

Crime prevention policy	
EU- priority	Drugs
Country	Estonia
Year	2018

1. Overview of the field

Definition of drugs

The Act on Narcotic Drugs and Psychotropic Substances and Precursors Thereof regulates the field of narcotics and psychotropic substances in Estonia. Under this law, unauthorised consumption of narcotic drugs or psychotropic substances without a prescription, or illegal manufacture, acquisition or possession of small quantities of any narcotic drugs or psychotropic substances, is punishable by a fine (usually determined by the police) or by detention for up to 30 days. However, proceedings for misdemeanours may be suspended for reasons of expediency.

Any act of illegal possession or dealing in drugs not intended solely for personal use is considered a criminal offence, regardless of the type and amount of illicit drug. Activities such as illegal manufacture, acquisition, theft or robbery, storage, transport or delivery of narcotic drugs or psychotropic substances with the intent to supply are punishable by up to three years' imprisonment for the smallest quantities, and by 6-20 years' imprisonment or even life, depending on the quantities involved and other defined aggravating circumstances, such as organised crime.

In 2011, the parliament adopted a legal basis for the implementation of drug treatment as an alternative to punishment for drug users. Treatment is an alternative to prison only if the offender is sentenced to imprisonment for a period of six months to two years and agrees to undergo the treatment course.

Historically, new psychoactive substances (NPS) were primarily regulated by amending the four schedules of licit and illicit narcotic and psychotropic substances to add each new substance individually. In 2013, Schedule V was added in order to regulate trade in NPS with legitimate industrial uses, such as γ -butyrolactone (GBL) and 1,4-butanediol (1,4-BD).

Sale of substances in this schedule is an offence when a substance is sold with the intention to cause intoxication. In 2016, Schedule VI was added; it includes 15 substance groups. Substances, their isomers, salts and ethers that belong in these groups do not need to be listed individually and are controlled automatically.

Assessment of trends and developments

The last general population study on drug use in Estonia dates back to 2008, however some more recent studies on risk behaviours among the adult general population (in 2014, 2015 and 2016) also explored illicit substance use. The available data indicate that cannabis remains the most commonly used illicit drug among the adult general population aged 15-64 years in Estonia, and its use is concentrated among young people, with males generally reporting cannabis use more frequently than females. Amphetamines were the most common stimulants used by the adult general population in 2008 and 2015.

Drug use among 15- to 16-year-old students is reported by the 2015 European School Survey Project on Alcohol and Other Drugs (ESPAD). This survey has been conducted in

Estonia since 1995. The lifetime use of new psychoactive substances (NPS) and lifetime use of cannabis among Estonian students were higher than the ESPAD averages (based on data from 35 countries), while lifetime use of illicit drugs other than cannabis was in line with the ESPAD average. Estonian students less commonly reported use of any alcohol during the last 30 days, while heavy episodic drinking during the last 30 days was in line with the average. The long-term trend indicates an increase in prevalence rates for cannabis use among 15- to 16-year-olds between 1995 and 2007, with some signs of stabilisation in the 2011 and 2015 studies.

Available data indicate that the majority of people who inject drugs (PWID) in Estonia primarily use opioids, mainly fentanyl. Estimates of the size of the population of high-risk opioid users are not available in Estonia.

Recent overview of statistics and research

Drug-related research is organised, planned and financed through the National Health Plan 2009-2020. National public funding of research is primarily managed by the Ministry of Education and Research. Additionally, many research projects in the field of drugs are financed by external funds (mainly from the US and the EU).

	Year	Country data	EU range	
			Min	Max
Cannabis				
Lifetime prevalence of use – schools (% , ESPAD)	2015	25.5	6.5	36.8
Last year prevalence of use – young adults (%)	2008	13.6	0.4	21.5
Last year prevalence of use – all adults (%)	2008	6	0.3	11.1
Quantity of herbal cannabis seized (kg)	2016	45.8	12	110855
All treatment entrants (%)	2016	1.0	1.0	69.6
Price per gram – herbal (EUR) (min and max values registered)	2016	15-25	0.6	111.1
	Year	Country data	EU range	
			Min	Max
Amphetamines				
Lifetime prevalence of use – schools (% , ESPAD)	2015	2	0.8	6.5
Last year prevalence of use – young adults (%)	2008	2.5	0.0	3.6
Last year prevalence of use – all adults (%)	2008	1.1	0.0	1.7
Quantity of amphetamine seized (kg)	2016	26.6	0	3380
All treatment entrants (%)	2016	3.8	0.2	69.7
Price per gram –amphetamine (EUR) (minimum and maximum values registered)	2016	15-20	2.5	76.00
	Year	Country data	EU range	
			Min	Max
Opioids				
All treatment entrants (%)	2016	93.4	4.8	93.4
Price per gram - heroin (EUR) (minimum and maximum values registered)	2016	15-15	4.00	296.00
	Year	Country data	EU range	

			Min	Max
Drug-related infectious diseases/injecting/death				
Newly diagnosed HIV cases related to Injecting drug use -- aged 15-64	2016	22.8	0	33
Drug-induced deaths -- aged 15-64 (cases/million population)	2016	132.29	1.4	132.3

2. Crime strategy and coordination

Objectives of the crime strategy

Illicit drug policy in Estonia is set out in two strategic documents: the National Health Plan 2009-20 and the White Paper on Drug Prevention Policy. The Health Plan serves as the national drug strategy, stating the objectives on illicit drugs. It seeks to prevent and reduce both the consumption of narcotic substances and the health and social damage caused by drug use. Whereas the Minister of Social Affairs holds overall responsibility for the National Health Plan 2009-20, the Minister of the Interior is responsible for drugs issues within the plan and its action plans.

The White Paper on Drug Prevention Policy, adopted in January 2014, elaborates on Estonia's illicit drug policy; its main objective is to reduce drug use and the resulting harms. It follows the EU's balanced approach to drug policy and is structured around seven pillars: (i) supply reduction; (ii) universal primary prevention; (iii) early detection and intervention; (iv) harm reduction; (v) treatment and rehabilitation; (vi) resocialisation; and (vii) monitoring. Specific actions for achieving the individual objectives of each pillar are specified in an action plan appended to the White Paper, addressing the period to 2018. The White Paper on Drug Prevention Policy is a scientifically based guide for the annual planning of activities in the field of illicit drugs.

Role of prevention in the crime strategy on state/regional/local level

The White Paper on Drug Prevention Policy sets out in detail the objectives for drug use prevention in Estonia until 2018. These include prevention and delay of initiation of drug use and strengthening the early detection and intervention system. Prevention activities are implemented mostly under the supervision of the Ministry of Social Affairs and the Ministry of Education, while other ministries and agencies cooperate with local governments to provide support and funding. Recently, the Ministry of the Interior has put greater emphasis on and more resources towards the primary prevention of drug dependency and has initiated a number of new evidencebased approaches, such as the Good Behaviour Game, Spin, etc.

Implementation of the policy (which level is responsible for the implementation and how is the implementation coordinated?)

The Government Committee on Drug Prevention is responsible for coordination at inter-ministerial level. Its tasks are setting drug prevention priorities; monitoring and assessing ongoing actions; proposing policy solutions and advising the government on drug problems; and coordinating measures related to drugs enacted under the National Health Plan 2009-20. The Minister of the Interior chairs the committee, which has members from all relevant

ministries. A series of working groups based on the pillars of the 2014 White Paper on Drug Prevention Policy play an important role in implementing drug policy. The working groups comprise NB: Year of data 2016. Strategies with broader focus may include, for example, licit drugs and other addictions. Illicit drugs focus Broader focus Page 2 of 25 representatives from relevant ministries, agencies and service providers. The Department of Public Health within the Ministry of Social Affairs is the permanent coordination unit in the field of drugs. The Minister of Social Affairs informs the government on the progress made in the implementation of the national drugs strategy. The National Institute for Health Development (the national focal point) is a member of the Government Committee for Drug Prevention and is responsible for providing annual information on the drug situation to this committee. At local level, health coordination committees, which exist throughout Estonia, address drug-related issues as part of their work.

Stakeholders (working groups, specialised agencies, partners, etc)

The Government Committee on Drug Prevention
The Ministry of the Interior, The Ministry of Justice, The Ministry of Social Affairs, The Ministry of Education and Research, National Institute of Health Development

Participation in European/ international networks, working groups, etc.

EMCDDA, Europol, CEPOL, Council of the European Union Horizontal Working Party on Drugs (HDG), Pompidou Group, National Drug Coordinators network

3. Good practices

Overview of recent good practices, prevention programs, etc.

- Good Behavior Game - programme has proved to be effective in preventing school dropout as well as criminal and other risky behaviours.
- The Spin programme, which is similar to the Kickz programme developed in the United Kingdom, aims to create alternative leisure activities for children in high-risk groups.
- The programme Incredible Years was introduced in 2014 and addresses parenting skills.
- A number of youth centres across Estonia, funded by the Ministry of Education and Research, provide drug prevention information and counselling to young people.
- The website of the National Institute of Health Development provides the general public with information on drug-related issues.