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ANALYSIS OF DRUG POLICY IN SERBIA

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Prologue

The Udruženje za mentalnu higijenu Antropos (hereinafter: Antropos) was founded in 2010 with the collaboration of mental health professionals. It became clear to the founders that young people are the population that is most neglected in terms of mental health, while they are the most sensitive and vulnerable generation, and at the same time, they are also the most receptive to novelties. We are responsible for the prevention of contemporary aggression, and the organization of individual and group consultation, psychotherapy (psychodrama self-knowledge groups), psychological workshops, self-reinforcing trainings, lectures, films, performances and grandstands on mental health. At the same time, we are happy to cooperate and coordinate in existing and planned mental health programs with civil and government-based organizations with a similar profile, both locally and abroad.

In 2021, Antropos had the opportunity to participate in the Erasmus+ „We have your back!“ (2021-2-HU01-KA220-IOU-000050143) international project. The goal of this project is the promotion of early drug prevention, the support for young people and young people living in minority, individuals training to become youth workers, establish contact with other associations and non-governmental organizations and the promotion and exchange of best practices. During the project, the partner organizations from five countries mapped out local good practices and legal frameworks, as well as national drug policies.

This study presents an analysis of Serbia's national drug policy.

First, we will present the characteristics of minors using drugs, and then the criminal acts that regulate drug abuse in the Criminal Code of the Republic of Serbia.

In the Criminal Code of the Republic of Serbia, there are three criminal offenses that regulate drug abuse.

From the statistical data that can be read later, it is clear that minors and younger adults are increasingly appearing as perpetrators of drug-related crimes.

When choosing a social response to juvenile delinquency, all criminological and criminal law characteristics must be taken into account. Juvenile crime forces the criminal justice system to respond through judicial mediation. That answer lies in the implementation of criminal proceedings and the implementation of criminal proceedings against minors and the imposition of appropriate criminal sanctions (Gordana Nikolić, 2015).

Overview of the drug abuse situation in Serbia and its analysis

In this chapter, we explore current drug use trends and stances on drug policy (supply reduction, harm reduction, drug prevention, treatment/care), as well as laws, drug strategies and action plans for drug use and prevention.

In the course of statistical data, the reader can gain insight into the past, present and future of drug users.

Statistics of psychoactive substance use in Serbia

Regarding the consumption of cigarettes and alcohol, young people have a more negative attitude towards smoking than towards alcohol consumption. Active smokers make up 25% of the young people asked and 12% of young people said that they smoke cigarettes occasionally, while 63% of young people do not smoke cigarettes (54% have never smoked and 9% have quit smoking). On the other hand, 26% of young people do not consume alcohol (24% of young people never consume alcohol, and 2% have quit drinking), 34% consumes alcohol rarely, 35% only drinks alcohol when they go out with friends, and 5% drinks alcohol several times a week or every day. 3% of young people state that they have used or are using psychoactive substances, the most common of which are marijuana (55%) and sedatives (24%). There is a downward trend in the use of ecstasy and cocaine, while an increase in the use of sedatives is observed. The main reason for experimenting with psychoactive substances, mentioned by young people were: influence of society (60%) and curiosity (38%) (Strategy for youth in the Republic of Serbia for the period of 2022 - 2023, pg. 44.).

Our "initial value" in elaboration is the year 2020 - the year when the Covid19 started. Interviewed young people in Serbia who are users of some type of psychoactive substance/s declared that they consume: alcohol (73.9%), cigarettes (36.8%) and other psychoactive substances (3%).

A special goal to be achieved by 2030 for young people in Serbia is: good health, social well-being and a safe environment. While the percentages mentioned above should be reduced in the following proportions: smoking - 10%, alcohol - 30% and other psychoactive substances - 0.5% (Strategy for youth in the Republic of Serbia for the period of 2022 - 2023, pg. 63.).

The Strategy for youth in the Republic of Serbia for the period of 2022 – 2023 refers to these data, which we will talk about later.

The first major research in Serbia regarding psychoactive substance abuse was conducted in 2006 (in accordance with the standards of the European Union), where they examined 10 690 people between the age 15 and 59.

The research showed that in Serbia, among the population of young people between the ages of 15 and 25, 70-80% of them were in contact with drugs, of which marijuana is the most common (*Anima Integrative Center* - <http://www.anima.autentik.net/>).

In 2019, the Republic Institute of Statistics, the Institute for Public Health of Serbia "Dr. Milan Jovanović Batut" and the Ministry of Health of the Republic of Serbia conducted a survey on the health of the population, during which they asked respondents about the abuse of psychoactive substances.

From the survey they obtained the following results:

➤ **Smoking:**

30.5% of the population used cigarettes, cigars or pipe tobacco (daily or occasionally). E-cigarettes or similar electronic devices (daily or occasionally) were used by 3.3% of the population. In a 2019 survey, the prevalence of smoking (daily or occasional) among the population between the ages 15 and 19 was 15%, including tobacco products (Health survey of the population of Serbia 2019, pg. 68.).

Every seventh (14.4%) young person aged 15 to 19 declared that they use some kind of tobacco product. The ration of daily smokers of cigarettes, cigars or pipe tobacco was lower in 2019 than in 2013. The frequency of daily smoking of cigarettes, cigars or pipes according to gender and research period is shown in table 1. The percentage of citizens in Serbia who smoke cigarettes, cigars or pipe tobacco (daily or every other day) is higher than the EU average.

Since exposure to tobacco smoke has a harmful effect on non-smokers and there is no safety level for exposure to tobacco smoke, in 2010 the Republic of Serbia passed the Law on the Protection of the Population from Exposure to Tobacco Smoke. This is derived (among other things) from surveys that show that almost half of the population aged 15 and over (48.9%) are exposed to tobacco smoke in a closed space on a daily basis. In addition, every fourth smoker (24.3%) tried to quit in the year before the survey, and every second smoker (58.6%) is concerned about the harmful effects of smoking on health.

Talking to a healthcare professional about the harmful effects of smoking is one of the most important measures to curb smoking. Data showing that 30.1% of smokers in Serbia in 2019 received advice from a healthcare professional to quit smoking, which indicates that education should be strengthened and healthcare professionals should be motivated to give advice on the harmful effects of smoking (Health survey of the population of Serbia 2019, pg. 70 - 71).

Table 1.

Frequency of smoking tobacco products (daily or occasionally) of the population by gender and age (Health survey of the population of Serbia 2019, pg. 70.)

	Smoking age 15+	Smoking age 15-19	Smoking age 20+	Smoking age 18-64
Female %	30,1	12,9	31,1	35,1
Male %	33,9	16,1	35,0	38,8
Serbia %	31,9	14,4	32,9	36,9

Table 2.

Frequency of daily smoking of cigarettes, cigars or pipe tobacco by gender and year of study
(Health survey of the population of Serbia 2019, pg. 72.)

	2000.	2006.	2013.	2019.
Female %	26,1	22,6	26,0	25,0
Male %	40,6	30,7	32,6	29,4
Serbia %	33,0	26,2	29,2	27,1

➤ **Alcohol consumption:**

According to a 2019 survey, the average daily alcohol consumption was more than 20 grams of ethanol for women and more than 40 grams of ethanol for men. According to the Institute's estimates, this amount of alcohol was consumed by 1.1% of the Serbian population aged 15 and over, significantly more often by men (2.0%) than women (0.3%).

According to the research, 50.7% of the Serbian population does not drink alcohol (39.3% have never tried alcohol, and 11.4% have not consumed alcohol in the last 12 months). 52.7% of 15 to 19 year olds did not consume alcohol (girls 57.2%, boys 48.1%). In the year before the survey, 49.3% of respondents consumed alcohol. 3.1% of respondents drank daily, which is a decrease compared to 2013 (4.7%) and 2006 (3.4%). Residents of Southern and Eastern Serbia (4.0%) and Vojvodina (3.9%) consume significantly more alcohol per day, in contrast to Šumadija and Western Serbia (2.1%), where this rate is the lowest. Men in Serbia consume more alcohol per day, even up to eight times more than women (Table 2). Daily drinking habits are also most common among residents with a low educational level (3.4%) and non-urban residents (3.8%).

The fact that every sixth (15.1%) adolescent aged 15-19, regardless of gender, consumed more than six alcoholic beverages at least once a month is worrying (Health survey of the population of Serbia 2019, pg. 73 - 75.).

Table 2.
Alcohol consumption of the population by age groups and gender
(Health survey of the population of Serbia 2019, pg. 75.)

Demographic characteristics	Population that has never consumed alcohol (%)	Population who consumed alcohol in the previous 12 months (%)	Population that consumes alcohol daily (%)
Age group			
15-24	40,3	55,2	0,4
25-34	32,3	58,0	0,6
35-44	35,4	55,1	1,5
45-54	30,7	52,4	3,6
55-64	39,9	40,6	5,5
65-74	45,2	39,0	4,8
75-84	54,8	30,0	6,0
85+	50,4	23,7	7,7
Gender			
Male	21,8	65,0	5,7
Female	55,1	35,2	0,7
Serbia	39,3	49,3	3,1

➤ Drug consumption:

Abuse and the consequences of abuse of psychoactive substances reach all social strata in all countries of the world. It affects all levels of society. Substance abuse has negative consequences for people's health and livelihoods, fuels crime and threatens sustainability.

In 2018, 5.4% of the world's population aged 15-64 used an illicit drug at least once in the last 12 months. Population-based substance use research provides important information on the extent and pattern of drug use and factors associated with drug use. There are hidden patterns of behavior that require targeted research to analyze. As a result of the investigation, some of the illegal drugs included in the investigation (amphetamines/methamphetamine, cannabis, cocaine, ecstasy, heroin, glue or other psychoactive substances) were seized.

4.2% of the population of Serbia never used it in the last 12 months, while Cannabis was used by 1.2% of the population in the previous year. The use of other illegal drugs ranged from 0.1% to 0.2% in the previous year (Table 3). Cannabis use was significantly more common in the year before the survey among 18-34 year olds (2.4%), men (1.6%), urban residents (1.5%) and those with higher education (1.8%). City dwellers (1.5%), highly educated individuals (1.8%), individuals from affluent households (1.8%) and from wealthy background (2.1%) (Health survey of the population of Serbia 2019, pg. 78.).

Table 3.
Use of illegal drugs by type of drug and time frame of use
(Health survey of the population of Serbia 2019, pg. 78.)

Illegal drug	Ever in his/her life age 15+	In the last 12 months 15+	Never in his/her life age 18-34	In the last 12 months age 18-34
Amphetamines/ Methamphetamine	0,4	0,2	0,7	0,4
Cannabis	4,0	1,2	5,6	2,4
Cocaine	0,6	0,2	1,0	0,6
Ecstasy	0,7	0,2	0,9	0,3
Heroin	0,4	0,1	0,3	0,1
Glue (volatile psychoactive substances)	0,3	0,1	0,4	0,2

Reported criminal acts

In 2019, the Republic Institute of Statistics published the following data for the period from 2009 to 2018: The Bulletin on juvenile offenders as well as the Bulletin on adult offenders, within general data on crime trends, detailed analysis of reports and accusations and convictions for the specified year. For the ten-year period from 2009 to 2018, minors accounted for an average of 3.74% of reported crimes, and the lowest percentage was 2.87% in 2018. The highest number of applications was in 2011, and the lowest in 2018. Table 1 provides a detailed overview of the percentage of juveniles involved in criminal offenses by age group during this period. Although there have been fluctuations in the number of reported juvenile crimes, there has been a decline since 2014, with a slight increase in 2016 and a significant decrease in 2018.

Furthermore, when considering the juvenile crime rate per 100 000 population, there is actually a drop from an average of 51% over ten years to 39% in 2018. This contrasts the reports about drastic increase in juvenile delinquency (Dr. Ivana Stefanović and Olivera Zečević, 2020)

Table 1.
Reported criminal acts in the 2009 – 2018 period.
(Dr. Ivana Stefanović and Olivera Zečević, 2020)

Year	Adult	Minor	In total	Participation of minors in %
2009	100026	3497	103523	3.38
2010	74279	3747	78026	4.80
2011	88207	4323	92530	4.67
2012	92879	3913	96792	4.04
2013	91411	3844	95255	4.04
2014	92600	3110	95710	3.25
2015	108759	3355	112114	2.99
2016	96237	3643	99880	3.65
2017	90348	3465	93813	3.69
2018	92874	2744	95618	2.87
Average:	92762	3564.1	96326.1	3.74

Most drug crimes committed by minors were recorded in Belgrade (47%) and Novi Sad (11%). Niš, Kraljevo and Pančevo also had a significant number of cases. The police are working on the reduction of these crimes, and the number of reported crimes and persons involved has increased due to the expansion of the list of psychoactive controlled substances.

Table 2.
Criminal offenses of minors related to narcotic drugs (distribution by year)
(Dr. Ivana Stefanović and Olivera Zečević, 2020)

	2010.	2011.	2012.	2013.	2014.	2015.	2016.	2017.	2018.	2019.
The total number of drug-related crimes committed by minors	342	333	280	358	370	356	350	567	767	794

In 2019, the Ministry of Internal Affairs of Serbia recorded a total of 11 021 criminal offenses related to narcotic drugs, of which 794 were committed by minors (7.2%). 97 minors were reported for unauthorized production and/or marketing of drugs, of which 90 were male and 7 were female. 25 adults participated in these crimes as co-perpetrators. This data can be found in Table 3.

Table 3.
Data according to the number of registered minors
(Dr. Ivana Stefanović and Olivera Zečević, 2020)

	2010.	2011.	2012.	2013.	2014.	2015.	2016.	2017.	2018.	2019.
Minors reported for the criminal offense of unauthorized production and distribution of narcotic drugs	89	69	52	62	52	43	53	79	97	93
Minors reported for the criminal offense of unauthorized possession of narcotic drugs	227	237	216	275	298	295	283	455	620	643

A crime study found that most narcotics were taken from minors on the street. Marijuana was the most commonly found drug, followed by amphetamine, ecstasy, heroin and cocaine. During the investigation, scales, knives, weapons, money and telephones were confiscated. Minors who have committed drug-related offenses usually are not involved in other crimes, but older minors are more likely to be involved in drug-related offenses. Data suggest that drug-

related criminal activity is a characteristic of 15-16 year olds
(Dr. Ivana Stefanović and Olivera Zečević, 2020).

Laws related to drugs

According to Article 3 of the Law on Psychotropic Controlled Substances (Official Gazette of the Republic of Serbia, No. 99 of December 27, 2010, and No. 57 of July 25, 2018), a narcotic drug is any substance of biological or synthetic origin that is on the List, and primarily effects the central nervous system, reducing the sensation of pain, causing drowsiness or wakefulness, hallucinations, disturbances in motor functions, as well as other pathological or functional changes in the central nervous system.

Psychoactive controlled substances in the sense of this law are:

- 1) intoxicating drugs, i.e. narcotics;
- 2) psychotropic substances;
- 3) products of biological origin that have a psychoactive effect;
- 4) other psychoactive, controlled substances.

(Official Gazette of the RS, No. 99 of December 27, 2010, and No. 57 of July 25, 2018 - Article 1.)

Treatment can only be carried out in health institutions (private clinics, professionally organized workplaces or medical training) established in accordance with the law and in accordance with the necessary standards, guidelines and protocols.

According to Article 64, psychoactive controlled substances are used only in medicine:

- 1) for addiction treatment;
- 2) to address the need for treatment, including the need for symptomatic treatment, i.e. therapeutic treatment, intervention.

When new medical technologies are introduced, the Commission provides expert opinions in order to harmonize different expert opinions on psychoactive controlled substances.

It is prohibited to treat addicted patients with psychoactive controlled substances in health institutions that are not legal entities (private clinics) or perform certain medical activities if they are not in accordance with health regulations.

Methods and conditions for the use of psychoactive controlled substances in health institutions and private clinics for the treatment of addiction are strictly regulated by law (including symptomatic treatment prescribed by the minister) (Official Gazette of the RS, No. 99 of December 27, 2010, and No. 57 of July 25, 2018.).

Criminal law applying to minors

In the law on juvenile offenders¹ there are sanctions and other measures that can be applied to a person who, at the time of committing an act that is considered a criminal act according to this law, has not reached the age of 14. According to the aforementioned law, minors are divided into juniors and seniors according to their age. In some cases, the Juvenile Criminal Law is also applied to minors, that is, those who have reached the age of 18 at the time of the commission of the criminal offense and have not yet reached the age of 21 at the time of the commission of the criminal offense (Article 2).

The status of minors is regulated by the Criminal Code of the Republic of Serbia for minors. This law regulates the criminal legal status of minors (as perpetrators or victims of criminal acts), the system of criminal sanctions for minor perpetrators, as well as certain conditions and sanctions for adult perpetrators of criminal acts, as well as the procedure for their declaration and execution by the competent state authorities (Gordana Nikolić, 2015).

The following criminal sanctions can be applied to punish the criminal acts of minors (Official Gazette of the RS, No. 85/2005):

- 1) educational measures
- 2) deprivation of liberty of minors and
- 3) safety sanctions

According to the aforementioned law, the purpose of criminal sanctions against minors is to influence the development of their personal responsibility, to empower and educate them in personal development, to ensure their proper development and their reintegration into the social community through supervision, protection and assistance, as well as providing general and professional training (Article 10 of ZMUKD).

The most prevalent criminal sanctions against minors are teaching and educational measures (out-of-school and institutional), which can be imposed on both younger and older minors. Educational measures can be divided into three categories:

¹ According to Article 3, a minor is a person who has reached the age of fourteen at the time of the commission of the criminal act, but has not reached the age of eighteen.

A minor is a person who has reached the age of fourteen at the time of the commission of the criminal act, but has not reached the age of sixteen.

An older minor is a person who has reached the age of sixteen at the time of the commission of the criminal act, but has not yet reached the age of eighteen.

A minor is a person who has reached the age of eighteen at the time of the commission of the criminal act, but has not reached the age of twenty-one at the time of the trial. ("Official Gazette of the RS", No. 85/2005)

obligations;

1) Warning and control measures: court warning and special

2) Measures to increase supervision: increased supervision of parents, adoptees and guardians; increased surveillance in the second home; increased supervision during guardianship; increased supervision in the day care center in the appropriate educational institution;

3) Institutional measures: placement in an educational institution, a juvenile prison, an institution for special treatment and training (Article 11 of ZMUKD).

It is important to note that minors most often commit various criminal acts at the age of 17. Boys are more often the perpetrators, compared to girls. In most cases, minors appear as drug users, less often as dealers.

The Republic of Serbia has since made significant progress, especially in passing an article of a special law regulating the minors, as well as in the amendments to the criminal law.

This fight is complicated because the perpetrators are minors, but our country is actively involved in this fight. Juveniles do not appear as perpetrators of criminal acts that hinder their proper growth and development and reduce their potential, while in adulthood they still appear as criminals (Gordana Nikolić, 2015).

Program activities for the prevention, treatment and reduction of demand for psychoactive controlled substances

In order to control and prevent the consumption of psychoactive substances, the law requires that competent authorities, municipalities, health authorities, private clinics and educational institutions plan, organize and implement the necessary measures and provide the necessary means to prevent and control demand (Official Gazette of RS, no. 99/2010 and 57/2018, Article 71).

Rehabilitation and reintegration of addicts must be ensured so that they can participate in the various forms of social life (Bulletin 72).

In order to improve the situation, local governments must participate in the organization and implementation of program activities aimed at preventing addiction and reducing the demand for controlled psychoactive substances. (Official Gazette of RS, no. 99/2010 and 57/2018, Article 73).

Local governments must establish a commission to coordinate the work of all authorities and associations operating in the area, which will monitor and make proposals for improving conditions in the area (Official Gazette of RS, no. 99/2010 and 57/2018, Article 92).

The Ministry works together with the organizations and bodies of UN, the World Health Organization (WHO) and the International Narcotics Control Bureau (INCB). It cooperates with the authorities of the European Union in the field of psychoactive controlled substances, as well as with the European Monitoring Center for Drugs and Drug Addiction (EMCDDA) and, in addition, with agencies and government bodies of other countries (Official Gazette of RS, no. 99/2010 and 57/2018, Article 93).

According to Article 93, the Ministry submits to the International Narcotics Control Bureau a report on:

- 1) agricultural areas that are sown with plants from which psychoactive controlled substances can be obtained;
- 2) seized amounts of psychoactive controlled substances;
- 3) implementation of international agreements on psychoactive controlled substances;
- 4) production of plants from which psychoactive controlled substances can be obtained;
- 5) production of psychoactive controlled substances;
- 6) export and import of psychoactive controlled substances;
- 7) application of psychoactive controlled substances;
- 8) stocks of psychoactive controlled substances;
- 9) other reports at the request of the International Narcotics Control Bureau.

(Official Gazette of RS, no. 99 from 27, December 2010, and no. 57 from 25, July 2018.)

Commercial offenses

A fine of 1,000,000 to 3,000,000 dinars can be imposed for commercial offence, and a fine of 100,000 to 200,000 dinars for the responsible person, if:

1. the controlled substances are handled, distributed or used, in which case the authorities order the disposal of the substances.
2. the individual trade psychoactive substances, you are breaking the law.
3. the individual imports a psychoactive drug for which a license has not been issued
4. the individual imports or exports poppy stem
5. the individual grows poppies illegally (not inform the authorities that the poppy or parts of the poppy have been used or can be used for the production of psychoactive substances)
6. the individual grows hemp illegally
7. the individual grows a plant/plants from which psychoactive substances can be made
8. delivering a psychoactive substance against the law
9. the individual transfers the export or import license to someone else

10. the individual transfers the sales license to another natural or legal person

11. if the physical-chemical identification of psychoactive controlled substances is carried out contrary to the law (Official Gazette of RS, no. 99/2010 and 57/2018, Article 108)

A legal entity can be fined from 800,000 to 2,000,000 dinars, and a responsible person can be fined from 80,000 to 200,000 dinars if:

1. the individual supplies mushrooms from which psychoactive controlled substances can be extracted (Psilocybe)
2. the individual disposes of or separate medical devices and psychoactive controlled substances
3. there is no person responsible for the identification and production of psychoactive controlled substances or substitutes and if he does not notify the ministry in a short period of time about the change in the circumstances of issuing the permit, i.e. do not report unusual cases related to the analysis of psych activity data to the Ministry
4. 90 days before the expiration of the production validity period, the individual does not submit an application for the renewal of production of a psychoactive controlled substance
5. the individual does not notify the ministry about the export and/or import of a psychoactive controlled substance that is not valid in the period of export or import, and you do not notify the ministry about the amount of export or import of a psychoactive controlled substance within the prescribed period. (Official Gazette of RS, Article 109)

According to Articles 108 and 109 of the aforementioned law, protective measures can also be imposed on legal entities, in which case certain economic activities are prohibited for a period of three to ten years.

Psychoactive substances that are the subject of an commercial offense will be confiscated without compensation (Official Gazette of RS, no. 99/2010 and 57/2018, Article 110).

Violations

A physical person can be fined from 40,000 to 50,000 dinars if:

1. plants from which psychoactive agents can be made, as well as mushrooms belonging to the Psilocybe family, from which psychoactive agents can be made, deliver a psychoactive substance.
2. leave controlled psychoactive substances and medical devices that were used contrary to the provisions.
3. advertising psychoactive substances that are against the law.

Regulations for the implementation of the law will be adopted within 18 months from the entry into force of this law (Official Gazette of RS, no. 99/2010 and 57/2018, Article 113).

Criminal acts against human health

Unauthorized production and marketing of narcotic drugs, drug abuse in the Republic of Serbia is regulated by the Criminal Code. The criminal offense is regulated by law and belongs to the group of criminal offenses against health, including crimes against the person. Until its adoption in 2006, criminal offenses in the Criminal Code were organized together with criminal offenses against human health. Crimes against human health are codified together with crimes against the environment and classified in their own group of criminal acts organized as a separate criminal group. The means of protection of criminal acts against human health is "health" or "health care law". It is the right to health or health care, and it implies the psychophysical condition of a person. It means the psychophysical state of a person in which all organs and parts of the body work harmoniously, i.e. there are processes that allow a person to live and work normally. It is a process that allows a person to live and work normally. (Gordana Nikolić, 2015)

Illegal production, possession and distribution of drugs is governed by the aforementioned Code (Official Gazette of the RS, no. 85/05, 88/2005, 107/2005, 72/2009, 111/2009, 121/12, 104/13, 108/14), regulated by Article 246, and consists of the following:

- (1) Who produces, processes, sells or offers for sale a unauthorized substance or preparation that has been declared a medicine, or who buys, holds or transports such a substance for sale, or who mediates the sale or purchase of such a substance, or otherwise distributes such a substance without authorization, shall be punished by imprisonment from three to twelve years.
- (2) Anyone who illegally grows poppy or psychoactive hemp or other plants from which 84 narcotic drugs can be obtained, or which contain narcotic drugs, will be punished with imprisonment from six months to five years.
- (3) If the crime referred to in paragraph 1 was committed by a group, or the perpetrator organized a resale or intermediary network, the perpetrator will be punished with imprisonment of five to fifteen years.
- (4) If the offense referred to in paragraph 1 was committed by an accomplice in organized crime, the perpetrator shall be sentenced to imprisonment for at least ten years.
- (5) If 1-4 the perpetrator of the offense referred to in paragraph 1 reveals from whom he procures drugs, he may be exempted from punishment.
- (6) Anyone who unauthorizedly produces, acquires, keeps or makes available to others equipment, materials or substances that he knows are used for the production of drugs, will be punished with imprisonment from six months to five years.
- (7) The drug and the means for its production and processing must be confiscated.

Unauthorized possession of narcotic drugs is regulated by the aforementioned law (Official Gazette of RS, 85/05, 88/2005, 107/2005, 72/2009, 111/2009, 121/12, 104/13, 108/14), regulated by Article 246a and consists of the following:

- (1) Whoever possesses a small amount of substances or preparations classified as narcotic drugs for his own needs, will be punished by a fine or a prison sentence of up to three years, but may be exempted from the punishment.
- (2) The perpetrator of the offense referred to in paragraph 1 who reveals from whom he procures drugs may be exempt from punishment.
- (3) The drug must be confiscated.
- (4) Anyone who possesses a large amount of substances and preparations classified as narcotic drugs without a permit will be sentenced to three to ten years in prison.

Facilitating the enjoyment of narcotic drugs is regulated in the following according to the criminal law (Official Gazette of the RS, 85/05, 88/2005, 107/2005, 72/2009, 111/2009, 121/12, 104/13, 108/14):

- (1) Anyone who induces another to consume drugs, or who gives drugs to another for his or another person's enjoyment, or who allows his premises to be used for drug consumption, or who otherwise enables others to enjoy drugs, shall be punished with a prison sentence of six months to five years.
- (2) If it was committed against a minor or several persons, or if there was particularly serious possession, the perpetrator will be punished with imprisonment from two to ten years.
- (3) If someone died as a result of the crime, the perpetrator will be sentenced to three to fifteen years in prison.
- (4) Actions will not be punished by a healthcare professional who facilitates the use of drugs within the framework of medical assistance.
- (5) The drug must be confiscated. (Article 247)

Drug consumption (inducing) or administration by another.

Making the drug available to others so that they or others can enjoy it. Consuming intoxicants and making intoxicants available to others. Drug consumption in other ways (facilitating behavior). In the following cases, we are dealing with more serious forms of minors, forms of criminal offenses that involve more than one person or that have suffered in particular, and they have serious consequences.

According to Article 24, "distorted insanity" of the perpetrator occurs due to the consumption of alcohol, drugs or other substances, when the perpetrator reaches such a state of mental disorder in which he is unable to understand the significance of his actions or to control his actions. On this basis, the sentence cannot be reduced for a person who commits a criminal offense in a state of severe mental disorder under the given circumstances (Official Gazette of RS, no. 85/2005, 88/2005 - cor. 107/2005 - cor. 72/2009, 111/2009, 121/2012, 104/2013, 108/2014, 94/2016 and 35/2019).

Article 83 of the Criminal Code regulates *the compulsory treatment of drug addicts*.

- (1) The court orders mandatory treatment for an offender who has committed a criminal offense due to the use of narcotic drugs and who, due to this addiction, has a serious risk of continuing to commit criminal offences.
- (2) The measure is carried out in a penitentiary or in an appropriate health or other specialist institution and lasts until the need for treatment, and for a maximum of three years.
- (3) If the measure is imposed with a prison sentence, it may last longer than the imposed sentence, but its total duration may not exceed three years.
- (4) Time spent in a treatment facility is included in the prison sentence.
- (5) If the measure is imposed with a fine, conditional sentence, court warning or exemption from punishment, it must be carried out freely and cannot last longer than three years.
- (6) If the perpetrator does not receive treatment without a justified reason, or if he voluntarily gives up treatment, the court orders that the measure be appropriate medical or its mandatory implementation in another professional institution (Official Gazette of RS, no. 85/2005, 88/2005 - cor. 107/2005 - cor. 72/2009, 111/2009, 121/2012, 104/2013, 108/2014, 94/2016 and 35/2019).

Strategy for youth in Serbia for 2022-2023

During the study we will mention drug strategies related to youth, we will also mention it at the republican, national and provincial levels.

In the study, we first relied on the strategy for young people in Serbia, from which we got very recent data, because the strategy was written for the period 2022-2023, in which, unfortunately, there is very little to say about the fight against the abuse of psychoactive substances, which contains the following statistics and goals for the next period:

When collecting data and elaborating on the topic, we primarily relied on the Strategy for Youth in Serbia, from which I drew more recent statistical data, given that the Strategy was written for the period 2022-2023.

National strategy for youth 2015-2025

The National Youth Strategy (2015 - 2025) defined the following definitions:

Youth at health risk are all those individuals whose health is at an increased risk of disease compared to the general youth population. The most vulnerable young people at risk are injecting drug users, sex workers, men who have sex with men, young people in institutional accommodation, young people of Roma ethnicity and young people serving criminal prison sanctions (pg. 56.).

Risky behavior of young people represents any activity that can endanger their own health and social values. The most common risky behaviors of young people are: consumption of cigarettes, alcohol, drugs, frequent changes of sexual partners, etc. (pg. 57.)

The health and well-being of young people in Serbia shows that the first drug use occurs at the age of 11-13. The starting substances are most often tobacco, alcohol, cannabinoids, sedatives, individually or in combination, but they can also be opioids (especially in girls) and amphetamines. A total of 64.5% of Serbian residents smoked cigarettes during their lifetime. 8% of respondents aged 18 to 64 stated that they had consumed illegal drugs at least once in their life. In Serbia, the prevalence of drug use among the population aged 18-34 is lower than in most EU countries. Sports betting is the second most common form of gambling, practiced by 17.2% of respondents at some point in their lives (National strategy for youth 2015-2025, pg. 24). In the national strategy for youth (2015 - 2025), we can read that young people are more often perpetrators than victims of crime. On average, the annual rate is about 34 - 41% of all crimes committed in the Republic of Serbia, recorded and reported by the police. Annually, 22,500 - 27,000 young people are reported, which is almost half of all reported offenders (44 - 48%). It is clear that young people are highly represent in crime. We think it's important to note that, according to statistics, 70% of drug-related crimes and more than 50% of violent crimes are committed, which is a shocking ratio.

And of those, 92% are male, while only 8% are female.

Based on these data, young people are prone to abuse when committing certain criminal acts (pg. 31.). If we just look at the fact that by 2030 a shocking decrease in drug and alcohol users is expected (Youth Strategy 2022 - 2030), the drug trade itself is experiencing its boom among young people, which is quite frightening. And then the question arises: how to proceed? Where to go from here?

Strategy against drug abuse in Serbia

According to the National Strategy for Youth (2015 - 2025), psychoactive substances are all those substances that change the state of consciousness, perception, opinion, mood, behavior and attitude towards the body. *We divide them into: legal drugs (alcohol, tobacco, various types of glue), medicines and illegal drugs (pg. 57.).*

If we think about young people, they are the resources of every social group, so they must be protected with appropriate methods (National Strategy for Youth 2015 - 2025, pg. 29.). In order to raise a physically and mentally healthy young person who is mentally ready for life and who will be able to take care of the future generation, it does not start in adolescence, but much earlier. However, for many of them, insecurity, threats and fear stand in the way of their development, and these feelings will later encourage or influence them to commit crimes, become addicted to drugs or alcohol, or become addicted to gambling. Exposure to security risks and threats endangers the physical well-being and integrity of young people, as well as the possibility of leading a quality life, in a safe environment where they will develop functionally, under conditions that promote healthy mental development and spiritual balance, and where young people are successful and happy (National Strategy for Youth 2015 - 2025, pg. 29.).

Young people exposed to health risks are characterized by a low level of knowledge and care about their own health, insufficient use of health services, unemployment, stigma and discrimination among the population, early exposure to specific problems of adults and early initiation of sexual relations, frequent changes of sexual partners and use of alcohol, tobacco and drugs. In this population, the risk of contracting and transmitting diseases is significantly higher compared to the general population of young people, so special attention should be paid to the creation of appropriate measures to care for the health of vulnerable young people. (National Strategy for Youth 2015 - 2025, pg. 29.). As for the treatment of addiction, the Strategy for the Prevention of Drug Abuse (2014 - 2021) clearly states: *Drug addiction is a disease that can be prevented, controlled and treated.*

Strategy on drug abuse prevention for the 2014 – 2021 period

Prevention and reduction of drug crime is an important issue in every society. The strategy on the prevention of drug abuse for the period 2014-2021 pays special attention to the prevention of drug abuse. It pays special attention to the prevention of drug abuse. Bearing that in mind, the Government of the Republic of Serbia. It adopted a resolution on the creation of a committee to combat drug addiction in schools. The task of this committee is to "develop a program for activities related to the harmful effects of drug use" (Dr. Ivana Stevanović, Olivera Zečević, 2020). The strategy is a key document in solving cases of drug abuse.

This strategy is in line with EU policy on the current national drug situation and scientific knowledge on the drug problem. A strategy tries to list everything you want to achieve in the coming period. The main goal of the strategy is to ensure and improve a high level of population security, as well as to ensure and improve the well-being of individuals and society, and to ensure and improve public health (Strategy on drug abuse prevention for the 2014 – 2021 period). The following institutions are involved in the prevention of drug abuse: Ministry of Health, Ministry of Youth and Sports, MUP, Red Cross of Serbia, Ministry of Education, Institute "Dr. Milan Jovanović Batut" of Serbia, Institute for Public Health, local self-

government units, addiction treatment centers, international organizations, associations, etc. Universal prevention includes activities that are carried out in the school environment, family and community. Drug addiction treatment takes place at all three levels of health. In the 4 largest cities of Serbia (Belgrade, Niš, Novi Sad and Kragujevac) there are institutions for the treatment of addicts (Strategy on drug abuse prevention for the 2014 – 2021 period).

The illegal drug trade market has changed in the past few years due to the entry of the Republic of Bulgaria and Romania into the European Union as well as the unanimous declaration of the Autonomous Province of Kosovo and Metohija. In the past, these were the main routes used by criminal gangs to transfer opiates, but due to the changed circumstances on the geopolitical level, to avoid stricter border controls, smugglers choose to transfer drugs within the Schengen border and the customs union of the Republic of Bulgaria-Romania-Hungary (Strategy on drug abuse prevention for the 2014 – 2021 period).

General goals in the strategy on drug abuse prevention for 2014 - 2021 are set on two main elements:

1. *to reduce the demand for psychoactive substances* so that the state must provide (at the local and national level) the necessary systemic measures to draw the community's attention to the problem: drug abuse, the need for prevention and promotion of a healthy lifestyle, taking into account social, health, security and economic potential of the country. The state must also ensure coordination and various activities at the local level.
2. *to reduce drug use* by strengthening activities against organized crime, illegal drug trafficking, money laundering and other forms of drug-related crime. Improving cooperation between the police, customs authorities and the legal system in the country, at the regional and international level. Improvement of information gathering and analytical work in reconnaissance (Strategy on drug abuse prevention for the 2014 – 2021 period).

Specific objectives in addition to the above general objectives are: The National Contact Point is central for the collection and distribution of data and information on drug control and reporting to the EMCDDA. The goal of the 2014-2017 action plan was to improve the efficiency of national and local action plans. It also aimed to promote cooperation between different actors and to establish partnerships with civil society in all areas of the fight against drugs (Strategy on drug abuse prevention for the 2014 – 2021 period).

The strategy on the prevention of drug abuse for the period from 2014 to 2021 defined five areas of action of the drug policy:

- 1) Reducing the demand for drugs;
- 2) Reducing the supply of drugs;
- 3) Coordination;
- 4) International cooperation;
- 5) Research, monitoring and evaluation.

Reducing the demand for drugs:

It consists of important measures to reduce drug demand, but primarily prevention (universal, selective and indicated), but also includes early detection and intervention, harm reduction, rehabilitation and social reintegration and recovery. The situation would improve if timely recognition, preventive measures and integration of addiction treatment were included in public health and social programs (Strategy on drug abuse prevention for the 2014 – 2021 period). *This means solving the problem at its source - at the level of the drug user. Treating addiction is an investment in the health of the population* (Strategy on drug abuse prevention for the 2014 – 2021 period).

Drug addiction is not only a health but also a psychosocial problem. Only comprehensive, organized, planned and integrated measures can bring results. The goal of harm reduction programs is to minimize the health and social risks and harmful consequences of drug abuse. The implementation of drug demand reduction programs must be organized at the local level, which is why it is important to involve the local government and establish good communication and cooperation between addicts and decision makers (Strategy on drug abuse prevention for the 2014 – 2021 period).

In order to reduce the demand for drugs, the Strategy set the following priorities:

1) improving the availability and effectiveness of measures aimed at reducing the demand for drugs, promoting the exchange of best practices, developing and applying quality standards in the field of prevention (universal, selective and indicated), early detection and interventions, risk and harm reduction, treatment, rehabilitation, resocialization and recovery;

2) improving the availability and effectiveness of preventive programs in raising awareness of the risk of using illegal drugs and other psychoactive substances. To this end, prevention measures should include early detection and interventions, promotion of a healthy lifestyle and targeted (selective and indicated) prevention;

3) developing effective demand reduction measures that can respond to challenges such as: polytoxicity, abuse of prescription drugs and new psychoactive substances;

4) developing measures to reduce mortality from drugs and blood-borne infectious diseases (IV and viral hepatitis C), sexually transmitted diseases and tuberculosis;

5) improving access, availability and coverage of effective and diverse treatment options for both opiate and non-opiate addicts;

6) improving the availability and effectiveness of measures aimed at reducing the demand for drugs in prisons in order to achieve a level of treatment that is equivalent to the treatment of prisoners in the civilian community, in accordance with the right to health care and human dignity. The European Convention on Human Rights and the EU Charter of Fundamental Rights;

7) development of an integrated model of rehabilitation and social support in order to improve social reintegration and recovery after treatment;

8) development of effective measures to reduce the demand for drugs in order to suppress or delay drug use, with special reference to vulnerable, marginalized groups (Strategy on drug abuse prevention for the 2014 – 2021 period).

Reducing the supply of drugs:

Reducing the supply of drugs refers to measures aimed at suppressing the production, traffic and distribution of drugs, as well as preventing illicit trade and the use of precursors (that is, substances used for the illicit production of narcotic drugs and psychotropic substances). In order to reduce the use of drugs, it is necessary to develop mutual coordination and cooperation between state institutions (eg Ministry of Health, Ministry of Internal Affairs, Ministry of Finance, Ministry of State Administration). It is important to regulate the destruction of confiscated drugs, as well as to determine the state administration body responsible for the destruction of confiscated drugs.

Effective monitoring of substances and their traffic that can be used for illegal production of narcotic drugs and psychotropic substances is an important element in managing the prevention of illegal production of narcotic drugs and psychotropic substances and reducing their supply. The criminal policy that enables the suppression of illegal possession, transportation, production and use of drugs is an integral part of the national policy on drugs in the part on the suppression of drug use. Special attention should be paid to new illicit drugs on the market, as well as to the discovery of new precursors and the proliferation of products provided by drugs and precursors. Policies and legislation on drug-related crime and drug precursors should be developed in accordance with recognized international standards and United Nations conventions.

Specific goals related to drug supply reduction include:

- 1) reducing the level of crime, especially in the area of organized crime;
- 2) ensuring better communication and cooperation between law enforcement authorities or agencies;
- 3) creation of a special cooperation mechanism between the Police Administration and the Customs Administration;
- 4) improvement of the control system of legal treatment of drugs and precursors;
- 5) improvement of the legal framework and practice of storage and destruction of drugs and precursors;
- 6) increasing capacity and improving the training of personnel working in the field of precursor control and drug supply reduction;

- 7) establishment of drug classification laboratories;
 - 8) provision of appropriate equipment for law enforcement authorities and agencies;
 - 9) strengthening cooperation with relevant international organizations and institutions.
- (Strategy on drug abuse prevention for the 2014 – 2021 period)

Coordination:

National and local coordination of all relevant services, institutions and organizations is a prerequisite for society to act efficiently and effectively in the field of drug policy. Horizontal and vertical coordination of work activities must be implemented. Implementation of the strategy requires a stable, multidisciplinary and integrated approach. This includes coordination with other administrative bodies of the drug policy framework.

In the area of coordination, the specific objectives are the following:

- 1) Establishing the agency for medicines and defining the coordination mechanism;
- 2) Creation and development of a coordination mechanism with local authorities; and
- 3) increasing the degree of cooperation with associations;
- 4) support for the implementation of action plans through specific financial mechanisms.

(Strategy on drug abuse prevention for the 2014 – 2021 period)

International cooperation:

The Republic of Serbia participates in international activities related to drug control and the consequences of drug consumption, actively participates in solving problems related to the use and consumption of drugs, works on political and professional approaches in this area and strives for the development of the national system with reference to the good practice of other countries - and results in the regulation of trade in precursors. International cooperation results in more effective measures against criminal groups, corruption and money laundering, as well as regulation of drug and precursor trade. Political and international development cooperation should be developed in order to effectively implement and promote a balanced approach to the problems of drugs and precursors in the fight against drug abuse. In particular, there is a need for a regional cooperation mechanism (Balkan route) that includes all countries through which certain drug trafficking routes pass, identification of potential key partners and cooperation with international organizations and organizations and EU member states. Due to the global problems related to drugs, it requires a bilateral or multilateral approach, so cooperation with

international organizations should be strengthened, such as European Union agencies (Europol, Eurojust, EMCDDA), World Health Organization (WHO), UNODC (United Nations Office on Drugs and Crime), International Narcotics Control Board (INCB), Commission on Narcotic Drugs (CND), World Customs Organization, Pompidou Group of the Council of Europe, INTERPOL (Strategy on drug abuse prevention for the 2014 – 2021 period).

The general goals of international cooperation include the establishment and strengthening of regional cooperation, especially with organizations dealing with drug issues. In addition, it is desirable to: participate in the activities of the European Union authorities, harmonize our legislation with the EU legislation and, last but not least, accept and fulfill the obligations to the European Monitoring Center for Drugs and Drug Addiction (EMCDDA). (Strategy on drug abuse prevention for the 2014 – 2021 period)

Research, monitoring and evaluation:

Understanding the problem of drug abuse requires systematic and specific research to better understand the nature of the measurement of drug-related problems. Data collection standards related to methods and concepts should be used, especially the most important epidemiological indicators for drugs developed by the European Monitoring Center for Drugs and Drug Addiction (EMCDDA). The EMCDDA contains five main indicators: 1) prevalence and patterns of drug use among the population; 2) prevalence and patterns of problematic drug use; 3) prevalence and occurrence of infectious diseases associated with drug use (prevalence and occurrence of intravenous, hepatitis B and C among intravenous drug users) 4) death due to drug abuse (general population statistics and cohort studies on death of drug users) and 5) treatment requirements (statistics of treatment facilities). In addition to the above-mentioned epidemiological indicators, in order to assess the frequency, trends and extent of drug abuse, indicators related to criminal offenses related to drug abuse are those on which data must be continuously collected according to European criteria.

Availability of drugs, treatment available in prisons, social exclusion related to drug abuse, various research activities, efforts to solve drug problems, public drug policy, national legislation, funding allocated to them, emergence of new synthetic of psychoactive substances through the early warning systems of competent national and international authorities and institutions and use them for planning national measures and interventions to alleviate and solve problems related to oppression.

(Strategy on drug abuse prevention for the 2014 – 2021 period)

Action plan for youth in Vojvodina for the 2015 – 2020 period

The health strategy of the European Union "Health together" supports the overall strategy "Europe 2020". This strategy states that better investments in the health sector are needed in relation to: more rational spending of resources, but not necessarily only in sustainable health systems, but investing in the health of young people through health promotion investment programs (Action plan for youth in Vojvodina for the 2015 – 2020 period, pg. 27).

In the Action plan for young people in Vojvodina for the period 2015 - 2020 the following goals were defined:

- Prevention of diseases of passion by supporting prevention programs (abuse of drugs, alcohol, smoking, gambling and eating disorders).
- Establishing networks of organizations and institutions dealing with addiction prevention.
- Harm reduction programs (for example: referral to withdrawal programs for psychoactive users, counseling programs for addicts, outreach and information dissemination in potential areas.
- Support for new education: programs for health workers and teachers aimed at acquiring knowledge about youth health protection methods (pg. 43).

Action plan for the implementation of the strategy on the prevention of drug abuse for the 2014 – 2017 period

There is a new strategy, but not a new action plan, and until it is in place, the new one will not be adopted.

The action plan for the implementation of the drug prevention strategy for the period 2014-2017 (hereinafter: the action plan) is the basic tool for the implementation of the drug prevention strategy for the period 2014-2021. The strategy provides a basic framework for the implementation of the drug policy, defines the key areas of action in which specific interventions will be implemented and sets specific goals for each area defined in the drug policy. Action plans provide a detailed concept of individual activities to be implemented within a given time frame. For each goal defined in the action areas and drug policy strategies, the action plan defines specific activities to be implemented in order to achieve these goals (Strategy on prevention of drug abuse 2014 - 2021).

Action plans are very important for the following reasons, because they:

- a tool for the implementation of the strategy, which predicts the activities that will be performed and the results that will be achieved during these activities, defines the responsibilities of the actors involved in the implementation of these activities and determines the deadlines for performing the tasks; tasks involved;
- a tool for monitoring strategy implementation;
- a coordination tool that coordinates all activities by defining the indicators of each activity and the sources of information to be used for the indicators, as well as defining the goals and activities to be achieved;

The implementation of the drug strategy is based on two action plans adopted for a four-year period: the first action plan covers the period 2014-2017, and the second action plan covers the period 2018-2021 (Strategy on prevention of drug abuse 2014 - 2021).

The action plan includes 5 areas of action, as already mentioned: demand reduction, supply reduction, coordination, international cooperation and research, monitoring and evaluation.

1. Activities related to prevention are:

1. Development of a model of cooperation in the field of prevention (connecting all actors involved in prevention (local authorities, health, education, youth and sports, labor and social policy, legislative aspects).
2. Development and implementation of national drug abuse prevention programs in primary and secondary schools.
3. Implementation of programs aimed at preventing drug addiction in existing counseling centers and student health services.
4. Systematic training of teachers, trainers and staff specialists and other experts working in educational institutions.

5. Work related to the prevention of addiction and the prevention of drug addiction in primary and secondary education.
6. Implementation of programs, projects and activities whose main goals are to reduce the interest of children and young people in trying drugs and other substances.
7. Development of guidelines for preventive programs for children and youth from risk groups in the social protection system, and development and adoption of protocols for managing the presence and use of psychoactive controlled substances in educational institutions.
8. Development and adoption of protocols for managing the presence and use of PAS in social welfare institutions.
9. Strengthening the role of the health system in detection and treatment, in the treatment of vulnerable children and young people.
10. Developing and implementing regional guidelines/criteria for financing projects for local governments.
11. Providing information and education about the negative effects of drugs on health through campaigns/posters/brochures.
12. Supporting, creating and broadcasting educational programs aimed at educating and informing children, young people, parents and other citizens about the effects and harmfulness of drugs and other addictive substances.
13. Implementation of preventive programs aimed at strengthening the positive behavior of parents and improving family ties; and the implementation of preventive programs aimed at strengthening the positive behavior of parents and improving family ties and relationships, with the aim of strengthening the role of the family in the prevention of addiction.
14. Developing guidelines/standards/forms to prevent the use of PAS in the workplace.
15. Adopting special protocols for monitoring the health and working capacity of addicts. They refer to the determination of the health condition and working capacity of addicts who are treated alternatively, with special reference to the ability to drive a vehicle.

16. Implementation of preventive programs for children and juvenile offenders.

17. Implementation of the prevention program within the Administration for the Execution of Criminal Sanctions.

18. Planning and development of programs for the prevention of drug abuse and drug addiction by other means at the level of the Ministry of Defense of the Republic of Serbia and the RS Army (Strategy on prevention of drug abuse 2014 - 2021).

2. Activities related to treatment and reintegration are:

1. Establishment of a working group for quality standards of RGSKT treatment.
2. Analyzing the current legislation and making proposals for amendments and additions related to the treatment of PAKS addiction.
3. Developing standards for screening for PAKS, different types and treatment programs.
4. Safety monitoring and treatment program monitoring system.
5. List of medicines for alternative therapies and sedatives.
6. Development of guidelines for general practitioners on early detection of drug use and interventions.
7. Monitoring the activities of methadone centers.
8. Ensuring the sustainability of alternative programs.
9. Providing a legal framework for the provision of alternative therapies in institutions that implement criminal sanctions.
10. Ensuring the sustainability of alternative therapies in institutions that apply criminal sanctions.
11. Creation of a system of social support for addicts after leaving the institution in PAKS for enforcing criminal sanctions.
12. Analysis of the activities of the regional network of health institutions.
13. Reestablishment of the network of institutions under the jurisdiction of reference centers.

3. Activities related to harm reduction are:

1. Analyzing the legal framework on the availability of harm reduction measures in health care.
2. Ensuring the legal framework of implemented damage reduction programs.
3. Defining and implementing financial mechanisms to support harm reduction programs.
4. Ensuring quality standards of harm reduction interventions.
5. Analyzing the scope and content of harm reduction programs at the national level.

6. Extension of the harm reduction program in accordance with the results of the analysis (activities above).
7. Informing healthcare workers and drug users about hepatitis B vaccination.
8. Adapting guidelines/standards for the treatment of hepatitis C viral hepatitis to the increasing number of injection drug users.
9. Facilitating counseling and HCV testing of PAKS inmates in treatment centers.
10. Increasing the availability of resources for the prevention and treatment of infectious diseases among drug users in institutions where criminal and alternative sanctions are applied.
11. Increasing the availability of harm reduction programs for drug users in institutions that apply criminal and alternative sanctions.
12. Establishing an overdose risk-counseling center for drug users released from institutions where criminal sanctions are implemented.
13. Raising the awareness of healthcare workers and drug users in institutions about the implementation of criminal sanctions and alternative measures related to hepatitis B vaccination.

4. Activities related to supply reduction are:

1. Strengthening the capacity of services dealing with the prevention of drug addiction and the control of drug trafficking within the police.
2. Creation of a mechanism for the exchange of information between law enforcement authorities in the area of drug-related crime.
3. Signing of the cooperation agreement between the Ministry of Internal Affairs and the customs office.
4. Provision of PAKS pre-inspection on site in accordance with the needs of the Police Agency and the Customs Service.
5. Introduction of CEPOL's special training model for the use of special investigative techniques.
6. Organizing training of joint investigative teams in relation to drug trafficking by organized crime groups and financial investigations conducted in parallel with criminal investigations.
7. Research and analysis of regular patterns of asset confiscation in EU countries Note: subsection organized crime.
8. Preparing an analysis of the normative framework for the storage and destruction of confiscated psychoactive controlled substances and precursors and provides recommendations for harmonization.
9. Amendment of the normative framework for the storage and destruction of confiscated psychoactive controlled substances and precursors based on the recommendations of the presented analysis.

10. Creation of a program to destroy precursors.
11. Preparation of the PAKS destruction program.
12. Final disposal of seized precursors.
13. Preparation of analysis on the need to store confiscated drugs and precursors.
14. Establishment of a laboratory for drug classification.
15. Regular updating of the PAKS list.
16. Creating an early warning system.
17. Harmonization of the list of psychoactive substances and precursors with the UN and EU lists.

5. Activities related to coordination are:

1. Strategy adoption.
2. Establishment of the Drug Office of the Government for Medicines (including the organizational structure).
3. Creation and strengthening of the coordination mechanism.
4. Monitoring the implementation of the drug strategy of the Republic of Serbia.
5. Financing of pharmaceutical agency activities.
6. Preparation of proposals for the preparation of action plans at the local level.
7. Clarification of cooperation with local authorities.
8. Development of a new action plan for medicines for the period 2018-2021.
9. Defining a model of cooperation with civil society organizations.
10. Memorandum of understanding on cooperation with civil society organizations.

6. Activities related to international cooperation are:

1. Establishing cooperation with the European Center for Monitoring Drugs and Drug Addiction and participating in the activities of the European Center for Monitoring Drugs and Drug Addiction.
2. Establishing cooperation with EUROPOL.
3. Establishing cooperation with Eurojust.
4. Establishing cooperation with Eulex.
5. Establishing cooperation with the horizontal drug group within the Council of the European Union.

6. Establishing cooperation with the working group dealing with precursor materials within the European Union.
7. Capacity building of services through training for participation in joint investigative teams.
8. Creation of cross-border cooperation projects in the field of prevention in order to exchange best practices at the regional level.
9. Participation in the annual meeting of the Narcotics Commission (Vienna).
10. Submission of annual reports to the UN.
11. Building cooperation with UNODC.
12. Cooperation with the World Health Organization in the field of medicines.
13. Building cooperation with the International Criminal Police Organization (Interpol).
14. Building cooperation with the Pompidou Group of the Council of Europe.
15. Building cooperation with other Southeastern European countries through regional initiatives.

7. Activities related to research, monitoring and evaluation are:

1. Creation of a National Center for drug situation monitoring.
2. Provision of funds for the work of the National Center for Monitoring the Narcotics situation.
3. Development of a system for data collection and analysis of the drug situation.
4. Preparation and communication of the EMCDDA national report on drugs.
5. Analysis of the results of the 2013 general population census.
6. Four-year population survey.
7. Implementation of the ESPAD study.
8. Creation of a mortality monitoring system, using PAKS.
9. Data collection on treatment demand indicators.
10. Registration of drug addicts undergoing treatment.
11. Conducting regular behavioral surveys of high-risk population groups, including intravenous drug users.
12. Developing a data collection system with regular monitoring of specific infectious diseases.
13. Regular surveys on the frequency of high-risk drug users (total population).
14. Monitoring availability and providing harm reduction measures.
15. Data collection as an indicator of supply reduction (seized PAHs, prices, purity, PAH crimes, production sites).
16. Creation of information exchange mechanisms for the new PAKS (early warning system).

Plan.

18. Mid-term evaluation of the 2014–2017 Action Plan.

19. Final monitoring of the 2014–2017 Action Plan.

(Strategy on prevention of drug abuse 2014 - 2021)

Action plan for the fight against drugs in the Autonomous Province of Vojvodina until 2014

On provincial level, there is only an action plan from 2014 that deals with the topic of drug problem. In the above-mentioned action plan and drug strategy, a more recent data that indicates what measures are being taken against drug use can be found.

In 2009, the Secretariat of the Ministry of Sports and Youth, in cooperation with the Department of Psychology of the Faculty of Philosophy of the University of Novi Sad, conducted research entitled "Quality of life of young people - causes of stress and ways to overcome them". According to research, focus groups revealed that 98% of young people know how to buy, use and consume drugs. This is an alarming fact, and the Government of Vojvodina in 2009 made a decision on September 23 ordering the formation of the Regional Secretariat for Sports and Youth under the Government of Vojvodina, a temporary body in charge of reducing drug addiction, which was accepted on February 19, 2010.

This resolution defines the following objectives:

- Implementation of activities in the Republic of Serbia in accordance with the Strategy for the fight against drugs 2009-2013.
- Monitoring the situation and problems related to drug addiction.
- Coordinating the work of the municipal board that deals with the prevention of drug addiction, as well as institutions, organizations and associations that deal with the fight against drug addiction within their activities.
- Creating an action aimed at prevention, treatment, care and rehabilitation of drug addicts.
- Recommending measures and actions in the field of prevention, treatment, care and rehabilitation of drug addicts.

- Initiating the adoption of a program of preventive action aimed at eradicating the harmful consequences of drug addiction and closely monitoring the implementation of the adopted programs.

(Action plan for the fight against drugs in the Autonomous Province of Vojvodina until 2014)

The Provincial Council for the fight against narcotics consists of the following institutions: State Administration and Secretariat for National Communities, Provincial Secretariat for Health, Provincial Secretariat for Sports and Youth, Provincial Secretariat for Education, Provincial Secretariat for Interregional Cooperation and Local Self-Government and educational workers who deal with the problem of drug addiction and psychiatrists. Psychologists with many years of experience in working with addicts, criminal police managers, representatives of the media, and representatives of religious communities are also present. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

According to the national strategy, the main risk factor was that Serbia was exposed to regional wars and NATO bombing in the 90's. This was due to the arrival of 400,000 refugees and internally displaced persons. In this context of changes and socio-economic crisis, drug abuse became more widespread. The geopolitical position of Serbia at the crossroads of East and

West (the so-called "Balkan route") contributed to the fact that a large amount of drugs arrived and remained in Serbia.

In the national strategy, drug trafficking, illicit financial flows, high costs of treatment, social protection, justice. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Goals of the Action plan for the fight against drugs in the AP of Vojvodina until 2014 are the following:

- Effective and coordinated fight against drugs
- More effective implementation of measures aimed at reducing the social, health and social consequences of drug abuse, as well as reducing drug consumption in society, especially among children and young people
- Improvement of family protection measures
- Involvement of all sectors of society in the fight against drugs

Primary prevention

Drug addiction is primarily a sociopathological phenomenon, and secondarily a health problem. Solving the drug problem requires intersectoral cooperation or a multidisciplinary approach. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

The goal of primary prevention is to prevent a drug-free life and to prevent drug use, especially among young people.

Activities and measures:

– education of parents and guardians about the harm of drugs and preventive measures through the work of staff in schools and health institutions

– developing the ability of parents to solve family problems and crisis situations
– improvement of advisory work in social and health institutions, motivating social and health workers to cooperate with parents and guardians

– establishing successful communication between parents and children. The specific goal is to increase the knowledge of parents and guardians about the harmful effects of drugs. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Regarding educational institutions, the basic principle is that the entire institution - teachers, pedagogues, parents and children inside and outside the institution - must participate together in informative or educational preventive programs. The program must correspond to the age of the child.

Age-appropriate education should be acceptable and understandable and aim at early identification of vulnerable groups of children for whom a protection and prevention program should be developed.

Specific goals:

- 1) Adopting behaviors/responsible lifestyles related to improving children's health
- 2) Promoting a healthy lifestyle
- 3) Raising the awareness of school-aged children about the harmful effects of drugs
- 4) Expanding the knowledge of teachers, educators, pedagogues and psychologists about the harmful effects of drugs on children's biological, social and mental health.

Activities and measures:

- Creation of special programs, promotion of a healthy lifestyle, drug prevention programs.
- Strengthening the implementation of the promotion and prevention program system through various activities of school education, public education and parent education.
- Support for youth lifestyle initiatives.
- Development of social skills.
- Informing young people and adults about the risks of drug use in the school program.
- Identification and reduction of risk factors in schools.
- to teacher education, how to effectively inform and motivate young people, to make the right decisions and to resist pressure from the perspective of modern society (trainer training course). (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

In order to have a real systemic impact, local self-government must work together with educational institutions and be directly involved in prevention programs. Activities and measures for the inclusion of local self-government in preventive programs include:

- The establishment of drug control committees in local governments should be initiated.
- Ensure better cooperation between local self-government organizations in the field of drug abuse prevention.
- Regular coordination meetings of representatives of regional drug control committees.

(Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Activities and measures related to health centers:

- The establishment of counseling centers in health centers should be initiated and, where they already exist, their activity should be extended to addicts.
- Inclusion of AP Vojvodina and monitoring of user statistics.

- Establishment of effective cooperation of health institutions in the treatment of drug and alcohol dependent patients. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Education sector

Activities and measures in this area of the action plan:

- Organization of scientific education related to medicines.
- Development of good practice guidelines for the prevention of drug abuse.
- Training of workers from other sectors engaged in health, educational and preventive activities on prevention methods.

(Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Information

The planned activities and measures are the following:

- Creation of information centers for young people.
- Creation and distribution of educational and promotional material.
- Information - leaflets, advertisements about important telephone numbers and addresses of the SOS network, or information about other treatment options. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Effective use of free time of young people:

Effective use of free time of young people means raising the awareness of young people in all social areas, including health, i.e. healthy lifestyles, and is also a form of prevention in the fight against drugs.

Activities and measures:

- Political action plan of the youth of AP Vojvodina 2011-2014, development of content for quality spending of free time of young people.

Media

Prevention of drug abuse and the fight against drugs require the direct participation and cooperation of all media - electronic, written and other. Therefore, the planned activities and measures are the following:

- Strengthening the activities of public media and other means of informing the public, which aim to provide timely and objective information about the harmfulness of drugs.

- Continuation of the radio and television program related to the health of young people and a healthy lifestyle.

- Continuous cooperation and inclusion of public media and other means of informing the public in preventive activities.

- Inclusion of public media and other means of informing the public in preventive activities.

- Informing the public through means of public information and other means of information of public interest - television, radio, information shows, tribunes. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Communities

Intervention in the community implies that all citizens and civil society (non-governmental organizations), as well as institutions operating in the fields of justice, internal affairs, health and social protection, are mobilized and actively involved in the implementation of the drug prevention program. Supporting volunteers in primary prevention is also part of the Community's agenda. The influence of the media and the promotion of a healthy lifestyle are very important, but the sensationalism that characterizes this type of reporting should be avoided.

The specific goal is the increased involvement of local authorities and civil society in prevention programs.

Activities:

- Educational programs for different groups, especially young people;

- Campaigns that promote a healthy lifestyle;

- Informing citizens about the dangers of drugs through the media;

- Celebrating World Drug Abuse Prevention Day and more;
- Programs for youth through outreach (awareness programs).

(Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Other institutions

Other institutions such as homes for children without parental care, institutions for the care of children and youth, correctional institutions and others require special drug prevention programs.

Children and youth in social care face a number of risk factors that make them a particularly vulnerable group.

The specific goal is to increase knowledge and awareness about the harmfulness of drugs among children and young people living in institutions.

Activities:

- Development of a drug abuse prevention program for institutional users.
- Special educational programs for children living in institutions without parental supervision.
- Implementation of special education programs in other institutions.
- Implementation of various educational activities in order to promote a healthy lifestyle in these institutions. (Action plan for the fight against drugs in the AP of Vojvodina until 2014)

Best practices

In accordance with the research carried out by the study, we have tried to bring together those organizations that can be considered good practice on the national and regional scene. Research can be seen as information gathering as it is conducted through online searches, our own network of connections and our prior knowledge. However, we had to realize that there are not many programs that can be called good practice at the national and provincial level. There are many prevention programs, but for us only a few can be considered good practice.

Preventing drug-related offenses is key to preventing juvenile delinquency. Serbia's latest strategy on drug prevention emphasizes the importance of preventing drug abuse among young people. In order to deal with this issue, the Government of Serbia established a commission to create a program that educates students about the dangers of drug use. However, research

shows that drug use among minors in Serbia is on the rise, already from 11-13 years old. In order to effectively prevent youth drug-related crimes, the state needs a comprehensive plan that includes various authorities and involves the cooperation of the private and civil sectors.

The authors of this paper consider some preventive programs implemented by the Ministry of Internal Affairs in order to solve this problem. (Dr. Ivana Stefanović and Olivera Zečević, 2020)

Prevention of offenses related to narcotic drugs by the police:

Preventing drug-related crimes is the main priority of the Ministry of the Interior, which has strengthened police activities in this area both through repression and prevention. The Ministry is particularly focused on educating children and young people about the dangers of drug abuse and how to recognize and protect them. They work with schools and other local partners to organize informational and educational events, including programs such as "Child Safety Basics", "School Cop" and "Prom". The police also participate in intersectoral teams that educate students, parents and teachers in all schools in Serbia about the fight against drug addiction.

1. Since 2017, the "Basics of Child Safety" program has been implemented to educate fourth and sixth grade elementary school students about police and fire services, child safety in traffic and emergency situations, violence prevention and protection from violence, trafficking, drug and alcohol abuse. In the 2018/2019 school year, first grade students were also included in the program. In the past two school years, over 13,000 lectures on prevention and protection of children from drug and alcohol abuse were held for an average of 55,000 students.

The program aims to inform students about the role of the police in protecting citizens and promoting safe internet use and disaster preparedness.

2. "School policeman" program: Police officers also cooperate with physical and technical security in schools, with the aim of more effectively identifying and solving this type of security problem. Video surveillance functions in 1,206 schools in Serbia (91 schools are connected to monitoring centers in police stations). This Program is, among other things, extremely important for the prevention and suppression of crimes related to intoxicating drugs when they are committed in the immediate vicinity of schools.

3. Graduation Project: The Graduation Project was launched in 2018 by the Ministry of Internal Affairs in cooperation with other ministries and agencies in order to promote safety and security awareness among high school students during graduation events. The project included 2,483 lectures and workshops, with a focus on drug abuse prevention. About 36,700 students attended these events, and as a result of preventive measures, 39 criminal and 741 misdemeanor charges were filed during the graduation celebration. In addition, two videos were broadcast on national and local television stations and social media, with over 100,000 views.

Projects within the concept of community policing: In 2019, 45 measures were implemented in Serbia to improve preventive action in areas of security that are prioritized in the strategic and operational plans of the police and to solve current security issues. Nine police departments implemented projects aimed at preventing substance abuse. These departments included

Vranje, Zrenjanin, Jagodina, Kruševac, Kraljevo, Pančevo, Prokuplje, Sombor and Čačak. (Dr. Ivana Stefanović and Olivera Zečević, 2020)

At the proxy level, according to the aforementioned Exspecto Mental Hygiene Foundation, whose program is no longer available, but was considered a very important good practice both at the provincial and national levels. The exhibition *Metamorphosis - drugs* - provides an insight into the process of emergence of addiction. It consists of 5 rooms. Through an interactive, multimedia exhibition, small groups - up to 15 people - are led by expert psychologists and pedagogues who are educated on the topic of drug addiction. Visiting the exhibition lasts two / two and a half hours. Unlike usual exhibitions, here visitors in a multimedia environment receive information and experiences through various senses (official data, life paths, interviews, personal belongings, albums, etc.). At the end of the tour, visitors are surveyed about their own experiences and attitudes, followed by a discussion. The primary target group is young people, residents of the Student House, primary and secondary school students - primarily 8th graders and high school graduates.

In cooperation with schools, they managed to organize a visit for 1074 groups by the end of 2010, that is, more than 13300 visitors.

In order to prevent and reduce youth drug-related delinquency, a comprehensive prevention plan is necessary. This plan should be based on a detailed analysis of the problem, with clear responsibilities and cooperation mechanisms of competent authorities, the private and civil sectors at all levels of the state. In addition to the adoption of strategic documents, continuous and synchronized activities are still needed, especially at the local community level, in order to fully understand the needs of those affected and the importance of immediate response from

all segments of society. And that is why we consider it important to mention that, in addition to preventive presentations, much more good practice would be needed.

Commentary on drug policy

Based on the above, it can be seen that there is a strategy and action plan for the prevention of drug use at the national and provincial level, but it is not the most up-to-date. Laws also focus more on criminalization and punishment than on harm reduction and prevention. The data seen in the statistics is very discouraging, as well as the speed at which they would like the situation to improve in the next 10 years among drug users. We believe that it is necessary to act in practice, because the theoretical part is given, even if it is incomplete, but it is necessary to step into the field of action. We have the opportunity to do something during the project, but we are not free to do it.

In Serbia, there are very few non-profit civil organizations whose main activity is dealing with young people and various drug prevention. Various preventive activities are taboo topics that cannot be brought into schools, or only with great difficulty. Several studies, such as the *Cesides* study from the city of Subotica, which also talks about the sense of security of young people, prove that young people use a large number of different addictive substances. In Serbia, non-profit civil organizations do not have such modern preventive activities that they could use often. That's why we think it's important in our work to strengthen the civil sector, so that we can have a greater impact and really be able to make changes for the future.

The association has already participated in numerous preventive projects against the use of narcotics, and during the current project, in cooperation with other organizations, another possibility of providing services has been opened, even if only temporarily. However, the future goal is to hold more interactive group sessions and psychological workshops related to drug addiction and develop long-term prevention services, looking for the necessary sources of support. Our first long-term goal is to reduce the prejudice against drug users in our society. We believe in using facts based on current information and research about drugs and abuse and building trust in the community. However, this group is still heavily stigmatized, making it difficult for them to maintain supplies and resources. Our employees know that even if someone is not ready to change, they still deserve help and harm reduction services.

This is our basic philosophy, which we try to adhere to not only in our daily practice, but also to transfer it to the wider society. On the other hand, we consider prevention important, the process of which starts already at school and in the family environment. We try to create programs of the kind that allow them to help, also take over alternative prevention programs from other organizations. The biggest problem in Serbia and Vojvodina is that young people have nowhere to turn, so in cooperation with several non-governmental organizations we want to create a network that helps young people.

Goal

The goals of the Association are the realization of humanitarian and other socially useful goals related to prevention, education and counseling in the field of mental hygiene of children and adolescents as well as their parents, educational and medical workers, etc., - adapted to needs by age and profession, - through various contents, primarily on the prevention of drug addiction.

- strengthening the capacity of the organization to be able to continuously carry out preventive programs at the level of primary, secondary and tertiary prevention;
- through an interactive and provocative lecture on the possible consequences of drug addiction and raising awareness among young people about its dangers;
- through organizing and leading an interactive group and psychological workshop for youth about drug addiction;
- through organizing and leading a self-awareness groups;
- through connection and cooperation with all institutions of the environment and beyond that work with the problem of drug addiction (schools, police, health institutions, Center for Social Work, etc.)
- through advisory and educational work
- strengthening the civil sector

The Association achieves its goals and tasks by organizing public performances, public forums, scientific and educational gatherings, and by preparing and publishing professional material, in order to promote and develop mental hygiene in the territory of Subotica and its surroundings.

Summary

The science of prevention has developed over the past 20 years. Science has identified protective and risk factors in infancy, childhood, and early adolescence. Biological processes, psychological disorders, neglect and neglect in the family, weak attachment to school and community. On the other hand, psychological and emotional well-being, psychological, social skills, strong bonds of care and caring parents, schools and communities that are well equipped and organized, are among the factors that contribute to the factors that make you less vulnerable and less likely to use drugs. Rates of drug use and drug addiction are rising, especially among younger generations. Antropos has been working in the field of drug prevention for many years, placing great emphasis on the mental health of young people, in cooperation with other organizations. The purpose of the study is to look at the specifics of the problem, its scope and role in the government's drug strategy. The examples mentioned above, as a result of which drug use can develop, are all just one of many possibilities. In the course of our work, we presented the theoretical possibilities we have, and the practical part depends on us and our actions. We want a better future and a safer environment for the future generations.

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