

# In Dialogue with Drug Users: A Basis for Innovative Prevention and Harm Reduction Methods – Case: DAATH.HU



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Daath.hu – Hungarian Psychedelic Community

- „Hungarian Psychedelic Community” (2001-)
- harm reduction, drug information, peer help
- psychedelic and related substances
- 9000+ registered members (entry test)
- Forum: 1000-1200 daily readers
- moderated, no trading
- Ecstasy pill database: 2900+ pill descriptions

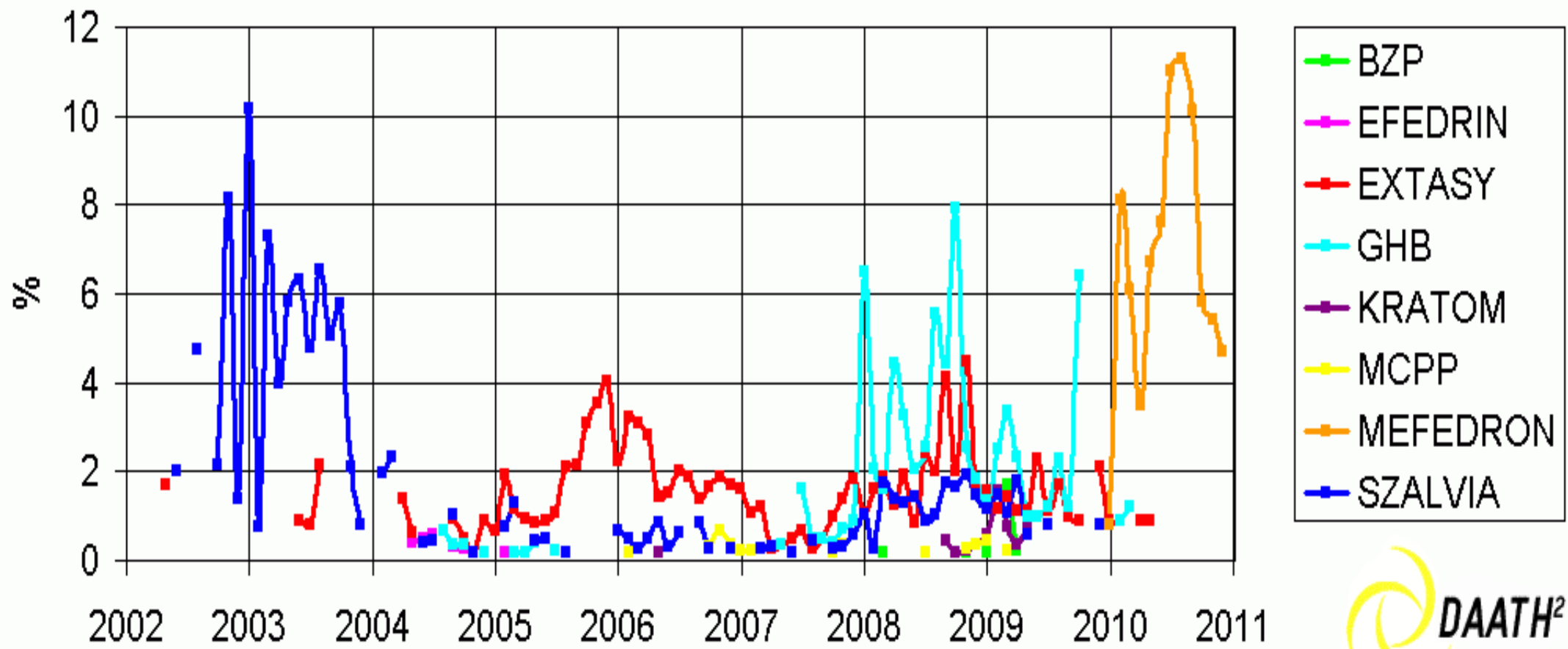
**Informed and responsible drug use!**

# „Earlier” Warning System

- Spread of GHB
  - 2003 February („Gina”)
  - 2004 April (GHB)
- BZP & TFMPP pills
  - 2004 November
- mCPP-containing Ecstasy pills
  - 2005 November
- "Spice" cannabis-like effects
  - 2007 October
- Party pills
  - 2008 February (methydone = bk-MDMA)
  - 2008 November (butylone)
- Mephedrone
  - 2009 June

# „Earlier” Warning System

Daath.hu - search keywords



# Novel Psychoactive Substances

- NSD = New Synthetic Drugs
- DD = Designer Drugs
- RC = Research Chemicals
  
- marginal, „psychonaut” subculture
- hallucinogenic Shulgin phenethylamines / tryptamines
- self-experimenting -> party drug use
  
- cannabinoid receptor agonists (e.g. JWH-s)
- stimulants (cathinones, piperazines,  $\beta$ -ketones)
- psychedelic-like (phenethylamines, tryptamines)

„incense”, „bath salt”, „plant food”, ...

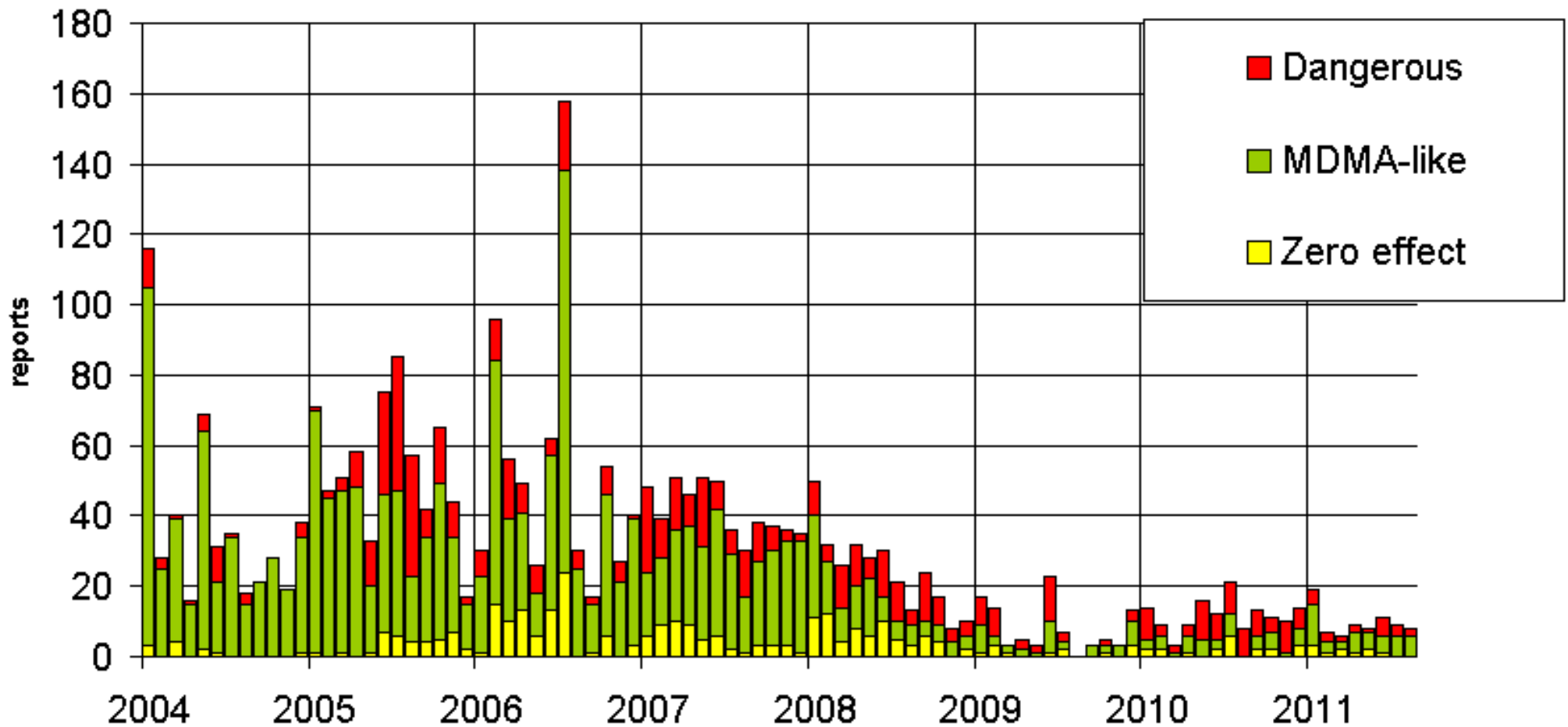
# The NPS Boom

## Destabilisation of the Ecstasy pill market

- precursor regulation
- Ecstasy pill market „drought”
- appearance of rare, crystalline MDMA
- criminalisation of piperazines – pill form mCPP
- EU ban on 2C-I | 2C-T-2 | 2C-T-7
- low quality speed (5-6% amphetamine)

## Destabilisation of the Ecstasy pill market

Daath.hu – Ecstasy pill database





# Why NPS?

- Demand: party culture, trend, curiosity, „coolness”
- Supply: Internet purchase
- Market: new profit
- Media: Internet communication, covert advertisement

**New!**

**Legal!**

**Strong!**

**Cheap!**

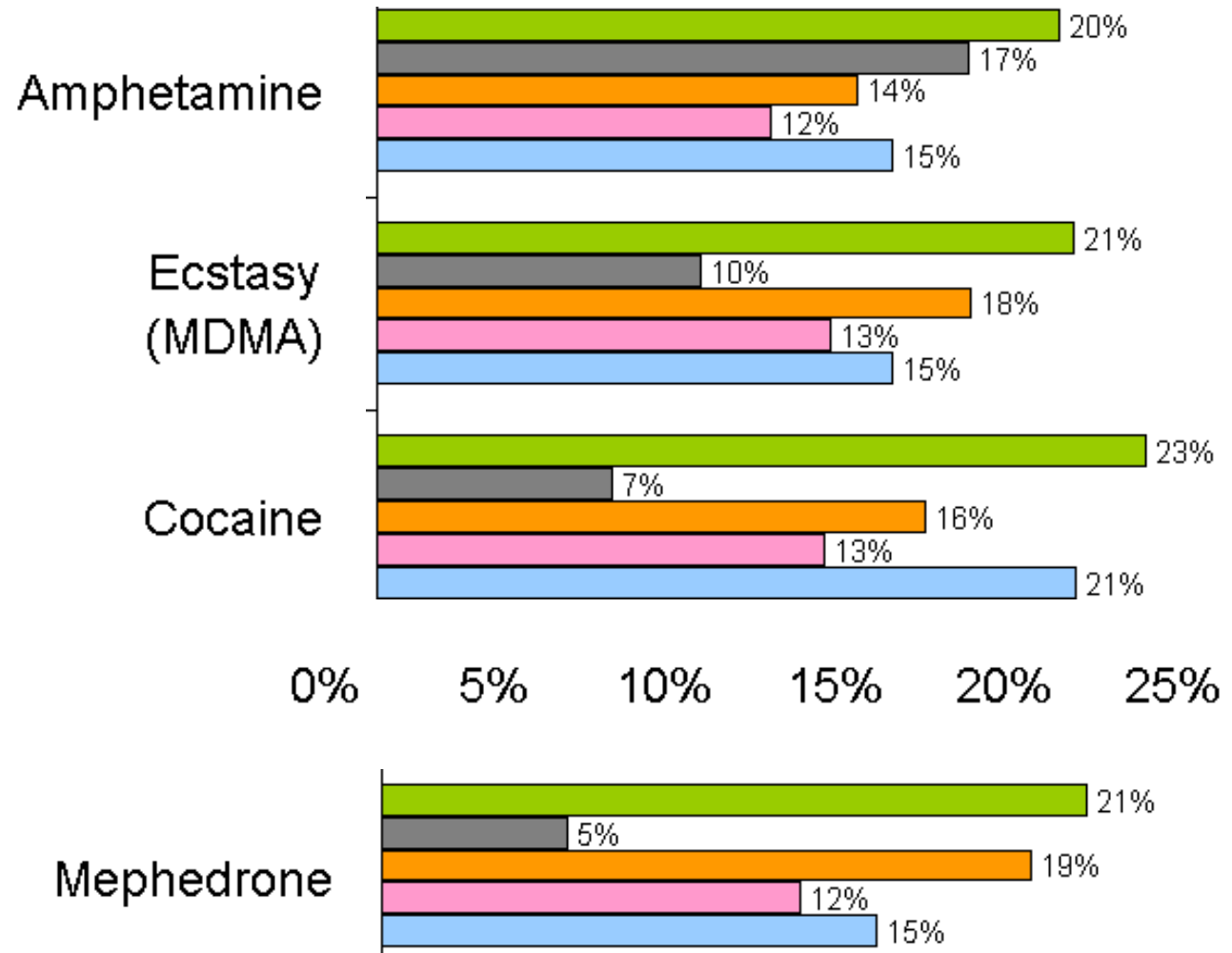
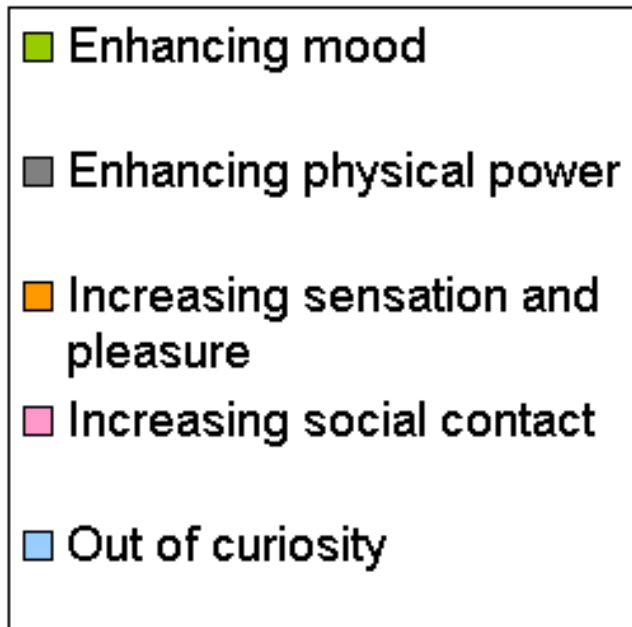
**Trendy!**

**Easily available!**

**Dangers (can)not listed!**



# Stimulants: Use Purposes



# Risks Related to Drug Use

- Overdosing
- Mixing
- Accidents
- Reckless use
- Suicides
- Pre-existing medical conditions
- Plain stupidity

# Risks Related to NPS Use

- Online purchase scams
- Drug misidentification
- Drug mixtures
- Substance naming
- (Over)dosing
- Drug interactions
- Legal consequences
- Psychosocial risks

# Do These Models Work?

- User criminalization
- Substance ban, generic/analog laws
- Double moral in public health policies
- Culture of reckless substance use
- Media: moral panic
- Debates on:
  - legal vs. illegal drugs
  - hard vs. soft drugs
  - natural vs. synthetic drugs

# Dilemma:

**Less users & More problems**

**or**

**More users & Less problems**

**?**



# **“Dirty” Strategies in NPS Prevention**

## **Disinforming**

**inaccurate, false, speculative, generalized, or out-of-context  
public media stories about alleged toxicity  
extreme acts of violence under an assumed influence**

## **Noninforming**

**“unknown long-term effects”  
justifies legal measures against NPS users?  
lack of proof of safety IS NOT proof of non-safety**

## **Uninforming**

**complex and vague NPS (generic/analog) regulations  
NPS vendors are not willing to inform  
avoiding legal risks leads to abstinence**



# Harm Reduction Best-Practices I.

1. Drug checking
2. Drug databases
3. Dose measurement
4. Global and local information



5. Vendor databases
6. Drug user empowerment
7. Party harm reduction
8. Market force involvement

9. Media regulation

10. Consumer protection

11. Smart user culture

12. Reducing alcohol/tobacco hypocrisy

# User/Community Involvement

- Information services
  - Ecstasy database, Media Monitor, Forum administration
- IT help
  - web development, graphics, content providing
- Peer help
  - party service, „psy care”
- Formal data providing
  - reporting, survey participating, interviewing
- Financial help
  - Erowid.org donation 390 USD

# Take-Home Message:

The lifecycle of drugs cannot be stopped by force, but the course may be partially affected by carefully chosen interventions.

**Thank you for your attention!**

