

24 Annex - Justice, freedom and security

186. NATIONAL STRATEGIC RESPONSE TO DRUGS (2008-2012)



Government
of Montenegro

**NATIONAL STRATEGIC RESPONSE TO DRUGS
(2008-2012)**

AND

ACTION PLAN FOR 2008/2009

Podgorica, June 2008

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DRUGS (2008-2012)**

AND

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NATIONAL STRATEGIC RESPONSE TO DRUGS (2008-

2012)

(I) INTRODUCTION

Drug abuse, or drug addiction, is one of the main socio-medical problems of the present civilisation, which represents a real risk for national health, especially in relation to infectious diseases (HIV, Hepatitis C, Hepatitis B, sexually transmitted diseases). At the same time, this problem is closely connected with other social problems, such as poverty, unemployment, prostitution, delinquency, criminality, homelessness, etc.

However, drug addiction is preventable and treatable disease. Timely detection, preventive measures, better treatment of addiction, integration of addiction diseases treatment into public health programmes and social services programmes, can result in improving the situation. This requires that the problem should be treated in its source- on the level of drug user. Treatment of those suffering from drug addiction is the investing in the population health, to the same extent as treatment of diabetes, heart and blood vessels diseases, malignant diseases and other are. As the drug addiction is not only medical problem but also socio-pathological phenomenon, only comprehensive, organized, planned, integrated and continuous actions can give the results.

The significant increase of drug abuse in developed countries occurred in 60s and 70s, and in our region this tendency became significant health and social problem at the beginning of 80s. Chronologically, in comparison to its neighbouring countries Montenegro was the last country to face increase in drug abuse. In the last decade, Montenegro dealt with this problem as a public health concern and safety problem for the first time seriously. Overall unfavourable economic and social situation in the country, influence of the war surroundings, increase in crime and availability of drugs, and their relatively low price, erosion of ethical and moral social codex and traditional family values, trends of "normalization" of negative social phenomena, and many other social processes, gave rise to occurrence of unpleasant social phenomena, accompanied by social pathology.

According to available indicators multiple increase in both drug supply, which additionally has become more diverse, and drug demand took place in Montenegro during the last years. However, the system for monitoring drug related problems and drug abuse in Montenegro has not been consistently established, due to lack of reliable data on the scope of the problem related to drug addiction, i.e. on drug abuse prevalence in general population or in certain population groups. To a great extent, this situation disables understanding the real nature and extent of this problem and consequently planning of adequate interventions.

Empirical studies of psychoactive substance abuse conducted in Montenegro in recent years, indicate continuous increase in the number of drug users and the percent of minors among them, as well as the fact that the first contact with drugs usually happens in final grades of primary school, and that the pattern of regular drug use decreases at lower years of age. The decrease in price of almost all drugs is present, and the increase in criminal acts directly or

indirectly associated to drug abuse, and related legal consequences can be seen as well. In addition, increases in sexually transmitted infections and infections transmitted via blood (HIV/AIDS, hepatitis B and C, gonorrhoea, etc) are evident. According to researches conducted in school population, and considering comparable data from EU countries, it is evident that the problem of drug use in Montenegro is not at the same level as it is in the neighbouring countries and Europe, but it has increasing tendency and, based on all indicators, it will maintain increasing tendency in the period to come. This represents warning and obligation to work harder and invest more (both efforts and resources), as well as obligation to implement this document and its action plans strictly.

Drug abuse and illnesses resulting from drug addiction affect all social classes, all social communities and all countries. Therefore, the principal goal of the United Nations and European Union is to *reduce drug supply and demand*, and accordingly, to keep the drug abuse prevalence within the frames bearable for the community in order not to disrupt the basic values of society, family and individual. Consequently, the main principle of the European Drugs Strategy and the National Strategic Response to Drugs 2008-2012 is the principle of drug supply and demand reduction, which includes addiction prevention measures, measures for drug addiction treatment, rehabilitation and the re-socialization of drug addicts, measures for harm reduction and drug crime suppression related to drug abuse.

In further steps of our country oriented toward approaching European Union, in the field of national policy related to drugs, new requirement will arise related to various new activities and improvements in the area of public health, social policy, education, police activities, customs and judicial system. Therefore, these areas are to be continually developed. One of the important areas of European Strategy in the field of drugs is cooperation with Western Balkans countries in the field of drugs and drug addiction which implying to us, as a partners, needs for establishing high quality cooperation i.e. building high quality capacities for cooperation.

This field in Montenegro has previously been defined through several documents at the end of

2000 and at the beginning of 2001, expert team of the Government of Montenegro developed five-year «Plan and Program for Combating Addiction Diseases in Montenegro». After that, Government of the Republic of Montenegro adopted long term plan and programme for addiction diseases in Montenegro. Further, «Action Plan for Drug Use Prevention Among Children and Youth in Montenegro», which was adopted after formerly mentioned Plan, defined activities for combating drug use for period 2003-2006.

Public Health Institute of Montenegro initiated development of the National Strategic Response to Drugs, 2008-2012 and action plan for the implementation of activities from the Strategy for the period 2008/2009.

National Strategic Response to Drugs 2008-2012 is in accordance with international framework, UN conventions, instructions of the Council of Europe and European Union, and all other international treaties and recommendations in this field but it also considers the experience of other countries. It is based on multidisciplinary, integrated and balanced approach, which incorporates measures and interventions oriented toward drug supply reduction and drug demand reduction.

This document is explicitly based on the principle of balanced intersectoral collaboration and the principle of creating partnership between a country and the civil sector with regard to needs and wanted effects.

Strategic framework will define designing and implementation of the interventions of the whole national programme and both governmental and nongovernmental sector, and it will serve as a basis for development of sustainable system for monitoring and evaluation of the comprehensive national response efficiency to drug use related problems in Montenegro, and also as a framework for adopting action plans for consecutive periods and other strategic documents and law regulations in this field.

Integral part of this strategy is Action Plan for 2008/2009 in which individual goals and their realization are described in detail, as well as concrete tasks of individual subjects involved in this process.

The implementation of the national policy in this field requires balanced, multidisciplinary and integrated approach, which implies coordination of all subjects involved in the fight against drugs and their consequences. The coordinator for the implementation of the policy in the field of drugs in Montenegro based

on this Strategy is National Office on Drugs working within the Government of Montenegro.

The Office should be established as soon as possible, in order to ensure the implementation of measures and their effective harmonisation among state administration bodies as well as between state administration bodies and local administration bodies and their harmonisation with civil sector. By the time the Office is established, coordination will be led by the Commission for Drug Use of the Government of Montenegro which should be set up. Upon its establishment National Office on Drugs will propose members for Professional Council for Drugs and Drug Use,

which will be set up and supported by the Government of Montenegro and will work as an external expert and advisory body for providing support to the Office.

Successful realization of the National Strategic Response to Drugs 2008-2012 and Action Plan 2008/2009 requires political and professional support of all relevant subjects in Montenegro.

Because of the great importance of these issues, the principles of organization and course of addiction diseases treatment are particularly defined in the Strategy, insisting on the principle of approaching addiction disease as a chronic recurring disease. Special attention is paid to usage of opiate agonists in treating heroin addiction. The tasks of health care professionals and institutions in the treatment of addiction diseases, as well as the tasks of civil society, are elaborated in this part of the Strategy.

(II) EXECUTIVE SUMMARY

National Strategic Response to Drugs 2008-2012 is a document for comprehensive planning of the strategic framework of interventions regarding drugs and drug use in Montenegro.

As this document covers wide range of areas and activities, target population has been defined as

the whole population of Montenegro, with the special emphasis on children and young people.

Basic approach in designing strategic framework was so called «policy of four pillars» which predicts equal distribution of both the resources and development plans in four wide areas: drug use prevention, treatment and rehabilitation of drug users, harm reduction related to drug use and the police and customs interventions.

Apart from indicated four areas, National Strategic Response to Drugs 2008-2012 has been designed based on two basic principles, which also represent the general goals – “**drug demand reduction and drug supply reduction**”.

Introductory part of the document deals with the methodology of the national strategy development, and the incorporated principles (the principle of constitutionality and lawfulness, the principle of human rights protection, the principle of comprehensive and continuous resolution of the drug abuse problem, the principle of the global character of drug abuse and global collaboration, the principle of decentralization, the principle of guaranteeing safety, the principle of adaptation to different population groups, the principle of ensuring healthy life styles, the principle of partnership – harmonised and multidisciplinary approach, consistency and complementarity and the principle of centralized coordination, funding, monitoring and evaluation).

In the field of the drug demand reduction the Strategy deals with drug use prevention, treatment and rehabilitation of drug users and harm reduction related to drug use.

Drug use prevention defines strategic approach in different systems: educational system, health care system, social security system, local community, workplace and media.

Fields of treatment and rehabilitation of drug users define strategic framework of interventions in the health care system, as well as in the area of so called «programme for resolving social problems of drug users». They also define the framework for addiction treatment in penal institutions, areas of rehabilitation and reintegration of drug users into society, and scientific – research activities in the field of addiction diseases.

Reduction of harm consequences related to drug use is especially defined in this document, as it presents one of four pillars, and although the approach of «harm reduction» has being applied in the world for many years and its efficiency has been proved in many ways, in our country it has not been developed.

In the area of **drug supply reduction**, the Strategy describes strategic framework of interventions within the police and customs services. It also describes drug use as a subject to the criminal law regulations.

Area of specific objectives and target interventions involves strategic framework in specific prevention programmes, treatment and rehabilitation and harm reduction, especially in the penal system with participation of NGO sector.

Coordination of the National Strategic response to Drugs 2008-2012 is defined through establishment and work of the National Office on Drugs under the Government of Montenegro, which would also have the key coordinative role in monitoring and evaluation of the activities defined in the Strategy.

Special chapter is oriented toward information system in the field of drugs and drug addiction which needs to be established urgently in all areas and on the central level as well.

Research is also important area covered by this Strategy, which also supports this area, especially the implementation of the population researches.

International collaboration is defined by this strategic framework as an area of special

importance and it implies capacity building for such collaboration in all areas and active participation of our country in collaboration on both regional and international level.

Financial resources for the implementation of the National Strategic Response to Drugs 2008-

2012, which will assure high-quality and continuous implementation of activities, have to be within the state and local budget in accordance with the work scope and obligations of particular subjects included in the implementation of these activities

In the Action plans for the implementation of the National Strategic Response to Drugs 2008-2012 individual goals and the manner of realisation of set goals are described in detail, as well as concrete tasks of individual executors in planned period, based on guidelines of the national strategy.

Action plan in the field of drugs covers two consecutive periods – 2008/2009 and 2010-2012.

Upon its adoption at the session of the Government of Montenegro the National Strategic Response to Drugs 2008-2012 will be published in the Official Gazette of Montenegro.

- Ministry of Finance of Montenegro

- Ministry of Culture, Sports and Media of Montenegro

(III) METHODOLOGY

Policies aimed at drug use reduction and harm reduction in the world are mainly based on one of two general approaches: prohibition – policy based on strong internal and external control (policy of USA, Japan, Sweden, etc.) and pragmatism – policy characterized by pragmatic and rational approach in the area of drug use; beliefs that problem solving is only possible by joint efforts of all involved subjects and with clear recognition and pragmatic acceptance of the fact that drug abuse was reported in the past and it will always exist (policy applied in England, Holland, Spain, Portugal, Australia, Canada, etc.)

The world experiences in the policies related to drug issues show that the best results have been achieved when the policy of combating drugs is equally based on four “pillars” (so called «policy of four pillars»)

I Prevention

II Treatment

III Harm reduction

IV Police and customs interventions

The development of first three standards relates to drug demand reduction, while development of the fourth relates to drug supply reduction. Consistence in applying «four standards» implies development and allocation of equal financial resources at national level as well for all four areas, i.e. it implies that none on these four areas should be prioritised.

The National Strategic Response to Drugs 2008-2012 is balanced, multidisciplinary and complete, and, apart from formerly mentioned four areas, it particularly deals with comprehensive coordination of implementation of the national action plan, with monitoring and evaluation issues, public relation, researches, information system in the field of drugs and drug addiction, international collaboration, etc.

The general goals of the National Strategic Response to Drugs 2008-2012 are defined in relation to two general activity areas – drug demand and drug supply reduction.

The work on the document development began in September 2007. Multisectoral Working Group for designing National Drug Strategy 2008-2012 was composed of the representatives from the following institutions:

- Ministry of Health, Labour and Social Welfare of Montenegro

- Ministry of Education and Science of Montenegro

- Police Directorate

- Ministry of Interior and Public Administration of Montenegro

- Customs Administration of Montenegro
- Education Office of Montenegro
- Municipality Podgorica – Municipal Office for Drug Prevention
- Municipality Nikšić – Municipal Office for Drug Prevention
- Special Hospital for Psychiatry «Dobrota» Kotor
- Primary Health Care Centre Podgorica
- Clinical Centre of Montenegro – Clinic for psychiatry
- NGO Sector (NGOs «Preporod», «Cazas», «Juventas»)
- United Nations Development Programme – UNDP
- Health Insurance Fund of Montenegro
- Ministry of Justice -Institution for Enforcement of Criminal Sanctions
- Public Health Institute of Montenegro

prevention, subgroup for the customs and police interventions and subgroup for treatment, rehabilitation and harm reduction.

The key framework for designing the National Strategic Response to Drugs 2008-2012 was EU Drug Strategy 2006-2012. In accordance with the recommendations of the Council of Europe, the professional knowledge of the European Monitoring Centre for Drugs and Drug Addiction has been used as well as knowledge of other European experts and institutions and experiences from neighboring countries.

National Strategic Response to Drugs 2008-2012 is governed by the universal principles of health improvement and activities within different levels of prevention:

- *Health improvement*, carried out through the policy of developing healthy life styles in children and young people.
- *Primary prevention*, whose task is to prevent occurrence of the drug use related problems.
Activities in this field are oriented toward drug availability reduction in illegal market; in field of the health education of school children through the programs for developing life skills; in the field of raising public awareness (especially of parents and family) regarding drug use risks; in the area of harmonizing legislation and creating other preconditions oriented toward reduction of illegal production and drug trafficking.
- *Secondary prevention*, whose task is to detect persons who use drugs as soon as soon as possible (in the phase when the addiction has not yet been developed and where notable

The Working Group has been divided into three working subgroups: subgroup for

symptoms of diseases as well as other consequences are not evident) and to motivate these persons to stop using drugs. Some of the activities in this field will include providing the screening tests on drugs for all health care institutions and interested subjects through municipal Offices for Drug Prevention, and providing adequate medicament therapy and psychotherapy in the acute phase of drug abuse and in the process of reintegration of drug users into society, providing support through the centres for social welfare, etc.

- *Tertiary prevention* whose task is to mitigate negative effects arising from drug use (when symptoms of disease are manifested, and noticeable physical and psychic addictions exist). Activities will be conducted in the direction of intensive medicament and psycho-therapeutic treatment and rehabilitation. This area involves measures for «harm reduction» arising from drug use, which means that it involves different programmes and activities oriented toward active drug users.

Key elements of the National Strategic Response to Drugs 2008-2012 i.e. the Action Plan

2008/09 for the Implementation of the Strategy are based on prior situation analysis¹ in all related areas, on both institutional and non-institutional level.

¹ "Situation analysis in the field of drugs and drug use in Montenegro" is a document developed by the Public Health Institute through direct data collection from all relevant subjects in the period July – December 2007 for the purpose of designing the Strategy, and it is accompanying (component) part of this Strategy.

This principle necessarily includes right of every individual to dignified and professional treatment and assistance in case of an illness or other threatening social situations.

Therefore, the state must assure constitutionally guaranteed rights to health and social safety of its citizens, and simultaneously reduce social exclusion of individuals or groups. This principle also guarantees social inclusion of drug addicts, that is, equal involvement of both active patients and rehabilitated former addicts in education, social and health care systems and in the employment system, as well as fair treatment of addicts in preliminary investigation, during the trial and imprisonment.

All those who are responsible for the implementation of various programmes are obliged to protect the confidentiality of personal data in accordance with their professional ethics and the Constitution.

(IV) PRINCIPLES

Basic principles of the National Strategic Response to Drugs 2008-2012 in Montenegro emerge from the Montenegrin Constitution and legislation, UN conventions, EU regulations, guidelines of the Council of Europe and the specific goals our society wants to achieve in the period between 2008 and 2012.

National Strategic Response to Drugs 2008-2012 and Action Plan for implementation of the Strategy 2008/2009 consistently observe the following principles, which *have equal values and which are not listed by their priority*.

IV.1 The principle of constitutionality and lawfulness

Pursuant to the Constitution of Montenegro and legal obligations, the National Strategic Response to Drugs 2008-2012 respects existing Montenegrin legislation and ratified international conventions and treaties that Montenegro integrated into its judiciary and those that will be integrated in the future.

IV.2 The principle of human rights protection

One of the principle rights arising from international conventions is the right of an individual, to a healthy life which encompasses comprehensive society engagement in the activities oriented towards the protection from circumstances favourable to narcotic drug abuse. Consequently, it is necessary to develop programmes for addiction prevention, drug availability reduction at all levels (from combating organized crime to street-level sale/availability reduction), programmes for treatment and rehabilitation of drug addicts, programmes of help and protection for families, as well as programmes for combating all forms of drug-related crimes.

IV.3 The Principle of comprehensive and continuous resolution of drug related problems

The drug problem control requires a thorough approach, which sees problems of drug use and abuse as a consequence of simultaneous, multi-level activities on both individual and wider social level. This should also include various active participants. Solving the drug problem is a task of different sectors in the areas of health and social care, education, interior affairs, finances, judicial system, security and defence, as well as civil society and the public as a whole.

IV.4 The principle of global character of drug use and global collaboration

Phenomenon of drug use and drug abuse has global character in modern society, and almost every country in the world is faced with this problem. At the same time, this problem moves in the local community and family and everyday life of every individual as well. Search for the solution of drug use problems and significant presence of drugs at global illegal market is being carried out at international level. Montenegrin participation in regional, European and world context should be present at all levels from national to local community levels. It is necessary to extend all sorts of international collaboration at multilateral and bilateral level., and it is also necessary to ensure implementation and harmonization of various conventions, declarations, resolutions, recommendations and guidelines and strategies of international organizations (UN, The Council of Europe, WHO)

IV.5 The principle of decentralization

This principle ensures equal distribution of various programmes and contents in the whole country, in accordance with actual needs in certain local communities and in line with available capacities.

IV.6 The principle of guaranteeing safety of the citizens of Montenegro

This principle arises from the constitutional right of an individual and community to personal and material safety and it should lead to reduction of all kinds of secondary crime associated with drug abuse and drug selling, including precursors as well. This principle is based on United Nations conventions and other international acts as well as on Montenegrin legislation.

IV.7 The principle of adapting to various population groups

It is necessary to develop activities which are adapted to different target population groups and their needs, ranging from preventive programmes, harm reduction programmes to appropriate models of addiction disease treatment, social care and rehabilitation.

IV.8 The principle of ensuring healthy life styles

Programmes of preventive and health education should motivate children and young people to adopt their own healthy life styles and provide them adequate conditions for applying healthy life styles (for example at school, in the family, in the environment). This is achieved by providing objective, generation adapted information on addiction substances and by providing support to children and young persons to gain social skills necessary for making responsible decisions in the life.

Children and young people should be informed about negative effects of drug use, at individual and social level and they need to have access to information and appropriate conditions for development of skills, which will help them to make responsible decisions (for example, not to use drugs, or if they use them to learn how to avoid new additional risks to health).

IV.9. The principle of partnership – balanced and multidisciplinary approach, consistency and complementarity

The drugs policy in Montenegro should take into consideration various approaches in the field of drug use prevention and harm reduction related to drug abuse and incorporate them in a single national system for combating drug addiction. This principle primarily includes primary and secondary preventions, measures for reduction of harmful health and social consequences associated with drug abuse, psycho-social treatment and therapy, rehabilitation and social reintegration of addicts, as well as the promotion of drug supply control with the aim of drug

availability reduction.

By doing so, the state policy is aimed at two directions – drug supply reduction and drug demand reduction. The task of the state is to ensure balanced development of all professionally and scientifically founded approaches and programmes, and to search for new solutions regarding drug use and abuse control.

Generally, none of the approaches to drug prevention has a significant advantage, but they should

be linked and integrated through balanced activities on different levels.

IV.10 The principle of centralized coordination, funding, monitoring and evaluation

Apart from coordination and transparency, implementation of the activities from this Strategy requires balanced use of the budget intended for resolving these problems, in accordance with four pillars on which strategic approach is based, as well as continuous monitoring and evaluation of the implemented activities.

(V) TARGET POPULATION

%	7.2%	6.5%	4.5%	4.7%	4.6%	3.4%	2.3%	1.6%	0.9%
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The target population of the National Strategic Response to Drugs 2008-2012 is almost the whole population of Montenegro, considering the fact that there is no specific age, social or any other subgroup in the general population which is or which can be immune to this phenomenon.

Based on estimation for 2007, domicile population amounted 627 339 people² in Montenegro. Age distribution of domicile population is given in the table 2.

² Data from the insured persons database of the Republic Health Insurance Fund

³ Monstat, Statistical Yearbook 2006, Podgorica

⁴ Monstat, Statistical Yearbook 2006, Podgorica

Table no 2 – The structure of the domicile population (projection) by age groups in 2007³

AGE GROUPS		No	Participation (%)
0-14 years	0-6 years	56	9.04
	7-14 years	66	10.63
	Total 0-14 years	123	19.67
	15-64	423	67.56
	over 65	80	12.77
	Total	627	100.00

Table no 3. Age distribution of the population in Montenegro according to census from 2003⁴

Years	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44
%	6.4%	6.9%	7.3%	8.0%	7.9%	7.3%	6.7%	6.7%	7.1%
Years	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80 and >	Unknown

(VI) GOALS

and fatal consequences of drug overdose;

- to provide conditions for extending institutional treatment programmes in corrective and penal institutions,
- to encourage the development of social protection programmes for drug users, therapeutic communities and communes, including the harm reduction programmes which will

VI.1 GENERAL GOALS

General goals of the National Strategic Response to drugs 2008-2012 are *drug demand reduction and drug supply reduction*.

Drug demand reduction implies measurable reduction of the use of drugs, drug addiction, and drug-related health and social risks through development and improvement of an effective and comprehensive knowledge-based drug demand reduction system by means of target interventions made in prevention, treatment and rehabilitation and harm reduction areas.

Interventions in the field of the drug demand reduction are oriented toward the following sub

objectives:

- to ensure that the question of drugs is dealt with at state and local levels equally with other social, health and economic issues in the country and to adopt necessary systemic measures on that basis;
- to raise awareness of the community about drug use problem and the need for its prevention and affirmation of healthy life styles;
- to provide coordination of various activities at local level and to coordinate activities at the local level and those at national level;
- to encourage preventive activities in this field and various programmes oriented toward drug demand reduction;
- to provide different and high quality capacities and programmes oriented toward drug addiction treatment, by introducing various approaches in treatment of addiction diseases;
- to encourage the development of programmes that will contribute to maintaining or reducing the number of persons with HIV, and Hepatitis B and C

contribute to reduction of social exclusion of drug users. This equally relates to the programmes and activities for social care in prisons and corrective institutions.

- to raise awareness and skills of all involved subjects dealing with drug use prevention, treatment and rehabilitation of drug users and measures and programmes oriented toward harm reduction;

Drug supply reduction implies establishment of the basis for the implementation of the efficient police and customs interventions oriented toward drug availability reduction and drug demand reduction in Montenegro.

Target interventions in this field are oriented toward:

- strengthening activities against organised crime, illicit drugs trade, money laundering and other forms of drug-related crime;
- improving collaboration among the police, customs and the judicial system;
- improving information collection and analytical work in crime detection;

- raising the level of knowledge and skills in staff and bodies dealing with detection and criminal prosecution;
- applying all available and creating new measures for shutting off the flow of drugs along the »Balkan path «;
- participating and using the system of early recognition of new synthetic drugs;
- strengthening police interventions at local level and preventive role of the police;
- ensuring suitable border control with the aim of preventing drugs from entering Montenegro;
- strengthening activities on combating organized crime related to illegal drugs,
- continuing monitoring of precursors and developing collaboration in this field between the customs and police and manufacturers and distributors of precursors in order to ensure monitoring of precursors, their trade and transportation,

- intensifying collaboration with other countries and international organizations and maintaining active collaboration in this area;

VI.2. SPECIFIC GOALS

Besides above-mentioned two general groups of goals, the Strategy is oriented toward achieving

the following specific goals:

- to establish general, comprehensive information system with the aim of collecting, keeping, processing and managing data in the area of drugs,
- to build capacities for establishing the institution of the National Focal Point for Drugs and Addiction for EMCDDA;
- to strengthen relevant legislation in this field;

- to ensure political and financial support for the implementation of the activities defined in the Action plan 2008/2009, and activities that will be defined as priorities at local and national levels in further Action plans;
 - to encourage cooperation among various partners and, in particular, to improve partnership relations with the civil sector in all areas of coordination and decision making and to encourage programmes implemented by nongovernmental organisations on the basis of professional independence;
 - to promote research in the areas of drugs and drug use,
 - to encourage trainings for all professionals working in this field and to encourage all activities oriented toward creating conditions for the development of training programmes at national level;
 - to provide evaluation and stable sources of funding all accepted programmes and measures in the area of drugs, and to develop new programmes for promoting the existing ones on this basis.
 - to establish central office for drugs as a mechanism for coordination, evaluation and monitoring of the activities from the National Strategic Response to Drugs 2008/2012 and Action plans for the implementation of the strategic activities, at both local and national level.
- (10-24 years) in order to ensure better information on consequences of drug use, and to encourage development and adoption of positive attitudes and social skills necessary for prevention of addiction diseases,
- strengthening institutional and functional capacities for treatment of persons who have developed addiction disease, including both those willing to be treated and those who

In terms of its *effect on planned beneficiaries*, the implementation of target interventions from

National Strategic Response to Drugs 2008/2012 would have the following implications:

- improved protection of children and young people against drug use and related consequences through providing special support to young persons, who are in the
«critical» period to develop the addiction, to chose healthy life styles, by strengthening resistance skills in children and young people in the situations of exposure to drugs and against pressure of social environment in which drug use is getting more and more
«normalised
»;
- support given to individuals who have problems to accept healthy life styles due to drug use and to thereby reduce risks to health;
- increasing possibilities and capabilities of a community to respond and successfully resolve public health problems,
- provided availability of preventive programmes to children and young people

are still not willing to be treated;

- reducing the rate of new drug addicts;
- improvement of possibilities for treatment, rehabilitation and resocialisation of the existing drug users;
- reducing the recurring rate in treated drug addicts,
- reducing mortality rate due to drug use,
- reducing the rate of injected drug users in the group of people with HIV/AIDS,
- reducing the possibility of drug supply in all environments.

(VII) NATIONAL STRATEGIC RESPONSE TO DRUGS 2008-2012

National Strategic Response to Drugs 2008-2012 is a balanced, multidisciplinary and comprehensive strategic document, and its special areas of interest are as following:

1. Drug demand reduction in the fields of
 - a) prevention of the drug use
 - b) treatment, rehabilitation and resocialisation of drug users
 - c) harm reduction
2. Drug supply reduction through:
 - a) interventions and collaboration among the police, customs and judicial system in
the fields of the crime related to drugs
3. National office on Drugs within the Government of Montenegro
4. Monitoring and evaluation
5. Public relations
6. Researches in the field of drugs and drug use
7. International collaboration
8. Information system
9. Financing of activities

10. Action plan for the implementation of the Strategy for 2008-2012.

Drug demand reduction implies measurable reduction of the use of drugs, drug addiction, and drug-related health and social risks through development and improvement of an effective and comprehensive knowledge-based demand reduction system, through target interventions in the areas of prevention, treatment and rehabilitation and harm reduction

VII.1 DRUG DEMAND REDUCTION

This area involves activities at various levels of prevention, from initial refusal of experimental use of drugs in all age groups to reduction of negative health and social effects of drug use, treatment, social care and renewed social inclusion of former addicts into society and community.

It is especially important to pay attention to promotion of mental health care in children and young people as well as prevention of HIV infection and other infectious diseases.

In order to ensure as efficient as possible implementation of preventive measures for drug use and drug addiction, it is necessary to ensure enforcement of the existing legislation and also to ensure all additional legal conditions for improving the implementation of these measures.

At national level it is necessary to ensure level of integration and balance of various programmes and activities.

In the process of the implementation of the programmes for drug demand reduction educational system, family, health care and social welfare systems have the most important role. All other systems, citizen associations, media, etc. have also important role. Since the implementation of the demand reduction programme has to be organized at the local level, participation of local authorities and good communication and co-operation with professionals for addiction diseases and politicians are important. This will ensure support and financial resources for the implementation of the programme at the community level.

VII.1.1 Drug use prevention

The basic goal of preventive activities is creation of social conditions that enable an individual to develop a life style that will prevent him/her from drug use.

In order to systemically establish work on preventing drug use it is necessary to ensure the designing, implementation and sustainability of the high quality programmes for drug use prevention as well as programmes for early interventions.

The preventive programmes should be implemented within several systems which affect the behaviour and the system of values of children and young people such as: family, health care system, educational system, local community, media. Furthermore, it is important to develop various models of collaboration of these subjects in the prevention.

In most European Union countries special attention is paid to the development of efficient systems for prevention oriented toward children and young people

The primary prevention programmes oriented toward general population of children and young people, their families, teachers and other relevant subjects have significant role.

VII.1.1.1 Prevention in the educational system

Prevention activities in the educational system involve wide area of drug use prevention programmes, which implies certain elements of risk reduction related to potential drug use. Approach defined in this way involves preventive activities oriented toward abstaining from all drugs, and also towards delaying the first contact with drugs in children and young people. In addition, this approach is oriented toward young people who experiment with drugs or use them occasionally.

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Objectives of prevention and objectives of education are complimentary. For this reason, the school is optimal place for adopting information and developing attitudes and skills. At the level of educational institutions, teachers and pedagogical and psychological services at schools have crucial role in the implementation of various preventive activities. Systematic education of teachers is required in order to support them in the implementation and enforcement of programmes for addiction prevention.

Educational institutions at all levels should provide children and young people with the access to objective information, knowledge on effects of drugs to individuals and society. Besides, the school should provide secure and safe conditions for comprehensive and healthy development of the children and young people. For successful realisation of these objectives school needs additional support of parents and community in which the school is located. The content of harm effects of drugs should be integrated into the regular curriculum and mandatory optional subjects. Children and young people should also be involved in the process of planning and conducting programmes of addiction prevention in schools. This provides not only their active involvement, but also the possibility for applying gained knowledge and skills in real life.

The country has to integrate different approaches oriented toward drug use prevention in the educational system and in other systems for protection of children and young people.

It is required to continually strive to develop and improve educational system by using huge potentials of positive effects to children and to help children in strengthening self-respect, self-confidence and in meeting all growing needs. It is necessary to develop and implement preventive activities at all educational system levels, in accordance with growing phases of the children and young people and to pay special attention to providing information on drugs and creating appropriate environment at schools for leading healthy life. Also, up to now, educational system has assumed large part of responsibilities for organisation and implementation of preventive programmes and programmes for promotion of healthy life styles, oriented toward raising awareness about harm effects of drug use and decreasing interest in experimenting with legal and illegal drugs. One of such efforts is developing curriculum for optional subject "Healthy life styles", oriented toward students of final grades of elementary schools as well as training given to teachers who will implement this programme.

Providing information to children and young people is important, but by itself it is not protective factor. Contemporary programmes for drug use prevention are aimed at improving cognitional, social and emotional development of children and young people, through age-adapted informing about types and health effects of drugs, through adopting constructive attitudes on drug use and supporting skills development. There are two preventive programmes implemented in Montenegro for elementary and secondary schools. It is necessary to maintain support of their implementation, as well as realisation of preventive programmes designed and realised by children and young people in cooperation with teachers, parents and partners in local community.

Special attention should be paid to early identification of risk groups in children and young people, for whom special preventive programmes should be developed, and also special attention should be paid to improvement of measures for secondary prevention, that is, early detection of drug users, in order to prevent experimental use from becoming addiction disease.

Within educational system it is also necessary to support parents, i.e. family, and make collaboration with other institutions in the local community, in order to ensure allocation of

responsibilities for protection of children and young people. Special attention should be given to improvement of knowledge and skills of parents to encourage children to adopt healthy life styles (for example, parents' training on addiction problems and raising awareness about damages related to addiction substances abuse, recognition of early symptoms of drug use and addiction etc.).

In the following five-year period continuous *researches about the substance abuse in student population* will be conducted on the basis of which specific preventive measures and interventions will be planned in order to ensure objective insight into the situation related to drug use in Montenegro.

Involvement of Montenegro in the network of European countries participating in the research of alcohol and drug use in secondary school students which is conducted every fourth year (ESPAD – The European School Survey Project on Alcohol and Other Drugs) is one of the strategic objectives in this field.

VII.1.1.2. Prevention in the Health care system

The health care measures that are implemented within the health care system are the measures of primary, secondary and tertiary prevention of illnesses and other conditions that jeopardize human health and welfare. Consequently, they also include the prevention of addiction and drug abuse.

Through preventive measures health care system acts primary in the systems of chosen paediatrician, counselling services for young people and chosen doctor. It also acts through collaboration and the involvement of health care workers and associates in conducting preventive programmes in the school system which are, mainly, oriented toward prevention of the usage of illicit drugs and toward stimulating young people to confront “the culture” of drug use through making responsible decisions, practising healthy life styles, taking responsibilities for their own health and the improvement of mental health.

In the field of *primary prevention of a community* there have not been systematic measures until now. Strategic goal was determining and amending legislation and developing professional guidelines for regulation of the terms for identifying working ability for receiving driving license (mandatory laboratory diagnostic for narcotics, etc.) as well as defining and amending the legislation and designing professional guidelines for regulation of terms for identifying working ability for possessing firearms (mandatory laboratory diagnostics for narcotics).

VII.1.1.3. Prevention in the system of social security

In the system of social security measures of primary prevention will be carried out together with all families and individuals who are at risk (improving disturbed family relations, abused and neglected children, children from incomplete families, children with behavioural disorders, children without parental care, children in the juvenile detention centres and child protection centres, children from economically endangered families).

VII.1.1.4. Prevention in the local community

Preventive programmes in the local community should be oriented toward the general population and the family, but they should include improved activities for children and young people who are, due to their social and family conditions, at risk for becoming addicts. In addition, programmes of addiction prevention in a community must be oriented toward various groups of young people with risky behaviour.

Preventive programmes in the community should involve multidisciplinary areas such as

educational system, youth clubs, health care and social institutions for fight against addiction, NGOs and media. It is necessary to encourage collaboration between various participants in the prevention within local community.

In local communities, it is necessary to create life conditions that will enable population to develop life styles without drugs, and also conditions for those who have already used drugs for choosing the mode of drug consumption with the minimal risk for them and their environment. What is more, free time and free time activities of children and young people should represent a significant factor in addiction prevention. Therefore, it is extremely important to ensure programmes for high quality free time structuring, that is spending free time in the manner which does not favour drug use. In doing so, local community has also significant role apart from governmental bodies and institutions.

Therefore, local authorities, educational institutions and other relevant institutions and non- governmental organizations should support preventive programmes in the local community.

At the level of local community in the next five-year period it is necessary to strengthen network of institutions dealing with prevention i.e. municipal offices for drug use prevention. It practically means establishing these offices in all municipalities in Montenegro, with dynamics proportional to population size and estimated number of drug users.

VII.1.1.5. Prevention in the workplace

In Montenegro, up to now, systematic measures in the field of addiction prevention in the workplace in Montenegro have not been carried out but in the future period attention must be paid to the development of prevention programmes for preventing abuse of illegal drugs in the workplace, especially in the workplaces with special working conditions and working places with higher drug abuse risks. In case of drug use that affects an individual's work in the

workplace, activities such as informing, counselling and medical check-ups are required, as well as the treatment and social care of those individuals.

Defining, reviewing, amending and harmonising legislation and developing professional guidelines for regulating conditions of health ability for work at the places with specific working requirements (especially with regard to substance abuse) are some of strategic activities oriented toward prevention in the workplace.

VII.1.1.6. Prevention - the role of media

In the field of media, activities oriented toward presenting problems to general population and

achievements in this area, and sharing the knowledge and experiences with neighbouring countries will be carried out.

In addition, it is necessary to continuously educate journalists who investigate drugs and drug use in Montenegro and to maintain good relations with representatives of media.

Electronic database of the institutions and journalists dealing with problems of drugs and drug addiction will be established, and among them continuous communication will be established. Important strategic objective is strengthening partnership with media.

Activities oriented toward spreading distributive range of the information users and addressing

important issues of the campaign and the National Strategic Response to Drugs 2008-2012 will be carried out during the whole period of the implementation of the Strategy.

Activities related to encouraging research journalism in this field as well as partner projects with NGO sector and sport activities oriented toward encouraging healthy life styles, in collaboration with institutions dealing with sport, will be planned.

VII.1.2. Treatment and rehabilitation of drug users

The system of the drug addiction treatment in Montenegro is based on the network of outpatient and hospital treatment that is neither closely connected nor sufficient enough to meet increasing needs for treatment. Need for rehabilitation and reintegration of treated addicts into society is even less met, considering the fact that capacities for rehabilitation and resocialisation of addicts into society in Montenegro practically do not exist.

The treatment of drug users must be integral, continuous and available. In that view, cooperation among various treatment programme providers, psychosocial care and rehabilitation must be ensured.

In all programmes, except in those intended for specific population groups, programme have to be adapted for both genders and for different age groups. Users of all kinds of illegal drugs must be involved in these interventions.

The treatment programmes oriented toward drug users are assessed on the basis of their effectiveness, efficiency and their general professional and scientific foundation, and they should be approved by relevant bodies and commissions. The financing of these programmes is provided by the country from various funds sources in accordance with relevant law regulation.

Within the health care system, treatment of drug users involves diagnostic procedures, therapeutic procedures and prevention of harmful effects related to drugs, that is, health complications in drug users and prevention of spreading infectious diseases in general population and among prisoners in penal institutions.

The treatment of drug addiction is carried out in health care institutions in line with laws which regulate this field – in public and private clinics, general hospitals and specialised institutions for treatment of addiction. Health workers and associates carry out activities in the field of health care in accordance with legislation which regulates this area. This is also applicable to public and private institutions, as well to NGOs which provide certain services in the field of treatment of drug users.

Committee, consisted of professionals dealing with treatment of drug addiction in practice, proposes drug addiction treatment doctrine within the health care system, which should be further approved and adopted by the competent ministry. This doctrine has to be in effect in

both public and private health care institutions.

Coordination and collaboration of all professional dealing with drug users in the field of health

care system is ensured through adequate professional bodies.

High priority treatment programmes for users of illegal drugs in health care system are those oriented toward abstinence from psychoactive substances and those oriented toward prevention of harmful effects related to drug use, prevention of the spreading infectious diseases and prevention of crime related to drugs.

Simultaneously with introducing new programmes and interventions oriented toward evaluation of adequacy of existing programmes for treatment of illegal drug users, it is necessary to carry out continuous monitoring and evaluation of the programmes.

Within the health care system at the national level, capacities for establishing the registries and the report systems on drug users and drugs have to be built in accordance with accepted epidemiological indicators and recommendations of European Monitoring Centre for Drugs and Drug Addiction. This would contribute to better understanding of problem gravity and to obtaining data that will serve as a basis for designing interventions.

One of the basic postulates for training health care services for adequate dealing with the problem is adequate and accessible training of the staff for treatment and rehabilitation of drug addicts, and also for the field of harm reduction related to drug use. Montenegro lacks personnel specialized for work with addiction diseases (psychiatrists and psychologists with special education in treatment and rehabilitation of psycho-active substance addicts (PAS), social workers, special pedagogues, etc.). Therefore, it is necessary to provide conditions for postgraduate studies, sub-specialisations in the field of addiction diseases treatment and rehabilitation, within specialised studies domain (formal education) or through study visits, participation at conferences, trainings, seminars in this field, regional exchange etc. It is necessary to continually improve capacities for treatment of addicts at both primary and secondary level of the health care, by training professionals to work in this field.

At the primary health care level, depending on types and level of addiction, drug users are treated in the Centres for mental health / services for prevention and treatment of addiction, and in psychiatric clinics within Primary Health Care Centres and at clinics of *chosen doctors*.

“Harm reduction” programmes are also being implemented at the primary health care level.

Tasks of “chosen doctor” in the treatment of addicts should be precisely defined and professional protocols for the treatment of addicts at the level of primary health care should be developed, in order to transfer part of treatment of addicts to clinics of chosen doctor. These protocols must be developed in collaboration with appropriate professional bodies (psychiatry, neuropsychiatry).

The capacity building for laboratory diagnostics of drugs at the level of primary health care is necessary postulate for creating conditions for adequate treatment of drug addicts. In that view, it is necessary to ensure continuity and stability when it comes to financing all health care institutions and their providing with adequate tests.

Within the primary health care it is necessary to establish counselling services and/or divisions for addiction diseases within the centres for mental health in line with the envisaged plan for building centres for mental health within the primary health centres. Counselling services have preventive role at three levels: primary, secondary and tertiary.

On the secondary level of primary health care, treatment is provided in institutions, i.e. special departments in psychiatric hospitals, which provide special types of treatment such as detoxification, the treatment of crisis conditions, the treatment of addiction in patients with comorbidity, therapeutic groups of treated addicts, etc. Departments for treatment of addicts in Montenegro are located within department for treatment of addiction in Special Psychiatric Hospital “Dobrota” in Kotor, and within department for treatment of addiction at Clinic for Psychiatry in Podgorica and Psychiatric Hospital Nikšić.

In order to prepare institutions on secondary health care for adequate admission and treatment of drug users, at the secondary level of health care it is necessary to provide conditions for laboratory

diagnostics based on blood tests, and thus also ensure continuous supplying with urinary tests for secondary health care institutions.

At both primary and secondary level of health care, special programmes for health promotion and prevention of addiction will be given support which would also include designing programmes and therapeutic guidelines for pregnant women addicted to PAS and treatment of children (neonatology).

In order to improve capacities for care of drug users in the case of overdoses, it is necessary to activate established divisions for acute detoxification and to complete building of planned divisions in General Hospitals Cetinje, Bijelo Polje, Nikšić, Berane, Bar, Pljevlja, Kotor, Podgorica.

In the field of stationary treatment of drug addicts, it is necessary to plan interventions oriented toward shortening hospital stay of addicts, through formalisation of protocols on treatment and by directing to outpatient treatment, rehabilitation and resocialisation of drug users.

Addiction treatment in penal institutions must be harmonised with other treatment programmes in which drug users had been involved before imprisonment sentence, and their involvement in appropriate treatment after imprisonment sentence must be provided.

The rehabilitation also implies the establishment of the institutions for rehabilitation and resocialisation of drug users and training of the personnel to work in such institution.

It is necessary to develop measures for resocialisation of psychoactive substances users, such as programmes for professional retraining or training, encouraging programmes for employment of former users of psychoactive substances, etc.

Programmes for resocialisation of drug users after imprisonment will be supported, and they will be implemented through professional training during imprisonment, through formalisation of training conducted in prisons and providing support in employment in adequate profession.

Also, the programmes of NGOs in the field of resocialisation and reintegration of psychoactive substances users into society who underwent the process of treatment and rehabilitation will be supported.

Support will be provided to *scientific – research activities* in the field of addiction diseases as well as in the field of drug use, at both clinical and public health level.

It is necessary to make effective connection between medical institutions for addiction treatment and institutions for social care, that is, to strengthen capacities of both institutions for overall insight into addiction problems and their treatment.

Various and integrated **programmes for resolving the social problem of drug users**

are crucial due to multiple nature of problems in individuals, family and society as a whole caused by drugs. Governmental and nongovernmental organizations have crucial role in social treatment of drug users. Their coordinated activity is a precondition for effective work.

Secondary and tertiary prevention, which will be carried out in the field of the social system, imply support to dysfunctional families regarding strengthening family in the phase of treatment and rehabilitation of addicts. In order to put social care system into operation, in this view, prior continuous capacity building is required – education of personnel and creating professional teams in the centres for social work.

In the non-institutional systems of social care, programmes oriented toward individuals, families and population groups will be conducted, in order to overcome social pressures and problems associated with drug use. In the field of programmes for resolving social problems, professional work is conducted through various activities:

- which Field work, involving harm reduction principles and “low threshold” approach, provides making contacts with users, as a crucial precondition for working with them.
- “Daily centres – drop in centres”;
- First social aid carried out through public institutions, where professional work is oriented toward recognition of personal and social pressures and toward looking for potential ways of support that will provide better social inclusion for a person, and thus increasing opportunities for making decisions directed to behavioural change related to drug use;
- Various programmes of “high threshold” aimed at achieving complete abstinence, as a therapeutic commune and community that can be organized within the social security system, and they can operate as autonomous institutions for the withdrawal and rehabilitation of drug addicts within the system of religious and non- governmental organizations, in accordance with the relevant legislation. The basis of rehabilitation in therapeutic communities is the work in well controlled and structured programmes that could place products and services in the market and in that way provide partial self-financing;
- Religious and other non-governmental organisations and institutions can also organise therapeutic and rehabilitation programmes as well as the programmes of psychosocial assistance, which will complement and further enrich the possibility of drug addicts care. Joining the therapeutic community and any other therapeutic or rehabilitation centre and the addiction care network must be previously verified and approved by the body of the Government of Montenegro, competent for the that area. Professional supervision of the work in therapeutic communities and the implementation of the rehabilitation programme should be implemented by the ministry responsible for social care;
- Institutions for rehabilitation and reintegration of drug users, in which appropriate activities with stable abstinence are conducted, provide concrete social inclusion. It is necessary to establish capacities in such a way that the end of therapeutic treatment is followed by direct social reintegration and re-inclusion of former addicts in the community. Re- inclusion of former drug users in the community implies their inclusion at all levels and in all areas, and especially the development of social skills and encouragement of education and employment. Re-inclusion in the community also implies decrease or reduction of social reasons that led to drug use. Reintegration into the community is very important for persons who were imprisoned or just left juvenile detention centre or child protection centre. In Montenegro, within the network of centres for social welfare, this opens possibility for professional

engagement in the social rehabilitation of drug users and their reintegration in community, as well as possibility for preventive actions for those who leave residential institutions. With appropriate training and capacity building in the future period, professional staff of the centres for social welfare is to become key leader in the process of reintegration of drug users in the community;

- Programmes for interpersonal assistance among drug users, their families and the

environment and other interested parties.

Special attention should be paid to creating activities oriented toward prevention of social exclusion of the groups of drug users involved in activities in other fields (for example beneficiaries of the programme of methadone substitution therapy, drug users in prisons, etc.). These types of activities imply and require high level of collaboration among professionals from different fields and systems.

Reintegration in the society relates also to those drug users who are not able or who do not want to stop drug using. Appropriate services must be provided to those drug users, who are, apart from being socially excluded, also exposed to the risk of disease.

So, after capacity building, it is necessary to accelerate designing of different programmes in this field. Due to the fact that the phenomenon of consumption of illegal drugs is relatively new in our country, few interventions and programmes have been developed in this field so far, but more and wider initiatives are expected to take place in the period to come. The future role of the centres for social welfare can be observed through four levels: identification of the drug use problem in the family, support and motivation for treatment, support to family and the process of socialization. In this view, it is necessary to educate staff, raise the level of theoretical knowledge and professional skills in facing with this problem. In addition, it is also necessary to improve keeping records of professional documentation and evidences, as well as to continuously exchange information with other subjects.

VII 1.2.1. Organisation and disease treatment implementation principles

VII. 1.2.1.1. The principle of approaching addiction as a chronic recurring disease

Firstly, addiction treatment is carried out on an organised basis within the health care system of the country, and particular measures of treatment and rehabilitation can be carried out outside the health care system. The approach to addiction treatment is based on the approach identical to the treatment of other chronic, non-infectious diseases. The treatment is planned and implemented according to the individual's needs and depending on the condition. During treatment only the professionally justified and checked procedures will be used.

VII 1.2.1.2. The principle of organisation and course of treatment

Taking in account chronic recurring course of disease, the basis for the organisation of drug addiction diseases treatment in Montenegro is outpatient treatment. Professionally

harmonised model enacted by the competent professional body will be applied in the treatments.

In the Centres for Mental Health, that is, services for counselling, prevention and outpatient treatment of addiction there are professional interdisciplinary teams which are leaders of the most of specific activities oriented toward demand reduction and the planning of the treatment implementation.

Basic goals of these centres / services are:

1. Outpatient therapeutic work with drug users and their families, conducted in collaboration with all relevant resources of the local community. Centre for Mental Health i.e. services for counselling, prevention and outpatient treatment of addiction is the place of primary special health and psychosocial care of the persons with the problems related to drug abuse;
2. Direct improvement and implementation of preventive activities – especially measures for early secondary prevention;
3. Epidemiological monitoring, coordination and implementation of the programmes for drug consumption reduction in the centre's activity field.

In the general hospitals it is necessary to ensure conditions for detoxification of addicts (units for

In the course of outpatient addiction treatment, centres are places where addicts get in touch with specialised workers for the first time. These workers establish diagnostics and, in accordance with the clinical picture, suggest potential treatment. The addicts' treatment is carried out in co-operation with the teams of chosen doctors, with specialised hospital programmes and other health and non-health subjects. The centres organise implementation of psychotherapy, education and abstinence control of the heroin addicts included in such treatment, and first acceptance of addicts who have completed the inpatient treatment (hospitals, prisons, communes, detoxification units etc.). In big cities and tourist resorts these centres can establish dislocated units for direct implementation of substitution programmes for travellers, tourists and temporarily for the addicts who do not have health insurance or have not chosen a doctor. Apart from the direct participation in the treatment, the centres have other specific tasks: organising and carrying out specific individual counselling for youth and families with high drug use risk, providing assistance to educational institutions in their field with the implementation of activities envisaged by preventive programmes and particularly with offering specific training for professional workers within the educational system. Furthermore, they support implementation of activities for high-risk groups of children and youth together with professional services within the educational institutions, school medicine advisory centres and, if necessary, with social security centres, they also coordinate implementation of all preventive activities aimed at risk reduction of HIV-infection spreading and hepatitis (motivation for counselling and HIV and hepatitis B and C testing). These centres can keep open telephone lines for parents, drug users and drug addicts; they can participate in education and direct co-operation with outreach-workers who work directly "in the field" (street). The centre professionals can perform the jobs of assessors ordered by the competent court, go to hearings and give expert opinions. The centres also participate in organising and implementing drug addict treatments in correctional facilities in co-operation with health care and other workers, as well as in implementing measures of compulsory addiction treatment ordered by the competent court. The centres establish communications with the media in prevention campaigns and organise and participate in training the workers of different occupations.

In the field of psychiatry and neuropsychiatry, every specialist of psychiatry and neuropsychiatry, at all levels of health care, must admit to treatment drug user and/or drug addicts, equally as every other patient, and provide treatment in accordance with professional and ethical rules.

Psychiatry section should define and adopt clear guidelines on treatment of addicts, as well as protocols for treatment at the primary and secondary level of health care, which will define usage of opiate agonists in the treatment of addicts.

detoxification). Further outpatient treatment must be ensured after detoxification.

VII 1.2.1.3 Tasks of healthcare professions and institutions in the treatment of addiction disease

Task of Gynaecologists – obstetricians

As any other patient a pregnant woman who is drug addict has to be admitted to the hospital and treated by specialized programmes for pregnant women who are addicted to drugs. Possible treatment of the child, in the case of abstinence syndrome, will be performed by paediatricians specialised in neonatology.

Additional education of specialists in this field will be supported.

Task of paediatricians

When providing health care to young adolescents, paediatricians have to check potential drug abuse, especially in cases of intoxication or after attempted suicide. Whenever the signs of disturbed behaviour are noticed, paediatricians are obligated to act in a preventive way.

Other health-care branches

All other healthcare branches which encounter addicts every day, must respect the basic principle of addiction treatment - as a chronic recurring disease. For the addicts within the maintenance treatment, they must continue with the treatment on the very day of admission in any hospital ward, in accordance with the instructions of a competent centre for mental health/addiction prevention and treatment centre. Infectologists and hepatologists (internists) should improve the treatment possibilities of addicts with chronic liver diseases due to high rate of hepatitis B and C virus infection in addicts.

Public Health Institute

Pursuant to law provisions and in accordance with the organisation of the system for prevention of addiction and outpatient treatment, Public Health Institute of Montenegro is the central institution for coordination and monitoring problems related to addiction through:

- monitoring and registration of persons treated in the health care system by all relevant factors, i.e. keeping hospital treated psychoactive drug addicts register;
- coordinating prevention programmes for combating and preventing addiction diseases;
- planning and participating in the implementation of health education;

- organising and participating in the education of healthcare workers;
- participating in special programmes for health promotion and cooperation with media in combating addiction;
- monitoring and evaluation of the activities and programmes in the public health domain;
- organising and implementing researches in the field of drugs and drug use.

VII 1.2.2. Civil society

Considering the fact that the country usually lacks adequate and timely solution to various problems through its system institutions, work of civil society institutions is very important. Civil society in this document is understood as a counterbalance to the country, and it consists of independent individuals and various forms of their associations and groups. The basic characteristic of the civil society is its independence from the country and its structures, which is, at the same time, the precondition for the autonomy and presence of the civil society. This strategic document supports development of specific programmes in the field of drugs and drug use and emphasises the role of NGO sector in this field.

Categories of civil societies, according to Official Gazette of EU (1999/C329/10) are:

- social partners (associations of employers, trade unions);
- organisations which are social and economic associations, but which are not social partners having regard to the full meaning of that word;
- non-governmental organizations that connect members regarding specific issues (human rights, organisations for environmental protection, humanitarian organisations, educational organisations, etc.);
- organisations of the community – groups of young people, groups of parents, organised on the basis of common interest realised at the local community level;
- religious communities.

This Strategy aims at strengthening partner relations among civil society, governmental bodies and institutions and local communities.

NGOs dealing with this area in Montenegro have been developed in the last decade, and there are still few of them, but they have wide and comprehensive programmes and activities, ranging from prevention to harm reduction related to drugs.

The following will be supported and strengthened: the role and programmes of civil sector in solving problems related to drug use and drug addiction, as well as in the fields of prevention, researches, harm reduction, rehabilitation and reintegration of drug users.

In the future period it is necessary to make institutional communication with civil sector in this field, through forums that would be organised by competent institutions.

More attention should be given to:

- maintaining and developing high-quality co-operation between the state and non-governmental organisations regarding drug supply and demand reduction,
- regular financing of non-governmental organisations with the high-quality programme activities in the fields of drugs and drug use,
- participating of non-governmental organisation representatives in the co-ordinating bodies.

Activities of NGOs in the programmes of exchange of sterile injecting equipment and activities oriented toward capacity building for this type of programme will be supported.

Support will be provided to activities of NGOs oriented toward establishing and functioning of the “drop in” centres for users of psychoactive substances and to capacity building necessary for establishing such centres.

Support will be provided to the implementation of “early systems for harm prevention” (campaigns)

VII 1.3. Harm reduction related to drug use

Programmes for reduction of harm consequences related to drugs will be introduced gradually into clinical practice of all institutions for treatment of the users of psychoactive substances and all professionals dealing with these problems.

Priority intervention in this field should be adoption of protocol for addiction diseases treatment which involves measures for harm reduction and especially usage of opiate agonists in the treatment of heroin addiction.

At the level of pharmaceutical practice, it is necessary to introduce normative regulations for the work of pharmacies oriented toward reduction of medication abuse. In addition, in order to increase availability of sterile injection equipment to wider population of drug users, it is necessary to ensure that all public pharmacies have sterile injecting equipment available for selling.

Country provides necessary conditions for the implementation of the harm reduction programmes.

Taking in account fact that in Montenegro there is only one institution that implements harm reduction programme, activities of this programme will be supported and sustainability and continuous capacity building of existing centre for methadone therapy will be assured.

Support will be provided to programmes for availability and exchange of sterile injecting equipment (“exchange of syringes and needles”) and sustainability through continuous capacity building of existing programmes for exchange of sterile equipment will be ensured.

Investments will be provided for necessary interventions with the aim of building capacities for establishing centres for methadone therapy and for developing programmes for exchange of sterile injecting equipment in other communities.

and information related to toxic substances that can be found in drugs, campaigns and information related to various substances used to increase amount of drugs, campaigns and information related to infectious agents found in drugs).

VII 1.3.1. Usage of opiate agonists in treating heroine addiction

Opiate agonists (methadone, buprenorphine etc.) play a crucial role in the modern approach to heroin addiction. However, in the addiction treatment doctrine it is considered that methadone alone or any other opiate agonist itself are not sufficient to change the deranged behaviour. That is why these medications have been used for attracting heroin addicts to join the programme, after which the agonist pharmacotherapy is used, if needed, only as one of the elements of a complex addiction treatment, which includes psychotherapy, education and certain forms of psychosocial assistance.

Types of programmes:

1. **Short detoxification** is a procedure that relieves the addict's withdrawal syndrome after terminating substance use, which involves gradual reduction of the daily dose of opiate agonists lasting 1 month at maximum.

2. **Slow detoxification** is a procedure that relieves the addict's termination of opiate use,

involving slow-pace reduction of opiate agonists daily dose during the period from one month to 6 months or more.

3. **Short (temporary) maintenance** of the same daily dose of methadone is a procedure that relieves the patient's heroine withdrawal by taking a required (adequate) daily dose of opiate agonists that remains unchanged for 6 months or less.

4. **Long-term maintenance treatment** is a procedure that enables addicts to use daily dose of opiate agonists through a period longer than 6 months.

The main indication for the usage of opiate agonists (methadone, buprenorphine or others) is

confirmed addiction diagnosis according to the MKB-10 or the DSM-IV criteria.

Due to the complexity of addiction treatment and different effects of opiate agonists as well as realistically high potential of their abuse, competent Ministry should, in the form of a specific regulation, prescribe the manner of the course of treatment with opiate agonists as a special programme. The regulation must include the indications and criteria for joining or leaving the programme, types of programmes, prescription of therapeutic dose rates, people responsible for implementation of different parts of the therapeutic procedure, the method of direct medication prescription, keeping records and providing professional supervision over the programme implementation.

VII.2 DRUG SUPPLY REDUCTION

Illegal drugs supply reduction is an important part of resolving drug abuse and drug addiction problems. It directly influences resolving problems related to citizens' safety, transport safety, public law and order in many other fields. Identification of the crime in this field is connected with numerous difficulties and requires specific approach with central coordination at all levels.

In the field of supply reduction, i.e. availability of narcotics, the range of actions will be

conducted primarily by police and customs services.

The drug supply and drug presence problem in Montenegro is not isolated, it depends on both the European and world illegal narcotic drug market. Drug crimes are less frequently viewed within the national frame of only one particular country. Therefore, the suppression of drug crime should not be dealt with in an isolated way, regardless of other criminal activities such as trafficking of arms and people, terrorism and money laundry. The narcotic drug trade is certainly one of the most productive forms of criminal activities of organised crime. With regard to generated profit, it is a global industry that is able to compete with the major economic branches.

Montenegro is, by its geo-strategic position, transit country which is attractive to international crime groups regarding heroine trafficking between countries manufacturers and countries consumers – from Asian countries through Balkan and former SFRY countries to Western European market (so called "Balkan Route" as a shortest way from the East to the West of Europe, with the note that there is also so called two-way direction); and also regarding cocaine trafficking from Latin American countries, across the Atlantic Ocean, the Mediterranean Sea and the Adriatic Sea to our ports and through Montenegro to other countries of the region and Western Europe. Trafficking of marijuana grown in Albania is still present, and it is trafficked to Montenegro across the country borders and then to regional countries and even further. It is also important to emphasise that Montenegro is coastal country with important sea port.

In order to successfully implement drug supply reduction measures and efficiently suppress narcotic drug trafficking by organised crime groups characterised by extreme flexibility, adaptability, mutual cooperation, great financial support, possible networking with government apparatus of particular states, it is necessary to ensure great participation and mutual coordination and cooperation of all competent institutions in the society, particularly government bodies such as: Ministry of Interior and Police Directorate, the Ministry of Finances, the Customs Administration, the Ministry of Justice and the Ministry of Health, Labour and Social Welfare. In that view it is necessary to encourage cooperation of the police, customs service and judicial bodies, as well as the participation in joint projects such as investigations, investigating teams, establishment of information exchange networks in all fields, training, seminars, etc.

In this view, it is very important to establish international cooperation having regard to geographical position of Montenegro and the fact that many international trafficking routes go through our country. This cooperation will be implemented in the field of information exchange with the police services of other countries, as well as through organising joint actions oriented toward cutting international trafficking chains, usually based on the principle "controlled delivery".

In the future period it is necessary to take all necessary measures for further strengthening and developing of the cooperation with police services and international organisations dealing with this problem.

As an area which is given special and great significance in the world, usage of synthetic drugs in Montenegro is relatively new phenomenon, which is mainly associated with free time activities of young adults. In order to protect young people from the use of synthetic drugs, it is necessary to follow positive international experiences in providing information, preventive work with children and young people and measures for ensuring safe conditions in places where young people spend time. In addition to police activities oriented toward reduction of illegal trafficking of synthetic drugs, it is necessary to initiate activities oriented toward harm reduction related to the usage of synthetic drugs.

In this field it is very important to collaborate with European Monitoring Centre on Drugs and Drug Addiction which, in order to identify new drugs that appear on European scene, established so-called "early warning system" through which Member States are alerted about appearance of new substances. This system also monitors potentially harmful new trends in the field of the usage of psychoactive substances. Participation in this system is very important for timely prevention of their negative effects and timely response in the case of appearance of new types on the market, as well as for rapid communication with authorised institutions, units of local government and international organisations (EUROPOL and EMCDDA).

Participation in the existing EU system for early warning and detection of new synthetic drugs is necessary due to effectiveness of sanction policy implementation. This participation requires improvement of operational ability of responsible bodies for detecting and preventing illegal production of synthetic drugs and their trafficking.

Legal frameworks for resolving problems related to synthetic drugs should be developed at national level, in accordance with general European legislation.

Continuous researches on risks and modes of synthetic drugs use can significantly contribute to

preventive activities among target population.

VII 2.1. Police interventions

In order to conduct interventions oriented toward drug supply reduction, support will be provided to necessary activities in the field of the police and customs system. In line with the scope and importance of the drug related problems and drug use, it is necessary, within the Police Directorate, to develop efficient organisation of the service for combating drugs, and to strengthen administrative and operative capacities in order to implement activities in the field of drug supply reduction. The indicated activities should be oriented toward:

- identifying and prosecuting organised groups and individuals who are organisers of criminal acts of drug smuggling and trafficking at international, regional and local level;
- enlightening criminal acts and identifying perpetrators who are directly or indirectly related to crime associated with drugs, such as money laundering gained from drug trade; criminal acts committed by drug addicts (robberies, serious frauds, thuggery); criminal acts committed in drugged state (violent behaviour, the criminal acts against life and body, misdemeanours in the field of traffic, and the criminal acts with intimidation and violence elements, associated with drugs affairs and due to unsolved issues, debt and claims, leading position in the market, etc.).

The capacities for establishing good collaboration with the police and customs services of other

countries and with international organizations and institutions dealing with drug problems should be intensively developed. This collaboration should especially be strengthened in the field of information exchanging, organising joint operative actions, training, participation in the projects, etc.

It is necessary to provide continuous development and improvement of the work methodology within legal authorities and in accordance with world trends in the field of combating drug related crimes. It is especially important to create postulates for efficient and full application of special investigation methods (MTN) and the techniques for financial investigations related to drugs, as well as mechanisms for confiscation of properties gained through drug-related criminal acts.

It is necessary to conduct continuous trainings and organise, through everyday activities, maximal engagement of all officers in the Police Directorate in combating drugs and drug abuse. This implies that all officers in the Police Directorate, regardless of their work responsibilities, should have elementary training and capabilities for acting in the field of drug combating, in accordance with their capacities.

Units of the Police Directorate, dealing with these concrete problems, will be strengthened institutionally and in human resources. Material and technical equipping of these units is also planned

Continuous theoretical and practical training of the staff in special units for drug combating in the Police Directorate will be provided in collaboration with police officers from other countries and international organizations.

It is necessary to improve methodology for collecting, processing and analysing data relevant for monitoring drug related problems and drug addiction, with providing preconditions for information, experience and knowledge exchange at national and international level. In that view, it is necessary to improve information exchange and joint work of different units in the Police Directorate with the aim of achieving efficient action at local and regional level and better results in combating smuggling and trafficking.

Continuous collaboration with all governmental bodies and bodies dealing with drug-related problems and drug abuse will be developed (Judiciary bodies, Customs Administration, Agency for Combating Money Laundering, Ministry of Justice, etc.), and when it is needed joint investigation teams dealing with concrete issues will be established.

It is necessary to plan and take preventive measures regarding presence of drugs in the particularly vulnerable environments, such as primary and secondary schools, student hostels, school yards and facilities near schools, places where young population gathers, etc. For indicated activities, long-term and short-term plans for preventive measures will be developed by special units for fighting drugs, units for combating minor delinquency, and in accordance with this further concept of the "school policeman" will be developed.

Participation in the campaigns and actions of governmental and nongovernmental organisations in the field of education about drug related harm effects will be actively supported, and through this activity public will be informed about the role of the police in both

preventive and repressive plan related to drugs and drug addiction combating.

VII 2.1.1. Precursors control

Significant and organised production of drugs, except several cases of marijuana growing, has not been registered in Montenegro so far. However, in the neighbouring countries there have been many cases of detecting secret laboratories in which synthetic drugs of amphetamine and "ecstasy" type were produced. Therefore, possibilities of production of such drugs and other drugs as well, and occurrence of these laboratories are not ruled out. For this reason, it is necessary to improve control of chemicals used in the manufacturing industry, as these substances are regularly traded and used in chemical, pharmaceutical and cosmetic industry, but also abused as "precursors" for preparation / production of narcotics. In order to regulate this trade, it is necessary to pass legislation, based on experience of other European countries, which will clearly define rights and responsibilities of all subjects in this field, and the actions of police and customs services.

VII 2.2. Customs interventions

In the customs system, continuous measures for improvement of the efficiency of passengers and trade control on border crossings in all transportation means will be implemented.

Continuous training of the personnel in Customs Administration will be carried out in all fields, which is necessary for capacity building of human resources involved in implementation of the measures oriented toward improvement of capacities for border control and toward cutting routes of drug trafficking across borders, out of borders in continental and water parts of the

state borders.

Measures for increasing the operative capacities oriented toward organised domestic and international crime groups dealing with drug trafficking will be implemented.

Measures for improvement of international cooperation in the field of prevention and combating drugs with customs of other countries, as well as international organisations and institutions dealing with drug-related problems will be implemented.

Collaboration between all governmental bodies oriented toward implementation of efficient investigations of drug related criminal acts will be improved.

VII 2.3. Drug use as a subject to criminal-law regulation

Criminal acts materialised in our legislation by one segment of the activities of social community oriented toward prevention of drug abuse are contained in the Criminal Code (Official Gazette of the Republic of Montenegro 47/06 and 70/06, Article 300 and Article 301).

Fulfilling responsibilities assumed from international conventions, our country introduced accepted decisions in its national legislation (primarily Law on Production and Trade of Narcotics, Official Gazette of the Socialist Federative Republic of Yugoslavia 45/92) and their criminal relief has been achieved by incriminating illegal production and trade of narcotics and their consumption.

In contemporary criminal legislation it is almost generally accepted solution that consumption of narcotics is not criminal act. This attitude is based on belief that addiction disease cannot be treated through applying penal measures to persons who use drugs, but through their treatment and prevention measures. For this reason penal repression is oriented toward those who produce drugs, put them into circulation or to those who allow or contribute to drug abuse. Previous criminal acts involve production of drugs and drug trafficking, and this action incriminates forcing of other persons to use these substances.

Up to now, development of normative system, institutional system, services for combating and prevention of psychoactive substances abuse in Montenegro has been slow and discontinuous. Taking into account that Montenegro has not passed the Law on Prevention and Combating Narcotics Abuse, it is necessary urgently to pass this Law in order to protect health of population and harmonise national legislation with international standards in this field. In this way prevention of drug addiction, which would be regulated by the above-mentioned law for the first time, would be a constituent part of the range of interventions based on scientific principles.

The Law on Prevention and Combating Narcotics Abuse should involve:

- conditions for the production and trade of narcotics;
- surveillance of the production and trade of narcotics;
- measures for combating narcotics abuse;
- system for prevention of addiction, support to addicts and occasional narcotics users.

For the first time, this Law would ensure standardised measures for combating narcotics abuse and psychoactive substances abuse including systematic control, detection and monitoring of all narcotics abuse-related cases.

The possibility of applying severe sanctions should be considered for persons who enable drug use in minors in the neighbourhood of the schools and other facilities where young people gather, or in the case of taking advantage of one's influence on minors or persons who are not able to make realistic judgements regarding dangers of drug use.

In both penal and misdemeanour procedures due to narcotics abuse it is necessary to enforce immediate procedure of cases where drug addiction is the reason for penal or wrongful acts.

Apart from the previously mentioned actions, a systematic analysis of the efficiency of the penal policy implementation regarding cases in penal and misdemeanour procedures related to drug abuse should be performed. In addition, on the basis of indicators, deficiencies should be viewed and attention should be aimed at education of judges and expert associates in the field of combating illegal trade of drugs and having regard to application of penal and offence provisions related to drug abuse.

It is necessary to adopt health programmes and programmes of social care oriented toward dealing with offenders.

Future development of penal policy and legislation should be based on recommendations and decisions of the bodies of the European Union.

VII 3. SPECIFIC OBJECTIVES AND TARGET INTERVENTIONS – SPECIAL PROGRAMMES

Apart from indicated fields, specific programmes and interventions for prevention, treatment

and rehabilitation as well as for reduction of harmful consequences of drug use will be planned and implemented.

Conditions in penal institutions regarding drug-related problems and treatment of addicts will be analysed and needs for staff, equipment and rooms will be defined in accordance with the size of identified problem. In addition, programmes for staff and convicts training will be introduced and continuous education in this area will be implemented.

Programmes oriented toward drug abuse and risk reduction of blood-borne disease transmission will be designed and continuous prevention work with prisoners and convicts on drug abuse will be carried out. In addition, prisoners and convicts will be provided with access to voluntary and confidential counselling and testing on HIV, HBV and HCV.

Preventive vaccination against HBV, HAV will be carried out in prison personnel and prisoners and convicts, and also it is planned to create conditions for introducing antiretroviral therapy and therapy for hepatitis A, B and C.

Cooperation between penal institutions and centres for methadone therapy will be established and formalised in order to take care of the beneficiaries of substitution programmes who are going to be imprisoned.

It is necessary to develop international cooperation between the imprisonment system and European Network on Drugs and Infections Prevention in Prisons – ENDIPP, and all other relevant international bodies and institutions and NGOs dealing with treatment of imprisoned addicts and addicts in the community.

In order to improve quality of data and their harmonisation, it is necessary to make network of the prison system and institutions that will keep records of addicts.

Special programmes and measures for rehabilitation and resocialisation of addicts will be developed, especially measures regarding minors. Mechanisms for post penal and post treatment care of persons who were in prisons and reformatory institutions will be established.

Special prison hospital will be continuously improved, by both professional advisory personnel and programmes oriented toward treatment of addicts (medicament treatment, detoxification, substitution treatment, support to special programmes for individual professional work with prisoners who use drugs, etc.).

The role of civil society (especially NGOs) will be encouraged in providing support in resocialisation and reintegration of drug users into society during and after imprisonment sentence through special programmes that will be supported, as well as other NGO programmes that will be implemented in penal institutions in accordance with needs.

(VIII) COORDINATION OF THE NATIONAL STRATEGY IMPLEMENTATION

Effective and efficient implementation of the national policy in the field of drugs requires balanced,

multidisciplinary, integrated and coordinated approach.

Key role in the coordination, supervision and monitoring of the implementation effectiveness of the National Strategy will be in the competence of the National Office on Drugs within the Government of Montenegro, whose task will be to regularly evaluate quality of implemented programmes in cooperation with other State Administration bodies responsible for the Strategy implementation.

The system of monitoring, collecting, managing and information exchange, research and evaluation in the field of drugs is a continuous process which includes improvement of information and data collection systems, data exchange among different subjects, defining and evaluating frameworks and standards for evaluation and research implementation, together with setting up the stable financial basis for their execution.

In order to achieve adequate implementation, coordination, monitoring and evaluation of the activities from the National Strategic Response to Drugs 2008-2012, all relevant institutions will introduce *contact person system* on drug issues.

Establishment of the National Office on Drugs within the Government of Montenegro should be

the priority.

VIII 1 National Office on Drugs within the Government of Montenegro

The role of the National Office on Drugs, as well as the national coordinator in the implementation of the policy for the drug supply reduction and drug demand reduction is continuous coordination oriented toward ensuring harmonisation of taken measures, among governmental bodies and between other institutions and governmental bodies, as well bodies of national and local administrations and NGO sector.

The National Office on Drugs is responsible for the following wide areas of activities:

- Coordination
- Monitoring and Evaluation
- Public Relations
- National Report on circumstances in the field of drugs and drug use in Montenegro.

The special act of the Government of Montenegro defines establishment of the National Office on Drugs, scope of its work, responsibilities, personnel, profile and responsibilities of associates.

The obligation of all governmental and nongovernmental institutions is to collaborate with the

National Office on Drugs and to submit reports timely by their subject areas.

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(IX) MONITORING AND EVALUATION

Continuous monitoring and evaluation of programmes represent the most important activities for checking implementation of programmes and thus contributing to programme quality and the rational utilisation of financial resources. The principal goal of monitoring present condition in the field of drugs and drug addiction is to determine guidelines for the development of national drug policy in the area of drug problems on the basis of collected and analysed data, as well as to determine guidelines for defining and implementing future activities, i.e. the evaluation of their efficiency.

In addition, monitoring epidemiological condition for the purpose of comparing data in relation to certain regions, local communities, but also in relation to international statistics contributes to wider and higher-quality realising and understanding of the addiction phenomenon from different perspectives.

Situation analysis in the field of drugs will be useful even to the wider professional public since the data will be available in the form of special reports, analyses and publications.

Monitoring of the situation in the field of drugs will encompass areas of drug use prevalence, manner of drug use, drug availability, the prevalence of problems associated with drug use and criminal acts related to narcotics use.

In the following period, in harmonising and adopting programmes in all systems, both governmental and non-governmental ones, it is necessary to introduce and implement evaluation of each programme (process evaluation - evaluation of outcome and evaluation effects in long-term programmes)

This requires co-operation among all subjects, especially those who perform data collection and analysis (health care, police, customs, judicial system, social care, education institutions, etc.).

In the following period, all programmes based on the National Strategy or arising from it should be evaluated, and a single system of evaluation should be established, which will have to be respected at all stages of planning and implementation of the programme.

The evaluation experts can be either national or foreign, but it is recommended that all programmes should be evaluated by foreign experts. For that purpose, professional measures and guidelines for the implementation of all evaluation stages should be developed. This means that evaluation frameworks have to be designed and they must meet standards such as quality, homogeneity, transparency and impartiality.

Each institution is obliged to monitor and evaluate programmes and activities implemented within its scope of work, and to submit reports to the National Office on Drugs, which, however, provide monitoring and evaluation at national level, developing Report on the Implementation of the National Strategic Response to Drugs 2008-2012.

(X) INFORMATION SYSTEM

Regular practice of systematic collection and analysing of data related to all aspects of drugs and drug use in Montenegro has not existed so far. This is prioritised strategic activity. Relevant institutions and state administration bodies must build capacities for data collection in accordance with the type and the nature of records, that must be kept in the health care system, educational system, police, customs, judiciary, scientific institutions, and results of their analysis should be used for the development of strategic and action plans. These data will be incorporated into the single ***Report on the Implementation of the National Strategic Response to Drugs 2008-2012***, which will be developed and issued by the National Office on Drugs at the end of each year, and adopted by the Government.

For the register of persons treated due to drug abuse, the Institute of Public Health collects data from all health care institutions, both the stationary and outpatient. Modified questionnaire promoted by Pompidou Group of the Council of Europe will be introduced as an official report form. The register includes the record treatment of drug users who requested treatment voluntarily or in any other way, regardless of whether they are minors and regardless of the type of drugs. Register keeping will be regulated by the Health Records and Recordkeeping Law..

The aim of the information system is to ensure high quality and objective information for creating the state drug abuse policy and for making strategic decisions.

Therefore, necessary precondition for a comprehensive understanding of drug abuse problem at the national level is the establishment of a single information system as well as development of standardised ways of collecting and using data from different areas in accordance with the competences and scope of the work of certain subjects involved in the system for combating the narcotics abuse in Montenegro (development of protocols for entering data in the information systems – common code of a person, as well as defining overlapping areas, that is free access to all systems)

In order to achieve the above-mentioned the National Information Unit for Drugs within National Office on Drugs should be established as a body responsible for the coordination of implementation of the activities in this Strategy. National Information Unit is a national body for collecting data related to drugs and their delivery to the relevant international bodies and institutions.

In order to activate planned national information system, in collaboration with all bodies and subjects involved in the system, it is necessary to improve identification and methodological evaluation of all statistical data sources, harmonise statistical system with EU standards, develop

new systems for statistical reporting, develop research protocols for local level, organise education for improvement of the quality of diagnosis and researches, create network for information exchange among certain state administration and local administration bodies. In order to build capacities of all competent institutions of the systems participating in the process of collecting data on drugs and drug addiction, strong and continuous collaboration with European Monitoring Centre for Drugs and Drug Addiction, as a responsible European agency for data collecting in this field will be established.

(XI) RESEARCHES

Empirical researches on psychoactive substances use conducted in Montenegro in recent years have been oriented toward children and young adults. Estimations on knowledge, practice and attitudes of school children and general population of young adults related to drug use, and the prevalence of the users of psychoactive substances are based on several researches conducted in the last 4-8 years, when the presence of drugs on the territory of Montenegro was significantly lower. These estimations, generally, indicate continuous increase in the number of drug users, in minors among them, as well as the fact that the first contact with drugs is mainly made at final grades of elementary school (between 13-14 years of age, now, even earlier), and also the fact that the age limit at which drug using form develops has been reduced. On the other hand, age limit also moves toward older ages (first experimental usage of drugs over 35 years). Decrease in the price of all drugs has been reported; increase in the number of criminal acts directly or indirectly associated with drug abuse and related legal consequences have been identified. Increase in the number of cases of sexually transmitted diseases and blood-borne diseases (HIV/AIDS, hepatitis B and C, gonorrhoea, etc.) is evident.

However, in order to realistically understand the problem and the factors that influence it, regular and extraordinary researches have to be carried out. Research activities that will be financed from different sources, especially through European Union assistance programmes for the candidate countries, should be developed. It is particularly essential to participate in international standardised researches, general population researches through interviews and research in population at risk, applying rapid assessment methods and qualitative methods.

For establishing relevant database at national level it is necessary to encourage, harmonise, improve and financially support continuous researches in certain sectors, and in accordance with needs and requirements to provide financial support to researches of independent researchers, as well as researchers from institutes and faculties.

In order to ensure rational and effective implementation of researches and investment of financial resources, it is necessary that an independent body scientifically assesses and values each research proposal. Having regard to actual themes in the field of drugs, it is necessary to define research priorities, i.e. to define research fields related to drug issues.

Researches in the field of addiction diseases will be carried out at all levels and in all areas (education, health, general population, etc.), in order to ensure better insight into problem size and its continuous monitoring, and to achieve monitoring and control of risk factors oriented toward defining more efficient measures of primary prevention, as well as to evaluate implemented measures.

Research plans at national level should be adopted on a two-year period basis, whereas at local levels they should be adopted at one-year period basis. Research results must be used for development of measures for drug demand reduction and drug supply reduction.

(XII) INTERNATIONAL COOPERATION

In addition to continuous capacity building of the country and NGOs oriented toward international cooperation, which is in this subject very intensive at the moment, the cooperation with international organisations and institutions such as Pompidou Group of the Council of Europe, UNODC, WHO, EMCDDA and others will be encouraged and strengthened.

Measures for supporting regional cooperation mechanisms will be developed, including all countries along the trade routes "Balkan Drug Route".

Within and in line with dynamics of the process of approaching European Union, through CARDS and PHARE programmes, cooperation with EU Member States will be established.

(XIII) FINANCIAL RESOURCES

For the implementation of the National Strategic Response to Drugs 2008-2012 it is necessary to provide financial resources within state budget and local budgets, the amount of which will ensure high quality and continuous implementation of activities, in accordance with scope of work and obligations of subjects involved in their implementation.

Financial resources for the implementation of the National Strategic Response to Drugs 2008-2012 at the state administration level, and on the basis of previous inter-departmental coordination, should be provided from the state budget resources, i.e. from individual line ministries.

As additional financial sources, profits of the games of chance, i.e. the lottery,

international organisation funds, as well as the funds gained by confiscating the property of sentenced drug offenders should be used.

Allocated financial resources for realisation of the activities for the years 2008 and 2009 amount EUR 4 644 600.

For 2008 proposed funds make EUR 2 861 000, out of which EUR 2 437 200 have been provided from the existing budget and by decisions of the Government of Montenegro and EUR 71 000 have been provided through donations. The funding gap for this year amounts EUR 352 800.

The proposed budget for 2009 is EUR 1 783 600, out of which EUR 25 000 have been provided through donations.

(XIV) ACTION PLAN FOR THE IMPLEMENTATION OF THE NATIONAL STRATEGIC RESPONSE TO DRUGS 2008-2012

In the action plan for the implementation of the National Strategic Response to Drugs 2008-

2012 individual goals and their realisation are described in detail, as well as concrete tasks of individual executors in the selected period, based on guidelines of this strategy.

The drugs action plan covers two consecutive periods – 2008/2009 and 2010-2012

(XIII) FINAL PROVISIONS

Upon its adoption by the Government of Montenegro the National Strategic Response to Drugs

2008-2012 will be published in the Official Gazette of Montenegro.

**ACTION PLAN
FOR
2008/2009**

**BUDGET
SUMMARY
TABLE**

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012									
BUDGET									
				2008			2009		
				PLANNED	PROVIDED		NOT PROVIDED	BUDGET	DONATIONS
AMOUNT (€)	AMOUNT (€)	AMOUNT(€)	AMOUNT (€)		AMOUNT (€)	AMOUNT (€)			
OBJECTIVE				AMOUNT (€)	AMOUNT (€)	AMOUNT(€)	AMOUNT (€)	AMOUNT (€)	
			1.1.1.1 - Preventive education in the preschool	2 500			2 500	10 000	12 500
			1.1.1.2 - Preventive education in the elementary school system	0				125 000	125 000
		1.1.1	1.1.1.3 - Preventive education in the secondary school system	0				110 000	110 000

		Prevention in the educational	1.1.1.4 - Preventive education in the	0				20 000		20 000
		1.1.1 - Prevention in educational system: SUBTOTAL		2 500	0	0	2 500	265 000	0	267 500
		1.1.2 - Primary prevention in the health care system		300			300	5 000		5 300
		1.1.2 - Primary prevention in the health care system SUBTOTAL		300	0	0	300	5 000	0	5 300
		1.1.3 - Primary prevention in the local community		5 000			5 000	5 000		10 000
		1.1.3 - Primary prevention in the local community- SUBTOTAL		5 000	0	0	5 000	5 000	0	10 000
		1.1.4 - Primary prevention in the community		0				40 600		40 600
		1.1.4 Primary prevention in the community: SUBTOTAL		0	0	0	0	40 600	0	40 600
		1.1.5 - Media in prevention		5 000			5 000	44 000		49 000
		1.1.5 - Media in prevention SUBTOTAL		5 000	0	0	5 000	44 000	0	49 000
		1.1. - PREVENTION: SUBTOTAL		12 800	0	0	12 800	359 000	0	372 000
		1.2 - TREATMENT AND REHABILITATION		674		356	318	542		1 216
		1.2 - TREATMENT AND REHABILITATION SUBTOTAL		674	0	356	318	542	0	1 216
		1.3 - PENAL SYSTEM		0				114	15 000	129
		1.3 - PENAL SYSTEM: SUBTOTAL		0	0	0	0	114	15 000	129
		1.4 - HARM REDUCTION		1 500		1 500		30 000	10 000	41 500
		1.4 - HARM REDUCTION: SUBTOTAL		1 500	0	1 500	0	30 000	10 000	41 500
		GENERAL OBJECTIVE 1: DRUG DEMAND REDUCTION: TOTAL		688	0	357	330	1 045	25 000	1 758

07

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012								
BUDGET								
		2008				2009		TOTAL
		PLANNED	PROVIDED		NOT PROVIDED	BUDGET	DONATIONS	
	DONATIONS		BUDGET					
GENERAL OBJECTIVE 2: DRUG SUPPLY REDUCTION	2.1 - POLICE AND CUSTOMS INTERVENTIONS	380		380		523		903
	2.1 - POLICE AND CUSTOMS INTERVENTIONS: SUBTOTAL	380	0	380	0	523	0	903
	2.2 - CUSTOMS INTERVENTIONS	1 719		1 699	20 000	50 000		1 769
	2.2 - CUSTOMS INTERVENTIONS: SUBTOTAL	1 719	0	1 699	20 000	50 000	0	1 769
GENERAL OBJECTIVE 2: DRUG SUPPLY REDUCTION - TOTAL		2 099	0	2 079	20 000	573	0	2 672
LEGISLATION		0				17 000		17 000
LEGISLATION: TOTAL		0	0	0	0	17 000	0	17 000
NATIONAL OFFICE ON DRUGS OF MONTENEGRO		2 000			2 000	53 000		55 000
OFFICE: TOTAL		2,000	0	0	2 000	53 000	0	55 000
RESEARCHES	RESEARCHES IN THE EDUCATIONAL SYSTEM	22 000	22 000			20 000		42 000
	RESEARCHES IN THE GENERAL POPULATION	0				50 000		50 000
	RESEARCHES IN THE SPECIFIC POPULATION GROUPS	49 000	49 000					49 000
RESEARCHES: TOTAL		71 000	71 000	0	0	70 000	0	141
GRAND TOTAL		2 861	71 000	2 437	352	1 758	25 000	4 644

ACTION PLAN EXP

07

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012						
BUDGET						
OBJECTIVE				AMOUNT (€)		
GENERAL OBJECTIVE 1: DRUG DEMAND REDUCTION	1.1. - PREVENTION	1.1.1 - Prevention in the educational system	1.1.1.1 - Preventive education in the preschool education	12 500		
			1.1.1.2 - Preventive education in the elementary-school system	125 000		
			1.1.1.3 - Preventive education in the secondary-school system	110 000		
			1.1.1.4 - Preventive education in the university system	20 000		
		1.1.1 - Prevention in educational system SUBTOTAL				267 500
		1.1.2 - Primary prevention in the health care system				5 300
		1.1.2 - Primary prevention in the health care system: SUBTOTAL				5 300
		1.1.3 - Primary prevention in the local community				10 000
		1.1.3 - Primary prevention in the local community: SUBTOTAL				10 000
		1.1.4 - Primary prevention in the community				40 600
		Primary prevention in the community: SUBTOTAL				40 600
		1.1.5 - Media in prevention				49 000
		1.1.5 - Media in prevention: SUBTOTAL				49 000
		1.1. - PREVENTION: SUBTOTAL				372 400
1.2 - TREATMENT AND REHABILITATION				1 216 000		
1.2 - TREATMENT AND REHABILITATION SUBTOTAL				1 216 000		
1.3 - PENAL SYSTEM				129 000		
1.3 - PENAL SYSTEM: SUBTOTAL				129 000		
1.4 - HARM REDUCTION				41 500		

ACTION PLAN EXP

	1.4 - HARM REDUCTION: SUBTOTAL	41 500
	GENERAL OBJECTIVE 1: DRUG DEMAND REDUCTION: TOTAL	1 758 900

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012		
BUDGET		
OBJECTIVE		AMOUNT (€)
GENERAL OBJECTIVE 2: DRUG DEMAND REDUCTION	2.1 - POLICE AND CUSTOMS INTERVENTIONS	903 000
	2.1 - POLICE AND CUSTOMS INTERVENTIONS: SUBTOTAL	903 000
	2.2 - CUSTOMS INTERVENTIONS	1 769 700
	2.2 - CUSTOMS INTERVENTIONS: SUBTOTAL	1 769 700
GENERAL OBJECTIVE 2: DRUG SUPPLY REDUCTION - TOTAL		2 672 700
LEGISLATION		17 000
LEGISLATION: TOTAL		17 000
NATIONAL OFFICE ON DRUGS OF MONTENEGRO		55 000
OFFICE: TOTAL		55 000
RESEARCHES	RESEARCHES IN THE EDUCATIONAL SYSTEM	42 000
	RESEARCHES IN THE GENERAL POPULATION	50 000
	RESEARCHES IN THE SPECIFIC POPULATION GROUPS	49 000
RESEARCHES: TOTAL		141 000
GRAND TOTAL		4 644 600

**SEPARATE OUTLINE
OF THE BUDGET AND ACTIVITIES**

3

ACTION PLAN END

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (€)
GENERAL OBJECTIVE 1: DRUG DEMAND REDUCTION							
1.1 - PREVENTION							
1.1.1 - Prevention of the addiction in the educational system							
1.1.1.1 - Preventive education in the preschool education							
STRENGTHENING	Development of programmes for strengthening capacities in parents to develop protective skills in the children and young	End of 2008	Ministry of Education and Science (MoES)	NGO Volunteers Parents, Media	• Developed Programme	Budget (resources for 2008 have not	2 500

3

CAPACITIES OF PARENTS FOR DEVELOPING PROTECTIVE SKILLS IN	Programme implementation	Continuously in 2009	Professional Service within preschool institutions	Bureau of Education	• Number of parents involved	Budget (resources for 2008 have not been allocated)	10 000
SUBTOTAL							12 500
1.1.1.2 - Preventive education in the elementary-school system							
STRENGTHENING PROTECTIVE MECHANISMS IN CHILDREN RELATED TO DRUGS	Realisation of the "Drug use prevention Programme in elementary schools"	Continuously in 2009	Educated professional associates and teachers	Schools, MoES, Bureau of Education, Local community, Public Health Care institutions	• Number of realized workshops • Number of children involved	Budget	50 000
STRENGTHENING ACTIVE PARTICIPATION AND INITIATIVES OF THE STUDENTS IN PREVENTIVE ACTIVITIES	Development and implementation of the student/school's projects	Continuously in 2009	Schools, students, professional associates	MoES, Parents, Local community	• Number of realized projects	Budget	20 000
EVALUATION OF THE PROGRAMME "DRUG USE PREVENTION" IN ELEMENTARY SCHOOLS	Conduct external evaluation to identify measures for the improvement of the	September 2009	Independent experts MoES	Schools, Professional associates, teachers, parents,	• Developed evaluation report with measures for improvement of the programme	Budget	5 000
SUPPORT TO CREATING FREE TIME ACTIVITIES IN CHILDREN	Project for developing sections (out-school activities) in the elementary schools	Continuously January-December 2009	Schools, Student	Ministry of Education and Science	• Published public competition • Programmes chosen • Number of schools	Budget	50 000
SUBTOTAL							125 000

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
1.1.1.3 - Preventive education in the secondary school system							
STRENGTHENING PROTECTIVE DEFENCE MECHANISMS IN SECONDARY SCHOOL STUDENTS RELATED TO DRUGS	Develop curriculum for the subject "Healthy life styles" and offer it as an optional subject	March 2009 and further	Authors of the programme, Bureau of Education Council	School, Professional services, teachers	<ul style="list-style-type: none"> Developed and adopted curriculum Number of students who 	Budget	30 000
	Implementation of the peer education programmes	Continuously in 2009	NGO	School, Health care institutions, Bureau for	<ul style="list-style-type: none"> Developed and adopted peer education programme Number of involved schools and students Number of realised workshops Programme evaluation 	Budget or donations	30 000
SUPPORT TO CREATING FREE TIME ACTIVITIES IN YOUNG PEOPLE	Project for developing sections (out-school activities) in the secondary schools	January-December 2009	Schools, Students	Ministry of Education and Science	<ul style="list-style-type: none"> Number of schools with organised sections Number of sections 	Budget	50 000
SUBTOTAL							110 000
1.1.1.4 - Preventive education in the university system							
STRENGTHENING ACTIVE PARTICIPATION AND INITIATIVES OF THE STUDENTS IN PREVENTIVE ACTIVITIES	Development and implementation of students' projects	In 2009	Students organizations NGOs	Faculties NGOs	<ul style="list-style-type: none"> Number of developed and realised programmes 	Budget	20 000
SUBTOTAL							20 000
TOTAL							267 500

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
1.1.2 - Primary prevention in the health care system							
DRUG AVAILABILITY REDUCTION AIMED AT REDUCING ABUSE OF PSYCHOACTIVE MEDICATIONS	Analysis of actual regulations for pharmacies with recommendations for changing the regime of distributing medications in the private pharmaceutical	January 2009	Ministry of Health, Labour and Social Welfare, Agency on Drugs	Republic Health Insurance Fund of Montenegro, Association of Pharmaceuts,	<ul style="list-style-type: none"> Developed analysis and recommendations Changed regime of distribution of drugs in the private pharmaceutical 	Budget	5 000
INCREASING ACCESSIBILITY OF STERILE EQUIPMENT IN FREE TRADE IN PHARMACIES	Adopting the mandatory decree on procurement and selling of the needles and syringes in pharmacies	End of 2008.	Ministry of Health, Labour and Social Welfare, Agency on	Republic Health Insurance Fund of Montenegro, Association of Pharmaceuts,	<ul style="list-style-type: none"> Number of pharmacies in Montenegro that procure and sell sterile equipment 	Budget (from actual resources)	300
SUBTOTAL							5 300

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (EUR)
1.1.3 - Prevention of the addiction in the local community							
STRENGTHENING SUSTAINABILITY OF THE OFFICES FOR DRUG USE PREVENTION IN THE LOCAL COMMUNITY	Establish network of the municipal offices on drug use prevention on the level of the local authority	End of 2008	National Office on Drugs of Montenegro, Community offices on drug prevention	Local community	<ul style="list-style-type: none"> Network established Number of the offices in the network 	Budget	5 000
	Regular annual meetings of the network every two months	Continuously in 2009	National Office on Drugs of Montenegro, Network of coordinators in the local	Local community	<ul style="list-style-type: none"> Number of held meetings Number of participants 	Budget	5 000
SUBTOTAL							10 000

ACTION PLAN END

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (EUR)
1.1.4 - Primary prevention of the community							
CREATING AND AMENDING LEGISLATION AND DEVELOPMENT OF PROFESSIONAL CRITERIA FOR REGULATING TERMS OF CONDITION IN DETERMINING THE HEALTH OF MOTOR VEHICLE DRIVERS	Adopting decisions on mandatory testing on drugs in determining driving ability	January 2009	Ministry of Health, Labour and Welfare	Public health care institutions	<ul style="list-style-type: none"> Decision made 	Budget	300
CREATING AND AMENDING THE LEGISLATION AND DEVELOPMENT OF PROFESSIONAL CRITERIA FOR REGULATING TERMS OF CONDITION IN DETERMINING THE HEALTH OF FIREARMS HANDLER (mandatory laboratory)	Making decisions on mandatory testing on drugs during examination for determining ability for possessing firearms	January 2009	Ministry of Health, Labour and Welfare	Public health care institutions	<ul style="list-style-type: none"> Decisions made 	Budget	300
	Media campaigns aimed to stigma reduction toward users of psychoactive substances in the general population	From 2009 continuously	Ministry of Health, Labour and Welfare,	Ministry of Sport, Culture and Media, National Office on Drugs of Montenegro, Public Health Institute of	<ul style="list-style-type: none"> Number of developed media contents within campaign 	Budget	20 000

ACTION PLAN END

REDUCING STIGMA TOWARD DRUG ADDICTS	<i>Tribunes aimed to general population on addiction diseases and stigma reduction toward addicts</i>	<i>Continuously</i>	<i>Ministry of Health, Labour and Social Welfare</i>	<i>Public Health Institute of Montenegro, NGOs</i>	<ul style="list-style-type: none"> ▪ <i>Number of realised tribunes</i> ▪ <i>Number of</i> 	<i>Budget</i>	<i>10 000</i>
SUPPORT TO YOUNG PEOPLE IN THE SCHOOL SYSTEM TO DEVELOP AND IMPROVE KNOWLEDGE AND EDUCATIONAL SKILLS AS A PROTECTIVE FACTOR IN THE	<i>Development and dissemination of appropriate information materials adapted to this group of young people</i>	<i>June 2009</i>	<i>NGOs</i>	<i>Local community, Employment Office of Montenegro</i>	<ul style="list-style-type: none"> ▪ <i>Developed material</i> ▪ <i>Number of distributed</i> 	<i>Budget</i>	<i>10 000</i>
SUBTOTAL							40 600

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (€)
1.1.5 -Media in prevention							
EVALUATION OF MEDIA PRESENTATION OF DRUG USE RELATED PROBLEMS	Survey on media presentation of the drug use related problems	End of 2008	National Office on Drugs (NOD)	Ministry of Culture, Sport and Media, Media, NGOs	• Evaluation was conducted	Budget	5 000
BUILDING THE SPECIFIC CAPACITIES OF JOURNALISTS FOR MONITORING DRUGS AND DRUG USE	Education-seminar on drugs and characteristics of addiction diseases	February 2009	National Office on Drugs (NOD)	Ministry of Culture, Sport and Media, Public health care institutions.	•Number of involved media •Number of	Budget	8 000
	Visit to specialized institutions dealing with drug use in Montenegro and the region	June 2009	National Office on Drugs (NOD)	Ministry of Culture, Sport and Media, Public health care institutions, NGOs, Institution for Enforcement of Criminal Sanctions	•Number of involved media •Number of involved editors	Budget	7 000
SOCIAL MOBILIZATION OF MEDIA EDITORS	Development of educative material on drugs and drug use for media (dictionaries of terms, language of stigma, characteristics of	June 2009	National Office on Drugs (NOD)	Ministry of Culture, Sport and Media, National Office on Drugs, Public health care institutions, NVO	• Number of distributed copies of educative-informative material	Budget	3 000
RISING AWARENESS ON THE IMPORTANCE OF THE IMPLEMENTATION AND ENCOURAGING THE PUBLIC TO PROVIDE SUPPORT AND MAKING PARTNERSHIP IN THE IMPLEMENTATION OF THE	Development and realization of the campaigns	End of 2009	National Office on Drugs (NOD)	Ministry of Culture, Sport and Media, National Office on	• Number of TV shows, journal articles and the number of public appearance related to activities from the	Budget	20 000
ENCOURAGING ACTIVE PARTICIPATION OF MEDIA AND MEDIA PERSONNEL IN THE FIELDS WHICH ARE THE SUBJECT OF THE STRATEGY	Public competition for selecting the best report on some of the fields covered by the Strategy	October 2009.	Ministry of Culture Sport and Media	/	• Number of applications • Awards gained	Budget	6 000
SUBTOTAL							49 000

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (€)
1.2 - TREATMENT AND REHABILITATION							
ESTABLISHING THE REGISTER FOR ADDICTION DISEASES AT THE LEVEL OF THE HEALTH CARE SYSTEM IN MONTENEGRO	Adopting the Law on evidences in the	June 2008	Ministry of Health, Labour and Social Welfare	/	• Adopted Law on Records in the Health	Budget (re-sources)	5 000
	Developing the Regulation on the register	June 2008	Institute of Public Health of Montenegro	Ministry of Health, Labour and Social	• Developed Regulation	Budget (re-sources)	1 000
CREATING AND STRENGTHENING CAPACITIES FOR LABORATORY DIAGNOSTICS OF PSYCHOACTIVE SUBSTANCES AT PRIMARY AND SECONDARY LEVEL OF HEALTH CARE	Harmonization of regulations of HIF aimed to putting diagnosticums at the list of necessary diagnostic materials	January 2009	Ministry of Health, Labour and Welfare,	Public health care institutions	Amended and adopted regulations	Regular budget resources	500
	Continuous supplying of health care institutions of the primary and secondary health care with tests for detection of drugs in urine for institutions at primary health care level	Continuously after modernizations of the regulations of HIF of Montenegro	Ministry of Health, Labour and Welfare	Public healthcare institutions	• Supplied tests	HIF (resources are not)	50 000
	Procurement of biochemical analyser and reagents for laboratory diagnostics aimed to determining the presence of drugs at the secondary health care level	End of 2008	Health Insurance Fund (HIF)	Public health care institutions	• Procured apparatus and reagents	HIF (resources are not)	300 000
IMPROVEMENT OF CONDITIONS FOR TREATMENT OF CRISIS-FUNCTIONAL ESTABLISHING	Establishment of the Commission for evaluation and working conditions in already established units	January 2009	Ministry of Health, Labour and Social Welfare HIF (joint	Health care institutions	• Visited institutions and developed report on evaluation with	Budget	2 000

OF UNITS FOR ACUTE DETOXIFICATION OF PSYCHOACTIVE SUBSTANCES IN GENERAL HOSPITALS AND	<i>Adoption of protocol on the work and personnel necessary in these units for adequate functioning.</i>	<i>March 2009</i>	<i>Ministry of Health, Labour and Social Welfare HIE Joint</i>	<i>Health institutions care</i>	<ul style="list-style-type: none"> • <i>Developed Protocol for work in the detoxification units</i> 	<i>Budget</i>	<i>2 500</i>
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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
STRENGTHENING HUMAN RESOURCES FOR TREATMENT AND REHABILITATION OF ADDICTS	Development of plans and programmes of continuous education of persons dealing with addiction diseases	End of 2008	Psychiatric Association of Montenegro	Ministry of Health, Labour and Social	• Developed educational plan	Budget	3 000
	Conducting continuous education of persons dealing with addiction diseases in accordance with training programme (Study visits, postgraduate visits,	From January 2009 continuously	Ministry of Health, Labour and Social	Psychiatric Section of	•Number of trained persons, •Number of organized	Budget	20 000
DEVELOPMENT AND ADOPTING OF PROTOCOLS FOR TREATMENT OF ADDICTS AT THE PRIMARY HEALTH CARE LEVEL	Development of Guidelines	End of 2008	Ministry of Health, Labour and Social Welfare, Psychiatric Section of Monte-	Health institutions	•Number of developed and distributed Guidelines	HIF (resources)	5 000
DEVELOPMENT AND ADOPTION OF THE PROTOCOLS FOR TREATMENT OF ADDICTS AT THE SECONDARY	Development of Protocol	End of 2008.	Ministry of Health, Labour and Social Welfare, Psychiatric Section of Monte-	Health institutions	•Number of developed and distributed Protocols	HIF (resources are not)	5 000
IMPROVEMENT OF CONDITIONS FOR ADEQUATE TREATMENT OF ADDICTS TO PSYCHOACTIVE SUBSTANCES AT OUTPATIENT LEVEL OF HEALTH CARE	Establishing counselling services and units for addiction diseases for mental health in line with proposed plan of establishing the Centre for Mental Health	January 2009	Ministry of Health, Labour and Social Welfare	HIF, Public health care institutions	•Number of established Counselling services and departments for addiction diseases within the Centres for mental health	HIF	35 000
	Development of Protocol on the work and personnel necessary in these units for adequate functioning (psychiatrists, psychologists, social worker,	January 2009	Ministry of Health, Labour and Social Welfare	HIF, Public health care institutions	•Adopted Operational Protocol	HIF	5 000
	Training of the personnel in the Counselling services for treatment of addicts to	Continuously	Ministry of Health, Labour and Social	HIF, Public health care institutions	•Number of trained personnel in the counselling services and departments for treatment of addiction	HIF	20 000

ACTION PLAN END

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
FORMALIZATION OF PROFESSIONAL DOCTRINES ON STATIONARY TREATMENT OF ADDICTS	Development and adoption of generally accepted protocol on treatment of drug addicts	January 2009	Ministry of Health, Labour and Social Welfare	Public health care institutions	•Developed and adopted protocol	Budget	2 000
STRENGTHENING CAPACITIES AND THE ROLE OF "CHOSEN DOCTOR" IN THE TREATMENT OF	Development of professional protocols on treatment of addiction diseases for chosen doctors	End of 2009	Ministry of Health, Labour and Social Welfare	Public health care institutions, Medical Chamber of Montenegro,	• Developed protocols	Health Insurance Fund of Montenegro	5 000
DEVELOPMENT OF PROGRAMMES AND THERAPEUTICAL GUIDELINES FOR TREATMENT OF SPECIFIC CASES OF ADDICTION TO DRUGS	Development of programmes and therapeutical guidelines for pregnant women addicted to PAS and treatment of children(neonatology)	End of 2009	Ministry of Health, Labour and Social	Public health care institutions, Medical Chamber of Montenegro,	• Developed programmes	Health Insurance Fund of Montenegro	5 000
	Development of programmes and therapeutical guidelines for drug addicts in minors	End of 2009	Ministry of Health, Labour and Social	Public health care institutions, Medical Chamber of Montenegro,	• Developed programmes	Health Insurance Fund of Montenegro	5 000
CREATING CAPACITIES FOR REHABILITATION AND RESOCIALISATION OF	Work of the Centre for rehabilitation and resocialisation of addicts to drugs in Podgorica	Continuously 2008/09	Capital Podgorica	Public health care institutions, Ministry of Health, Labour and Social	•Number of users of these institutions	Participation (allocated resources for 200.	700 000
STRENGTHENING THE ROLE OF NGO SECTOR IN THE FIELD OF RESOCIALISATION	Programmes of NGO sector in the field of resocialisation and rehabilitation of drug users	Continuously 2009	NGO sector	Governmental organisations and NGOs, Local community,	• Number of programmes • Drug addicts population involved	Budget	10 000
	Study visit for 10 professionals from social welfare	January - February	Ministry of Health, Labour and Social	/	•Evaluation of the study programme	Budget	10 000

ACTION PLAN END

CAPACITY BUILDING OF THE CENTRES FOR SOCIAL WELFARE RE- LATED	<i>Seminar on psychoactive substances(PAS) and characteristics of the addiction disease and the role of social welfare in treatment and</i>	<i>End of 200.</i>	<i>Ministry of Health, Labour and Social</i>	<i>Public health care institutions,</i>	<i>• 38 professionals educated in the social welfare</i>	<i>Budget (lack of resources)</i>	<i>5 000</i>
	<i>Education of personnel of the Centres for social welfare in family</i>	<i>Continuously</i>	<i>Ministry of Health, Labour and Social</i>	<i>Public Health, Institute Centres for Social Welfare</i>	<i>• 38 professionals educated in the social welfare</i>	<i>Budget</i>	<i>20 000</i>
SUBTOTAL							1 216

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
1.3 - PENAL SYSTEM							
IMPROVEMENT OF TECHNICAL CAPACITIES FOR TREATMENT OF DRUG ADDICTS	Providing space and technical capacities for unit for treatment of drug addicts	End of 2009	Institution for Enforcement of Criminal Sanctions (IECS)	Ministry of Justice, Ministry of Health, Labour and Social Welfare,	<ul style="list-style-type: none"> Provided space and technical capacities 	Budget	20 000
CAPACITY BUILDING OF PERSONNEL FOR TREATMENT OF DRUG USERS	Training of personnel for treatment of drug addicts	End of 2009	(IECS)	Ministry of Health, Labour and Social Welfare,	<ul style="list-style-type: none"> Number of trained personnel 	Budget	20 000
RISING AWARENESS IN PRISONERS ON DRUGS AND DRUG USE	Development and implementation of the educative programmes for prisoners	Continuously from 2009	(IECS)	Health care institutions	<ul style="list-style-type: none"> Number of prisoners involved in education, Number of realized 	Budget	10 000
EDUCATIVE AND PREVENTIVE ACTIVITIES WITH THE STAFF IN PENAL INSTITUTIONS AND PRISONERS-IMPROVEMENT OF THE LEVEL OF KNOWLEDGE ABOUT DRUGS AND DRUG ADDICTION	Development of curriculum in the field of drugs and drug use for the personnel in penal institutions and introducing curriculum, in the Centre for education of	March 2009	(IECS)	NGOs	<ul style="list-style-type: none"> Developed and introduced curriculum in the field of drugs and drug use for the personnel the Centre for education of personnel 	Budget	5 000
	Education of prisoners in the field of drugs and drug	Continuously in 2009	(IECS) NGOs	Public health care institutions	<ul style="list-style-type: none"> Number of educations Number of educated 	Budget	7 000

ACTION PLAN EUP

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
PREVENTION OF VACCINE PREVENTABLE DISEASES	Implementation of the programmes of preventive immunisations of the personnel and offenders against Hepatitis A and B	Continuously in 2009	IECS Health	Public Health Institute of Montenegro Ministry of Health,	<ul style="list-style-type: none"> Number of vaccinated offenders Number of vaccinated 	Budget	20 000
IMPROVEMENT OF ACTIVITIES IN THE DOMAIN OF HARM REDUCTION IN PENAL INSTITUTIONS	Formalising collaboration between IEPS and methadone centres in the community in the field of	Jun 2008	IECS Primary Health Centre	Ministry of Justice Ministry of Health, Labour and Social Welfare	<ul style="list-style-type: none"> Signed Agreement on Collaboration 		/
	Strengthening capacities and sustainability of counselling services for Human resources within	Continuously in 2009	NGO IEPS	Ministry of Justice	<ul style="list-style-type: none"> Number of users of counselling services Coverage Percent in 	Global Fund	15 000
STRENGTHENING CAPACITIES OF IEPS IN INTERNATIONAL COLLABORATION IN THE FIELD OF DRUGS	Develop international collaboration of penal system with ENDIPP (European Network on Drugs and Infections Prevention in	Continuously in 2009	IECS, Ministry of Justice	HIPP Project	<ul style="list-style-type: none"> Number of international projects in which IEPS is involved Indicators resulting from 	Budget	5 000
REDUCTION OF DRUG AVAILABILITY IN PENAL INSTITUTIONS	Continuous education of the personnel and technical equipping	Continuously in 2009	IECS, Ministry of Justice	International organisations	<ul style="list-style-type: none"> Number of educated persons Supplied equipment 	Budget	20 000

ACTION PLAN EUP

STRENGTHENING CAPACITIES FOR COLLECTION AND ANALYZING OF DATA ON DRUGS AND DRUG	<i>Networking of penal system with institutions that will be responsible for information system on drugs and drug use</i>	<i>End of 2009</i>	<i>IECS, Ministry of Justice</i>	<i>Public Health Institute of Montenegro, Office on Drugs of Montenegro</i>	<i>▪ IEPS involved in the system and trained persons for data collection</i>	<i>Budget or international projects and donations</i>	<i>7 000</i>
SUBTOTAL							129 000

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
1.4 - HARM REDUCTION							
PROVIDING SUSTAINABILITY AND STRENGTHENING CAPACITIES OF THE CENTRES FOR METHADONE THERAPY	Organisation of round table discussions on HR with the members of psychiatric section in Montenegro with the request to make statement regarding substitutional programmes	End of 2008	Ministry of Health, Labour and Social Welfare	Primary Health Care Centre Podgorica UNDP	<ul style="list-style-type: none"> Organised round table discussions Developed report with conclusions and 	Budget (from existing)	1 500
PROVIDING SUSTAINABILITY AND STRENGTHENING OF THE CAPACITIES FOR OTHER HARM REDUCTION MEASURES IN MONTENEGRO	Development and adoption of the implementation programme for harm reduction activities in Montenegro	June 2009	Ministry of Health, Labour and Social Welfare	Psychiatric Association of Montenegro	<ul style="list-style-type: none"> Programme adopted 	Budget	3 000
STRENGTHENING PERSONNEL CAPACITIES OF THE CENTRES FOR METHADONE THERAPY IN PRIMARY HEALTH CARE CENTRE PODGORICA	Training of the personnel in the Centre for methadone therapy and new-planned centres-study visits	February 2009	Ministry of Health, Labour and Social Welfare	Primary Health Care Centre Podgorica Public Health institutions	<ul style="list-style-type: none"> Study visit made Evaluation Number of participants 	Budget	10 000
CAPACITY BUILDING FOR ESTABLISHMENT OF NEW CENTRES FOR METHADONE THERAPY AND PROGRAMMES FOR EXCHANGE OF NEEDLES AND SYRINGES	Making decisions on establishment of the units for methadone therapy and units for exchange of needles and	Middle of 2009	Ministry of Health, Labour and Social Welfare	/	<ul style="list-style-type: none"> Decision made 	Budget (from existing)	/
	Education of health workers in the field of harm reduction	End of 2009	Ministry of Health, Labour and Social Welfare	Public Health Care institutions	<ul style="list-style-type: none"> Education completed Number of trained 	Global Fund (provided)	5 000
RAISING AWARENESS OF ACTIVE DRUG USERS ON HARM REDUCTION IN DRUG USE	Development of educative-information materials intended to drug users with practical recommendations on harm reduction in drug use	January 2009.	NGOs	Public Health Care institutions	<ul style="list-style-type: none"> Printed material Number of distributed 	Budget	5 000

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
STRENGTHENING CAPACITIES OF NGO SECTOR FOR OUTREACH WORK WITH DRUG USERS	Education of NGO sector for outreach work with drug users	June 2009	NGOs	Public Health Care institutions	<ul style="list-style-type: none"> Number of trained persons for outreach work 	Global Fund (provided resources)	2 500
	Implementation of outreach activities in the field of harm reduction	Continuously	NGOs	Public Health Care institutions	<ul style="list-style-type: none"> Number of drug users encompassed by outreach activities 	Global Fund (provided)	2 500
CAPACITY BUILDING FOR ESTABLISHMENT OF "DROP IN" CENTRES - SOCIAL AND MEDICAL SUPPORT TO DRUG USERS	Analysis of legal base for establishment of drop-in centres	June 2009	NGOs	National Office on Drugs of Montenegro, Ministry of Health, Labour and Social Welfare	<ul style="list-style-type: none"> Performed analysis of legal base and recommendations given for adaptation 	Budget	5 000
	Development of detailed programme for establishment of drop-in centres in Podgorica	End of 2009	NGOs	National Office on Drugs of Montenegro, Ministry of Health, Labour and Social Welfare	<ul style="list-style-type: none"> Programme developed 	Budget	5 000

<p>IMPLEMENTATION OF THE MEASURES IN THE OTHER FIELDS OF HARM REDUCTION-EARLY SYSTEM S FOR HARM PREVENTION</p>	<p><i>The Development and distribution of educative material that consists of information related to toxic matters found in drugs, campaigns and information related to various matters used for increasing amount of drugs, campaigns and information for infective</i></p>	<p><i>End of 2009</i></p>	<p><i>NGOs</i></p>	<p><i>National Office on Drugs of Montenegro Public health care</i></p>	<p><i>* Developed and distributed material</i></p>	<p><i>Budget</i></p>	<p><i>2 000</i></p>
<p>SUBTOTAL</p>							<p>41 500</p>

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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNTS (EUR)
GENERAL OBJECTIVE 2: SUPPLY REDUCTION							
2.1 - POLICE AND CUSTOMS INTERVENTIONS							
REVIEW OF ACTUAL STATUS OF AVAILABLE TECHNICAL AND PERSONNEL CAPACITIES IN THE FIELD OF DRUGS	Situation analysis related to personnel, equipment and the space and	March 2009	Police Directorate of Montenegro	/	<ul style="list-style-type: none"> Final analysis developed Report on available capacities with 	Budget	3 000
IMPROVEMENT OF THE CONTROL OF PASSENGERS ON BORDER CROSSINGS IN ALL MEANS OF TRANSPORTATION	Training of the personnel: elementary, advanced training and training for applying modern technologies	End of 2008	Police Directorate of Montenegro	Police Academy OEBS UNODC	<ul style="list-style-type: none"> Number of trainings realised Number of trained officers 	Regular budget resources, international projects and donations (provided resources)	30 000
BUILDING TECHNICAL CAPACITIES OF POLICE DIRECTORATE IN THE FIELD OF DRUG RELATED CRIME	Procurement of modern equipment for the control of	From 2009	Police Directorate of Montenegro	International organisation	<ul style="list-style-type: none"> Procured equipment 	Budget	70 000
	Procurement and training of official dogs	June 2009	Police Directorate of Montenegro	International organisation	<ul style="list-style-type: none"> Procured official dog 	Budget	30 000
IMPROVEMENT OF CAPACITIES FOR THE CONTROL OF COUNTRY BORDERS AND CUTTING SMUGGLING ROUTES ACROSS BORDERS, OUT OF BORDERS IN INLAND AND WATER PART	Improvement of operational organisations: procurement of material-technical resources, development of working methodology and strengthening human resources	By the end of 2008	Police Directorate of Montenegro	Police Academy International organisations (OEBS, UNODC And other)	<ul style="list-style-type: none"> Procured technical resources Number of new employees 	Budget (Government allocated resources)	200 000
INCREASING OPERATIONAL CAPACITIES AIMED TO ACTIVITIES TOWARD ORGANISED CRIMINAL DOMESTIC AND INTERNATIONAL GROUPS DEALING WITH DRUG SMUGGLING	Improvement of operational organization: procurement of material-technical resources, development of working methodology and strengthening human resources	Continuously by the end of 2009	Police Directorate of Montenegro	Organs of the state prosecutor, OEBS	<ul style="list-style-type: none"> Number of processed cases organized criminal groups due to criminal acts related to drugs 	Budget	150 000

ACTION PLAN END

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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNTS (EUR)
STRENGTHENING CAPACITIES AIMED TO SUPPLY REDUCTION ON ILLEGAL MARKET IN MONTENEGRO - REDUCTION OF THE STREET SELLING, AND TO INCREASE THEIR AVAILABILITY TO	Strengthening the organizational structure of the Drug Unit, technical equipping and capacity building in human resources for the repression of the	Continuously by the end of 2008	Police Directorate of Montenegro	Organs of the state prosecutor	<ul style="list-style-type: none"> Number of discovered cases of drug selling 	Budget (Government allocated resources)	150 000
IMPROVEMENT OF THE MECHANISMS FOR STRENGTHENING FINANCIAL INVESTIGATIONS RELATED TO DRUGS, AND MECHANISMS FOR EFFICIENT CONFISCATION OF THE PROPERTY GAINED THROUGH CRIMINAL ACTS RELATED TO DRUGS	Improve law regulations	Middle 2009.	Organs of the state prosecutor, Directorate for prevention of money laundering	Ministry of Justice, Ministry of finance, International	<ul style="list-style-type: none"> Legislation amended and adapted 	Budget or project and donations	5 000
	Increase efficiency of taking proven operations related to property with gained drug	Continuously 2008/09	Organs of the state prosecutor, Directorate for prevention of	Ministry of Justice, Ministry of finance, International organizations	<ul style="list-style-type: none"> Number of discovered cases of money laundering related to drug, Number of reported persons 	Budget (from actual resources for)	20 000
	Discovering transactions of the money gained in the	Continuously 2008/09	Organs of the state prosecutor, Directorate for prevention of money	Police Directorate, International	<ul style="list-style-type: none"> Number of realized seminars 	Budget (from actual resources for)	30 000
IMPROVEMENT OF INTERNATIONAL COLLABORATION IN THE FIELD OF PREVENTION AND COMBATING DRUGS	Improvement of collaboration through bilateral contacts and participation in the projects and organization of efficient exchange of data	Continuously 2008/09	Police Directorate of Montenegro	Ministry of external affairs, International organizations	<ul style="list-style-type: none"> Number of joint projects Number of exchanged 	Budget or international projects and donations	15 000
	Participation in joint actions in international plan	Continuously 2008/09	Police Directorate of Montenegro	International organization	<ul style="list-style-type: none"> Number of joint actions 	Budget (from actual resources for)	50 000

ACTION PLAN END

WITH POLICE SERVICES OF OTHER COUNTRIES, AND INTERNATIONAL ORGANIZATIONS AND INSTITUTIONS DEALING WITH	Presence at conferences, seminars and meetings of relevant international organizations and institutions	Continuously 2008/09	Police Directorate of Montenegro	International organizations	<ul style="list-style-type: none"> ▪ Number of attended meetings ▪ Number of the staff who 	Budget or international projects and donations	20 000
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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNTS
STRENGTHENING PERSONNEL CAPACITIES IN THE POLICE DIRECTORATE	The implementation of the continuous theoretical and practical training for the staff dealing with criminating of drugs, such as other staff who are indirectly or directly faced with criminal acts and offences related to drugs (specialised	Continuousl y in 2009	Police Directorate of Montenegro	Police Academy Danilovgrad OEBS	<ul style="list-style-type: none"> Number of trainings Number of trained staff General indicators of 	Budget or international projects and donations	30 000
	Development of the system of technical assistance (procurement of technical equipment, program	Continuousl y in 2009	Police Directorate of Montenegro	National Office on Drugs of Montenegro	<ul style="list-style-type: none"> Procured and installed equipment Developed programmes Quality of collected data 	Budget	15 000
IMPROVEMENT OF THE METHODOLOGY OF COLLECTING, PROCESSING AND ANALYSING DATA RELEVANT FOR MONITORING OF DRUGS AIMED AT MONITORING TRENDS AND IDENTIFYING	Education of the staff for collecting and analysing of data	Continuousl y in 2009	Police Directorate of Montenegro	International organisations EMCDDA,	<ul style="list-style-type: none"> Number of staff trained for data collection and 	Budget or international projects and donations	10 000
	More active collecting of data on drug related problems among school and student population (preventive police	Continuousl y in 2009	Police Directorate of Montenegro	Ministry of Education and Science of Montenegro, Municipal offices for	<ul style="list-style-type: none"> Number of identified cases of drug consumption in the school environment 	Budget	10 000
	Develop concept for practical application of "school	Continuousl y in 2009	Police Directorate of Montenegro	Ministry of Education and Science of Montenegro, Municipal offices for	<ul style="list-style-type: none"> Number of identified and processed cases of drug selling in the school environment 	Budget	10 000
DEVELOPMENT OF CAPACITIES IN THE FIELD OF PREVENTION RELATED TO PRESENCE OF DRUGS AMONG CHILDREN AND YOUNG PEOPLE	Implement activities aimed to prevention of open narco-scenes	Continuousl y in 2009	Police Directorate of Montenegro	Ministry of Education and Science of Montenegro, Municipal offices for	<ul style="list-style-type: none"> General indicators on drug use among school and students population 	Budget (provided resources)	20 000

ACTION PLAN EUP

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNTS
IMPROVE MECHANISMS FOR THE CONTROL OF DRIVERS IN INLAND TRANSPORTATION RELATED TO PRESENCE OF NARCOTICS IN THE ORGANISMS	Analysis and changing of legislation	Middle of 2009	Police Directorate of Montenegro	Ministry of Justice, Ministry of Interior and Public Administration, Ministry of Maritime Affairs	<ul style="list-style-type: none"> Conducted analyses of laws and prepared proposals of amendments 	Budget	5 000
	Additional education and procurement of equipment for the Traffic Police	The end of 2009	Police Directorate of Montenegro	/	<ul style="list-style-type: none"> Trained and prepared staff Number of discovered cases 	Budget	30 000
SUBTOTAL							903 000

ACTION PLAN EUP

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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (USD)
2.2 - CUSTOMS INTERVENTION							
REVIEW OF ACTUAL STATUS IN RELATION TO AVAILABLE PERSONNEL AND TECHNICAL CAPACITIES	Conduct systematic analysis of available capacities in the Customs Administration	March 2009.	Customs Administration of Montenegro	/	<ul style="list-style-type: none"> Systematic analysis of available 	Budget	5 000
IMPROVEMENT OF EFFICIENCY OF THE CIRCULATION CONTROL ON BORDERS IN ALL TRANSPORTATION MEANS	Training for the personnel : training for applying new equipment and technology	The end of 2008	Customs Administration of Montenegro	International organizations dealing with training in this field	<ul style="list-style-type: none"> Trained staff for handling new equipment and technology Number of trained staff of 	Budget Government of Montenegro	50 000
	Participation at seminars and trainings related to discovering drugs in the country and abroad	Continuously in 2009	Customs Administration of Montenegro	International partners	<ul style="list-style-type: none"> Number of signed agreements 	Budget	10 000
IMPROVEMENT OF TECHNICAL CAPACITIES OF THE CUSTOMS ADMINISTRATION OF MONTENEGRO FOR THE BORDER CONTROL	Procurement of modern equipment for the control of the goods	End of 2008	Customs Administration of Montenegro	Government Montenegro	<ul style="list-style-type: none"> Scanner installed in the Port of Bar 	Budget (resources provided)	1 649 700
INTERNATIONAL COOPERATION AIMED AT BUILDING CAPACITY	Participation at conferences, seminars and meetings and training related to discovering drugs in the country and abroad	Continuously in 2009	Customs Administration of Montenegro	International organisations and partners	<ul style="list-style-type: none"> Number of meetings attended Number of the persons attended 	Budget	10 000

ACTION PLAN ECU

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MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008-2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT (USD)
IMPROVEMENT OF BILATERAL COOPERATION IN THE FIELD OF COMBATING DRUGS WITH CUSTOMS SERVICES OF OTHER COUNTRIES AND INTERNATIONAL ORGANISATIONS AND INSTITUTIONS DEALING WITH DRUG ISSUES	Participation in RILO and CEN network of the World Customs Organisations for exchange of data on	Continuously in 2009	Customs Administration of Montenegro	All European countries	<ul style="list-style-type: none"> Gained number of analysis and informative data Reducing the rate of taking drug into Montenegro 	Budget	10 000
	Participation in the system MARINFO for exchange of data in maritime transportation	Continuously in 2009	Customs Administration of Montenegro	All sea countries in Europe	<ul style="list-style-type: none"> Number of exchanged data, Increase in the amount and types of confiscated drugs 	Budget	10 000
	Application for involvement in the organisation CARIN dealing with international investigations	By June 2008.	Customs Administration of Montenegro	Supreme Court of Montenegro	<ul style="list-style-type: none"> Application accepted, observer status received 	Budget (from actual resources for)	10 000
	Participation in the project SEMS Adriatic dealing with exchange of data on maritime transport among countries in the Adriatic	September 2008	Customs Administration of Montenegro	All maritime countries in the Adriatic	<ul style="list-style-type: none"> Number of exchanged data, Increase in the amount and types of confiscated drugs 	Budget (from actual resources for)	10 000
	Signing Agreement on Cooperation with countries from the Region and Europe	In 2009	Customs Administration of Montenegro	Government Montenegro	<ul style="list-style-type: none"> Number of signed agreements Specific indicators resulting 	Through regular budget resources	5 000
SUBTOTAL							1 769 700

ACTION PLAN ECU

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
LEGISLATION							
ESTABLISHMENT OF ADEQUATE LEGISLATION IN THE FIELD OF COMBATING AND PREVENTING DRUG ABUSE	Development and adoption of the Act of Law	End 2009	Ministry of Health, Labour and	Ministry of Interior and Public Administration, Ministry of Justice, Ministry of Agriculture, Forestry and Water Management	•Developed and adopted Law	Budget	7 000
IMPROVEMENT OF LEGISLATION IN THE FIELD OF COMBATING THE MONEY LAUNDERING	Analysis of the laws in this field, development of recommendations for amendments to the law, adoption of amendments of the law	End 2009	Directorate for Prevention of Money Laundering	Ministry of Interior and Public Administration, Ministry of Finance	•Adopted changes and amendments of the Law	Budget	5 000
IMPROVEMENT OF LEGISLATION IN THE FIELD OF INCREASING TRANSPORTATION SAFETY	Amending law regulations for control of drivers in inland transportation related to the presence of drugs	End 2009	Ministry of Interior and Public Administration (MoI)	Police Directorate, Ministry of Justice, Ministry of Maritime Affairs and Transportation	•Analysis of the Law conducted and proposal for changes prepared	Budget	5 000
SUBTOTAL							17 000

ACTION PLAN END

MONTENEGRO - NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012							
ACTION PLAN FOR 2008/2009							
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS	FINANCIAL SOURCE	ESTIMATED AMOUNT IN €
NATIONAL OFFICE ON DRUGS							
	Development of Decree on establishing the National Office on Drugs of	September 2008	Government of Montenegro-Secretariat	/	• Developed and adopted Decree on establishment	Budget (the resources lack)	2 000
	Establishment of the National Office on Drugs of Montenegro: providing rooms	January 2009	Government of Montenegro	/	• Provided rooms for the office	Budget	8 000
COORDINATION OF ACTIVITIES FROM	Establishment of the National Office on Drugs of Montenegro: equipment for the office	January 2009	Government of Montenegro	/	• Equipped office	Budget	5 000

ACTION PLAN END

THE NATIONAL STRATEGIC RESPONSE TO DRUGS 2008-2012	Employment and the work of the staff	February 2009	Government of Montenegro	/	▪ Employed persons	Budget	40 000
SUBTOTAL							55 000

186. NATIONAL STRATEGIC RESPONSE TO DRUGS (2008-2012)

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MONTENEGRO -NATIONAL STRATEGIC RESPONSE TO DRUGS, 2008 - 2012					
ACTION PLAN FOR					
OBJECTIVE	ACTIVITY	TIME FRAMEWORK	LEADER	PARTNERS	INDICATORS
RESEARCHES					
RESEARCHES IN EDUCATIONAL SYSTEM					
ASSESSMENT OF THE SCOPE OF THE DRUG USE PROBLEM IN ELEMENTARY SCHOOL CHILDREN	Researches on drug use in elementary schools(12-15 years)-studies on knowledge, attitudes and behaviour	Middle of 2009	Ministry of Education and Science	Public Health Institute Office on School System Schools	<ul style="list-style-type: none"> Survey conducted Results published
ASSESSMENT OF THE SCOPE OF THE DRUG USE PROBLEM IN SECONDARY SCHOOL	Implementation of ESPAD survey in 16 years old population	End of 2008	Public Health Institute	Ministry of Education and Science, Office on School System, Schools	<ul style="list-style-type: none"> Survey conducted Results published
ASSESSMENT OF THE SCOPE OF THE DRUG USE PROBLEM IN UNIVERSITY STUDENT POPULATION	Implementation of the survey on drug use in university students	Middle of 2009	Ministry of Education and Science	Public Health Institute National Office on	<ul style="list-style-type: none"> Survey conducted Results published
SUBTOTAL					
RESEARCHES IN GENERAL POPULATION					
ASSESSMENT OF THE SCOPE OF THE DRUG USE PROBLEM IN	Implementation of the survey on drug use in general population	End of 2009	Public Health Institute	National Office on Drugs NGOs	<ul style="list-style-type: none"> Survey conducted Results published
SUBTOTAL					
RESEARCHES IN SPECIFIC POPULATION					
ASSESSMENT OF THE SCOPE OF THE DRUG USE PROBLEM IN INJECTED DRUG USERS	Implementation of the survey on drug use in IDUs (RDS)	August 2008	Public Health Institute	UNDP NGOs	<ul style="list-style-type: none"> Survey conducted Results published
SUBTOTAL					
TOTAL					