

CADAP 7

Result 2

Service Technical Assistance Services for the improvement of data collection and analysis systems and the implementation of a Drug Early Warning System in Central Asian Countries

Current situation of data collection and drug early warning system in Kyrgyzstan

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Acronyms

CADAP	Central Asian Drug Action Programme
CARICC	Coordination Centre for Combating illicit trafficking of Narcotic Drugs, Psychotropic Substances and their Precursors
DRID	Drug– related infectious diseases
DRD	Drug– related deaths
EHRA	Eurasian Harm Reduction Association
ESPAD	European School Survey Project on Alcohol and Other Drugs
EWS	Early Warning System
GSIN	State Executive Service attached to the Government
INCB	International Narcotic Control Board
FES	Forensic Expert Service
MFA	Ministry of Foreign Affairs
MIA	Ministry of Internal Affairs
MoH	Ministry of Healthcare
MSSEP	Medical Service of the State Service for Executions of Punishments
NIAC DC	National Information– Analytical Centre on Drug Control
NPS	New psychoactive substances
NSP	Needle and syringe programme
OST	Opioid Substitution Treatment
PWID	People Who Inject Drugs
PWUD	People Who Use Drugs
RCHPMC	Republican Centre for Health Promotion and Mass Communications
RDMMD	Republic's Department of Medicines and Medical Devices
SCIDT	Service for Combatting Illicit Drug Trafficking
SCS MoF	State Customs Service at the Ministry of Finance
SSEP	State Service of Execution of Punishment
UNICEF	United Nations Children’s Fund
UNDP	United Nations Development Programme
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organisation
WPDI	Within Prison Drug Injection (WPDI)

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1. Introduction

The Kyrgyz Republic, also known as Kyrgyzstan, is a Central Asian country with a land area of approximately 199,900 square kilometres. It shares borders with Kazakhstan to the north, Uzbekistan to the southwest, Tajikistan to the south, and China to the east and southeast, making for a total boundary length of 4,500 kilometres.

As of January 1, 2022, the resident population in the country was 6,7 million people. Currently, the system of administrative and territorial structure of the Republic includes 7 “oblasts” (regions), two cities of republican level, 40 administrative districts, 32 cities, 9 urban-type settlements, 3 villages and 452 “aiyl aimaks” (village communities). The Kyrgyz Republic (Kyrgyzstan) is an independent State governed by the rule of law, the government authority is based on the principle of the separation of legislative, executive and judicial powers. The President is the Head of the State, the executive power and highest official. He is elected by the citizens of the Kyrgyz Republic for a term of five years.

The Jogorku Kenesh, the Parliament of the Kyrgyz Republic, is the highest representative body exercising legislative power and oversight functions within the limits of its competence. The Executive power is exercised by the President. The structure and composition of the Cabinet of Ministers is set out by the President. The Chairman of the Cabinet of Ministers is the head of the Presidential Administration. The judicial system of the country is established by the Constitution and laws, and consists of the Constitutional Court, the Supreme Court, and local courts.¹

The Kyrgyz Republic has demonstrated its commitment to the global system of control over narcotic drugs, psychotropic substances, and precursors by acceding to the Single Convention on Narcotic Drugs of 1961, the Convention on Psychotropic Substances of 1971, and the United Nations Convention to Combat Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 in 1994. In 2017, the Economic and Social Council (ECOSOC) granted Kyrgyzstan the right to vote in the Commission on Narcotic Drugs until 2021, indicating the country's continued participation in international efforts to address drug-related challenges.²

With the aim to discuss effective implementation of the drug control conventions, with the support of the Kyrgyz Republic's Department of Medicines and Medical Devices under the Ministry of Health, an International Narcotic Control Board (INCB) mission to the Kyrgyz Republic was organized in 2021, the first one after the 1997.³

The country has participated in a number of projects supported by UN organisations (WHO, UNODC, UNICEF etc.), the European Union, the Organisation for Security and Cooperation in Europe, the Commonwealth of Independent States, and is a Member State of the CARICC (Coordination Centre for Combating illicit trafficking of Narcotic Drugs, Psychotropic Substances and their Precursors) Agreement. Kyrgyzstan also participated in the previous phases of the CADAP Programme. The main partner for CADAP 7 in the Kyrgyz Republic is the Ministry of Internal Affairs.

¹ <http://www.stat.kg/media/publicationarchive/672efdec-dda1-400c-96b4-f0508d24d220.pdf>

² [Kyrgyzstan and UNODC cooperate at countering drug trafficking in the country](https://www.unodc.org/unodc/en/news/missions/missions2022/kyrgyzstan-and-unodc-cooperate-at-counteracting-drug-trafficking-in-the-country)

³ <https://www.incb.org/incb/en/news/missions/missions2022/incb-mission-to-kyrgyz-republic.html>

2. Legal and institutional framework

The legislative framework of the Kyrgyz Republic encompasses a range of laws, decrees, and resolutions that pertain to the regulation of narcotic drugs, psychotropic substances, and precursors, as well as the safeguarding of public health within the country.

Coordination of drug policy

In Kyrgyzstan, the State Coordination Committee on Drug Control plays the coordinating role in the state drug policy. It consists of the deputy heads of the ministries and departments concerned, representing internal affairs, national security, customs, health, the penal system and law enforcement agencies. The main executive body in drug policy is the Service of Counteracting against Drug Trafficking of the Ministry of Internal Affairs, where a unit for coordinating drug monitoring in the country has been established.

The main drug policy stakeholders in Kyrgyzstan are the following:

- The Ministry of Foreign Affairs of the Kyrgyz Republic.
- The Ministry of Internal Affairs (MIA) - Service for Combatting Illicit Drug Trafficking
- The State Executive Service attached to the Government (GSIN).
- The Ministry of Health
 - Republican Centre for Psychiatry and Narcology Penitentiary services
 - Republican Centre for Health Promotion and Mass Communications
 - National Information-Analytical Centre on Drug Control
 - Republic's Department of Medicines and Medical Devices
- Ministry of Justice
- Medical Service of the State Service for Executions of Punishments
- Forensic Expert Service
- State Customs Service at the Ministry of Finance;

In the past, the primary coordinating entity with CADAP was the State Drug Control Service attached to the Government (SDCS); however, it was dismantled in July 2016.

Additional collaborators comprise the Counter-Drugs Department (SBNON) of the Ministry of Internal Affairs (MIA), which plays a significant role in drug policies, drug data collection, and prevention activities. Non-governmental organisations (NGOs) in Kyrgyzstan are essential and successful associates of the programme and will remain a vital connection between the government and the programme, particularly for CADAP 7.

Drug strategy and action plans

The anti-drug programme of the Government of the Kyrgyz Republic was ratified by Decree No.54 on January 27, 2014. Additionally, the Regulation "On the establishment of the Counter Narcotics Service of the Ministry of Internal Affairs of the Kyrgyz Republic" was approved by the Decree of the Kyrgyz Republic's Government, No. 587, on December 18, 2018.

Furthermore, on August 10th, 2022, the Cabinet of Ministers of the Kyrgyz Republic by its Decree #445 adopted the New Antinarcotic Programme of the Kyrgyz Republic and its Action Plan for 2022-2026. The Programme was developed by the Kyrgyz State Service on Drug Control (SSDC) with the assistance of UNODC project "Strengthening the State Service on Drug Control of the Kyrgyz Republic".

Legal framework

In Kyrgyzstan, the Cabinet of Ministers is the authority to update and approve lists of narcotic drugs and psychotropic substances, in accordance with the Law of the Kyrgyz Republic on "Narcotic Drugs, Psychotropic Substances and Precursors" and the Criminal Code of the Kyrgyz Republic. The Misdemeanours Code, which came into effect in January 2017 under Law No. 10 of the Kyrgyz Republic, Chapter 24, outlines two primary misdemeanours concerning drug trafficking. These misdemeanours are defined in Article 123 as the "*Illicit manufacture of narcotic drugs or psychotropic substances, their analogues and precursors in small quantities without intent to sell*" and Article 124 as "*Sowing and cultivation of plants containing narcotic drugs.*" However, this Code is no longer valid in accordance with the Kyrgyz Republic's Law No. 126 of October 28, 2021.

A special working group was established, comprising of individuals with legal expertise, representatives from the non-governmental sector, judicial practitioners, and international organisation experts, to review and revise the current criminal, procedural, and executive legislations from 2016 to 2018. Consequently, new legislative acts such as the Code of the Kyrgyz Republic on Violations, the Code of the Kyrgyz Republic on Misdemeanours, the Criminal Code of the Kyrgyz Republic, and the Criminal Procedure Code of the Kyrgyz Republic were adopted. These new laws came into effect on January 1, 2019. The use of narcotic drugs or psychotropic substances in public places is considered equal to the consumption of alcoholic beverages, and fines are imposed on violators under Section 81 (Chapter 15) of the Violation Code, which is referred to as "*Use of narcotic drugs or psychotropic substances, drinking alcohol in public places.*" It is important to note that minor offences related to the circulation and use of narcotic drugs, psychotropic substances, their analogues or precursors in public spaces, as defined in the above-mentioned code, do not constitute criminal offences.

3. Drug situation by key indicators

Prevalence and patterns of drug use among the general adult population

To date, a comprehensive study encompassing a representative sample of the general population in Kyrgyzstan has yet to be undertaken.

Youth

Within CADAP 6, a school survey was conducted in 2019 using a sample of 5,152 students to investigate the prevalence of marijuana and hashish use among adolescents⁴. The survey, which followed the ESPAD methodology and had previously been conducted in 2017, included 4,388 adolescents from selected educational institutions. After data cleaning, 4,294 questionnaires were included in the final dataset. The results of the study revealed that 2.3% of students had tried marijuana or hashish at least once in their lifetime, with boys being more likely to have tried it than girls (4.5% vs. 0.8%). Of those

⁴ 2019 Substance Use and Addiction Among Youth in Kyrgyzstan, Author: Dinara Madybaeva, M.D. – monitoring and evaluation specialist / PF "AIDS East-West, Foundation in the Kyrgyz Republic"; Reviewers: Assoc. prof. Viktor Mravcik, M.D., Ph.D. – CADAP 6/Component "National Focal Point", senior scientist; Biljana Kilibarda, M.D., Ph.D. – CADAP 6/Component "National Focal Point", scientific expert.

who had tried it, 1.4% had done so in the past 12 months (2.5% of boys and 0.3% of girls), and 0.5% of school students had consumed cannabis products in the 30 days prior to the survey. Notably, there was an increase in the prevalence of consumption among boys from 3.3% to 4.5% compared to the 2017 survey. The more intensive cannabis use (40 or more times in a lifetime) was found to be 0.2% of students, with no difference between boys and girls. The study also revealed that the prevalence of new types of psychoactive substances used throughout life ranged from 0.3% to 0.8%, with an increase in use among boys and a decrease among girls.

A previous study was conducted within CADAP 6 in 2017 following ESPAD methodology with a sample size of 4,643 students aged 15-16 years. The final cleaned database included 4,542 questionnaires, and data analysis was carried out exclusively among students born in 2001, which finally included 2,022 questionnaires. The results of this study showed that 30% of 15-16-year-old students had lifetime experience with alcohol, 29% with smoking tobacco, and 6% with illegal drugs, including solvents, which accounted for most of this figure (5.8%). The lifetime prevalence of cannabis use was 3.3% of boys and 1.2% of girls, with 1.0% of students aged 15-16 years having smoked marijuana or hashish in the 30 days prior to the questionnaire survey, and 0.5% of the students surveyed having used cannabis products. After cannabis the drugs with the highest prevalence both in the ESPAD 2017 and 2019 were inhalants.⁵

Table 1. Prevalence of use of psychoactive substances among youth aged 15-16 years by gender - ESPAD studies – 2017 vs 2019 (in %)^{6,7}

	ESPAD 2017			ESPAD 2019		
	Boys	Girls	Total	Boys	Girls	Total
Lifetime prevalence						
Cannabis	4.5	0.8	2.3	3.3	1.2	2.2
Ecstasy	1.4	0.4	0.9	0.3	0.4	0.4
Amphetamine	1.6	0.4	1.0	0.6	0.5	0.6
Methamphetamine	0.9	0.3	0.4	0.2	0.4	0.3
Inhalants	10.4	11.6	11.0	7.6	4.1	5.8
Past 12 months						
Cannabis	2.5	0.3	1.4	1.3	0.7	1.0
Ecstasy	0.8	0.3	0.5	0.3	0.3	0.3
Amphetamine	0.9	0.5	0.7	0.5	0.3	0.4
Methamphetamine	0.5	0.3	0.4	0.0	0.1	0.1
Inhalants	4.0	5.4	4.7	3.1	1.9	2.5
Past 30 days						
Cannabis	0.7	0.3	0.5	0.4	0.5	0.5
Inhalants	2.2	3.3	2.8	1.7	1.3	1.5

A number of earlier studies have been conducted on the subject of drug use among youth in the Kyrgyz Republic:

⁵ Madybaeva D and Aida Karipova A. Survey of substance use and behavioural addiction among pupils in the Kyrgyz Republic in 2017. ResAd, 2018

⁶ ibid

⁷ 2019 Substance Use and Addiction Among Youth in Kyrgyzstan, Author: Dinara Madybaeva, M.D. – monitoring and evaluation specialist / PF “AIDS East-West, Foundation in the Kyrgyz Republic”; Reviewers: Assoc. prof. Viktor Mravcik, M.D., Ph.D. – CADAP 6/Component “National Focal Point”, senior scientist; Biljana Kilibarda, M.D., Ph.D. – CADAP 6/Component “National Focal Point”, scientific expert.

- In 2009, the Mentor Foundation (UK) carried out an assessment of the effectiveness of the "Your Choice" programme, which aimed to prevent the use of psychoactive substances (PAS) among minors in several countries, including Kyrgyzstan. The sample size for this study consisted of 1,562 students from 25 schools, with a mean age of 13.4 years. The results showed that 11.2% of students had used any illicit drug at least once in their lifetime, while 1.2% had used cannabis at least once.
- In 2007, a national survey was conducted in Kyrgyzstan at the behest of the United Nations Children's Fund (UNICEF). The aim of this survey was to identify the knowledge, attitudes, and skills of young people with regard to HIV and substance use. The results showed that 0.3% of schoolchildren in the 5th-7th grades, 1.3% of high school students, and 3% of those in professional schools had used drugs.
- In 2006, a survey was conducted using an ESPAD adapted questionnaire among students aged 15-16 in schools located in the Bishkek, Jalal-Abad, Osh, and Issyk-Kul regions. The results showed that 2.4% of respondents had used cannabis at least once, while 3.7% had used inhalants. Regular consumption of marijuana (more than 40 times) was observed in 0.5% of respondents.

Narcological register

In the Kyrgyz Republic, records of psychiatric and narcological cases have been maintained for over four decades. Each year, approximately eight to ten thousand individuals who use drugs are registered in the system and remain in the database for a period of five years. If a person no longer uses drugs after the five-year period, they will be removed from the register.

The Republican Centre of Narcology has reported that in 2020, a total of 8,342 people were officially registered as people who use drugs (PWUD). This figure represents a decline in the number of registered cases of drug dependence compared to the 8,543 registered in 2016. However, it should be noted that there were no significant fluctuations in the number of registered cases between 2016 and 2020; additionally, the percentage breakdown between men and women remained constant, with 94% being male and 6% being female. ⁸

Table 2. Drug users recorded in narcological registration (disaggregated by gender) ⁹

	2016	2017	2018	2019	2020
Total number of registered drug users	8,543	8,485	8,564	8,448	8,342
Male	8,035	7,985	8,044	7,950	7,863
Female	508	500	503	498	479

Prevalence and patterns of problem drug use

The earliest available data regarding the prevalence of problem drug use in Kyrgyzstan dates back to 2006. This estimation was derived from a study conducted by the United Nations Office on Drugs and Crime (UNODC) using the multiplication (nominative) method. Subsequent estimates were obtained in 2013, which revealed that the number of people who inject drugs (PWID) was estimated to be 25,000,

⁸ Paris Pact Fact Sheet, March 2022

⁹ ibid

or 476 individuals per 100,000. This figure was nearly 3.5 times higher than the number reported by the narcological register.¹⁰

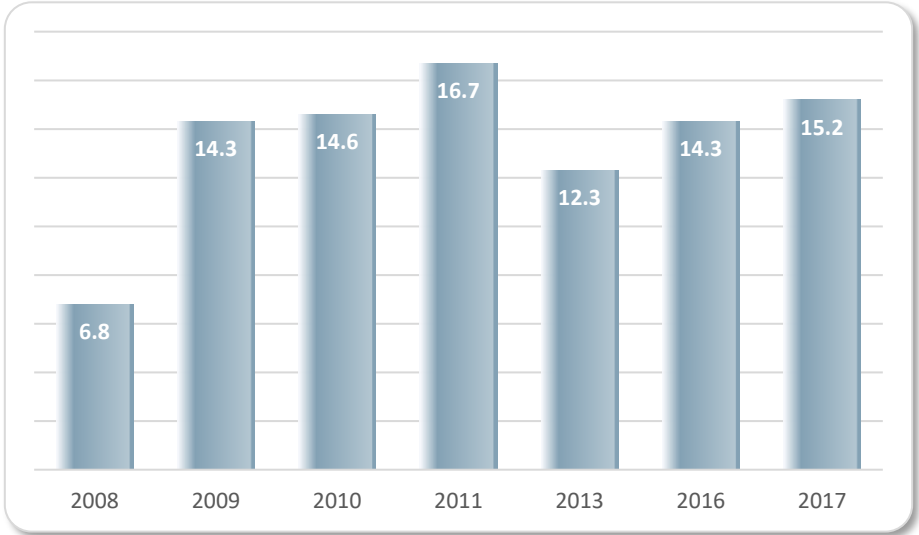
Drug-related infectious diseases and harm reduction

According to UNAIDS (as reflected in Graph 1 below), the number of people living with HIV in Kyrgyzstan increased from 9,600 in 2020 to 10,000 in 2021, figure that has increased from the first registered cases in 1999 (108 cases). In 2017, safe injecting practices were reported by 80.9% of PWID, which was lower than the rate of 91.8% reported in 2013.¹¹

The number of HIV tests conducted increased from 418,806 in 2017 to 541,755 in 2021, and the number of new HIV cases decreased from 839 in 2017 to 805 in 2021. Moreover, the proportion of people who inject drugs (PWID) among people living with HIV decreased from 44% in 2017 to 36% in 2021.¹²

In terms of HIV prevalence among people who inject drugs, it remained at 14.3% both in 2009 and 2016, indicating an increase from 6.8% in 2008¹³. Harm reduction measures are widely available in Kyrgyzstan, with opioid substitution therapy (OST) being relatively accessible. However, abstinence-oriented treatment is underdeveloped, and most treatment programmes are focused on detoxification.

Graph 1. HIV prevalence among PWID (%)



In Kyrgyzstan, similar to Tajikistan, women have slightly higher access rates to NSPs compared to men. However, the question remains as to whether NSPs effectively help women overcome the healthcare barriers imposed by drug registries, criminalisation, and drug-related stigma.¹⁴

To assess the level of stigma, the Stigma Index 2.0 survey was conducted among PLHIV in the Kyrgyz Republic across six regions with the highest number of PLHIV. The survey findings revealed that the majority of respondents (82.8% and 88.9%) reported that their family, as well as members within and

¹⁰ https://www.unodc.org/documents/centralasia/prodocs/Anti-drug_program_ENG.pdf
¹¹ <https://kpatlas.unaids.org/dashboard>
¹² Paris Pact Fact Sheet Kyrgyzstan 2022
¹³ Disaggregated data available only for 2011, 2013 and 2017, reflecting an increase in females PWID with HIV from 4.5% in 2011 to 9.2% in 2017 (USAID figures – Key Population Atlas)
¹⁴ Daria Matyushina-Ocheret . Access Barriers to Health Services for Women Who Use Drugs in Eastern Europe and Central Asia (in The Impact of Global Drug Policy on Women: Shifting the Needle), 2021. Available at: [The Impact of Global Drug Policy on Women \(emerald.com\)](https://www.emerald.com)

outside their community, were aware of their drug use. Among PWID, 2% expressed concerns about seeking medical assistance/services due to the fear of someone discovering their drug injection history, while 30% had previously avoided such services, but not within the last 12 months. In addition to data indicating improvements, experts also acknowledged positive changes in the communities, highlighting an improvement in the experiences of PWID regarding stigma and discrimination.¹⁵

Drug-related deaths and mortality of PWUD

In 2018, there were 61 registered cases of drug-induced deaths, representing a notable increase from the 23 cases recorded in 2016. The rate of drug-induced mortality per million individuals aged 15-64 years also demonstrated a surge, rising from 6.0 in 2016 to 15.3 in 2018.¹⁶

Drug treatment

The Republican Centre for Psychiatry and Narcology of the Ministry of Health of the Kyrgyz Republic (RCPN) is responsible for treatment and reporting on the number of people suffering from mental disorders.

The number of patients receiving treatment for drug use disorders (excluding alcohol and tobacco) in Kyrgyzstan exhibited a slight decline from 2,346 in 2012, to 2,056 in 2017, without any discernible decreasing trend during the same period. Moreover, data from 2017 indicates that all individuals receiving treatment for heroin use in Kyrgyzstan were engaged in intravenous drug injection. Notably, Kyrgyzstan stands out for its high relative prevalence of non-alcoholic drug treatment in relation to 1,000,000 inhabitants.¹⁷ The number of PWUD registered for the first time in 2020 was 145 reflecting a decreasing trend from 2016 (366). In 2020, 327 people were discharged from treatment.¹⁸

Drug use in prisons

Kyrgyzstan's incarceration rate is 166 prisoners per 100,000 population (International Centre for Prison Studies, 2015), exceeding the world average of 146 prisoners per 100,000 population. HIV prevalence among prisoners and detainees is estimated to be 11.3%, most of whom (95%) are male and one-third of whom are PWID¹⁹.

Since the 1990s, Kyrgyzstan has incorporated several internationally recognized best practices pertaining to opioid substitution treatment (OST) into its healthcare system. This includes offering opioid substitution treatment and syringe exchange programmes in prisons throughout the country.

Through CADAP, the ATLANTIS programme and Clean Zone were established. Within the framework of CADAP 6, a Clean Zone specifically designed for women was built in a correctional facility. To investigate the prevalence and patterns of drug injection within prisons, a study was conducted on a nationally representative sample of 368 prisoners who were interviewed within six months of release in 2014. The survey queried drug injection practices over three time periods: lifetime, 30 days prior to incarceration, and during incarceration. Among the respondents, 35% reported a history of drug injection, 86% of whom indicated that they had injected drugs while in prison. Of those who injected drugs within prison,

¹⁵ Harm Reduction Network Association . People Living with HIV Stigma Index 2.0 Kyrgyz Republic 2022 available at: [Kyrgyzstan-SI-2.0-Report-2022-English.pdf \(stigmaindex.org\)](https://stigmaindex.org/Kyrgyzstan-SI-2.0-Report-2022-English.pdf)

¹⁶ Paris Pact Fact Sheet Kyrgyzstan 2022

¹⁷ Zabransky, T., & Mravcik, V. (Eds.). (2019). The 2019 Regional Report on the Drug Situation in Central Asia [Региональный обзор о наркоситуации в Центральной Азии 2019]. Bishkek/ Prague: CADAP 6/ResAd.

¹⁸ *ibid*

¹⁹ Joint United Nations Programme on HIV/AIDS. Kyrgyzstan Country Factsheet: UNAIDS; 2019 (September 6, 2020). <https://www.unaids.org/en/regionscountries/countries/kyrgyzstan>.

34.8% initiated drug injection while incarcerated. Furthermore, only 11% of drug injectors reported currently being enrolled in MMT, despite 95% of the sample having had prior experience with MMT.²⁰

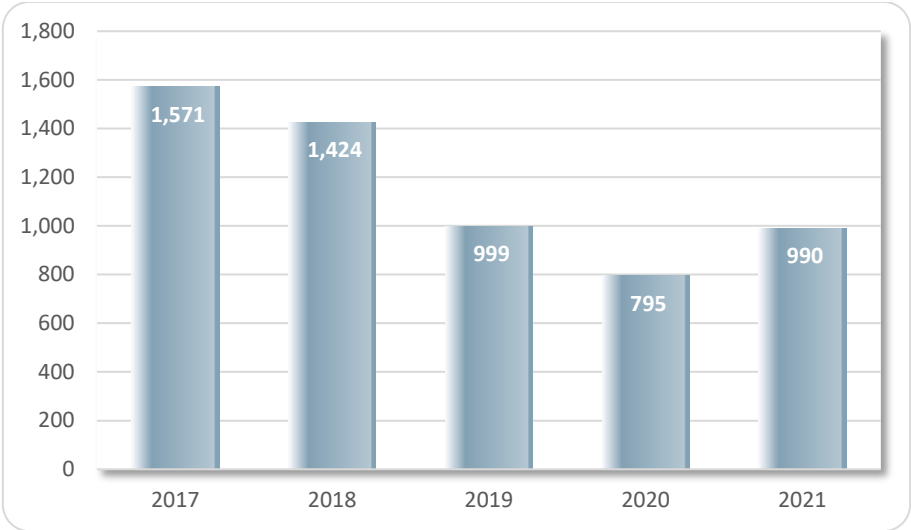
Drug related crime

The Ministry of Interior (Moi) bears the primary responsibility for documenting drug-related crimes. In 2021, the Moi detected 933 cases, which accounts for 90.2% of all drug-related crimes identified by law enforcement agencies in the country. This represents an increase of 28% compared to 2020 when 729 cases were detected. National security bodies detected 49 drug-related crimes in 2021, comprising 5% of all drug-related crimes identified by law enforcement agencies. This is a decline of 5.8% from 2020, during which 52 cases were detected ²¹.

The State Service of Execution of Punishment, a penal authority under the government, registered 5 drug-related crimes in 2021, representing 0.5% of all drug-related crimes detected by law enforcement agencies. This figure was 61.5% lower (8 cases) than the 2020 figure. The prosecutorial bodies registered 3 drug-related crimes in 2021, which accounted for 0.3% of all such crimes and was twice the number recorded in 2020.

Compared to 2020, the total number of drug-related crimes increased from 795 to 990 in 2021, with the largest increase observed in the category of illicit manufacture of drugs with intent to sell (547 in 2021). The number of cases related to illicit manufacture of drugs without intent to sell remained relatively stable between 2020 (413) and 2021 (409).

Graph 2. Total drug-related crimes registered (by Moi and law enforcement agencies)²²



In 2021, law enforcement agencies detected 280 misdemeanours associated with illicit trafficking in narcotic drugs, psychotropic substances, and their precursors, representing an 11.11% decrease (35 cases) compared to 2020 (315). The proportion of drug-related misdemeanours among all misdemeanours registered in the country was 2.21%.

²⁰ Azbel L, Wegman MP, Polonsky M, Bachireddy C, Meyer J, Shumskaya N, Kurmanalieva A, Dvoryak S, Altice FL. Drug injection within prison in Kyrgyzstan: elevated HIV risk and implications for scaling up opioid agonist treatments. *Int J Prison Health*. 2018 Sep 10;14(3):175-187. doi: 10.1108/IJPH-03-2017-0016. PMID: 30274558; PMCID: PMC6447033.

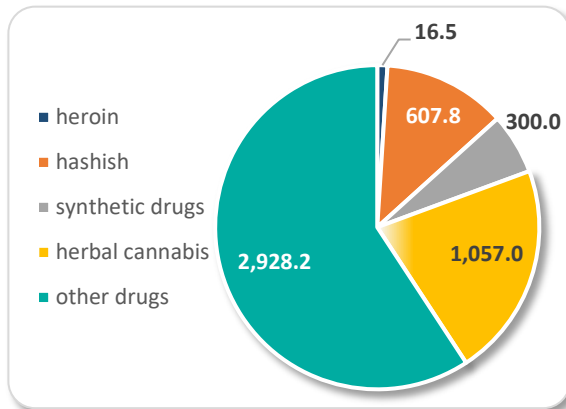
²¹ UNODC. The Central Asian Region Information Bulletin On Drug-Related Situation For 2021. – Tashkent:: Baktria press, 2020

²² Fact Sheet Paris Pact, UNODC March 2022

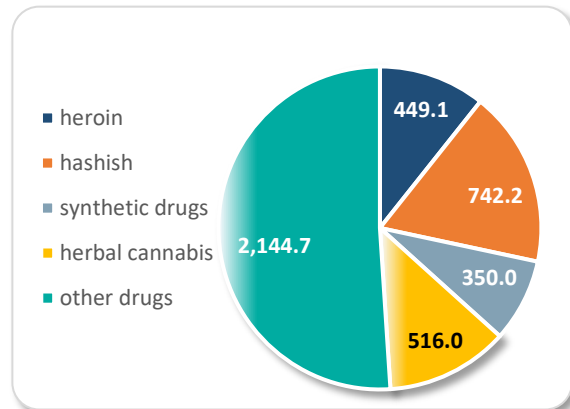
Drug seizures

In 2021, law enforcement agencies and internal affairs bodies seized a total of four tons, 202 kg, and 212 grams of narcotic drugs, psychotropic substances, and precursors from illicit markets, representing a 15% decrease of 741 kg and 368 grams compared to the amount seized in 2020 (4 tons, 943 kg, and 580 grams)²³.

Graph 3. Drug seizures in 2020 (in Kg)



Graph 4. Drug seizures in 2021 (in Kg)



Regarding drug-related misdemeanours, law enforcement agencies and internal affairs bodies seized 8 kg and 541 grams of narcotic drugs, psychotropic substances, and precursors in 2021, which is a slight increase of 289 grams or 3.5% compared to the same period in 2020 (8 kg and 252 grams).

In 2020, the wholesale price of heroin remained relatively stable at 8,000-10,000 USD, with no significant changes over a five-year period. However, the wholesale price of opium per kg increased in 2020 to 3,000-5,000 USD, which was higher than in 2019 (1,500-3,000 USD). Additionally, the street price of heroin in 2020 ranged between 10-15 USD per gram, representing a decrease compared to 2019 (15-25 USD).

4. NPS and EWS

Since 2015, there has been an increase in sales of new psychoactive substance (NPS) in the country, including online sales. The dealers employ innovative advertising techniques such as "graffiti" on the walls of buildings, displaying email addresses for potential buyers to make purchases of NPS. During operational-search activities on March 16, 2015, a recreational substance was procured and studied, which was identified as "ADB-PINACA" (N-(1-carbamoyl-2,2-dimethylprop-2-yl)-1-pentyl-1H-indazole-3-carboxamide).

The presence of NPS in the Kyrgyz Republic was confirmed in 2019 through a survey conducted among schoolchildren, using the ESPAD methodology. The results indicated a lifetime prevalence of new types of psychoactive substances ranging from 0.3% to 0.8%, with a rise in the use of NPS among boys compared to 2017.

²³ Fact Sheet Paris Pact, UNODC March 2022

In the clinical protocol "Mental and behavioural disorders due to the use of new psychoactive substances in children and adolescents. Diagnosis, treatment and prevention", approved by order No. 584 of the Ministry of Health of the Kyrgyz Republic on June 26, 2017, the Republican Centre for Psychiatry and Narcology of the Ministry of Health of the Kyrgyz Republic acknowledges the rise in the usage of new drugs, which is deemed one of the most pressing medical and social issues. Furthermore, the document notes the increasing number of new psychoactive substances available on the market and their tendency to be volatile. The Kyrgyz Republic government passed a resolution, Decree No. 723, which authorized the implementation of the National Development Programme until 2026, incorporating a notification mechanism for new synthetic drugs and new psychoactive substances, as well as establishing appropriate control measures over their circulation.²⁴

As part of the C2 CADAP 6 regional seminar held in Almaty on 27-30 March 2017, a snapshot exercise was conducted to map the availability of new psychoactive substances (NPS) through online shops that catered to the population of Central Asian countries. The primary objective of the exercise was to provide a basic overview of the characteristics of online shops that offered NPS and targeted Central Asian countries. The exercise identified a total of 160 online shops offering NPS through targeted searches, including 119 online shops that specialised in synthetic substances, 24 online shops that dealt in herbal substances with psychoactive effects, 15 online shops that offered synthetic and herbal drugs, and two online shops that sold plants with psychoactive effects or herbal products in addition to a broad range of other goods.²⁵

In 2021, the School of Law at Swansea University conducted a study, in collaboration with the Eurasian Harm Reduction Association (EHRA), to investigate the use of NPS in Kyrgyzstan, which involved a desk review and structured interviews²⁶. The study found that health professionals and people who use drugs have varying opinions on the definition of NPS. The primary users of NPS were identified as young people with no prior drug use and as experienced PWUD who turned to NPS due to the limited availability of traditional drugs. These groups differed in their methods of consuming NPS. The study revealed that NPS are marketed aggressively, with advertisements displayed on walls and easily available on the internet. The general lack of awareness about NPS and the absence of support services for those who use these substances is a concern. The primary source of NPS in Kyrgyzstan is online, with specific Telegram channels being a popular platform for their distribution. In some cases, NPS are offered for free, such as through commercial contests where the prize is an iPhone.²⁷

²⁴ The concept of introducing a national notification mechanism for the emergence of new synthetic drugs and new psychoactive substances

²⁵ Kateřina Grohmannová, Mariya Prilutskaya, and Viktor Mravčík. New Psychoactive Substances - The Online Market In Central Asia - Analytical Report 2018 Results From An Internet Snapshot ResAd, 2019. https://www.eu-cadap.org/wp-content/uploads/2023/01/2018_analytical-report-on-new-psychoactive-substances.pdf

²⁶ Eurasian Harm Reduction Association (2021). New Psychoactive Substance Use in Eastern Europe and Central Asia: Regional Report. Daan van der Gouwe. EHRA: Vilnius, Lithuania.

²⁷ Ibid

5. Available information sources on drug situation in Kyrgyzstan

Name/title	Type of data (in terms of key indicator or core data)	Methodological information	Provider (Institution name)	Periodicity
General population survey on substance use	Drug use in general population	No surveys identified		
School survey	Drug use in youth	ESPAD based questionnaire Students 15-16 years old		2017, 2019
School survey	Drug use in youth	School survey using ESPAD adapted questionnaire Students 15-16 years old in schools in the Bishkek, Jalal-Abad, Osh and Issyk-Kul regions		2006
School survey	Drug use among the youth	School survey 1,562 students (mean age 13.4) from 25 schools from the KR Kyrgyz Republic involved.	the Mentor Foundation (UK)	2009
School survey	Drug use among the youth	A national survey was carried out in order to identify the knowledge, attitudes and skills of young people concerning HIV and substance use. Schoolchildren in the 5th–7th grades high school students and students in professional schools	UNICEF	2007

Name/title	Type of data (in terms of key indicator or core data)	Methodological information	Provider (Institution name)	Periodicity
Data on drug use in other subpopulations	NPS	Qualitative study (desk work and structured interviews with PWUD and reduction service providers)	Eurasian Harm Reduction Association	2020/2021
The narcology register		People with SUD recorded in dispensaries People registered for the first time by gender and age groups	MoH Republican Narcology Centre	annually
High-risk drug use prevalence estimates	Estimate on number of PWID	Estimates on number of PWID (multiplier method) Within EpidNadzor		2013 once in two years
High risk drug use	Sentinel epidemiological surveillance	Use of harm reduction services, injecting practices		
DRID	Sentinel epidemiological surveillance	HIV, HCV and STI among PWID	AIDS Republican Centre	
DRID	Routine statistics	Number of HIV, HCV and other infectious disease (number of tested, new HIV cases) Number of people living with HIV	MoH AIDS Republican Centre	
DRD	Number of death cases	Drug related deaths	MoH	annually
Drug overdose	Number of drug overdoses	Drug related deaths	MoH	annually

Name/title	Type of data (in terms of key indicator or core data)	Methodological information	Provider (Institution name)	Periodicity
Drug related treatment	inpatient and outpatient treatment data	Number of patients who applied for drug treatment Number of patients discharged Primary drug of abuse among treated persons	RSPC MH	annually
Drug-related crime	Drug crime	Routine statistics Number of crimes by type of criminal offense Number of persons convicted and offenders convicted for drug related crime	NSC till 2018 Mol	annually
Drug seizures	Drug seizures	Routine statistics on number of seizures and quantity of drugs seized.	NSC, Mol Counter Narcotic Service	annually
Drug prices	Drug prices	Routine statistics on drug prices from administrative and criminal proceedings.	Mol	annually

6. Strong and weak points of Drug Information Systems in Kyrgyzstan

Strong points

- Established partnerships with numerous international organisations in the field of drug control and public health.
- Demonstrated keen willingness and enthusiasm to collaborate in the CADAP Programme, reflecting the national commitment to address drug-related issues.
- Conducted a series of capacity-building activities, including workshops and training sessions, to enhance the knowledge and competencies of national experts in addressing drug-related problems, including NPS use.
- Demonstrated experience and proficiency in conducting surveys among school-aged children, providing valuable insights into the prevalence and patterns of NPS use among this population group.
- Consistently reported data on drug supply, including NPS, to international information-sharing platforms, enabling better understanding of the global NPS market dynamics.
- Provided access to the findings of implemented studies and routine statistics on NPS use, contributing to the scientific knowledge base and informing evidence-based interventions.
- Collection and use of sex-disaggregated data for some indicators

Weak points

- Lack of coordination of Drug information system, lack of regular reporting on the drug situation in a country.
- There is currently a lack of reliable data on drug use among the general population, making it difficult to develop evidence-based policies and interventions. This highlights the need for more systematic and comprehensive data collection efforts to be put in place in order to provide a better understanding of the scope and nature of drug use among the general population.
- In addition to the lack of data on drug use prevalence, there is also insufficient information available on drug-related mortality rates.
- Data on problem drug use is particularly limited, especially in regards to substances other than opiates. The lack of data on problem drug use of substances such as stimulants and synthetic drugs hinders the development of appropriate and targeted interventions to address the specific needs of individuals struggling with drug abuse.
- Although some data disaggregated by gender is available, there remains a significant lack of the necessary data required to enhance the planning of gender-sensitive responses in accordance with the specific needs of the country.

7. Recommendations

- The establishment of robust and reliable Drug Information System (DIS) and Early Warning Systems (EWS) focused on new psychoactive substances (NPS) and their coordination structures is crucial for effective drug policy. To this end, the design and implementation of such systems should become a priority.
- Compile and triangulate available data from various sources, including drug seizures, drug-related health and social indicators, and surveys of drug use among different population groups, in order to compile a comprehensive and accurate understanding of the drug situation in Kyrgyzstan.
- The COVID-19 pandemic has impacted various aspects of daily life, including drug use patterns. To address this, it is important to analyse the impact of the pandemic on drug use trends, including changes in drug availability, drug use patterns, and the associated risks and harms.
- Conduct regular assessments of recent developments in drug information systems to ensure their quality and effectiveness. This might include evaluating the use of new technologies and methods for collecting and analysing drug-related data, as well as identifying areas for improvement.
- Develop an updated country drug report that provides a comprehensive overview of the drug situation in the country, including prevalence rates, trends, patterns, and associated harms, as well as responses, interventions, and policies in place.
- Knowledge sharing and collaboration among countries and regions can enhance the quality and effectiveness of drug information systems and early warning systems. To this end, organize regional workshops to exchange experiences on data collection, compare data, and prepare regional reports can be an effective approach.
- Ensure the systematic collection of reliable gender-disaggregated data and conduct further quantitative and qualitative research to better understand the gender dimension in drug-related interventions.

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