DRUG PROBLEM IN POLAND

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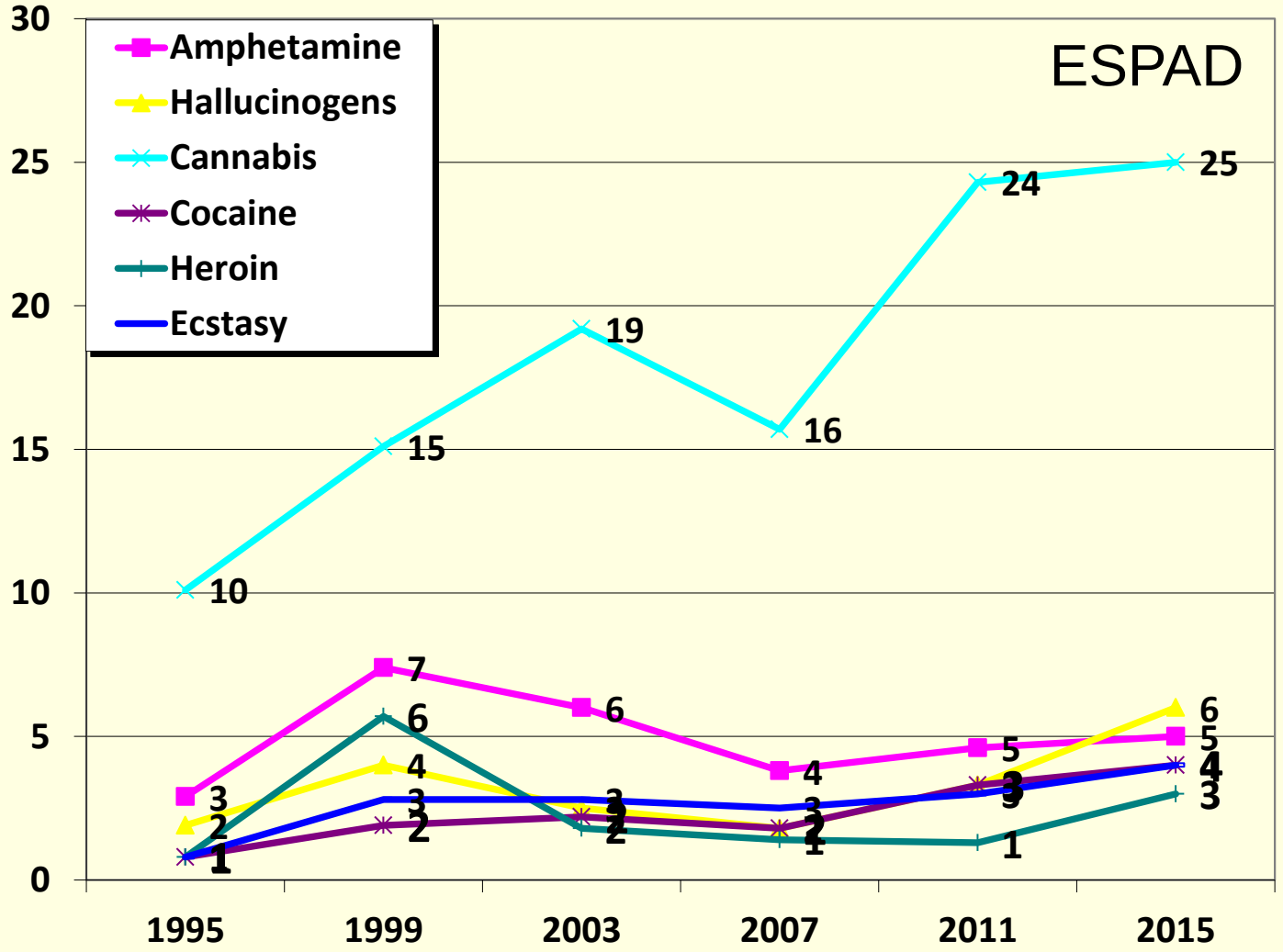
Introduction

- Evaluation as a fundamental requirement for effectiveness and rationality of drug policy
- Types of evaluation
  - process evaluation
  - outcome evaluation
  - impact evaluation
- Methodological problems
- Evaluation and monitoring
- Polish examples of outcome evaluation of drug policy aimed at reducing drug use and drug use related harm

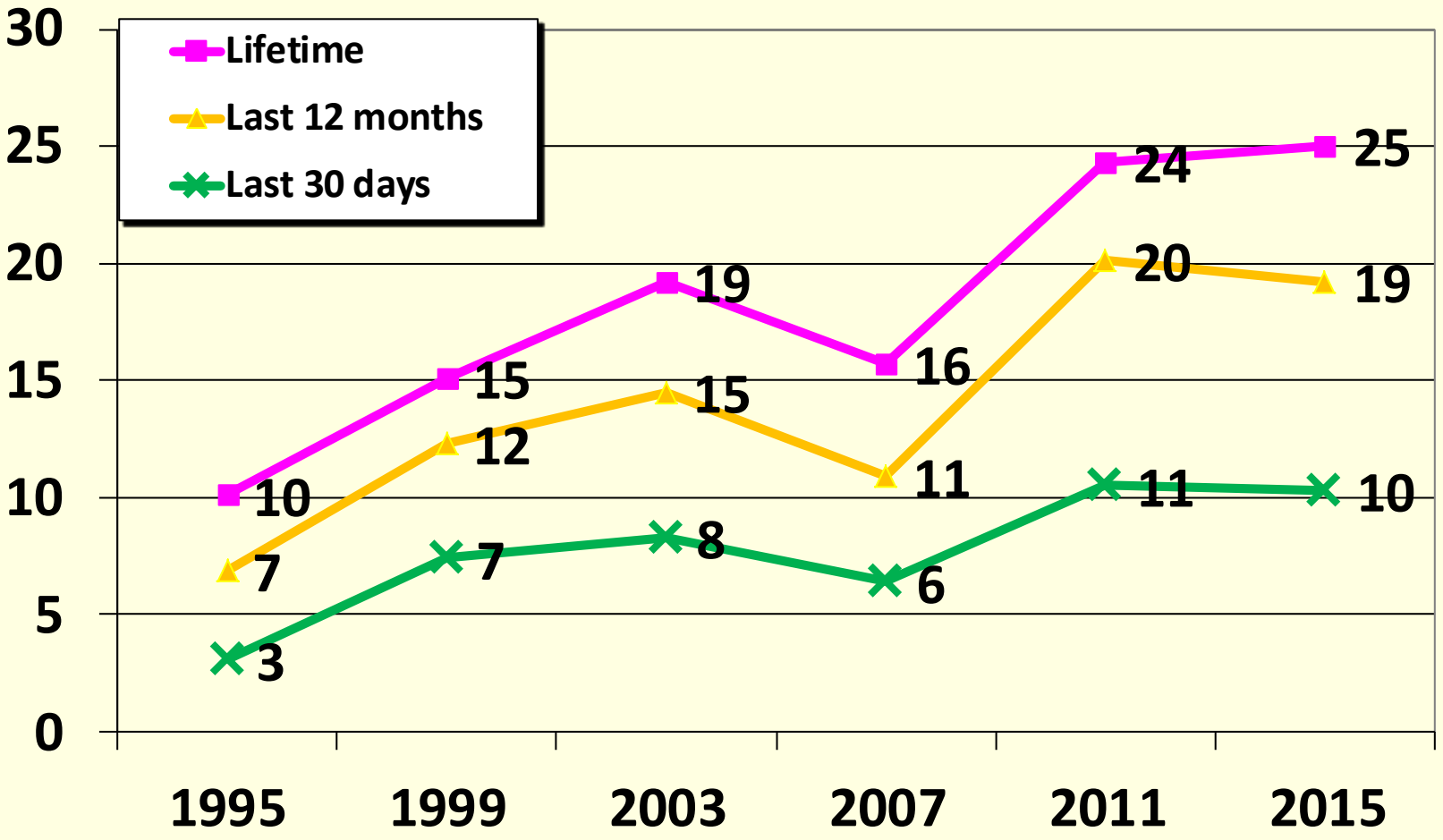
Main data sources

- School surveys (ESPAD) 1995, 1999, 2003, 2007, 2011, 2015 *(Institute of Psychiatry and Neurology)*
- National population survey 2002, 2006, 2010 *(Polish National Focal Point to EMCDDA)*
- National statistical data on psychiatric residential treatment *(Institute of Psychiatry and Neurology)*
- Law-enforcement statistical data *(Ministry of Justice, the police)*
- HCV prevalence study *(Institute of Psychiatry and Neurology)*
- Cohort mortality studies among drug addicts – 2000-2011 *(Institute of Psychiatry and Neurology and National Bureau for Drug Prevention)*

Lifetime prevalence of drug use among 15-16 years old students in Poland (percentages of respondents)



Prevalence of cannabis use among 15-16 years old students in Poland (percentages of respondents)



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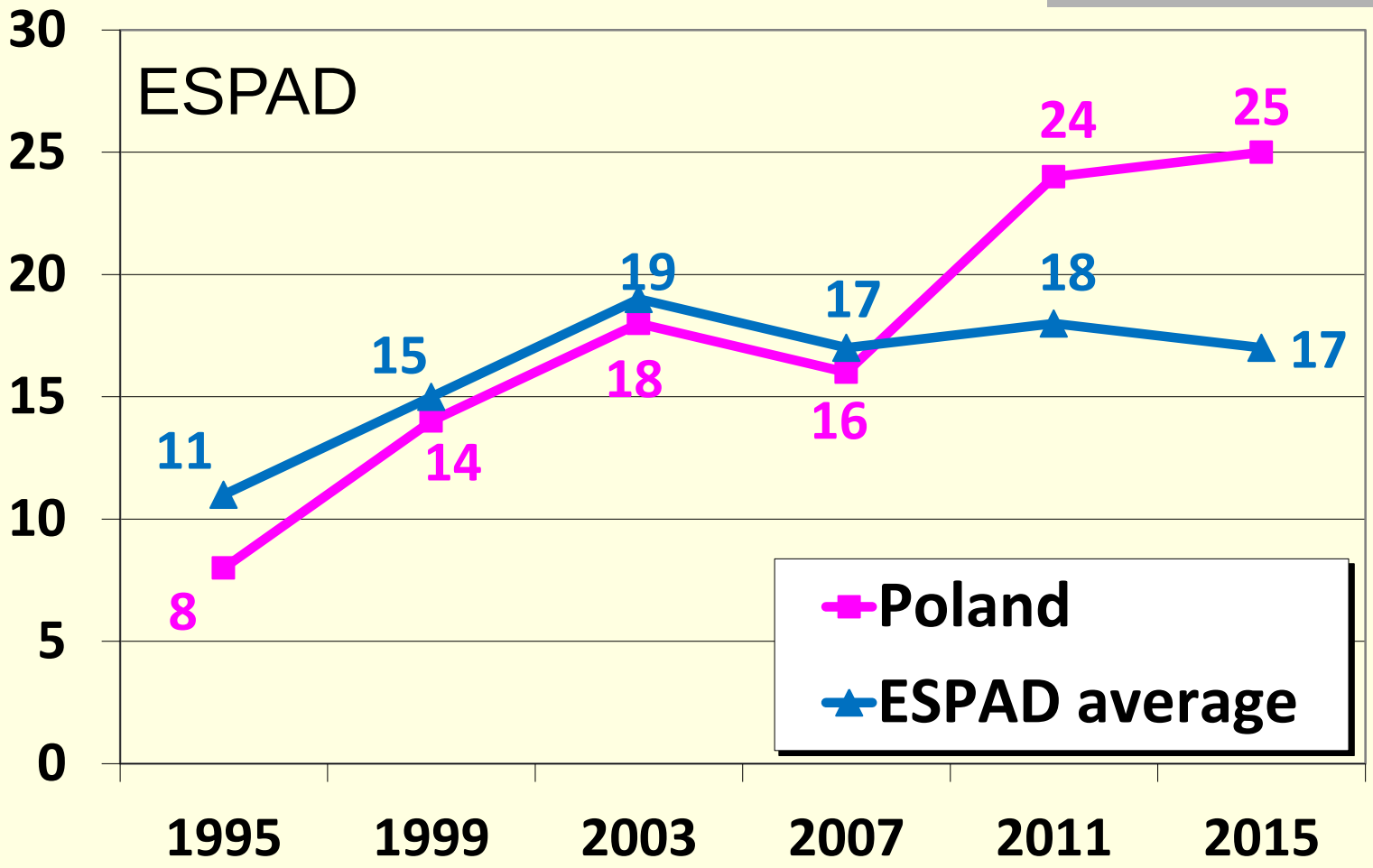
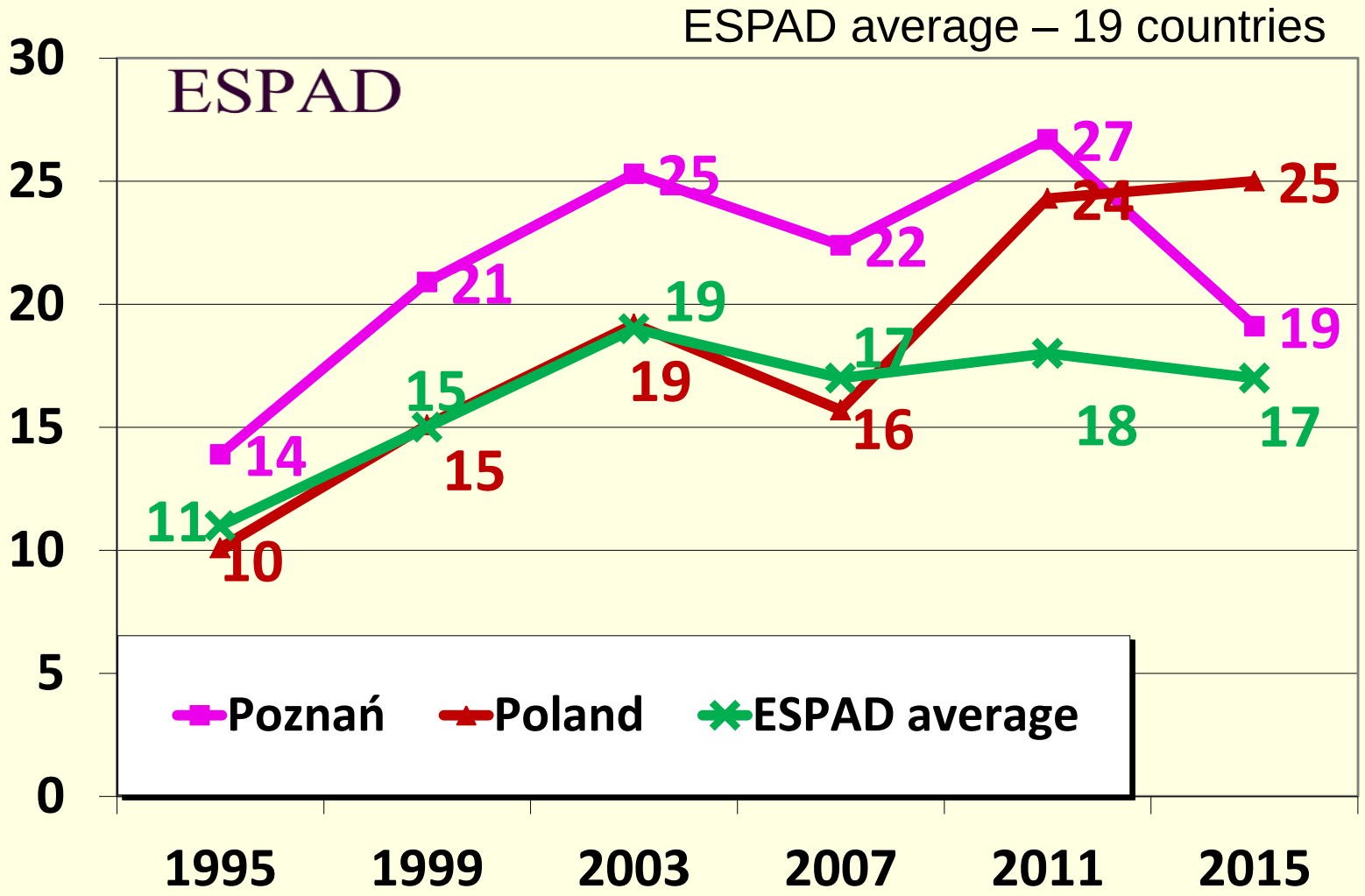
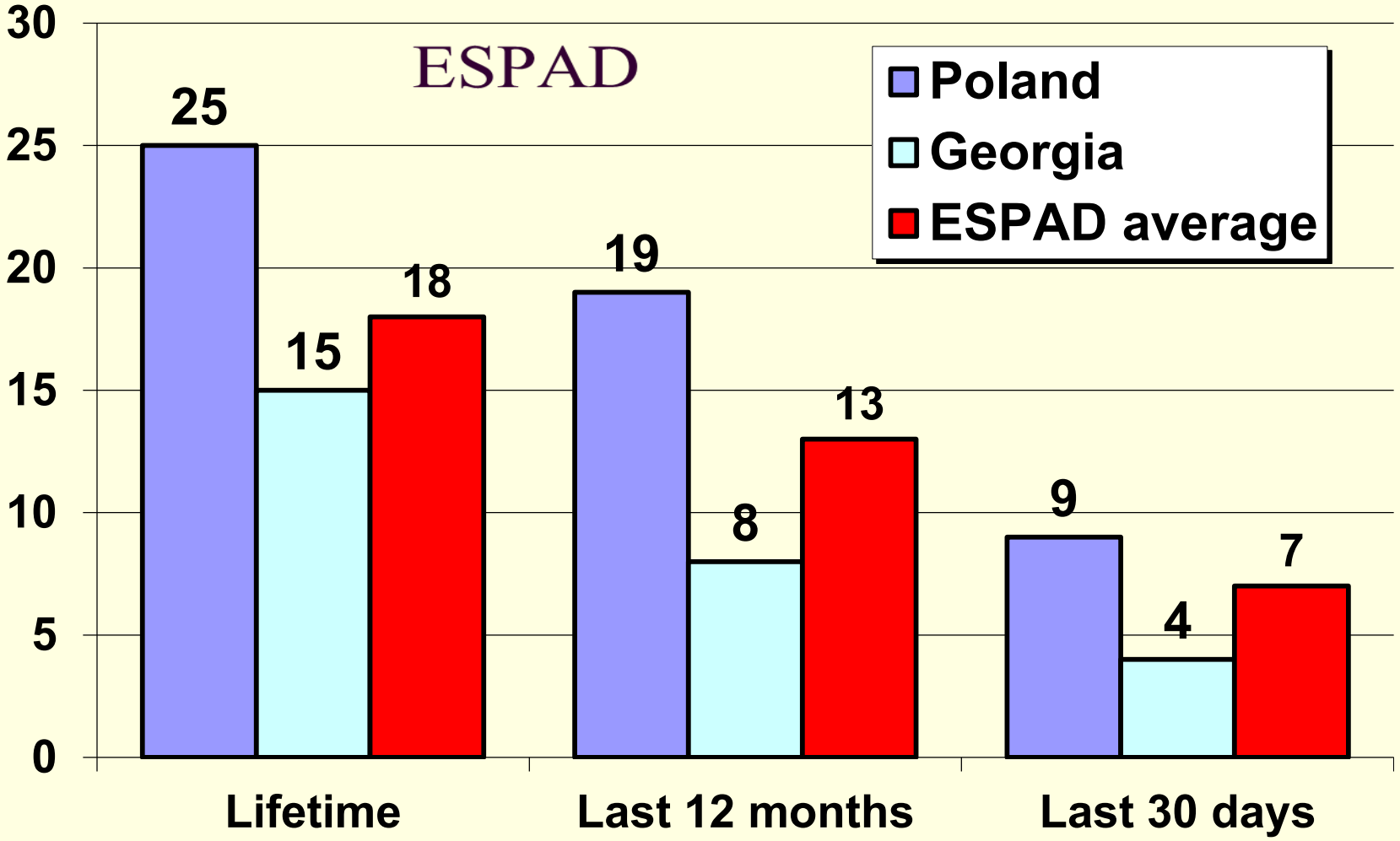


ESPAD average – 19 countries

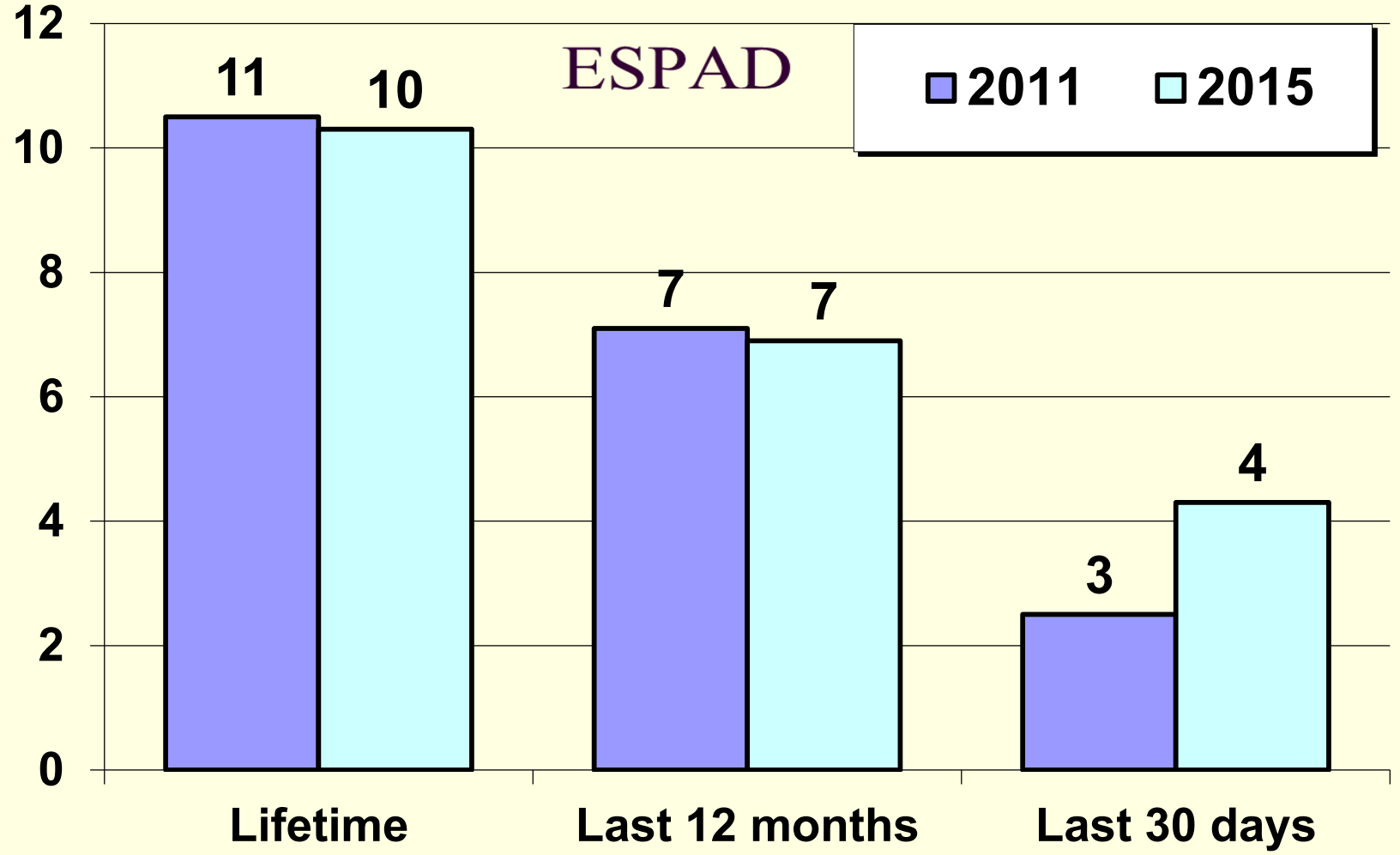
Lifetime prevalence of cannabis use among 15-16 years old students (percentages of respondents)



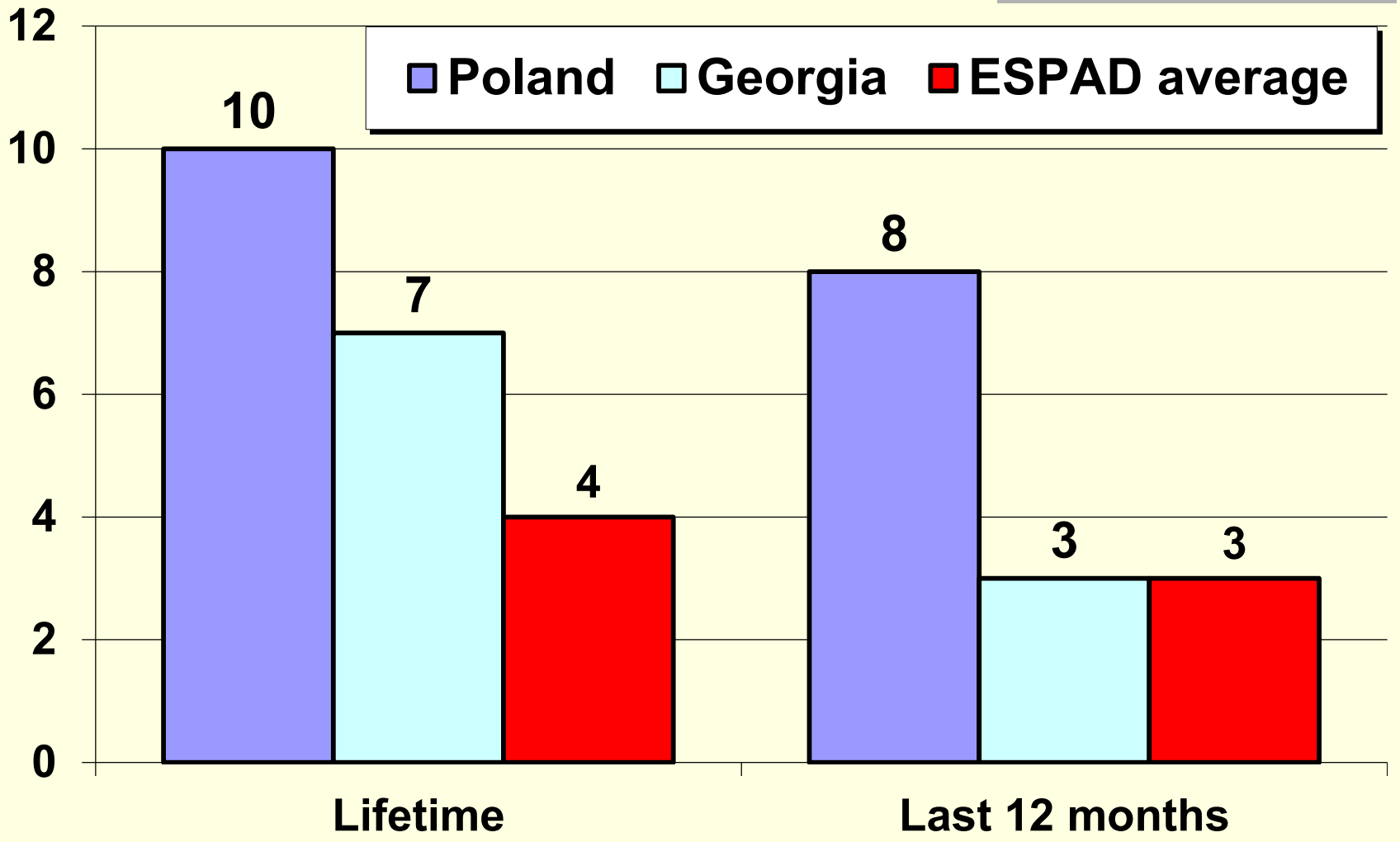
Prevalence of cannabis use among 15-16 years old students in 2015 (percentages of respondents)



Prevalence of NPS use by students age 15-16 years in Poland (percentages of respondents)



Prevalence of NSP use by 15-16 years old students in 2015 (percentages of respondents) ESPAD



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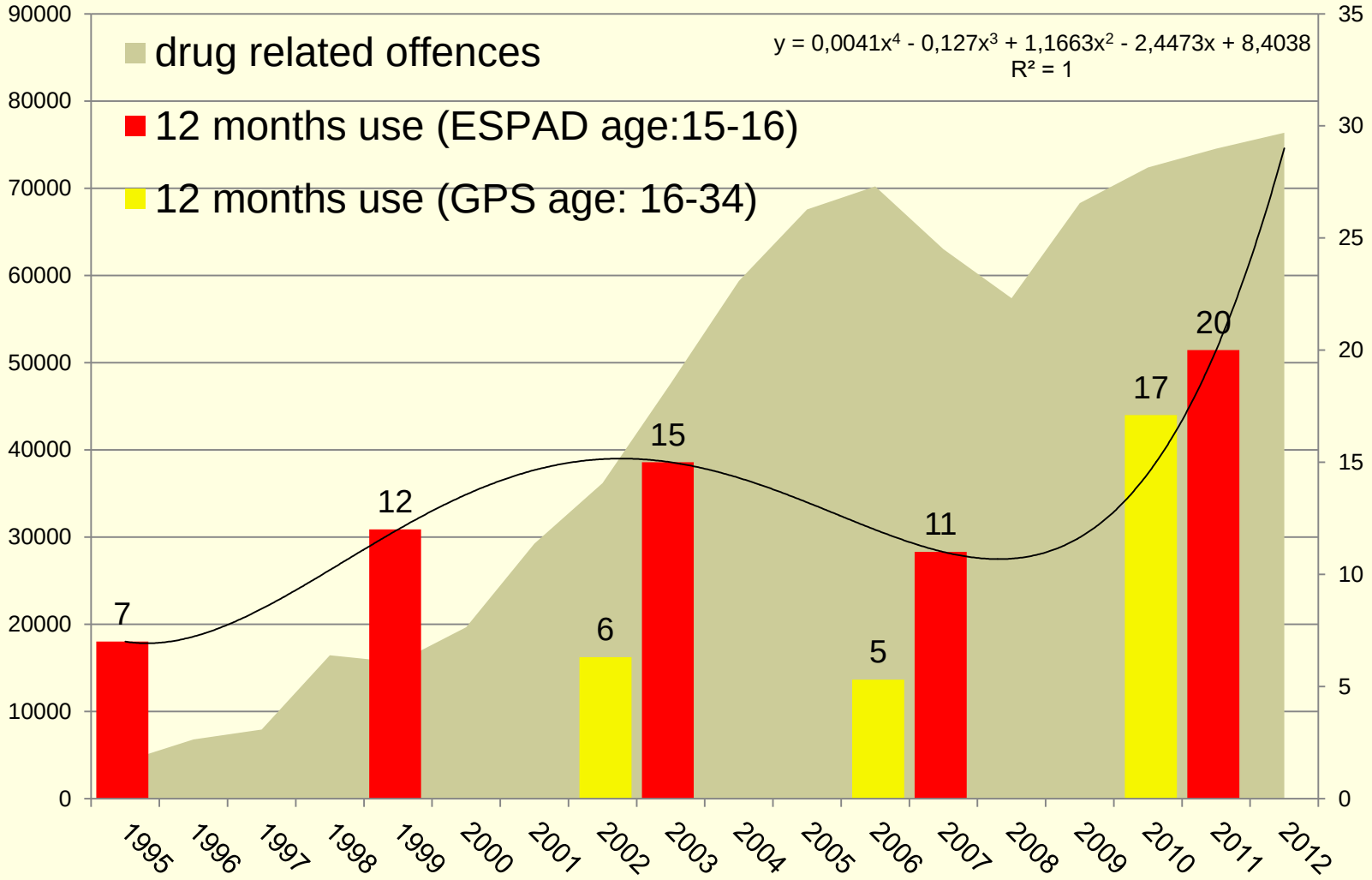
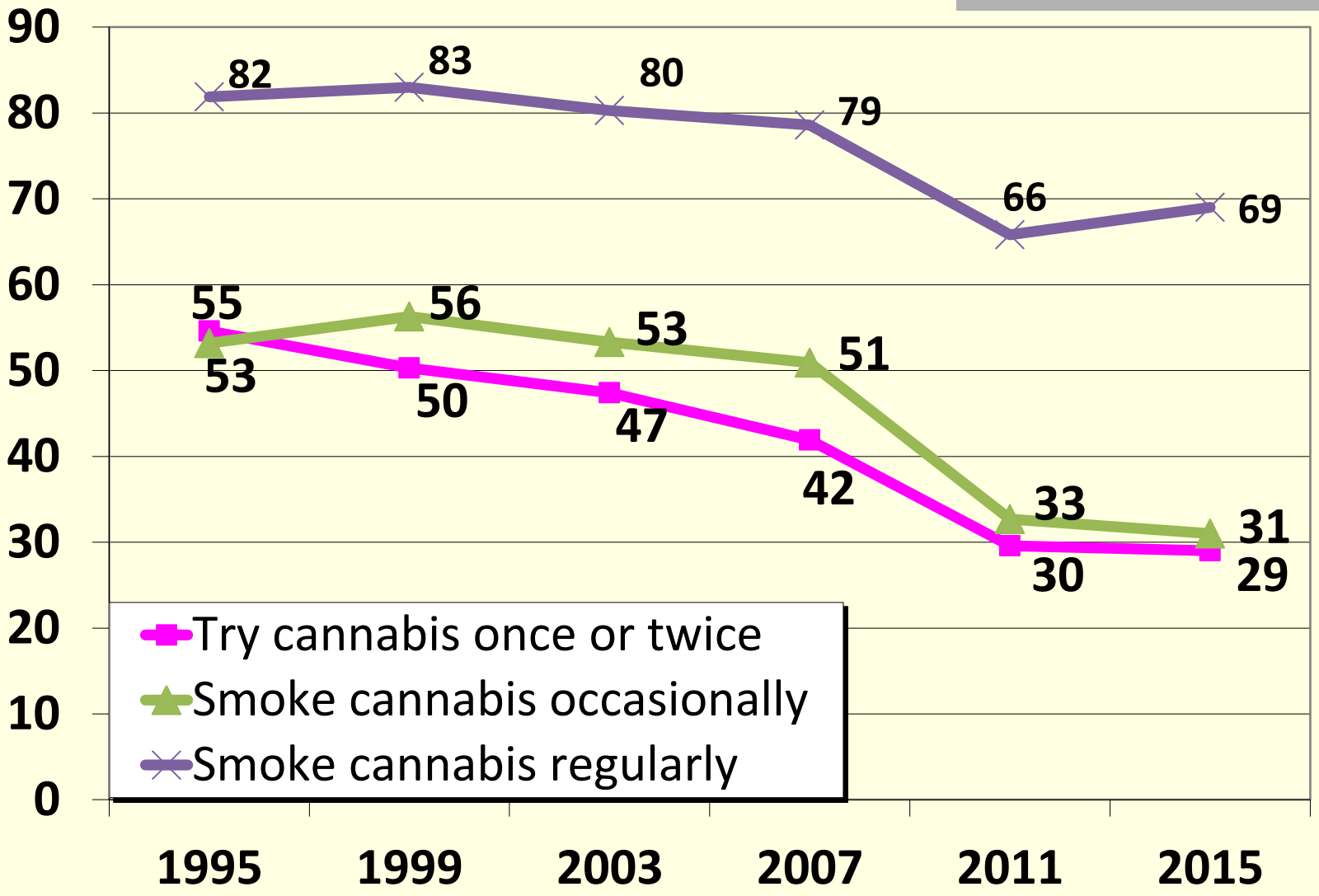
Cannabis use in Poland (GPS and ESPAD) and number of drug related offences noted by police



Perceived risk related to cannabis use in Poland – „great risk” (ESPAD, age: 15-16)



Criminalization of drug problem

- In 1997 Poland adopted a new law penalizing illicit drug possession, but with exception of small amount for personal use
- In 2000 the amendment to this law extended penalization to cover any possession even small amount for personal use
- In 2011 the probation measures were extended to include occasional drug users if prosecuted for illicit drug possession, prosecution may be discontinued by the attorney provided that drug user will take part in prevention program

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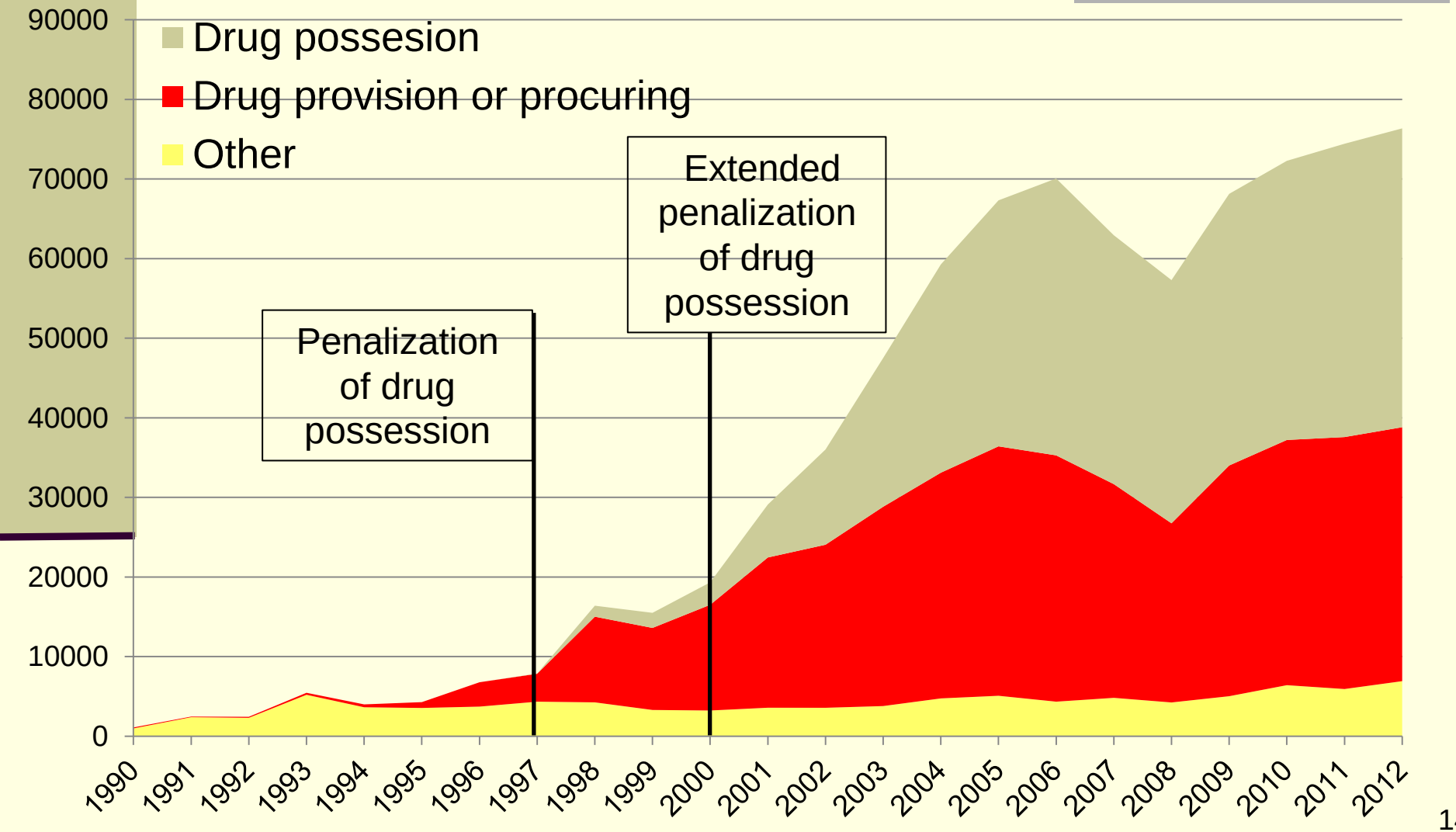
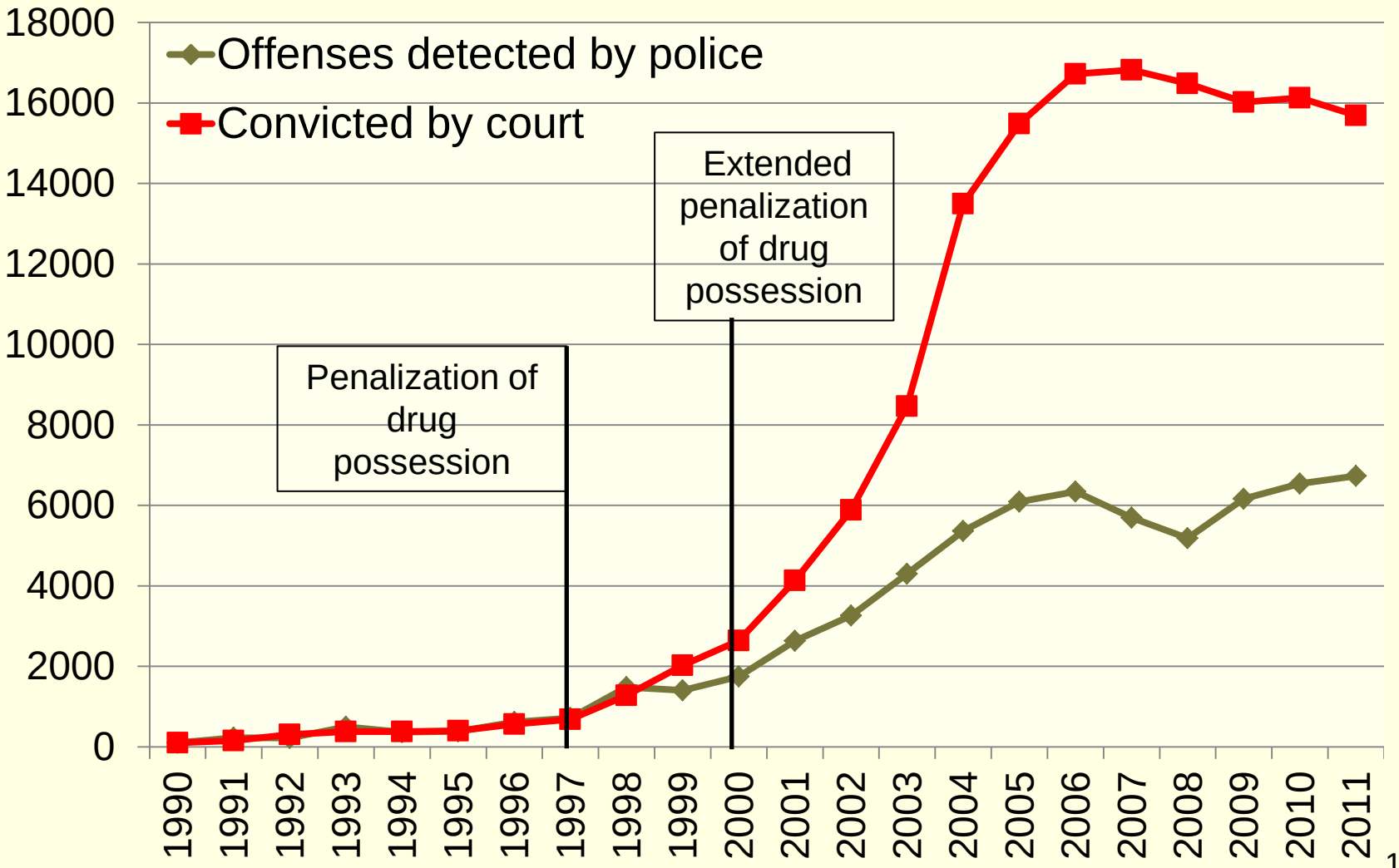
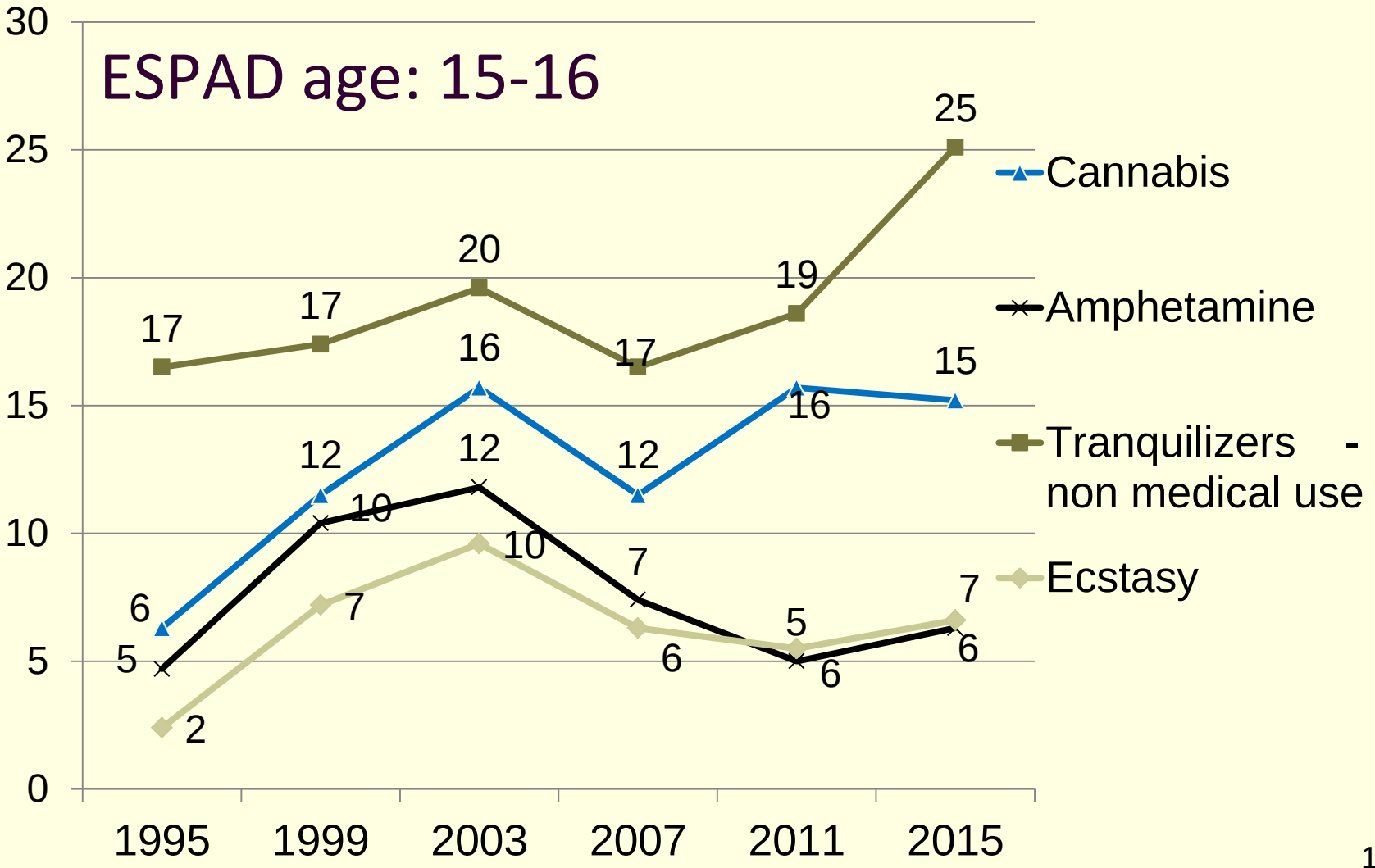
Drug related offences detected by police in Poland



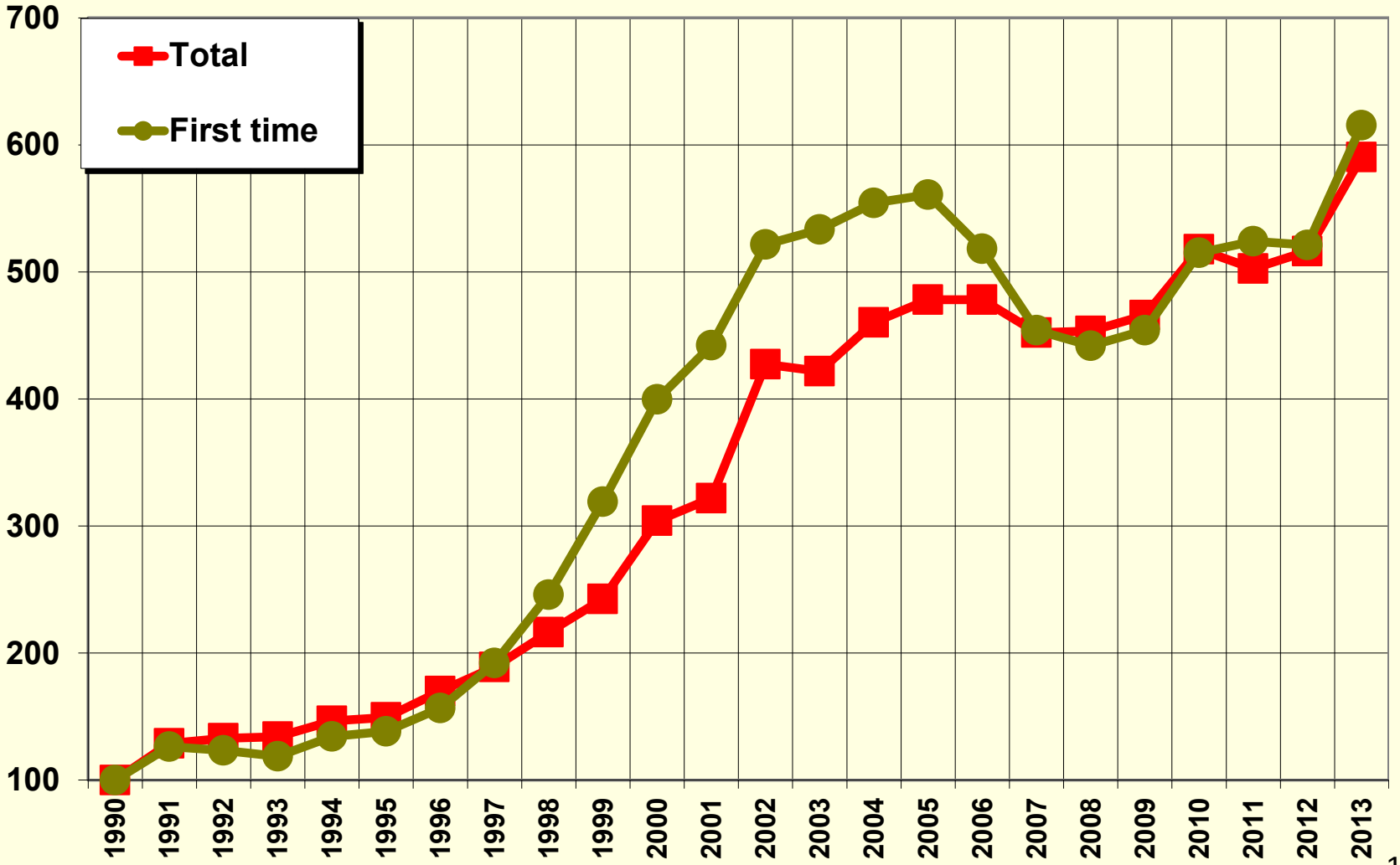
Drug related offences in Poland detected by police and sentenced by court (Index 1990 = 100)



Perceived drug availability in Poland (percentages of answers “very easy” for question: how difficult do you think it would be for you to get it)



Treatment demand to residential treatment in Poland (Index data 1990 = 100)



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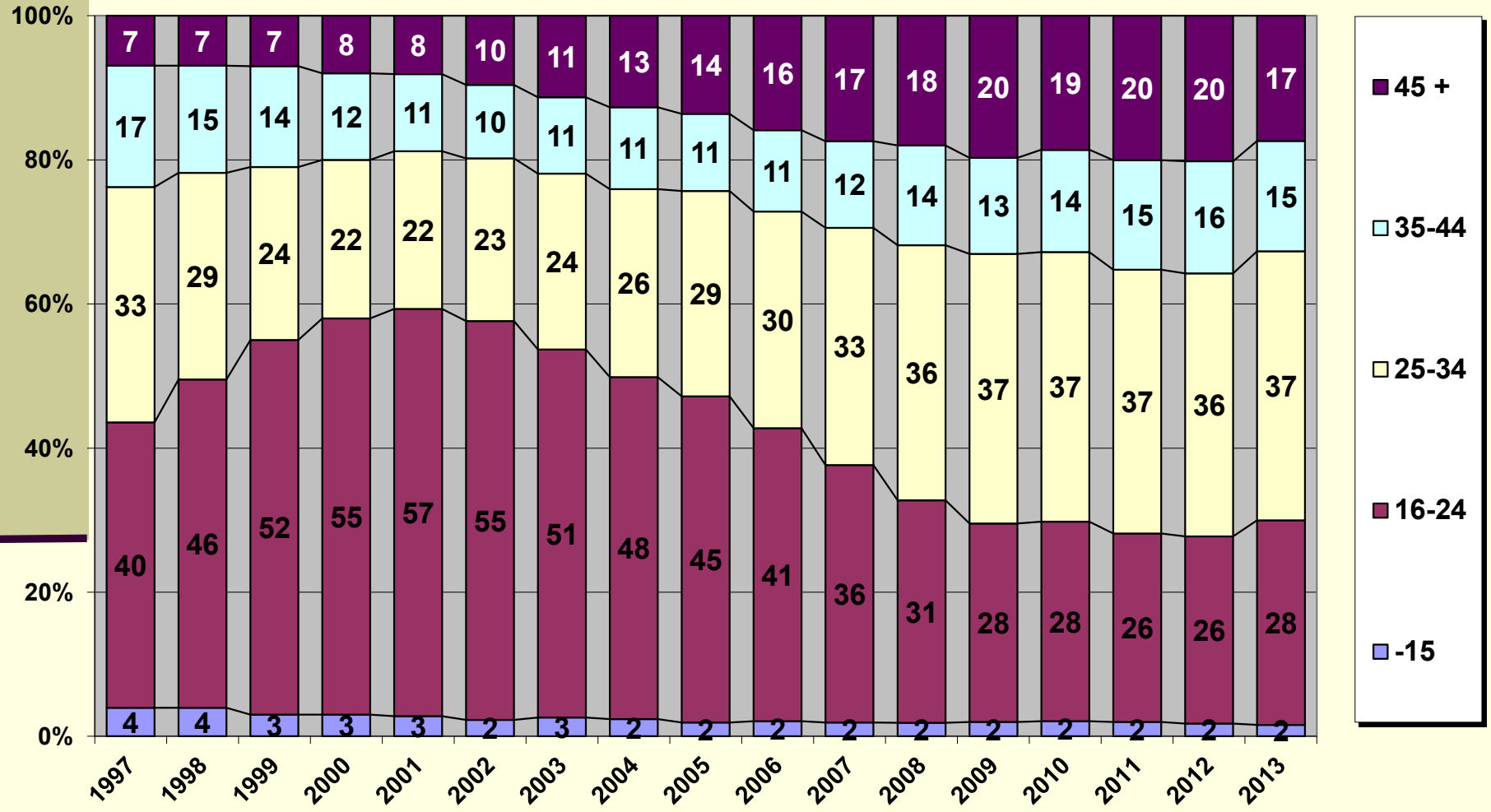
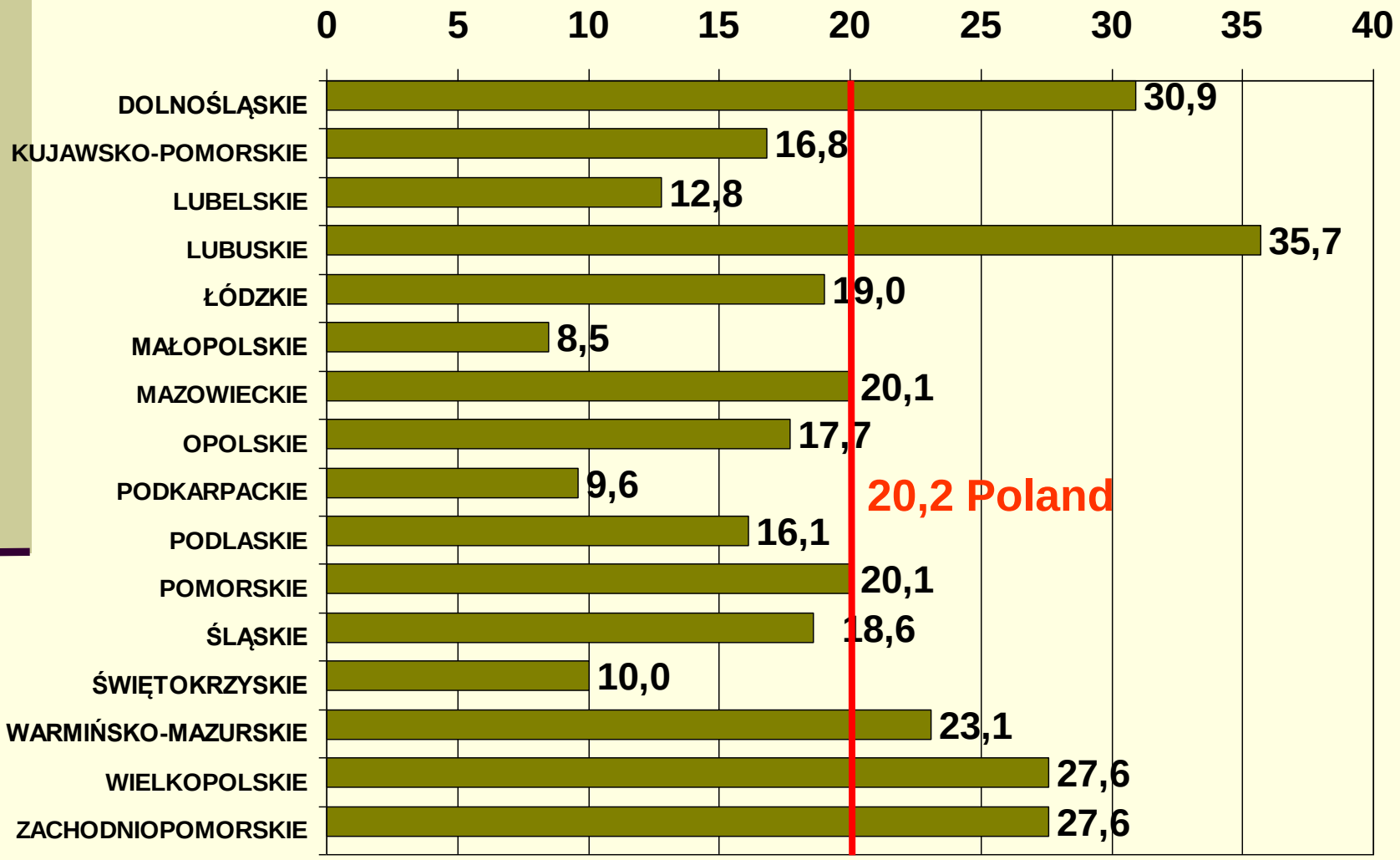
Treatment demand to residential treatment in Poland by age groups



First treatment demand to residential treatment – rate per 100 000 population (2013)

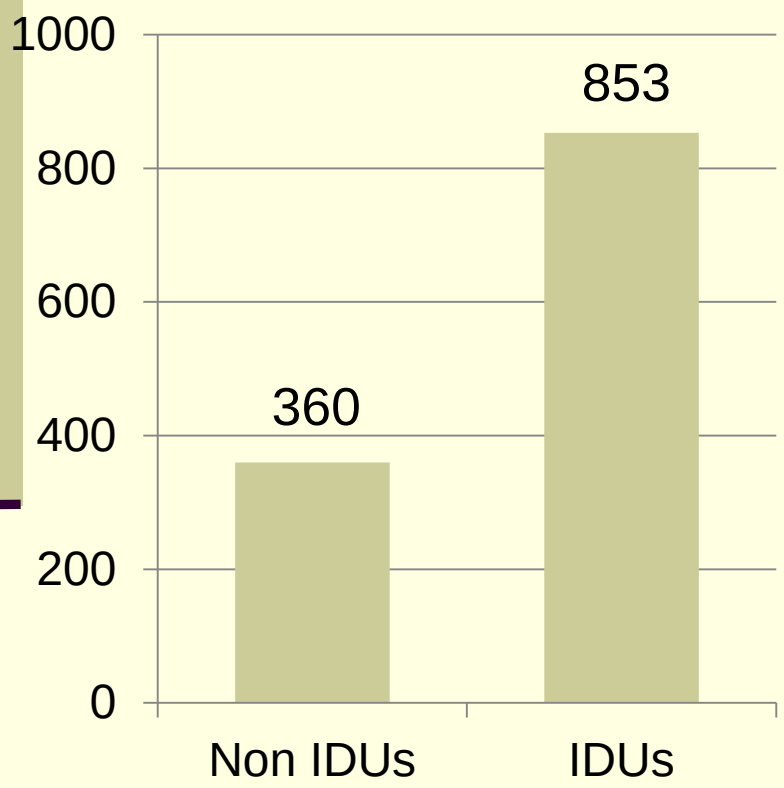


HCV prevalence study 2014

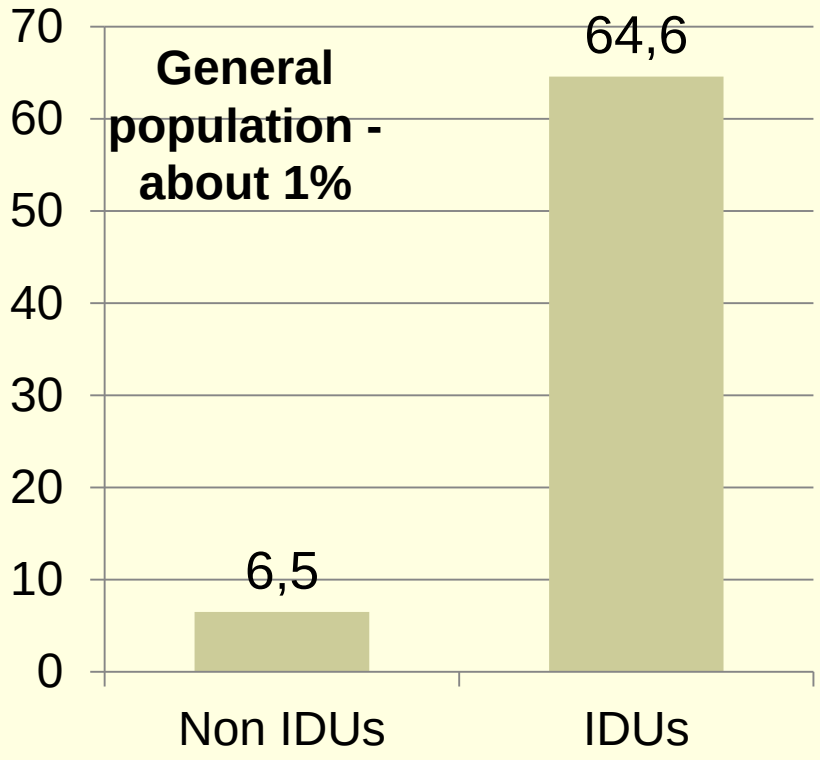
- Population under study – drug users using regularly illicit substances and experience problems
- Inclusion criteria:
  - daily or almost daily drug use during at least 1 month in the last 3 years, or
  - lifetime injecting drug use
- Snowball sampling in 15 localization around Poland
- Testing saliva samples (anti-HCV antibodies) and collecting standardized interviews
- Sample size – 1219 (average per localization – 81)

HCV antibodies and injecting drug use

Lifetime injecting and non-injecting drug use (numbers)



HCV antibodies among IDUs and non IDUs (percentages)



Statistically significant p 0,01

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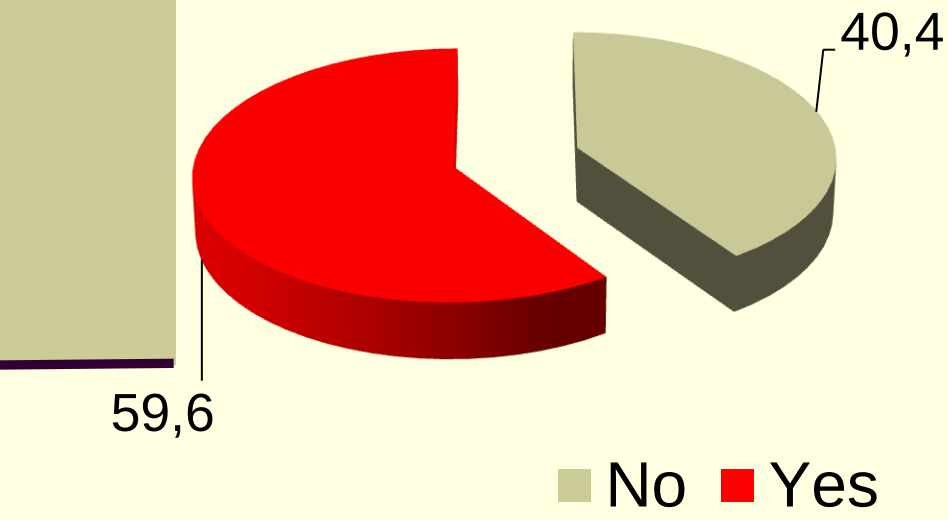
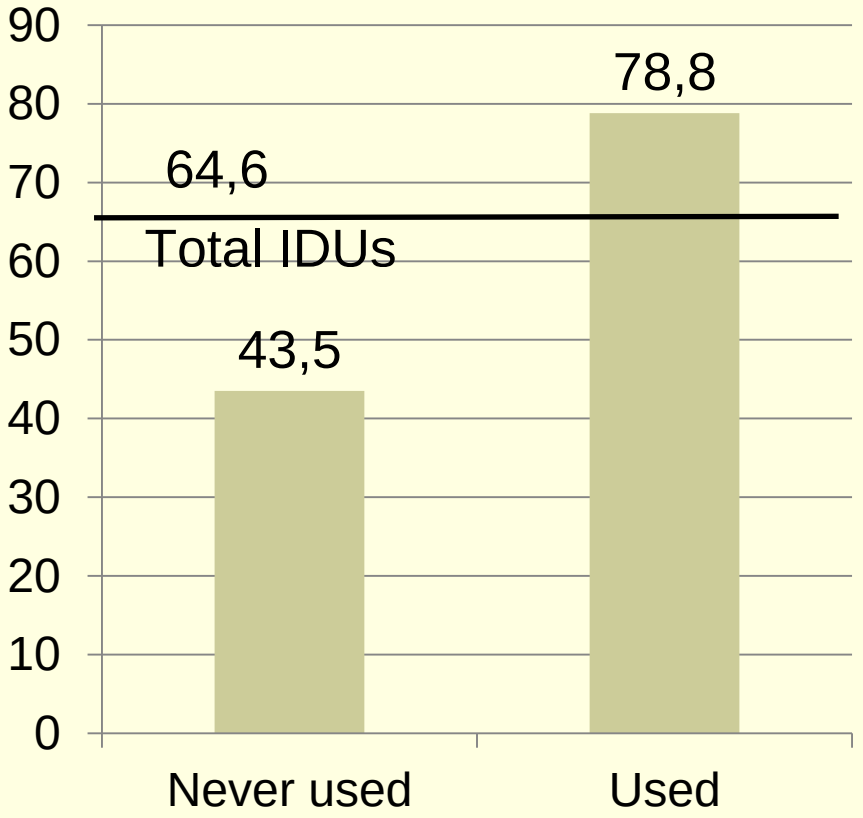
HCV antibodies among IDUs

Lifetime use of needles or syringes used by others



HCV antibodies and use of used needles or syringes



Statistically significant p 0,01

Risk of use of used needles or syringes in last 30 days – logistic regression model

N = 424

Variables (reference category)	Odds ratio	CI lower	CI higher
Homelessness (no)	2,359	1,435	3,879
Risky places of injections (no)	1,986	1,133	3,483
Injection every day (once a week or less frequently)	3,430	1,746	6,737
Injection 2-6 times per week (once a week or less frequently)	1,694	0,852	3,367
Tested HCV+ (no tested)	0,656	0,387	1,109
Tested HCV- (no tested)	0,299	0,131	0,685

Variables not included in the model:

- Gender
- Age
- Education
- Number of years since first injection
- Imprisonment experiences

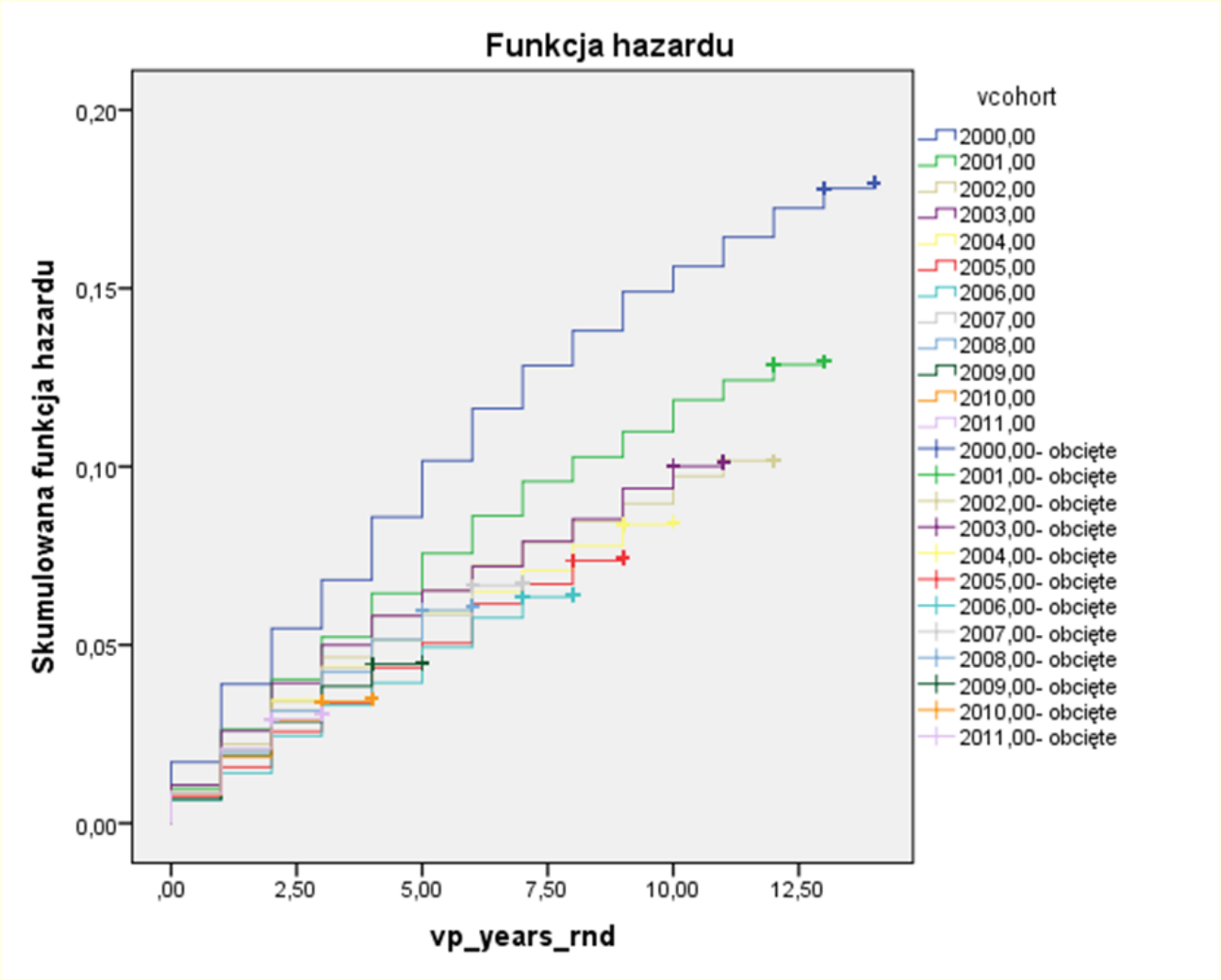
Model fitting:

- 78,1% correctly classified
- R^2 Nagelkerke = 0,19

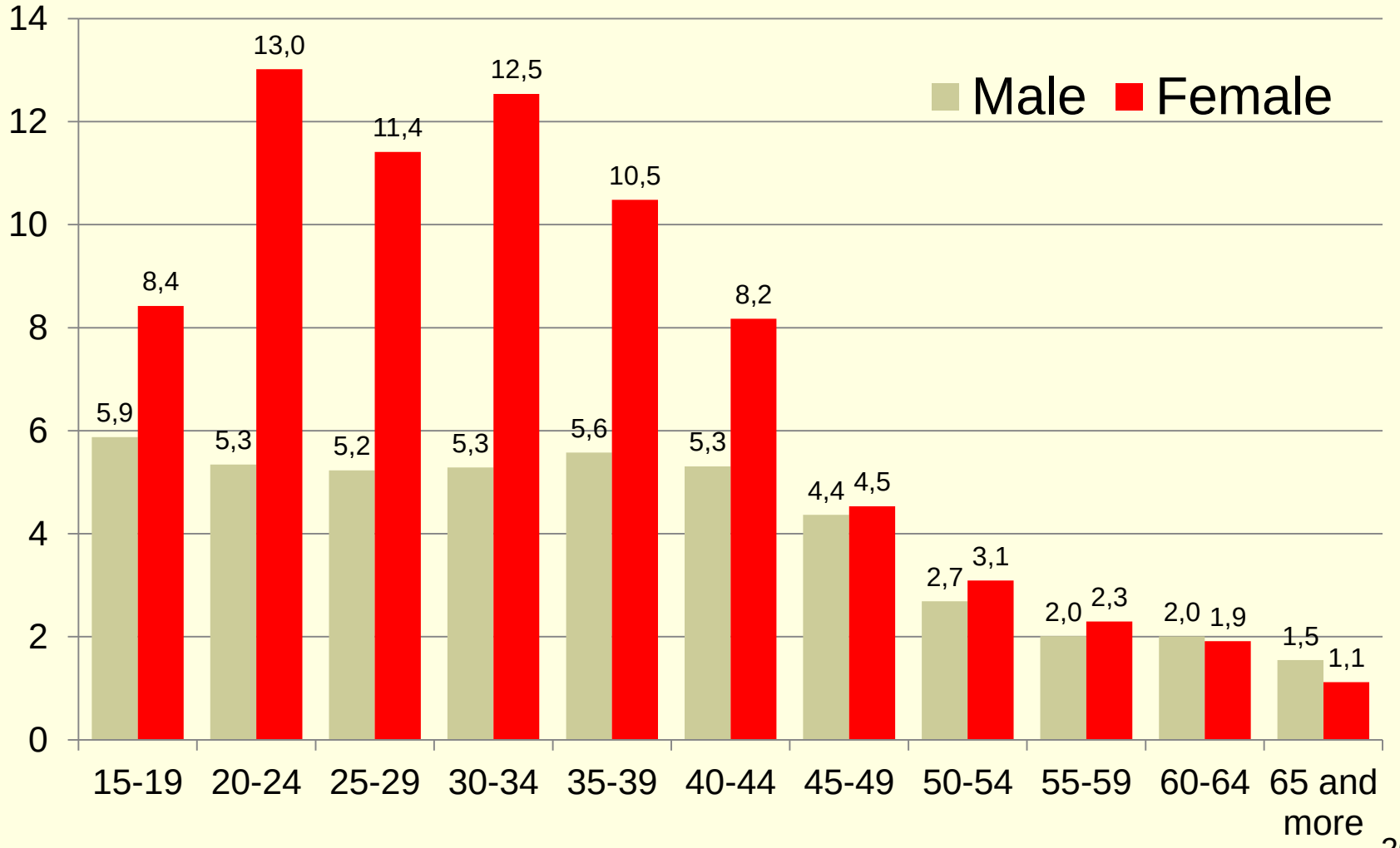
Mortality cohort study among problem drug users in Poland (2013)

- Population under study
  - Drug users treated in 2000-2011 in residential drug addiction treatment in whole country
- Follow up period: 2000-2013
- Size of initial group – 96 135
  - Vital status identified – 74 192 (77.2%)
  - Vital status unidentified – 21 943 (22.8%)
- Number of person-years – 560 523
- Number of deaths – 5 727 (7.7%)
- Crude mortality rate (CMR) – 10.2 per 1000 person/years
- Standardized mortality ratio (SMR) – 3.3 (95% CI: 3.2-3.4)

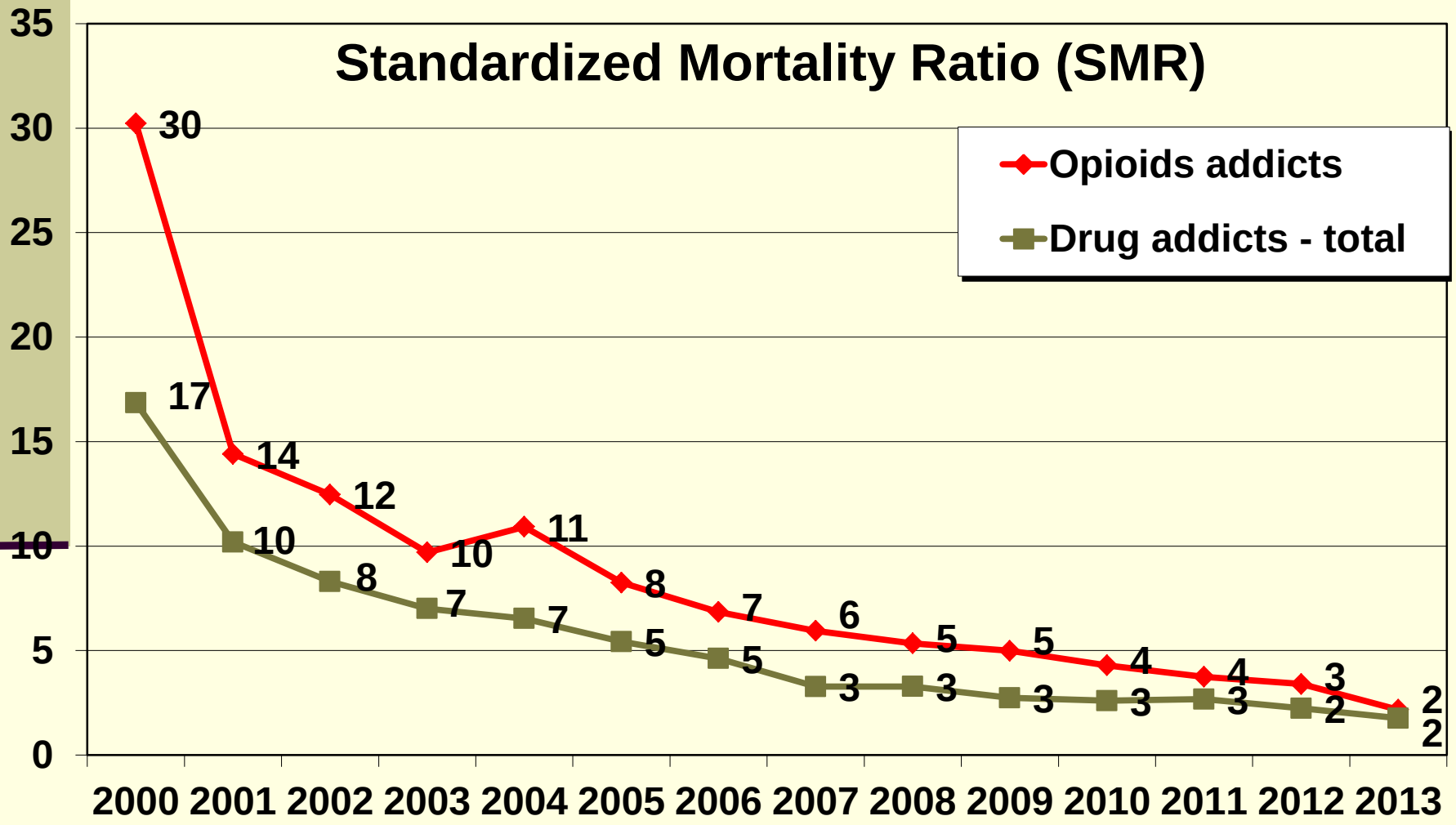
Hazard function for particular cohorts (Kaplan-Meier survival analysis)



Standardized mortality ratio (SMR) by age and gender



Mortality of problem drug users – findings of cohort study



Conclusions

- Drug use prevention is still not able to manage to reduce cannabis use on national level, but stabilization in last 4 years period is a success
- Locally decrease in cannabis was achieved
- Prevalence of other drugs use including NPS is currently stable
- Penal policy produced criminality by penalization of drug possession – not visible impact on drug availability
- Treatment and harm reduction – decreasing trend in mortality of drug addicts