, the Protocol of Cooperation was officially adopted.

According to the methodology based on the Trans-theoretical Model which is an integrated, bio-psychosocial approach to conceptualize the process of intentional behavioral change, the Stages of Change are:

- Pre-contemplation: Individuals in this stage do not consider or intend to change a problematic behavior.
- Contemplation: Individuals feel a desire to change a particular behavior.
- Preparation: By the time individuals enter this stage, the pros of attempting to change a problematic behavior outweigh the cons.
- Action: the beginning of an actual shift in the targeted behavior.

 Maintenance: Individuals have successfully achieved and maintained a behavioral transformation.

Motivational interviewing facilitates user drive. Main target groups consist of people arrested for drug use and/or drug possession, parents and families, and generally people who contact the Drug Law Enforcement Unit 24-hour hotline.

The main principle is based on the rational implementation of the Protocol of Cooperation, within an effort to develop social and treatment policies and measures in the framework of the criminal justice system, to support drug-dependent individuals in the course of their rehabilitation and social re-integration.

The aim of the Protocol of Cooperation for the Referral of Young Offenders to the Mental Health Services Treatment Centers between the Cyprus Police (Drug Law Enforcement Unit) – Sovereign Base Areas Police and The Ministry of Health (Mental Health Services), is to provide young drug users (arrested for the first time) with an alterative. Through referral to therapeutic programs, they are given the opportunity to broaden their awareness, reflect on the issue, and shift their attitude on drug-use.

The activation criteria for the Protocol of Cooperation are the following:

- First-time drug-related arrestee minors and young adults.
- Seized drug quantity exclusively intended for personal use.
- Criminal liability restriction (14 24 years old).
- Immediately before or after the search or arrest, the person must have not breached Sec. 244 of the Criminal Code; upon apprehension or arrest by the Police, his/her behavior must not have incited others to commit a criminal offense.

Provided that the person will attend and complete a treatment program in one of the government treatment centers of the Mental Health Services and that he/she will receive a relevant certification within two years from his/her induction, the case shall be filed as "otherwise disposed of", pending go-ahead from the respective Attorney General.

The Protocol of Cooperation is an innovative format in the Cypriot criminal justice system. An improvement of collaboration between National Mental Health Services and the Police is underlined in the preamble to the Protocol (close contact with cooperating partners reduced red tape), thus creating a common point of reference in installing the mechanism: sit all stakeholders around the same table and build trust, and also improve the quality of Mental Health Services. The Protocol of Cooperation has covered areas of selective prevention in the existing support system for young drug-users, and is expected to expand its operations to include referral to other, non-governmental treatment alternatives.

Some of the additional positive results of its implementation include:

- Increase in cannabis users in treatment, and reduction of risk of problematic use.

- Improved adjustment of procedures to local needs and the legislation.
- Population reach far wider than what other services could alone achieve.
- Reduction in years until turn-up (from 8.5 in 2006, to 6 in 2008, and 5.7 in 2011).
- Reduction in number of users in the justice system cost effectiveness.
- Facilitation and improvement of access for youth and their families to mental health services.
- Formulation of a positive profile for Police authorities to the general public.
- Reinforcement of the notion of security, justice, upgrading health issues.

The experiences gained from the implementation of the program might help other countries adopt it in the future. According to the Cypriot experience in implementing the Protocol, if State agencies intervene early on to the affairs of the youth, behavior shifts regarding their drug consumption are remarkably substantial.

Discussion

In the short discussion that followed the presentation of the protocol, it was noted that Cypriots intend to rapidly expand its application, as it has proven effective in practice.

At first, the program's therapeutic personnel had expressed some hesitations, especially regarding the handling of participants' confidential information. However, during its implementation, no issues of confidentiality came up, as the police do not ask for personal data of users who participate in such programs and respect the confidentiality between therapists and users.

The Cypriot legislation provides zero tolerance for drug possession. In practice, the police –having realised the cannabis-consumption culture among the youth– try to implement early intervention through the protocol's agenda, which offers an alternative to penal procedure for young users willing to take advantage of the offered services. However, it should be reminded that the protocol is not a legally binding instrument for the authorities. In theory, the Attorney General can disagree to the induction of an offender to this alternative program. In practice, though, the Attorney General ultimately assents to the proposals of the D.L.E.U.

Most users entering the program are in the pre-contemplation stage, absolutely unwilling to undergo any changes. They are in need of mobilization, which follows via utilization of motivational interviewing skills, development of good relationships between the police and the so-called service-users (not drug-users). Users have a maximum of two weeks free of custody to decide on their participation in the program, though in most cases this procedure ends promptly, after one or two preliminary sessions.

The intensity and duration of the program is customized for each user and their needs. It may vary from once of twice per week, for 4-6 months or even 2 years. This relies upon the therapeutic personnel only, without interference from the police.

As a rule, high-risk and low-risk users are grouped separately, in two operational therapeutic centres; one for individuals aged 14 to 22, and another for older users. There are also customized programs for students and their needs, and the possibility to enter the program even after a 2nd or 3rd arrest. However, the latter is resolved according to case, keeping always in mind that relapse is a part of dependency, but also of therapy.

A point for future improvement lies in the establishment of a follow-up stage after completion of the program. Its absence significantly impedes factual evaluation and long-term efficiency assessment.

Despite the conflicts between a police model based on repression and coercion and a harm reduction model based on the user's voluntary participation, the application of the Transtheoretical Model by the police and therapeutic services is highly regarded by participants, as it is quite effective and applicable to all types of dependency, by accurately describing the stages in an addict's path towards full recovery.

More short presentations ensued, with representatives from Former Yugoslav Republic of Macedonia and Albania.

The Former Yugoslav Republic of Macedonia experience

In Former Yugoslav Republic of Macedonia, "HOPS" has been active in harm reduction since 1997. At first, only one drop-in centre operated, and interventions were limited. Later on, with support from the Global Fund and in cooperation with the Ministry of Health, similar activities sprung in many urban areas. It is characteristic that the first agreement between "HOPS" and the Global Fund was also undersigned by the Ministry of the Interior, which has proven very supportive in the whole process and implementation of harm reduction programs. In general, the police are actively involved in the field, and also participate in the national coordination mechanism for drugs.

Currently, "HOPS" runs three training programs, aiming: police stations, drug-cases inspectors, and special task forces against street crime. This training emphasises on a human rights approach, focusing on the needs of drug-users, promoting harm-reduction programs, etc. Actually, one of the trainers is a police official with international experience on the field to share, offering peer education to colleagues.

Open harm-reduction programs operate in 12 Former Yugoslav Republic of Macedonia cities. Before their launching, the organization had discussed extensively with the local police, to earn their trust. In 7 municipalities, the police actively participate in drafting the local action plan, and there are examples of fine cooperation with NGOs. In one city, for example, the local police try to refer drug users to "HOPS", and avoid imposing detention or arrest and transfer to the police station.

In general, "HOPS" cooperates well with the Ministry of Interior, and mutual aid has solved some problems. For that, high-level meetings are held frequently for the last 5 years.

Of course, there are cases of the police abusing drug-users in the streets, and many have complained for receiving accusations by the police for crimes they never committed, or even brute force during inspections. For these users, "HOPS" offers legal aid and support, but one national problem is the absence of an independent agency for monitoring police misconduct. As a result, 99% of the complaints for such violations are not investigated. As regards sex workers, there have been cases of reported violence and rapes by police officers (e.g. 3 sex workers forced by the police to test for HIV and hepatitis on November 2008), but the same issue applies.

The Albanian experience

The Albanian NGO "Aksion Plus" has regular contacts with the police regarding drugusers and LGBTs (lesbian, gay, bisexual, and transgender individuals). In some cases, the police may request information for NGO clients enrolled at the Methadone Maintenance Treatment (M.M.T.), after presenting official paperwork from the Prosecution Office. NGO experts are invited to defend drug users before Court. Most frequently, they are in touch with the police concerning drug-users who get arrested and require M.M.T. as soon as possible. They either receive methadone from NGOs, or by family members who are entrusted with the medication, or by police health services. On a policy level regarding prevention and other relevant issues, "Aksion Plus" collaborates with the Police Directorate and the State Police.

In general, the interaction is rated positive; the Police, Prisons and Probation Service considers "Aksion Plus" a constructive partner for addressing and handling crucial issues relevant to drug-users. Practically, they are satisfied to collaborate with an organization in a way that eliminates formalism, bureaucracy, and long procedures that prove quite detrimental to arrested or detained drug-users.

As noted, there is a tendency for close collaboration with Civil Society Organizations (CSOs) that quite often contact "Aksion Plus" to address drug-use issues. The Ombudsman is also an effective mechanism that monitors violations of human rights, and a partner to "Aksion Plus". Human rights organizations are becoming increasingly aware and active, and the Police, Prisons and Probation authorities try to become as transparent and responsible before the media and the public at large.

However, isolated cases of violence have been recorded that were dealt with by respective institutions (NGOs, Ombudsman, and the Media), while "Aksion Plus" has delivered training sessions for Police and Penitentiary officers.

As to law reforms, the conduct of law enforcement agencies toward drug-users is always an open issue, but the governmental gears run very slow. There are planned strategies, but not properly funded. There have also been suggestions to amend the

Penal Code (both general part provisions and specific sections related to substance abuse), though nothing has materialized yet.

In Albania, the most positive reform relates to the Probation Service, as almost all cases of drug users are referred and supervised by A+, which is a step forward on a more humane treatment. This process is ongoing, and the two institutions have agreed to improve their collaboration.

Session II

The afternoon session included short presentations from Montenegro, Greece, and Slovenia, on the interaction between the police and treatment service providers.

The Montenegrin experience

In Montenegro, "4life" NGO applies prevention protocols, runs workshops and forums, and provides education and counselling to people who arrested for drug-related crimes. It cooperates with the police authorities in all these activities, and several users have joined its treatment programs after police guidance.

Quite often, though, drug-users complain about police practices, especially for being incriminated for offences they did not commit. When petty offenders who are drug-users are arrested, they are asked to confess to a crime, convinced by police officers that they will be released after their testimony; after admitting to acts they never perpetrated, they receive heavy incarceration sanctions. One of the problems in Montenegrin case-law is its inconsistency of penalties amid similar cases. Sometimes, long imprisonments are imposed, even though the drug quantities are evidently intended for personal use. The law is interpreted variably, and drug-users are often sentenced for cases not based on evidence, but only vague testimonies. NGO "4life" is especially active in the local media, and its activity has contributed to the reduction of discrimination against drug-users.

The Greek experience

During the first session, a representative of the Greek Drug & Substitute Users Union presented the organization's experience of Greek police practices in the field of harm reduction. The Union was founded in 2011, it is the first and only suchlike association operating in Greece as a drug activism movement, and has faced opposition even from the more progressive and radical fractions of Greek society. Greek stakeholders showed interested in how the union's beliefs and ideas would be expressed and implemented, and almost all approached the Union, to work with it and utilize its collective empirical knowledge on drug-use and the actual functioning of drug policies in Greece. That is to say, all but the Police.

According to the presentation of the Union's representative, drug-users in Greece are subject to police brutality and violation of human rights on a regular basis. The contacts of the Union with the police are usually conflictive. Greek police officers exercise an unacceptably punitive and criminalizing behaviour towards weak,

homeless, young, and beginner drug-users. On the other hand, veteran and older drug-users have almost no possibility to live a decent life, or even merely survive, as currently drug-users are not granted any welfare benefit allowance, despite their numerous medical, psychological and mental problems (in violation of the World Health Organization directives that universally define disabilities). This situation, together with the daily ritual of the police pursuing street drug-users, renders their lives unbearable and their prospects to change outright impossible. However much the Union would like to find common grounds of collaboration with the Police, such likelihood seems impossible at the moment.

The police adhere to a strategy that the Union's members totally contest. The Union's major request is harm reduction. The Greek police are not familiar with the term, despite efforts of the O.S.T. programs. Police officers often attend seminars and discussions on drug policy, and allegedly receive special training on handling drug-users. However, this is not implemented in every-day routine. Drug-users are treated harshly, even by the most trained of officers. Recently, some of the Union's members met with a high-ranking officer certificated as trained on infections; he was not familiar with facts of HIV transmission.

The Union's representative cited some cases that were heavily disputed in public:

- 1) In a big city, the local chief drug detective was on an Albanian drug dealer's payroll (many discussions over the phone were intercepted). He was arrested and prosecuted for serious charges; however, on his arrival to the prosecutor's office, gathered colleagues were cheering, supporting, and treating him like hero.
- 2) Recently, a mentally challenged youngster was imprisoned for possession of 2 grams of cannabis and a large quantity of heroin. A large-volume drug dealer was released from custody having provided the police with valuable information, i.e. the youngster's name. However, the large quantity tested negative for heroin; it was an allowed substance.
- 3) A world-wide famous case which inspired a documentary called "Ruins" referred to the arrest and public castigation of female HIV carriers presented as sex workers who deliberately transmitted the virus. In truth, the women were mostly drug-users. Incidentally, this took place during a national election period, and is a landmark case for Greece, reported by all four Greek participants.
- 4) Another upset that received international attention was the publication of pictures taken by patients of prison hospitals that lacked proper hygiene and staff to handle cases such as serious heart problems, Kaposi's sarcoma, HIV, Hepatitis C, etc. Most patients were not serving time for felonies.

According to the Union, the orientation of law enforcement has focused more on drug-users in the last two years. It is quite often that drug-dealers will blow the whistle on their clients to the police to maintain a life away from custody, which leads to arrests of dependent individuals. Therefore, drug law enforcement needs a shift in orientation. The condition and lifestyle of drug-users must be thoroughly examined, and drug-use provisions should be reviewed. The hunting down of drug-

users must cease, and police officers must discard the punitive and promote a supportive approach. A large nember of Greek prisoners are drug-users, so a turn to treatment instead of punishment is crucial, with harm reduction being more beneficial and constructive for both sides.

Drug-users aspire to live in a society that treats them like proper human beings with human rights. In their everyday lives, in O.S.T. programs, they meet people with skills, talents, capacities, creativity and sensitivity, and such traits they were deprived the chance to develop. With only a little support, education and true care, these people can be something more than drug-users: they can have a life.

According to the NGO "PRAKSIS", in the last two years, the Greek police (especially in Athens) send their men across the medical centre and mobile units offering free and anonymous testing. Sometimes, they only stand in uniform and observe, and occasionally they halt individuals asking for legal documents. This practice scares people away form the mobile units. Whenever random checks take place outside the medical centre, immigrants and asylums seekers disappear for the next 5-7 days. PRAKSIS is currently collecting data on every police activity on a daily basis, to construct a report that will be submitted to the Ministry of Public Order.

On March 2013, the Greek Police and the Ministry of Health implemented operation "THETIS" within the Hellenic Centre for Diseases Control and Prevention. The idea was to visit drug-user hangouts in downtown Athens, forcibly transport them to Amigdaleza (a detention centre) and –according to the relevant press-release– test them for HIV and HCV, log their medical history, and then release them to return unaccompanied to Athens –far from a walking distance. This went on for a month.

On August 2012, the Greek police and the Ministry of Health launched operation "XENIOS ZEUS". It involved visits to immigrant hangouts, mostly in downtown Athens, and forcible transportations to detention centres, regardless of presentation of legal documents. This initiated numerous "sweep" activities by the police that endure to day, and pack detention centres with individuals that finally prove to be legal immigrants or asylum seekers. The most recent one (April 2014) counted almost 1000 apprehensions for document verification; after 2 days of cross-checks, only 25 were lacking the proper legal documents. The least one can say about such operations is that they are cost-ineffective.

Since 2014, OKANA has inaugurated an educational program in collaboration with the Greek Ministry of Public Order, to educate police officers on best practices for marginalized population groups, mostly focusing on drug-users. PRAKSIS collaborates to this project by stationing one psychologist per month to assist the educational procedure with accumulated experience.

According to the next Greek participant, representing "Centre for Life (CFL) – Kentro Zois" [NGO supporting people living with HIV/AIDS (PLWHA) by offering a wide range of services and prevention activities], the organization once had only rare

contacts with the police, as there was no practical reason for such an interaction. This, however, changed in April 2012. At that time, the police issued Regulation 39A, concerning the collaboration between the Ministry of Health and the Ministry of Public Order and Citizen Protection. In this context, the police in cooperation with the Hellenic CDC are allowed to conduct mandatory HIV testing among populations who are considered "suspicious" for infectious diseases and may "jeopardize" public health. As mentioned by the fourth representative, several women were forcibly tested, charged with a felony, imprisoned, and publicly exposed in national media. These women were portrayed as foreign sex workers, but most turned out as Greek drug-users who were offered extra money for unprotected sex. Most of them were unaware of their HIV condition, and were tested for AIDS without their consent. The police announced the positive results in a police station, and these women were arrested and prosecuted (a chronicle of this story is presented in the documentary "Ruins", directed by Zoe Mavroudi: http://ruins-documentary.com/en/).

Several NGOs have reacted and highlighted the outrageous violations of human rights. Some have also filed lawsuits against those responsible, including the medical doctors who ran the tests and the Hellenic CDC (the case was recently dropped), while several participated in a committee for the amendment of Regulation 39A. The regulation is still officially in force, but temporarily inactive.

In 2011, Greece faced an HIV outbreak among injecting drug-users. In 2012, harm reduction protocols were implemented by several organizations (OKANA and an NGO network, KETHEA, etc.) NGOs Centre for Life, Praksis, Positive Voice, and Medicines du Monde, provide trained volunteers to OKANA's streetwork interventions.

In implementing these programs, several problems are reported by street-workers, such as police conduct and lack of collaboration. "Sweep" operations force injecting drug-users to constant hiding or relocating, making it almost impossible for street-workers to regularly access them. Frequently, the police seize safety kits offered by street-workers to drug-users and disposes of them, while, generally speaking, the police's presence is intimidating and restricts street-work efficiency.

On January 2013, the Ministry of Health invited several NGOs and governmental agencies to collaborate in order to plan and deliver a strategic plan for the reduction of the HIV outbreak among injecting drug-users in Athens. On February 2014, after several meetings, discussions, training sessions, proposals, standstills, disagreements and modifications, the Ministry of Health and collaborating NGOs drafted and announced the official "National Action Plan for the reduction of HIV outbreak among injecting drug-users", which is quite vague, lacking a timeframe and any information on funding. However, it is welcomed by several NGOs under certain preconditions regarding the Hellenic CDC and Regulation 39A. It requires a representative of the Police to the committee, and clearly prioritizes collaboration with the Ministry of Public Order and Citizen Protection (Police) for its optimal implementation.

KETHEA, the largest rehabilitation and social reintegration network in Greece, has been providing service to drug dependent individuals and their families since the the first Greek therapeutic community (Ithaki), was established in 1983. Its services are offered free of charge, on the street, in prisons, and in rehabilitation units around Greece. KETHEA also helps people suffering from other forms of addiction, including alcohol, gambling, and the internet.

KETHEA runs many organized drug-free communities, and other programs for social rehabilitation, family support, school and community based prevention, research, and early integration. The economic crisis and harsh social conditions in Greece have brought a constant increase in homeless drug-users, an escalation in suicidal behavior, deterioration in the physical and mental health of drug users, an outbreak of the HIV virus among drug-users, and the emergence of new illegal substances.

Regarding harm-reduction, KETHEA operates two drop-in centers, "Off Club" and "Threshold" (EKAP). It also implements other harm reduction interventions, such as the supply of condoms to sex workers (male, female, and transgender), distribution of leaflets on HIV, and establishing contact between the harm reduction program and the police (information on outreach activities). An effort is ongoing, focused on police education, circulation of flyers, and police awareness regarding drug-users. KETHEA interacts with police leadership to solve everyday problems, such as the seizure and disposal of syringes and paraphernalia upon arrest of drug-users, and obstruction of needle exchange in the presence of police officers.

The Slovenian experience

The Slovenian participant approached the main seminar issues as a treatment provider and policy maker. In Slovenia, when treatment programs were launched in 1994, NGOs organized meetings with stakeholders from all relevant Ministries (Justice, Police, and Health), to reach a consensus on implementation from the very beginning.

The Police do not interfere in street-work activities of NGOs, but rather participate closely in the process. Local relations are encouraged, and harm reduction programs are implemented in collaboration with local police stations. At times things improve and at times they deteriorate, but ultimately ratings are satisfactory, with adequate interaction and coordination.

Police are usually invited to conferences and training courses organized by NGOs, and there is also cooperation at a ministerial and inter-ministerial level. As a result, Slovenia exhibits several examples of fair practices: the police do not obstruct users who participate in methadone treatment programs, and they generally do not show up at treatment centres when an arrest is imminent, as treatment centres must remain safe havens in the eyes of drug-users.

In open scenes, the police are often present and many disturbing incidents have been recorded. In general, though, there are special guidelines, recommendations, and training on police handling of coercion when drug-users are involved. The real problems, though, relate to the police being responsible for custodial terms and conditions, with many complaints from detainees.

In Slovenia, heroin does is not the bigger problem. On the one hand, vast numbers of young users of new synthetic drugs are not aware of harm reduction services and do not acknowledge their effectiveness. On the other, the police do not know how to handle these users, who often suffer from several psychiatric issues.

NGOs also collaborate well with the police on strategic planning and early warning. Compared to previous years, cooperation may be more limited, but it is still ongoing, on both the central and local levels. Of course, if someone asks drug-users, their outlook on this issue will probably be quite different.

Proposals for the development of collaboration models between the police and harm reduction and treatment services

The last part of the seminar focused on a discussion concerning problems arising between the Police and NGO workers, and issues to keep in mind when addressing collaboration with the Police. The purpose of this discussion was to practically illustrate how NGOs can initiate cooperation and achieve their objectives.

The seminar produced some vital conclusions:

- 1) The police must primarily accept that they alone cannot solve the drug problem, and admit that the issue must be tackled within society as a whole.
- 2) Local practices must be encouraged and the police leadership must observe and understand how local stations function.
- 3) The progression must be gradual, and relations should rely on confidentiality and partnership.
- 4) When problems occur, the key for solving them is communication. In this fashion, NGOs and the police can utilize a step-by-step approach to surpass difficulties.
- 5) Feedback to the Police is also crucial, as they must know and understand their mistakes in everyday function. They need to be exposed to the right methodology. A proper approach is also essential: it is ineffective to be exceedingly critical of police practices; instead, it is better to acknowledge their problems and be willing to collaborate.
- 6) Legislative reforms are a vital gateway for some jurisdictions as to harm-reduction practices. In Germany, for example, safe consumption rooms were established only under specific provisions of the federal law. Of course, this is not always a benchmark for all legal systems: the Netherlands and Switzerland –both pioneers on harm-reduction in Europe– lack explicit provisions for such rooms, which function under a gentlemen's agreement.

- 7) Sometimes the correct approach is a personal issue, as a person in the right position may often be the key. If NGOs face difficulties with the Police, they can ask for a liaison to communicate with. This could be an efficient strategy, as proven in some cases.
- 8) Coordination, commitment, and motivation are key-factors for the Police. In Cyprus, for example, the Anti-Drug council is a national coordination body that constructs top-priority action plans to be followed by all partners, the police included. Additionally, it is vital that police officers implementing the Protocol of Cooperation are inspired by it and have faith in their actions.
- 9) Flexibility is an additional key-issue in the field of cooperation in harmreduction. It is impossible to create one universally applicable methodology, but a flexible model could be constructed that could adjust to different legal orders. In some countries, like Greece, the reform should probably start from scratch, i.e. the Police Academy and the basic training of police officers.
- 10) Governments should also exercise policy pressure, and state agencies should be informed on all essential issues analyzed herein. Financing is also vital, as lack of resources can render all aspirations meaningless.

In this last session, participants discussed the threshold quantity for personal consumption. The law often calls for zero tolerance on drug possession, but in practice police officers may not be that unforgiving to small amounts. However, it is still debateable whether this amount should be designated in law or left to the police officer's discretion according to case-specific factors.

Finally, it was clarified that the war on drugs is not a solution, and the police must sincerely acknowledge that. Other approaches and alternatives must be devised, and priority should be granted to innovative ideas, and not only concrete solutions.

Steps forward

Prior to the seminar's closure, a brief reference was made to the United Nations General Assembly Special Session on World Drug Policy planned for 2016. At a regional level, Diogenis Association plans to organize a relevant Informal Dialogue in Athens on 10-11 October on progress made towards UNGASS on drugs, with the participation of delegates from NGOs implementing drug policy reforms in South-East Europe, as well as officials and stakeholders. It would be fruitful if more members of the police could participate in that and other meetings. This could be accomplished via formal invitation from the Police itself, and the participants to the seminar agreed to strive towards this direction.

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