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for Drugs and Drug Addiction



# Prevention

## GERMANY

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## 0 SUMMARY (T0)

The prevention of addiction is - alongside treatment, survival support and repressive measures – one of the four pillars of the comprehensive addiction and drug policy in Germany. Measures for addiction prevention fall within the competence of the ministries at federal and *Land* levels and are availed of in particular by the Federal Centre for Health Education (Bundeszentrale für gesundheitliche Aufklärung, BZgA), by the *Laender*, on a municipality level and by the self-governing bodies of the insurance providers. The structure and strategy of addiction prevention in Germany as well as the roles of the individual institutions are outlined in the first section.

Measures for environmental prevention comprise, in the case of legal drugs such as alcohol and tobacco, in particular sales and advertising restrictions, as well as price increases. As far as illicit drugs are concerned, statutory regulations such as the German Narcotic Drugs Act (Betäubungsmittelgesetz, BtMG) apply. In the section on environmental prevention, the variety of addiction prevention activities of universal, selective and indicated prevention in different settings, is illustrated from 2019 and in part 2020. These include new projects at municipal, *Land* and national level as well as new and updated materials and media. Different instruments for the quality assurance of addiction prevention measures are presented in the following.

Nationwide addiction prevention measures are described based on the 2019 Dot.sys data (n=25,367). This includes setting out the addiction prevention activities by substances, objectives and settings: the focus of the substances addressed was on the prevention of the abuse of alcohol, cannabis and tobacco. Increases have been recorded for almost all substances compared with 2016, with cannabis related measures showing the greatest increases. As in previous years, disseminating knowledge was in 2019 again stated as the most common goal of addiction prevention, and schools were named as the most frequent setting. A special analysis breaks down the activities of cannabis related prevention measures in 2019.

## 1 NATIONAL PROFILE (T1)

### 1.1 Strategy and structure (T1.1)

#### 1.1.1 Main prevention-related objectives (T1.1.1)

The primary objective of addiction prevention is to promote the health of every individual. This includes avoiding or delaying the first use of legal and illicit drugs, early detection of and intervention in high-risk use behaviour as well as the reduction of misuse and addiction. Prevention is - alongside addiction treatment, survival support and repressive measures – a central component of the comprehensive addiction and drug policy in Germany. In addition to severe psychological and physical harm to the individual, substance abuse and dependence also cause enormous damage to the national economy.

Modern addiction prevention systematically reaches target groups in their living environments and strives to effect a health-promoting change in knowledge, attitudes and behaviour. A salutogenetic approach, in the sense of a strengthening of resources, is primarily pursued, namely strengthening life skills and risk competence.

The importance of addiction prevention is shown by the fact that the *National Strategy on Drug and Addiction Policy (Nationale Strategie zur Drogen- und Suchtpolitik)*<sup>1</sup> (Die Drogenbeauftragte der Bundesregierung 2012), with its specific measures and objectives in the field of addiction prevention, is intended to be embedded in an overarching prevention strategy.

#### 1.1.2 Organisational structure (T1.1.2)

The responsibility for implementing the National Strategy on Drug and Addiction Policy falls within the relevant federal ministries, the BZgA, the *Laender*, the municipalities as well as the social insurance providers. Insofar as addiction prevention measures fall within the areas of health, social insurance, education and youth, they are subject to concurrent legislation. The *Laender* only have the authority to legislate insofar as the Federal Government does not exercise its legislative competence (Art. 72 German Constitution (Grundgesetz, GG)). Addiction prevention services are mainly financed by the *Laender*, social insurance providers and the municipalities.

The statutory health insurance providers (gesetzliche Krankenversicherung, GKV) provide services in the scope of primary prevention and health promotion (Sec. 20-20b German Code of Social Law, Volume 5, SGB V) for the prevention of dependence on addictive substances and possible secondary diseases from the use of addictive substances. The services provided by the health insurance providers also aim, in addition to the addiction prevention aspects, to promote a healthier lifestyle in all age groups. Binding content and quality criteria of the pre-

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<sup>1</sup> Further information on the *National Drug and Addiction Strategy* can be found in the Drug Policy workbook.

vention and health promotion measures have been set by the Umbrella Association of Statutory Health Insurance Schemes (GKV Spitzenverband) for health insurance providers and service providers in its prevention manual (“Leitfaden Prävention”).

Since 1992, the BZgA has coordinated the "BZgA *Laender* cooperation working group on addiction prevention". The task of the committee, which meets twice a year, is to optimise the networking of the persons and entities involved at *Land* and federal level as well as to coordinate nationwide and *Land*-wide measures in addiction prevention. Specialists from the *Land* coordination agencies for addiction prevention are represented as well as, in some cases, members of the corresponding *Land* ministries. The coordination agencies and specialist bodies of the *Laender* are, as a general rule, independently governed, registered associations that are funded using *Land* resources. Representing civil society as well as representing the interests of addiction support at a federal level, the German Centre for Addiction Issues (Deutsche Hauptstelle für Suchtfragen e.V., DHS) - a registered association with non-profit objectives - also takes part in the meetings.

Roughly every two years, one or more of the 16 *Laender* represented in the addiction prevention working group organises a BZgA-funded expert conference on the topic of “Quality assurance in addiction prevention” (“Qualitätssicherung in der Suchtprävention”) (see section 1.3.1).

Since 1998, the office of the Federal Government Commissioner on Narcotic Drugs has been attached, with a central office, to the German Federal Ministry of Health (Bundesministerium für Gesundheit, BMG). In an annual "Drug and Addiction Report", the Commissioner reports on current developments and projects. In 2019, the key topic for the year was “municipalities as actors in addiction prevention and support”<sup>2</sup>.

In the *Laender* and the municipalities, a range of further structures exists for professional cooperation between ministries, municipalities, associations and clubs in the area of addiction prevention. In this way, the principle of subsidiarity is adhered to and a broad dispersion of preventive measures across all federal levels in Germany is ensured. International cooperation can thus also be found at all levels, primarily in the form of projects within the European Union (EU).

### **1.1.3 Commentary on funding (T1.1.3)**

### **1.1.4 National action plan for drug prevention in schools (T1.1.4)**

Education policy in Germany is the responsibility of the *Laender*. This relates to both schools and higher education. For this reason, the school systems differ, in some aspects strongly,

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<sup>2</sup> Further information can be found at <https://www.drogenbeauftragte.de/>. Information on the conference “Focus on addiction - municipalities engaged locally” (Sucht im Fokus – Kommunen engagiert vor Ort) on 25 November 2019 in Berlin can be found at <https://www.drogenbeauftragte.de/themen/drogenpolitik/jahrestagung-25112019/> [accessed: 11 May 2020].

from each other, e.g. through the number of school years or different curricula. In regular meetings of the Standing Conference of Ministers of Education and Cultural Affairs<sup>3</sup> (Kultusministerkonferenz, KMK), the *Laender* coordinate their joint interests in this area.

Due to the federal structure in Germany, there is no national action plan for drug prevention in schools. However, in 2012 the KMK issued a Recommendation on Health Promotion and Prevention in Schools (KMK, 2012). That recommendation stated: “Addiction prevention is a particularly important topic in health promotion and prevention. The aim must be to prevent the start of addictive substance use and other behaviours with a high risk of leading to addiction as well as to identify and reduce high-risk use and behaviours at an early stage, in particular through early intervention and measures to improve life skills.”

Through guidelines and curricula, the *Land* cultural affairs ministries have, for some years, made addiction prevention a mandatory lesson topic, one example being the *Land* programme “*Happy, healthy school*”<sup>4</sup>.

## 1.2 Prevention interventions (T1.2)

### 1.2.1 Environmental prevention (T1.2.1)

Individual decisions to use a substance are influenced by social-ecological factors. Environmental prevention interventions aim to change the cultural, social, physical and economic conditions, which lead to or promote the emergence and development of diseases (Bühler, Thrul & Gomes de Matos, 2020). The intention is to influence the use behaviour of individuals by limiting the availability of consumption opportunities. As environmental prevention is primarily of significance with respect to legal drugs, the most important rules on the consumption of alcohol and tobacco will be set out here.

#### Alcohol consumption in Germany

According to the current Drug Affinity Study (Orth & Merkel, 2020), in 2019 63.4% of the 12 to 17-year-old **adolescents** had already drunk alcohol at some point in their lives, with 9.0% drinking regularly (at least once a week). Based on the 30-day prevalence, approximately every seventh adolescent (14.7%) reported at least one day of binge drinking. 94.9% of the **young adults** (18 to 25 years old) have drunk alcohol at least once in their lives, 32.3% drink regularly and 40.6% have practised binge drinking in the last 30 days. Male and female respondents differ in their consumption of alcohol above all with regard to the intensity, which is higher for male respondents (Orth & Merkel, 2020). Trends show that ever fewer adolescents

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<sup>3</sup> The conference is a coming together of the ministers and senators of the *Laender* responsible for education and training, for universities and research as well as for cultural matters.

<sup>4</sup> e. g. in North Rhine-Westphalia (<https://www.schulentwicklungspreis.de>), Mecklenburg-Western Pomerania (<https://www.bildung-mv.de/schueler/schuelergesundheit/ernaehrung-und-schulverpflegung/landesprogramm-gute-gesunde-schule-mv/>), Berlin (<https://www.berlin.de/sen/bildung/unterstuetzung/praevention-in-der-schule/gesundheit>), Brandenburg (<https://mbjs.brandenburg.de/bildung/gute-schule/gute-gesunde-schule/gute-gesunde-schule-landesprogramm.html>) [accessed: 21 Jul. 2020].

have already drunk alcohol at some point in their lives and that regular alcohol consumption and binge drinking in this age group has also decreased. Among young adults, the development over time varies: regular alcohol consumption, the consumption of high-risk amounts and the 30-day prevalence of binge drinking among young men were less widespread in 2019 than was the case in 2011/2012. There have been no significant longer term changes in alcohol consumption among young women (ibid.).

Further current data on the prevalence of alcohol consumption can be found, for example, in the 2018 BZgA representative alcohol survey (Orth & Merkel, 2019a) and in the 2018 Epidemiological Survey of Substance Abuse (Atzendorf et al. 2019; Seitz et al., 2019a).

**Effects of consumption:** Overall, alcohol consumption in Germany has been decreasing, however at 10.5 litres of pure alcohol per inhabitant over 15 years old in 2017, this is very high when compared to other countries (John et al., 2020). With regard to illness, health economic costs and early death, high alcohol consumption represents one of the most significant avoidable risk factors (Batra et al., 2016). According to the alcohol atlas (Alkoholatlas) (DKFZ, 2017), around 21,000 people died from alcohol-related disorders in 2012. Studies estimate that around 74,000 deaths are caused solely by alcohol consumption or by the combined consumption of tobacco and alcohol (Rummel, Lehner & Kepp, 2020 after John & Hanke, 2002). Direct and indirect costs to the economy as a whole<sup>5</sup> in Germany, associated with harmful alcohol consumption, amounted to an estimated €57.04 bn in 2018 (Effertz, 2020; Die Drogenbeauftragte der Bundesregierung, 2019c). This represents an increase of 45% compared to earlier estimates (2008 to 2012: 39.3 bn annually (Effertz, 2015a))<sup>6</sup>.

### Legislation on alcohol consumption

Noteworthy environmental prevention measures that have the aim of reducing alcohol consumption are, for example, sales and advertising restrictions as well as price increases (John et al., 2017; DKFZ, 2017). Proven measures include youth protection, tax increases, geographical and time related rules on the availability of alcohol and rules on drink driving (John et al., 2018).

**German Youth Protection Act (JuSchG Sec. 9 Alkoholische Getränke)**<sup>7</sup>: The legal minimum age for the independent purchase of beer, wine or sparkling wine is 16, i.e. selling alcohol to

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<sup>5</sup> There are current annual *direct* costs caused by harmful alcohol consumption in Germany in the amount of €16.59 billion (2008: €9.15 bn) related to sickness and care costs, rehabilitation measures, services for participation in working life and accidents. Annual *indirect* costs in the amount of €40.44 billion (2008: €30.15 bn) relate to loss of resources due to mortality, long-term unemployment, unfit for work, short-term unemployment, reduction in earning capacity due to early retirement, rehabilitation measures, loss of productivity due to nursing care needs (Effertz, 2020; Die Drogenbeauftragte der Bundesregierung, 2019c).

<sup>6</sup> According to Effertz (2020), the reasons for this increase are: price and wage increases in the health service, increased high-risk alcohol consumption, especially among those over 60 years old, and low priced alcohol purchases in Germany.

<sup>7</sup> The JuSchG serves to protect children and adolescents in public. Within the meaning of that Act, children are persons under 14 and adolescents are persons between 14 and 18 years old.

anyone under 16 years old is prohibited. Alcoholic spirits may only be purchased from the age of 18 (Gaertner et al., 2015).

**Alcohol tax:** In Germany, the applicable tax rate is determined by the type of alcoholic drink<sup>8</sup>. Apart from the introduction of the tax on alcopops, there have been no significant tax increases since 1982 (DKFZ, 2017). The revenue from alcohol taxes in 2018 was virtually unchanged in comparison to previous years, at around €3.185 billion (John et al., 2020) and is below the EU average, which has increased in recent years (Gaertner et al., 2015).

**Drink driving:** The legal provisions are set out in the German Road Traffic Act (Straßenverkehrsgesetz, StVG) and the German Criminal Code (Strafgesetzbuch, StGB). The upper limit of 0.5 mg/ml blood alcohol concentration (BAC) has applied to the driving of vehicles since 2011 and is thus in line with the European standard (DHS, 2017). Provided no indications of unsafe driving are present, a BAC of between 0.5 and 1.09 mg/ml is considered a regulatory offence (Sec. 24a StVG). In such cases, the driver can expect, among other things, a fine, a driving ban or points in the Register of Driver Fitness (Fahreignungsregister). For beginners, an absolute ban on alcohol applies during the two year probationary period or if the driver is not yet 21 years old (Sec. 24c StVG). A BAC of between 0.3 and 1.1 mg/ml with alcohol-related, conspicuous driving behaviour represents a relative unfitness to drive (criminal offence as per Sec. 316 StGB). If a BAC of under 0.3 mg/ml is determined, relative unfitness to drive only exists in exceptional circumstances. An absolute unfitness to drive is assumed if the BAC is over 1.1 mg/ml, regardless of indications of lack of fitness to drive (Sec. 315c StGB). In both cases, legal consequences can be expected, for example imprisonment or a fine, a driving ban or a medical-psychological evaluation (Medizinisch-Psychologische Untersuchung, MPU). Cyclists with a BAC of 1.6 mg/ml or more are considered to be "absolutely unfit to 'drive'" (DHS, 2017) - they can have their driving licence withdrawn and an MPU ordered. The driving licence can even be revoked in certain cases from a drunk pedestrian who has caused an accident. The same blood-alcohol levels apply to the driving of e-scooters as to other vehicles<sup>9</sup>.

**Regulations on alcohol consumption in public:** Regulations concerning alcohol consumption in public, such as bans on local public transport or in certain areas of the city centre are issued by the Laender or municipalities<sup>10</sup>.

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<sup>8</sup> The 2017 Alcohol Atlas (Alkoholatlas 2017) from the German Cancer Research Centre (Deutsches Krebsforschungszentrum) (DKFZ, 2017) provides a detailed overview on alcohol tax levels in Germany by type of tax.

<sup>9</sup> <https://www.drugcom.de/news/alkohol-auch-auf-dem-e-scooter-eine-gefahr/> [accessed: 24 Jun. 2020]; also regulated in the German Electric Micro-Vehicle Ordinance (Elektrokleinstfahrzeuge-Verordnung – eKFV) (status: Jun. 2019).

<sup>10</sup> In the scope of the BZgA youth campaign "Alcohol? Know your limit." ("Alkohol? Kenn dein Limit."), a legal expert report "Legal scope for action in municipal alcohol relationship prevention" (Rechtliche Handlungsspielräume der kommunalen Alkoholverhältnisprävention) will be made available on request to relevant municipal stakeholders in an easy-to-understand version.

## Tobacco consumption in Germany

The results of the 2019 Drug Affinity Study (Orth & Merkel, 2020) on smoking behaviour among adolescents (12 to 17 years old) and young adults (18 to 25 years old) in Germany show that 83.0% of all **adolescents** have never smoked. Around one in five young people (20.9%) has already smoked a water pipe, around one in seven (14.5%) has already smoked an e-cigarette and approximately one in nine (11.0%) has tried an e-shisha. Among **young adults**, smoking is less widespread, at 28.8%, with 40.5% having never smoked. More young men smoke than young women. The proportions of young adults who have already smoked a water pipe (65.4%), e-cigarette (32.5%) or e-shisha (15.5%) are higher than those of adolescents. Experience with the use of tobacco heating products is relatively low both among adolescents (0.5%) and young adults (4.5%). Trends show a continuous decline in smoking among adolescent and young adults (ibid.).

Further current data on the prevalence of tobacco consumption can be found, for example, in the 2018 BZgA representative alcohol survey (Orth & Merkel, 2019c) and in the 2018 Epidemiological Survey of Substance Abuse (Atzendorf et al. 2019; Seitz et al., 2019b).

Kuntz et al. (2020, p. 20) provide an overview of the available data sources on the prevalence of smoking in Germany. Further cross-sectional surveys are available on the prevalence of e-cigarette consumption (for example Hanewinkel et al. 2020; DKFZ, 2018; Kotz & Kastaun, 2018).

**Effects of consumption:** Tobacco consumption in Germany is the leading cause of premature death. An estimated 121,000 people died in 2013 as a result of smoking (Kuntz et al., 2020; DKFZ, 2015). The overall economic costs of smoking are estimated at €97.24 bn for 2018, which represents an increase of 19.3% on earlier estimates (Effertz, 2020): of that figure, direct costs account for €30.32 bn and indirect costs for €66.92 bn<sup>11</sup> (2008 to 2012: €25.41 bn and €53.68 bn annually (Effertz, 2015b; DKFZ, 2015).

## Statutory rules on tobacco consumption

Environmental prevention measures aimed at reducing tobacco consumption are for example tax increases on tobacco products, sales and advertising restrictions and smoking bans in public or in the workplace. In recent years, tobacco prevention and tobacco control policy measures have led to a reduction in smoking, especially among adolescents and young adults (Kuntz et al., 2019). “Established” smokers, on the other hand, largely continue to smoke (Effertz, 2020).

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<sup>11</sup> There are current annual *direct* costs caused by smoking in Germany in the amount of €30.32 billion related to sickness and care costs, rehabilitation measures, services for participation in working life and accidents. The *indirect* costs in the amount of €66.92 billion include loss of resources due to mortality, long-term and short-term unemployment, incapacity to work, reduced earning capacity, care and rehabilitation (Effertz, 2020; Die Drogenbeauftragte der Bundesregierung, 2019c).

Germany ratified the Framework Convention on Tobacco Control (FCTC) of the World Health Organisation which came into force in 2005, thus committing to introduce price-related measures and tax measures for the purposes of tobacco control and protection from passive smoking.

In 2016, the new version of the Tobacco Products Directive 2014/40/EU<sup>12</sup>, passed by the EU, was transposed into national law by way of the German Tobacco Products Ordinance (Tabakerzeugnisverordnung, TabakerzV) (BMEL, 2017). The most visible change relates to the image and text warnings on the outer packaging of tobacco products, which make up 65% of the packaging surface on both the front and reverse. The written warnings are illustrated with photos of possible damage to health and consequences from smoking. In addition, there is advice about free counselling services. Tobacco products with characteristic flavours or with technical features which change the aroma, flavour or smoke intensity are prohibited (Drogenbeauftragte der Bundesregierung, 2017). Since the end of the transition period on 20 May 2020, it has been prohibited to market menthol smoking tobacco products (including cigarettes, cigarillos, water pipe tobacco)<sup>13</sup>. In the new Directive, electronic cigarettes containing nicotine (e-cigarettes) and refill cartridges are subject to greater regulation and stricter requirements regarding product safety, in particular concerning the maximum amount of nicotine in the liquids and better information for users regarding the ingredients<sup>14</sup>.

**Protection against passive smoking:** in 2015 around 11% of the adult, non-smoking population was regularly exposed to passive smoking in closed rooms. The highest exposure was found among 18 to 29-year-olds (Kuntz et al., 2019 according to GEDA-Studie). The German Workplaces Ordinance (Arbeitsstättenverordnung, ArbStättV) passed in 2004 and the German Maternity Protection Act (Mutterschutzgesetz, MuSchuG) obligate employers to protect non-smoking employees from the dangers of passive smoking. In 2007 the German Federal Act on the Protection of Non-Smokers (Bundesnichtraucherschutzgesetz, BNichtrSchG) also came into force. Under the Act, employees in public authorities as well as passengers on public transport have a legal right to protection from passive smoking. More extensive provisions are imposed by the *Laender* in laws governing the protection of non-smokers<sup>15</sup>. Currently for example a (national) prohibition on smoking in cars in which children or pregnant women are also travelling is being discussed, as well as at bus stops.

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<sup>12</sup> Replaced the previous version, 2001/37/EC.

<sup>13</sup> The basis is the following legal text: Sec. 4 in conjunction with Annex 1 No. 4 (d) (aa) and Sec. 34 German Tobacco Products Ordinance (Tabakerzeugnisverordnung, TabakerzV) ([https://www.bvl.bund.de/DE/Arbeitsbereiche/03\\_Verbraucherprodukte/03\\_AntragstellerUnternehmen/04\\_Tabakerzeugnisse/02\\_Rechtsvorschriften/bgs\\_tabakerzeugnisse\\_rechtliche\\_grundlagen\\_node.html](https://www.bvl.bund.de/DE/Arbeitsbereiche/03_Verbraucherprodukte/03_AntragstellerUnternehmen/04_Tabakerzeugnisse/02_Rechtsvorschriften/bgs_tabakerzeugnisse_rechtliche_grundlagen_node.html)) [accessed: 25 Jun. 2020].

<sup>14</sup> Further provisions can be found in the "German Act to Implement the Directive on Tobacco Products and Related Products" (Gesetz zur Umsetzung der Richtlinie über Tabakerzeugnisse und verwandte Erzeugnisse).

<sup>15</sup> A summary of the *Laender* laws on the protection of non-smokers can be found at: <https://www.rauchfrei-info.de/informieren/gesetzliche-regelungen/laendergesetze-zum-nichtraucherschutz/> [accessed: 25 Jun. 2020].

**German Youth Protection Act** (*Jugendschutzgesetz (JuSchG Sec. 10 smoking in public, tobacco goods)*)<sup>16</sup>: The prohibition covers the selling of products containing tobacco and nicotine to children or adolescents, as well as 18-year-olds smoking in restaurants and public houses, shops or in public. In addition, cigarette machines must be modified to ensure that adolescents cannot gain access to the cigarettes. In most cases, when buying cigarettes from vending machines, age is checked through the (mandatory) "Geldkarte" payment method. Since 2016, the ban on the sale and consumption of tobacco products to children and adolescents also applied to e-cigarettes and e-shishas, regardless of whether they contain nicotine or not.

**Tobacco tax:** In Germany, tobacco goods are subject to tobacco duty and value added tax. The tobacco tax is regulated in the German Tobacco Duty Act (Tabaksteuergesetz, TabStG) and in recent years has been gradually increased (Sec. 2 (1) No. 1a TabStG)<sup>17</sup>, most recently on 15 February 2019 (Die Drogenbeauftragte der Bundesregierung, 2019c). In 2019, the revenue from tobacco taxes was approx €14.2 bn, and has once more slightly decreased, by 0.6%, compared to the previous year (€14.3 bn) (Kuntz et al., 2020).

**Trading in tobacco products:** To combat the illegal trade in tobacco products, tobacco packaging must be marked with a unique identifier (traceability) and carry a tamper-proof security feature (Art. 15 and Art. 16 Tobacco Products Directive 2014/40/EU). This has now also applied to cigarettes and to hand rolling tobacco since 20 May 2019. For all other tobacco products, the rules will apply from 20 May 2024 (BMEL, 2018)<sup>18</sup>.

**Advertising for tobacco products:** Under the German Tobacco Products Act (Tabakerzeugnisgesetz, TabakerzG), an advertising ban on tobacco and e-cigarettes in the press and other printed publications applies. It is also prohibited to advertise on the internet, radio and television. Additionally, tobacco companies are not allowed to sponsor radio programmes or events that are aimed at several EU Member States. A complete advertising ban has been increasingly discussed in recent years<sup>19</sup>. In May 2020, the "Draft Second Act amending the Tobacco Products Act" (Entwurf für ein zweites Gesetz zur Änderung des Tabakerzeugnisgesetzes) (Drucksache 19/19495) was presented<sup>20</sup>. This contains, among other things, an advertising ban for tobacco products outside (billboards, public transport stops),

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<sup>16</sup> The JuSchG serves to protect children and adolescents in public. Within the meaning of that Act, children are persons under 14 and adolescents are persons between 14 and 18 years old.

<sup>17</sup> How much tax to levy on products containing nicotine - "Liquid-Steuer" ("liquid tax") - is currently under discussion.

<sup>18</sup> In 2017, Germany ratified the Tobacco Smuggling Protocol, based on Article 15 of the FCTC, which came into force on 25 September 2018 (Die Drogenbeauftragte der Bundesregierung, 2019c).

<sup>19</sup> For example, an expert discussion took place in the Bundestag in December 2018, in which the majority of experts expressed support for the introduction of a comprehensive advertising ban. Further information is available at <https://www.bundestag.de/dokumente/textarchiv/2018/kw50-pa-ernaehrung-tabakwerbung-577516> [accessed: 12 May 2020].

<sup>20</sup> <https://www.bundestag.de/dokumente/textarchiv/2020/kw22-de-tabakerzeugnisgesetz-696122> [accessed: 25 Jun. 2020].

prohibits cinema advertising if the films are not approved for minors, and prohibits the distribution of free samples outside of tobacco shops. After a transition period, the ban is due to take effect from January 2022, for tobacco heaters from January 2023, and for e-cigarettes from January 2024<sup>21</sup>. On 2 July 2020, the tobacco advertising ban was passed in the Bundestag. Recently, Germany was the only country in the EU that permitted unrestricted outdoor advertising for tobacco products (DKFZ, 2020).

As a member state of the FCTC, Germany has an obligation to disclose the tobacco industry's advertising expenditure: in 2017 this amounted to around €247 million, an increase of around 16.8% on the previous year (around €212 million) (Kuntz et al., 2020).

### Use of illegal drugs in Germany

In 2019, according to the current Drug Affinity Study (Orth & Merkel, 2020), around one in ten 12 to 17-year-old **adolescent** (10.6%) had already used an illegal drug once in their life. Among **young adults** (18 to 25 years old), almost half (47.2%) has already used an illegal drug at some point. The consumption of illicit drugs is dominated by cannabis: 10.4% of adolescents and 46.4% of young adults have tried cannabis at least once. The level of cannabis use increases steadily from late childhood to young adulthood and it is more widespread among male adolescents and young men than female adolescents and young women. Experience of use of other substances is significantly lower: The lifetime prevalence rates for the use of illegal drugs other than cannabis is less than 1% for adolescents. Among young adults, they range from 7.8% for ecstasy, 6.8% for amphetamine, 5.4% for psychoactive plants, 4.7% for cocaine, 3.2% for LSD, 2.1% for new psychoactive substances, 0.6% for inhalants and crystal meth, 0.3% for heroin, to 0.2% for crack. The 12-month prevalence rates for the use of illegal drugs (ecstasy, LSD cocaine and psychoactive plants) has increased from 2011 levels for young women and men, although the increases are at a significantly lower level than for cannabis (ibid.).

It is estimated that around 15.2 million adults between 18 and 64 years old (Atzendorf et al, 2019) have used an illegal drug at least once in their lives, which corresponds to a lifetime prevalence of 29.5%. Cannabis plays the most prominent role here too. Further current data on the prevalence of illicit drug use in Germany is available through regularly repeating representative surveys, such as the 2015 Drug Affinity Study (Orth, 2016); the 2018 Alcohol Survey (Orth & Merkel, 2019b), the 2018 Epidemiological Survey of Substance Abuse (Atzendorf et al., 2019) (see the Drugs workbook for detailed prevalence figures), as well as individual regional surveys (for example the Special Unit for Addiction Prevention Berlin, 2019c).

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<sup>21</sup> <https://www.aerztezeitung.de/Politik/Strikteres-Tabak-Werbeverbot-soll-kommen-409786.html> [accessed: 25 Jun. 2020].

**Effects of consumption:** in 2019, 1,398 people died as a result of their drug use (2018: 1,276). As was also the case in previous years, most deaths were attributed to opioid overdoses, involving, for example, heroin or morphine, as well as mixed use (Die Drogenbeauftragte der Bundesregierung, 2020).

### **Statutory regulations on the use of illicit drugs**

**German Narcotic Drugs Act (*Betäubungsmittelgesetz, BtMG*):** In Germany, the BtMG regulates, as the central legislative instrument, how the state deals with drug offences. It provides for a variety of sanctions which, depending on the severity and type of offence, range from administrative fines to custodial sentences. According to the BtMG, a narcotic (illicit drug) is any substance which is included in one of the three schedules to the BtMG: Schedule I: narcotics not eligible for trade and non-prescribable (e.g. MDMA, heroin or cannabis), Schedule II: narcotics eligible for trade and non-prescribable (e.g. methamphetamine) and Schedule III: narcotics eligible for trade and prescribable (e.g. amphetamine, codeine, cocaine, morphine and opium). Since its introduction in 1971, the BtMG has been modified and amended several times in order better to suit the changing conditions.

With the threat of punishment (Sec. 29-30a BtMG), the possibilities for action regarding environmental prevention interventions are, to a great extent, exhausted as far as illicit drugs are concerned. In addition, numerous other laws contain criminal provisions and sanctions for drug-related offences (German Criminal Code (Strafgesetzbuch, StGB), German Road Traffic Act (Straßenverkehrsgesetz, StVG), German Precursors Monitoring Act (Grundstoffüberwachungsgesetz, GÜG), German New Psychoactive Substances Act (Neue-psychoaktive-Stoffe-Gesetz, NpSG), see on this point the Legal Frameworks workbook).

A pilot project planned by the Berlin Senate on the controlled supply of cannabis to a limited number of adult study participants together with scientific supervision was again rejected by the German Federal Institute for Drugs and Medical Devices (Bundesinstitut für Arzneimittel und Medizinprodukte, BfArM) in 2020, on the grounds of it breaching the BtMG<sup>22</sup>.

**German New Psychoactive Substances Act (*Neue-psychoaktive-Stoffe-Gesetz, NpSG*):** As well as a ban on purchasing, possessing and dealing/trafficking in NPS, the NpSG also prohibits entire substance groups (see Legal Framework workbook). In 2019, a regulation to amend the Schedule to the NpSG and the Schedules of the BtMG came into effect, according to which further individual substances were included in Schedule II of the BtMG and substance groups in the NpSG were further developed and expanded (Die Drogenbeauftragte der Bundesregierung, 2019b; 2020; see Legal Framework workbook)<sup>23</sup>. In May 2020, the Schedule to

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<sup>22</sup> <https://www.aerzteblatt.de/nachrichten/111852/Bundesinstitut-lehnt-Modellversuch-zu-Cannabis-in-Berlin-ab> [accessed: 13 Jul. 2020].

<sup>23</sup> The research project “Phar-Mon NPS” (Piontek & Hannemann, 2017) examined the effects of the NpSG on users, the addiction support system and law enforcement authorities. In 2019, “PharMon plus” was further developed into an information system for new developments in patterns of use and in the use of psychoactive

the NpSG was amended again to cover further, newly emerging synthetic cannabinoids (Drucksache 272/20; see Legal Framework workbook).

**Driving and illicit drugs:** In contrast to alcohol, there are no legal threshold values for driving under the influence of illicit drugs (Straßgütl & Albrecht, 2020). Road traffic law and criminal law have a special role to play in environmental prevention: As per Sec. 24a (2) StVG, it is a regulatory offence to drive a vehicle whilst under the influence of "intoxicating substances" (Schedule StVG (to Sec. 24a)) and the substance is detected in the blood. Sanctions range from fines or driving licence points to a driving ban. If a positive test for drugs is obtained in connection with irregular driving and signs of deficient driving, criminal proceedings will be instituted. Possible sanctions include imprisonment and fines and the revocation of the driving licence (Sec. 315c, Sec. 316 StGB). A successfully completed medical-psychological assessment (Medizinisch-Psychologische Untersuchung, MPU) is a requirement of having the driving licence reissued. This also requires evidence of abstinence from drugs of over a year. After an accident whilst under the influence of drugs, civil and insurance law consequences can be expected. The recommendation of the Commission on Legal Limits (Grenzwertkommission)<sup>24</sup> includes a detectability threshold for cannabis of under 1 ng tetrahydrocannabinol (TCH)/ml blood serum, for fitness to drive not to be acutely affected. In the case of other illicit drugs, the driving licence authorities and the courts generally assume that they are not safe for driving. In this respect, driving licence authorities do not have to prove that someone has driven whilst under the influence of a narcotic (see Legal Framework workbook).

### 1.2.2 Universal prevention (T1.2.2)

Universal prevention activities form the mainstay of addiction prevention activities in Germany. These include activities aimed at the general population, irrespective of their risk profile of developing abusive behaviour (Bühler, Thruhl & Gomes de Matos, 2020). Prevention activities are ideally provided in the everyday life and living environments of the target groups; this also applies in respect of universal prevention measures. Typical areas of activity for universal prevention measures are, for example, school, leisure, work, municipality, sports club settings. In addition to a differentiation in behavioural and environmental prevention measures of universal prevention, the interventions primarily differ in respect of the specific substances they are aimed at, non-substance-related or behavioural addictions as well as cross-substance projects. Cross-substance interventions primarily serve to teach life skills or to promote the formation of critical opinions<sup>25</sup>.

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substances and medicinal drugs. Further information can be found at <https://legal-high-inhaltsstoffe.de/de/pharmon-nps.html> [accessed: 12 May 2020] and in the Drugs workbook.

<sup>24</sup> Working group consisting of members of the German Society of Legal Medicine (Deutschen Gesellschaft für Rechtsmedizin, DGRM), the German Society of Traffic Medicine (Deutschen Gesellschaft für Verkehrsmedizin, DGVM), and the Society of Toxicological and Forensic Chemistry (Gesellschaft für Toxikologische und Forensische Chemie, GTFCh), and which advises the German Federal Government.

<sup>25</sup> Bühler, Thruhl & Gomes de Matos (2020, p. 21 et seq.) provide an overview of theoretical foundations and models of modern addiction prevention.

**Note:** As there are many different projects from a wide variety of providers in Germany, an exhaustive listing is almost impossible. (New) projects in universal prevention are listed, purely by way of example, in this reporting year. A comprehensive presentation of the projects can be found in the 2019 and 2018 Prevention workbooks<sup>26</sup>.

## School

The school environment is particularly well-suited for carrying out universal prevention measures, as it provides comprehensive access to the main target group of children and adolescents, and preventive measures can be integrated very well into the school curriculum<sup>27</sup> and beyond. Schools are equally well-suited as settings for non substance-related, substance-related and cross-substance-prevention activities. The effectiveness of addiction prevention measures in primary schools has been intensively investigated. Measures that build on a psychosocial approach as well as on behaviour-modifying interventions are particularly likely to succeed, usually on the condition that they are supplemented by components in non-classroom settings (Bühler & Thrul, 2013). The approaches and content of school-based prevention programmes include *social competence* (social skills, problem solving/decision making, self-control, self-esteem, stress and anxiety management), *knowledge orientation* (education on health risks), *social influences* (adaptation of social norms, stability training, public commitment) and *offers of healthy alternatives* (Bühler, Thrul & Gomes de Matos, 2020, p. 34 et seq.)<sup>28</sup>.

For the primary school setting, the prevention programme KIKS UP developed the game "**KLASSE KLASSE**", which consists of implementing holistic prevention in game form for 6 to 11-year-old children. In addition to elements promoting movement and enjoyment training, the strengthening of social and emotional skills is also addressed. To date, the game has been implemented in four *Laender* and evaluated by the Justus Liebig Universit Giessen (Hopf, Knoll & Stecher, 2016)<sup>29</sup>.

Since 2015, the BMG has, through the BZgA, supported the increase in the nationwide reach of the evaluated life skills programme, "**Klasse2000**", for health promotion and prevention of addiction and violence in primary and special needs schools. The programme started in 1991 with 234 classes. Since then, it has reached over 1.7 million children. The effectiveness of the programme has been proven by several studies (e.g. Isensee et al., 2015; Kolip & Greif, 2016). The results of an evaluation study on the long and short term effects, carried out by the Lower

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<sup>26</sup> Other projects for which responsibility or funding is at federal level (ministries, BZgA) can be found here: <https://www.drogenbeauftragte.de/themen/initiativen-und-projekte.html> [accessed: 18 May 2020].

<sup>27</sup> Guidelines and curricula from the *Land* ministries of education and cultural affairs make addiction prevention a compulsory teaching topic.

<sup>28</sup> On the effectiveness of addiction prevention life skills programmes, see also Bühler (2016).

<sup>29</sup> Further information is available at <https://www.kiksup.de/klasse-klasse/das-sagen-andere/evaluation/> and <https://www.uni-giessen.de/fbz/fb03/institute/ifezw/prof/empfi/Forschung/Projekte/evaklasse> [accessed: 9 Jul. 2020].

Saxony Criminological Research Institute (Kriminologische Forschungsinstitut), are expected to be published in 2020<sup>30</sup>.

**"1000 little treasures - health and addiction prevention at primary school"** (1000 Schätze – Gesundheit und Suchtprävention in der Grundschule) is a modular programme to strengthen first grade pupils' psychosocial health, that focuses on their resources and strengths and promotes life skills, exercise and mindfulness. The programme is currently being revised on the basis of the evaluation results (NLS, 2019). The plan is to repeat the programme from the 2020/2021 school year onwards. The Lower Saxony State Office for Addiction Issues (Niedersächsische Landesstelle für Suchtfragen, NLS) implements the programme funded by the GKV together with the network of experts for addiction prevention in Lower Saxony<sup>31</sup>. "1000 little treasures" has also been run in Berlin since 2019.

#### ***New materials for the school setting:***

- The new BZgA teaching material, "Cannabis - materials for addiction prevention in classes 8-12" published in 2020, offers teachers and educational staff factual information and different action modules to enable them to integrate the topic of cannabis prevention into their lessons.
- "Dealing with cannabis use in the school environment. Handbook for observing and taking action" of the NLS, 2020

#### **Local authority setting**

A holistic and enduringly effective addiction prevention needs to involve not only the family<sup>32</sup> and school but also the social living environment of children and adolescents. Local addiction prevention activities are often conducted in inter-authority and supra-local cooperation projects with various local partners. In addition to kindergartens and schools, above all organised and non-organised recreation as well as the public health sector serve as settings for municipal addiction prevention work.

In 2019, the national competition "**Model Strategies of Municipal Drug Prevention**"<sup>33</sup> (Vorbildliche Strategien kommunaler Suchtprävention) was run for the eighth time since 2001 by the BZgA and the Federal Government Commissioner on Narcotic Drugs, with the support of municipal umbrella organisations and the GKV umbrella organisations. This year, the theme is "effective local addiction prevention" and focussed on municipal addiction prevention as a

<sup>30</sup> Further information can be found at <https://www.klasse2000.de/> and <https://kfn.de/forschungsprojekte/klasse2000/> [accessed: 2 Jul. 2020].

<sup>31</sup> Further information can be found at <https://nls-online.de/home16/index.php/praevention/o-suchtpraevention-anschulen#schatz> and in the annual reports 2019 and 2018 of the NLS [accessed: 2 Jul. 2020].

<sup>32</sup> See 2019, 2018 and 2017 Prävention workbooks for the "family" setting.

<sup>33</sup> The winning entries and competition documentation from 2019/2020 and previous years are available at <https://kommunale-suchtpraevention.de> [accessed: 12 May 2020].

whole: prevention across addictions, substance specific prevention (alcohol, tobacco, medicinal drugs, cannabis, synthetic drugs etc.) and the prevention of non-substance-related addiction (including pathological gambling, excessive gaming and internet use). All German cities, local authorities and rural districts were invited to take part, as well as municipal associations and local self-government agencies in city states. The contributions proposed by the municipalities ranged from the sustainable strengthening of municipal structures to reducing consumption in different age groups and improving access routes of vulnerable groups. With 51 entries, the competition met with broad participation across Germany. A jury from science and practice evaluated the competition entries and selected the winners. In September 2020, eleven municipalities were recognized for their exemplary and effective addiction prevention activities.

### Recreational and sport settings

The recreational and sport settings represent an important field of activity for early prevention measures which are universally applied because the majority of children and adolescents belong to a sports club at some point, at least for a short period. Moreover, the fact that sports clubs exist throughout the country guarantees a high degree of accessibility to children from different social strata, including socially disadvantaged children, with a low risk of stigmatising this target group.

The BZgA has various collaborations in this area, including:

- The programme on early addiction prevention **“Make children strong” (Kinder stark machen)**, based on promoting life skills and a local focus. Cooperation with popular sports is particularly important because sports clubs represent an important living environment for children and adolescents. A central component is the BZgA qualification on the topic of early addiction prevention for opinion leaders working in clubs in the field of child and youth work. In the 25th year of its existence, the 2019 initiative was present at 18 sports and family events nationwide, with a total of more than 400,000 visitors<sup>34</sup>. In August 2020, the Federal Government Commissioner on Narcotic Drugs took over the patronage of the participation initiative.
- **“DFB-Give-and-go 2020” (DFB-Doppelpass 2020)**: The objective of this project is to strengthen synergies between schools and clubs in the area of early addiction prevention and in this context the BZgA supports schools and clubs with action packs on addiction prevention topics<sup>35</sup>. From August 2020, the DFB project will continue seamlessly under the name **“Doppelpass 2024”**.

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<sup>34</sup> Further information can be found at <https://www.kinderstarkmachen.de> [accessed: 6 Jul. 2020].

<sup>35</sup> Further information can be found at: <https://www.dfb.de/schulfussball/doppelpass-2020> [accessed: 6 Jul. 2020].

- The "**Children's gymnastics campaign**" ("**Offensive Kinderturnen**"), which focusses on the target group of 3 to 7-year-olds. Up to 2021, the BZgA will be a partner in German Youth Gymnastics (Deutschen Turnerjugend, DTJ). Clubs will be supported by the DTJ in developing networks and cooperations with other institutions and organisations<sup>36</sup>.

The new mobile addiction prevention service from Saxony "**HAPPINESS WANTS YOU**" (**GLÜCK SUCHT DICH** (translator note: the German word "Sucht" means "is looking for" as well as "addiction")) was conceived on behalf of the Saxon State Ministry for Social Affairs and Social Cohesion (Sächsisches Staatsministerium für Soziales und gesellschaftlichen Zusammenhalt) by the Saxony specialist coordination centre for addiction prevention (Fach- und Koordinierungsstelle Suchtprävention Sachsen). The aim is to promote the risk competence and life skills of children and adolescents in Saxony, in order to help these children and adolescents deal with addictive substances and addictive behaviour in a responsible manner. For this project, a double decker bus was converted into a mobile exhibition area: At eight stops, children and adolescents, in both in-school and out-of-school contexts, have the opportunity to playfully engage with the topics of "happiness" and "addiction", and reflect on their attitudes to happiness, risks of use and intoxicants. Various content modules and interactive methods allow for an age-appropriate approach, oriented to regional needs. Existing regional services can also be integrated. The service is also aimed at attachment figures such as parents, teachers and school social workers, as well as youth centre and sport club staff. The regional approach is linked to introductory, further training and counselling events for educational staff, as well as regional experts in addiction prevention and offers the option to strengthen their function as opinion leaders<sup>37</sup>.

### Substance-related measures

**Cannabis:** Since the start of 2019, the **BZgA** has been expanding its **Cannabis prevention measures for adolescents** (Maßnahmen zur Cannabisprävention im Jugendalter) in close coordination with the Federal Government Commissioner on Narcotic Drugs. The aims of the national strategy are to provide education on the health and psychosocial risks of cannabis and promote a critical attitude, to avoid use-related harms by abstinence for as long as possible, and to reduce consumption among adolescents. The measures are primarily aimed at non-users and interested adolescents between 14 and 18 years old but also at parents, teachers and social workers. Among other things, the following will be implemented:

- Online-based, target-group-specific prevention services, directed at the respective overall life environment: The new website, [cannabis-fakten.de](https://www.cannabis-fakten.de) (launched in September 2020) is aimed individually at young people, their attachment figures as well as teachers and professionals. The factually informative website is continuously expanded across all types of

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<sup>36</sup> Further information can be found at <https://www.dtb.de/offensive-kinderturnen> [accessed: 6 Jul. 2020].

<sup>37</sup> Further information can be found at <https://www.gluecksuchtdich.de/> [accessed: 6 Jul. 2020].

media (including short videos, interactive tools, print media) and supplements the established BZgA portal drugcom.de.

- In spring 2020, on initiative of the Federal Government Commissioner on Narcotic Drugs a national ideas competition was launched for the youth-savvy communication of cannabis facts and prevention services on social media, with the winner's idea to be implemented from autumn 2020 ("Make yourself smart!"). The aim is to inform young people of the health risks of cannabis use using social media channels and to educate them on the possible long-term consequences.
- In some *Laender*, established, personal communication prevention services in schools, vocational schools or youth recreation centres (including the course "Cannabis - Quo vadis?" and the "Cannabis prevention toolbox" (Methodenkoffer Cannabisprävention)) will be evaluated, by 2021, as to their effectiveness, optimisation potential and national transferability. For school-based cannabis prevention, new didactic teaching material has been available since 2020 (see above), which will be supplemented by film materials as of 2021.
- In the field of research, the results of a systematic, subject-specific secondary analysis of the "SCHULBUS" data, collected between 2004 and 2008 in various regions, have been available since June 2020 (Baumgärtner, 2020). The aim was to draw conclusions for cannabis prevention and identify reasons as to why adolescents give up cannabis.
- Regular discussions with interdisciplinary experts at government, *Land* and municipality level serves to continuously develop quality assurance. Within the scope of a joint working group, national quality standards for cannabis prevention projects are being formulated.

The "**Cannabis Prevention Course**" (**Cannabis-Präventions-Parcours**) by the Schleswig-Holstein State Office for Addiction Issues (Landesstelle für Suchtfragen Schleswig-Holstein) is aimed at 8th grade pupils nationwide under the slogan "But it's only...". The aims are a critical examination of the subject of cannabis and reflection on personal responsibility and own actions. As well as providing information, the course offers the opportunity to practise and train life skills and problem solving abilities. It encompasses six stations and lasts for two school lessons. It is accompanied by two addiction prevention specialists from regional specialist institutions who are trained on the course. The course was refined in 2018/2019 and evaluated in 2020. It is financed by the Schleswig-Holstein Ministry for Social Affairs, Health, Family and Senior Citizens (Ministerium für Soziales, Gesundheit, Jugend, Familie und Senioren) and the GKV<sup>38</sup>.

In the Project "**The Smoke Detectors**" (**Die Rauchmelder**) by the Lower Saxony State Office of Criminal Investigation (Landeskriminalamt, LKA), two young protagonists provide information on cannabis in various video episodes<sup>39</sup>.

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<sup>38</sup> Further information can be found at <https://lssh.de/cannabis-parcours/> [accessed: 6 Jul. 2020].

<sup>39</sup> Further information can be found at <http://dierauchmelder.de/> [accessed: 14 Jul. 2020].

**Crystal Meth:** In the past, against the background of increasing seizures of crystalline methamphetamine (crystal meth) in Germany and an observed rise in use in the regions bordering the Czech Republic<sup>40</sup>, the prevention of the use of crystal meth became a stated political objective. The high profile of the issue in the media was countered by the BZgA with a fact-based educational strategy which, in particular, aimed to reach at-risk groups with informational materials<sup>41</sup>.

The target group oriented prevention approach was implemented in close cooperation with organisations in *Laender* and local authorities. In Dresden, the problem of the locally increasing prevalence of crystal meth use was tackled with innovative prevention approaches. In the scope of the “**Year of Culture - focus on addiction**” (**Kulturjahr Sucht**) an interface between art, culture and addiction prevention was created. With the aim of promoting life skills and destigmatising addicts, among other things events on addiction prevention were held in public spaces and supported by various cooperation partners. The “Year of Culture - focus on addiction” was developed as a pilot project by the Dresden Public Health Department (Gesundheitsamt) was funded up to 2019 by the BZgA; a handout for adaptation in other municipalities is being published in August 2020<sup>42</sup>.

**Legal highs:** Various online projects and websites<sup>43</sup> provide extensive information on the risks of consuming so-called legal highs. In Mecklenburg-Western Pomerania, the Regional Office for Addiction Prevention (Regionalstelle für Suchtvorbeugung), together with the Anklam Police Inspectorate, has initiated a cooperative, **film-based student project** on the subject of legal highs. The short film aims to shape prevention from the perspective of young people and can be used as a motivational tool in prevention work.<sup>44</sup>

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<sup>40</sup> See on this point also the results of the SCHULBUS study (Baumgärtner & Hiller, 2016) and the JEBUS study (Baumgärtner & Hiller, 2018).

<sup>41</sup> Available at <https://www.bzga.de/infomaterialien/suchtvorbeugung/> and <https://www.dhs.de/informationen/material/broschueren-und-faltblaetter.html> [accessed: 6 Jul. 2020].

<sup>42</sup> Further information can be found at <https://www.dresden.de/de/leben/gesundheit/beratung/sucht/kulturjahr-sucht/veranstaltungen.php> [accessed: 6 Jul. 2020].

<sup>43</sup> For example <https://www.drugcom.de/drogenlexikon/buchstabe-l/legal-highs/>, <https://mindzone.info/>, <https://legal-high-inhaltsstoffe.de> and <https://infoeorse-neue-drogen.de> [accessed: 6 Jul. 2020].

<sup>44</sup> Further information is available at <https://www.lakost-mv.de/aktuelles/detail/legal-highs-ein-kooperatives-filmprojekt-in-der-drogenpraevention> and <https://www.youtube.com/watch?v=Ky0oxU88jy4> [accessed: 7 Jul. 2020].

### ***New informational materials:***

- Using funding from the BZgA, the following ***DHS informational materials***<sup>45</sup> on the topic of illicit drugs were updated in 2019 and 2020: “Basic information on cannabis” (Basisinformation Cannabis); Handbook “Addiction prevention for children in residential care” (Suchtprävention in der Heimerziehung); “Addiction problems in the family” (Suchtprobleme in der Familie); “Addiction problems in the workplace” (Suchtprobleme am Arbeitsplatz); “Smoking pot is risky - a booklet in simple language” (Kiffen ist riskant - Ein Heft in Leichter Sprache); “Addiction and its substances - amphetamine & ecstasy”/“cannabis”/“cocaine, crack & freebase” (Die Sucht und ihre Stoffe - Amphetamin & Ecstasy/Cannabis/Kokain, Crack & Freebase); “Basic information on NPS” (Basisinformation NPS). A brochure on crystal meth in simple language is currently being produced and will be available from 2021.
- The Thuringia Ministry for Labour, Social Affairs, Health, Womens Affairs and Family Affairs (Ministerium für Arbeit, Soziales, Gesundheit, Frauen und Familie) has produced a **“Thuringia guide on the subject of ‘crystal meth’” - prevention and support with group-specific services 2019/2020 (Thüringer Leitfaden zum Thema “Crystal Meth” - Prävention und Hilfen mit gruppenspezifischen Angeboten)**<sup>46</sup>.

### **Cross-substance (online) media, apps, websites**

An overview commissioned by the BZgA on apps currently available on the market to change behaviour (substance use, behavioural addictions) is expected in 2021.

As the combination of media-supported and classic forms of learning can be helpful in gaining the attention of adolescents and supporting them to develop a critical attitude to addictive substances, **apps** on tobacco (“Tobacco talk” (Tabak-Talk)), alcohol (“Whatsalc” (WhatsAlk)) and media (“Whats on”) were developed by the ginko Foundation for Prevention (ginko Stiftung für Prävention)<sup>47</sup>.

In the project **“Your life belongs to you” (Dein Leben gehört dir)**, schools in the *Land* programme **“Good, healthy school”** (“Gute gesunde Schule”) in Mecklenburg-Western Pomerania have been supported in their addiction prevention work, with the focus on cannabis and other illicit drugs, by means of an app<sup>48</sup>.

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<sup>45</sup> Materials can be obtained from: <https://www.dhs.de/informationsmaterial/broschueren-und-faltblaetter.html> [accessed: 6 Jul. 2020].

<sup>46</sup> Available at <https://www.tmasgff.de/publikationen#pub33> [accessed: 6 Jul. 2020].

<sup>47</sup> Further information can be found at <https://www.ginko-stiftung.de/landeskoordination/Apps.aspx> [accessed: 15 Jul. 2020].

<sup>48</sup> Further available can be found at <https://www.lakost-mv.de/suchtpraevention/angebote/appgestuetzte-interaktive-suchtpraevention> [accessed: 15 Jul. 2020].

The podcast “**Youth addiction Rosenheim**” (**Jugend Sucht Rosenheim**) by Diakonie Oberbayern tackles addiction and substance-specific topics over several episodes<sup>49</sup>.

Diakonie Niedersachsen has videos available online in different languages, with advice on the topic of addiction, on the channel “**Your counselling experts**” (**Deine Beratungsexperten**)<sup>50</sup>.

The website **feelok.de** is a health platform for adolescents, to promote their health competence and prevent addictive substance use. Didactic teaching materials are available for teachers. The D-A-CH network has been supported by feelok.de since 2011, by feel-ok.at since 2004 and by feel-ok.ch since 1999<sup>51</sup>.

In 2020, the **blu:app** from blu:prevent (Blue Cross (Blaues Kreuz)) was completely overhauled and equipped with new features (for example new topic areas, design, digital support in the form of a chatbot system<sup>52</sup>).

The “**BZgA Infoline for addiction prevention**” (**BZgA-Infotelefon zur Suchtvorbeugung**) provides personal and anonymous counselling for problems related to drugs (+49 221 892031). Additionally, the nationwide “**Drug & addiction hotline**” (**Drogen & Sucht-Hotline**) is available 24 hours a day at a new telephone number (+49 1806 313031)<sup>53</sup>.

### 1.2.3 Selective prevention (T1.2.3)

Selective prevention is aimed at groups of people who have an increased risk of developing a substance dependence - mostly without exhibiting it. The target groups of selective prevention measures are often approached in recreational settings.

The National Strategy on Drug and Addiction Policy (Nationale Strategie zur Drogen- und Suchtpolitik) envisages a stronger focus on at-risk groups (Die Drogenbeauftragte der Bundesregierung, 2012) and sees the need “... to develop specific services for at-risk adolescents in the field of selective prevention” (ibid)<sup>54</sup>.

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<sup>49</sup> Further information can be found at <https://soziale-dienste-obb.de/2020/04/16/postcast-jugend-sucht-rosenheim/> bzw. <https://soundcloud.com/user-894932933-316053014> [accessed: 14 Jul. 2020].

<sup>50</sup> [https://www.youtube.com/channel/UC2kEq-KByZ\\_KPZ0Ryu4uU\\_A/featured](https://www.youtube.com/channel/UC2kEq-KByZ_KPZ0Ryu4uU_A/featured) [accessed: 15 Jul. 2020]; previously „Deine Suchtexperten“.

<sup>51</sup> Further information can be found at [https://www.feelok.de/de\\_DE/ueber\\_feelok/ueber\\_feelok.cfm](https://www.feelok.de/de_DE/ueber_feelok/ueber_feelok.cfm) [accessed: 15 Jul. 2020].

<sup>52</sup> Further information can be found at <https://bluprevent.de/angebote/die-bluapp/> [accessed: 15 Jul. 2020].

<sup>53</sup> <https://www.bzga.de/service/infotelefone/suchtvorbeugung/> or <https://www.sucht-und-drogen-hotline.de/> Addresses of drug counselling centres from all over the country: <https://www.bzga.de/service/beratungsstellen/suchtprobleme> [accessed: 26 Jun. 2020].

<sup>54</sup> In the “Prevention manual” by the GKV, “Children and adolescents, especially those at risk of addiction or from families affected by addiction or by mental health problems, in the community” are explicitly named as a target group. Further information can also be found at <https://www.gkv-buendnis.de/gesunde-lebenswelten/kommune/themen-und-inhalte/suchtprevention-in-der-kommune/kinder-aus-suchtblasteten-familien/> [accessed: 21 Aug. 2020]. Projects specifically for children from families affected by addiction are presented in the Prevention workbooks from previous years.

**Note:** As there are many different projects from a wide variety of providers in Germany, an exhaustive listing is almost impossible. (New) projects in selective prevention are listed, purely by way of example, in this reporting year. A comprehensive presentation of the projects can be found in the 2019 and 2018 Prevention workbooks<sup>55</sup>.

The BZgA web portal on drugs and addiction prevention, "**drugcom.de**", set up in 2001, encompasses quality assured information on legal and illegal addictive substances. Adolescents and young adults up to 25 years old who occasionally or regularly use drugs, are provided with counselling programmes and programmes for changing behaviour. This includes tests to assess their own use behaviour, tools to determine prevalence figures and explanatory videos on different substances on the drug.com YouTube channel. In 2020, the new clip "How do I give up smoking?" (Wie höre ich mit dem Kiffen auf?) was released<sup>56</sup>. In addition to a more drug-savvy target group, opinion leaders from the areas of school, youth recreation, addiction prevention, addiction counselling or addiction support are important target groups. With more than 400,000 visitors per month, drugcom.de is one of the most visited websites in Germany in the area of addiction prevention was overhauled in the course of a relaunch in 2020<sup>57</sup>.

### Music and party settings

These approaches can be found in numerous scene or party-based projects which are offered in many larger towns and cities. Activities within such party projects are often developed by specialist entities or addiction prevention facilities and implemented in cooperation with local clubs, discos and organisers of music and party events<sup>58</sup>.

Helbig et al. (2019) examined use behaviour in the Berlin party scene and identified desired support services to reduce the risks of use.

The new project "**SONAR | Safer Nightlife Berlin**" is a cooperation between Berlin prevention and addiction support projects, Clubmission Berlin and other partners commissioned by the Senate Department of Health, Care and Gender Equality (Senatsverwaltung für Gesundheit, Pflege und Gleichstellung). In terms of providing information and skills, visitors to Berlin's nightlife are educated about the risks of consuming alcohol and other drugs, and sensitised to the topics of consumption and risk management in the party setting: between 2018 and 2019, numerous programmes took place on-site in clubs and at parties (personal-communicative interventions, safer use counselling), club staff were trained on risk management in clubs and at events on the basis of an assessment, primarily on substance-related information and risks,

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<sup>55</sup> Other projects for which responsibility or funding is at federal level (ministries, BZgA) can be found here: <https://www.drogenbeauftragte.de/themen/initiativen-und-projekte.html> [accessed: 18 May 2020].

<sup>56</sup> To date, six clips on different substances and topics have been created. These clips have spread widely, with more than 900,000 views: up to May 2020, 14,300 subscribers had already been gained by drugcom.de's YouTube channel: <https://www.youtube.com/channel/UC3HKTiEt5MebQKd0wxx4o1Q>.

<sup>57</sup> Further information can be found at <https://www.drugcom.de/> [accessed: 13 Jul. 2020].

<sup>58</sup> See the 2019 Prevention workbook for other projects and initiatives.

emergencies in connection with substance use and reflection on use, and “party drug consultations” were held (individual counselling and support, promoting reflectivity and consumption competence) as well as “club talks” (open discussions with party guests)<sup>59</sup>. The central components of the measures carried out were evaluated by the delphi Gesellschaft für Forschung<sup>60</sup> (research institute).

With the aim of preventing health harms, the Berlin pilot project “**Drug checking**” intends to give drug users in future the possibility to have samples of their substances such as cocaine, cannabis or amphetamine, chemically analysed on site, on an anonymous basis in counselling facilities and have them analysed for possible impurities or for too high active substance concentrations. The planned start for the project is in 2020<sup>61</sup>.

The project “**Partyzelt - the next generation**” is expected to start in autumn 2020 in Baden-Württemberg. The Tuttlingen district has hosted the annual Southside Festival since 1999, with up to 60,000 visitors. There has been a prevention tent on the festival grounds since 2018. Within the framework of workshops, selected adolescents are trained by specialists to become Peers<sup>62</sup> and supported in developing and implementing prevention measures. The trained Peers offer counselling to other adolescents and the target group of adolescents with high-risk use behaviour, directly where the consumption of intoxicants takes place. Together with the Peers, new addiction prevention measures are to be developed, implemented and refined for the Southside Festival 2020. The responsible body is Fachstelle Sucht Tuttlingen (Baden-Württemberg Land Authority for Prevention and Rehabilitation, Baden-Württembergischer Landesverband für Prävention und Rehabilitation).

### **People with a migration and/or refugee background**

Within the scope of the “**LOGIN**” project (living situation of adult refugees in Germany), information is currently being collected on the prevalence of substance use among refugees as well as the utilisation of addiction support services by substance using refugees. The 2018-2021 project is being carried out by the Centre for Interdisciplinary Addiction Research (Zentrum für interdisziplinäre Suchtforschung) of Hamburg University and funded by the BMG. Results are expected in 2021<sup>63</sup>.

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<sup>59</sup> Further information can be found at <https://safer-nightlife.berlin/> [accessed: 9 Jul. 2020].

<sup>60</sup> Further information can be found at <https://delphi.de/forschen/praevention-im-partykontext-evaluation-von-sonar-safer-nightlife/> [accessed: 9 Jul. 2020].

<sup>61</sup> Further information is available at: <https://www.aerzteblatt.de/nachrichten/104100/Drug-Checking-in-Berlin-soll-bald-an-den-Start-gehen> [accessed: 9 Jul. 2020]. Information on the topic of drug checking can be found in the Harms and Harm Reduction workbook.

<sup>62</sup> Peer education approaches are based on the assumption that other persons of the same age group are better able than teachers or counselling professionals to create favourable conditions for the initiation of learning processes. This can be attributed to, amongst other things, a greater social connection between peers, the use of common vocabulary and greater authenticity (Backer & Schönbach, 2002).

<sup>63</sup> Further information is available at <http://www.zis-hamburg.de/projekte/projektetails/LOGIN/> [accessed: 13 Jul. 2020].

In the scope of the pilot project **“Addiction prevention for refugee girls and boys”** by the Baden-Württemberg Regional Authority for Prevention and Rehabilitation (Baden-Württembergischen Landesverband für Prävention und Rehabilitation, bwlv), refugee adolescents and youth support professionals are to be sensitised, psychological barriers to the support system broken down and suitable routes of access created. Proven and effective methods, materials and content in addiction prevention were refined and adapted to the target group: due to language factors, these are often image-based, audio-visual and interactive; the implementation takes place in gender-specific settings. An evaluation (standardised questionnaire in simple language, before-and-after survey with over 80 participants aged between 15 and 24 years old) shows positive effects on addiction-related knowledge development and altered use behaviour in relation to tobacco and alcohol. The pilot project has been funded by the Baden-Württemberg Municipal Association for Youth and Social Affairs (Kommunalverband für Jugend und Soziales, KVJS) and is being tested in the Schwarzwald-Baar district. The modules developed are intended to be implemented by the bwlv throughout the *Land*<sup>64</sup>.

In spring 2019, the five-year joint project **“PREPARE”** was started, focussing on the prevention and treatment of addiction problems among refugees. PREPARE is part of the Federal Ministry of Education and Research’s (Bundesministerium für Bildung und Forschung, BMBG) funding initiative on the psychological health of refugees and consists of four subprojects on the topics of addiction and refugee flight: a “Skills training on affect regulation” (ZIS Hamburg), “Recording substance use and principles of good practice in support services” (Charité, Berlin), the “Culture-sensitive recording of substance use disorders” (Emden University of Applied Sciences) and a “Culturally sensitive digital brief intervention for young refugees to reduce problem alcohol and cannabis consumption (BePrepared)” (German Institute for Addiction and Prevention Research, Cologne and the Technical University Berlin (Deutsches Institut für Sucht- und Präventionsforschung, Köln and Technische Universität Berlin)). The DHS is responsible for dissemination within the network, will set up an internet platform and hold annual workshops with experts<sup>65</sup>.

**“Flight – Trauma – Addiction: Services for prevention and care” (Flucht - Trauma - Sucht: Angebote für Prävention und Versorgung)** from the Network for traumatised refugees in Lower Saxony (Netzwerk für traumatisierte Flüchtlinge in Niedersachsen e.V.) started in summer 2019 in cooperation with the NLS. The aim of the project is to improve access to the different support systems (addiction and trauma support) for traumatised and addicted refugees and to prepare professionals as well as possible for the counselling and care of traumatised refugees with addiction problems (NLS, 2020). A “Survey of the status quo and needs in the counselling centres for addiction and addiction prevention in Lower Saxony” was carried

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<sup>64</sup> Further information can be found at <https://www.bw-lv.de/aktuelles/detail/artikel/kvjs-foerdert-modellprojekt-zur-suchtpraevention/> [accessed: 6 Jul. 2020].

<sup>65</sup> Further information is available at <https://www.gesundheitsforschung-bmbf.de/de/prepare-praevention-und-behandlung-von-suchterkrankungen-bei-gefluchteten-8826.php> [accessed: 10 Jul. 2020].

out for this purpose in early 2020<sup>66</sup>. The project will be funded for a period of three years by the EU Asylum, Migration and Integration Fund and the Lower Saxony Ministry for Social Affairs, Health and Gender Equality (Ministerium für Soziales, Gesundheit und Gleichstellung).

The Regional Authority of Westfalen-Lippe Coordination Office for Drug Related Issues (LWL-Koordinationsstelle Sucht) has updated its compilation of media, materials and internet services on **“Addiction prevention for young people with a migration and/or refugee background” (Suchtprävention mit Jugendlichen mit Migrations- und/oder Fluchthintergrund)** (as of February 2020).

### **People with physical and/or mental impairments**

The aim of the national pilot project **“TANDEM - specific help for specific needs in the disabled and addiction support network” (TANDEM – Besondere Hilfen für besondere Menschen im Netzwerk der Behinderten- und Suchthilfe)**, which is due to be funded by the BMG up to 2021, is to be able to offer adequate support to people with intellectual disabilities and an addiction problem, by tailoring services to their needs. One facility from addiction care and one from disabled care operate together as a “Project Tandem”. The project has been expanded since August 2019 to cover the topic of prevention of internet-related disorders for people with intellectual disabilities/learning difficulties. TANDEM is implemented in three pilot locations nationally and is scientifically evaluated by FOGS GmbH and backed up by an advisory board<sup>67</sup>.

### **Pregnant substance users**

The BMG-funded pilot study **“Substance use during pregnancy and its consequences for mother and child - focus on cannabis (CaSCH-T1)”** (Substanzgebrauch während der Schwangerschaft und seiner Folgen für Mutter und Kind – Fokus Cannabis (CaSCH-T1)) was carried out from September 2018 to April 2019. The aims were to determine the prevalence of substance use during pregnancy, the consequences of the use of illicit substances during pregnancy for mother and child, the level of knowledge with regard to the risk of cannabis use during pregnancy and the effectiveness of interventions for treating chronic cannabis use during pregnancy. To this end, a systematic literature search and non-interventional, anonymous online survey were conducted: the limited data available on substance use during pregnancy was not sufficient for evidence-based conclusions. While a high number of participating pregnant women and mothers in the online survey could reflect a sensitivity to the topic within the target group, the low number of participating doctors is considered “alarming” in view of the risks of psychotropic substances for mother and child. It is also possible to conclude the need for information and training in corresponding occupational groups (Hoch et al., 2019; Apelt et al., 2019).

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<sup>66</sup> Further information can be found at <https://nls-online.de/home16/index.php/194-flucht-trauma-sucht-ergebnisse-der-umfrage> [accessed: 20 Jul. 2020].

<sup>67</sup> Further information can be found at <https://www.lwl-ks.de/de/TANDEM/> [accessed: 13 Jul. 2020].

In collaboration with the German Medical Association (Bundesärztekammer, BÄK), the BZgA has developed the **new guidelines** “Addressing alcohol consumption among patients”. Medical manual for the prevention and treatment of high-risk, harmful and dependent use” (Alkoholkonsum bei Patientinnen und Patienten ansprechen. Ärztliches Manual zur Prävention und Behandlung von riskantem, schädlichem und abhängigem Konsum) in the scope of the adult campaign “Alcohol? Know your limit.” (Alkohol? Kenn dein Limit), which is aimed at practice based doctors and clinicians. All content is based on the recommendations of the S3 guidelines “Screening, diagnoses and treatment of alcohol related disorders” (Screening, Diagnose und Behandlung alkoholbezogener Störungen) by the Working Group of the Scientific Medical Professional Societies (Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften e. V.) (July 2014). The guidelines provide information on low-risk, high-risk or harmful and dependent alcohol consumption, and how medical diagnoses can be made. It also makes recommendations and gives advice on medical brief intervention, in order to positively influence alcohol consumption behaviour among patients. It is a complete update and revision of the 2009 “Brief intervention for patients with alcohol problems” (Kurzintervention bei Patienten mit Alkoholproblemen).

**New educational videos**<sup>68</sup> on alcohol during pregnancy have been released in 2020: “Alcohol during pregnancy” (Rhineland-Palatinate State Office for Health Promotion) (Alkohol in der Schwangerschaft, (Landeszentrale für Gesundheitsförderung in Rheinland-Pfalz)) and “Why is alcohol dangerous during pregnancy?” (Hesse State Office for Addiction Issues) (Warum ist Alkohol in der Schwangerschaft gefährlich? (Hessische Landesstelle für Suchtfragen)).

Up to 2020, the needs-oriented, interdisciplinary and cross-system pathway, the “**Dresden clinical pathway for crystal meth**” (**Dresdner Versorgungspfad Crystal**), will be evaluated with respect to the treatment of methamphetamine using pregnant women. In addition, a handbook will be produced on how the concept can be implemented in other regions of Germany, to care for drug using mothers and young women. Results will be published this year<sup>69</sup>, see also Mathiebe et al. (2019).

In addition, the BZgA provides information on substance use during pregnancy on its **various websites**<sup>70</sup>. Other **guidelines and brochures** exist on the topic, such as the position paper “Drugs – Pregnancy – Child”, (Drogen – Schwangerschaft – Kind) from the Professional Association for Drugs and Addiction Support (Fachverband Drogen und Suchthilfe e.V.), the manual

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<sup>68</sup> <https://www.youtube.com/watch?v=r3G1LSi3kkE> or <https://www.youtube.com/watch?v=3GpAYPmNR5c> [accessed: 13 Jul. 2020].

<sup>69</sup> The “Dresden clinical pathway for crystal meth” has been implemented since 2015 in the routine clinical activity of the University Hospital Carl Gustav Carus in Dresden and is an example of the care and treatment of methamphetamine using women within the context of parenthood. Further information can be found at <https://tu-dresden.de/med/mf/fph/forschung/forschungsprojekte> [accessed: 13 Jul. 2020].

<sup>70</sup> <https://www.drugcom.de/haeufig-gestellte-fragen/fragen-zu-schwangerschaft-und-drogen/>, <https://www.kenn-dein-limit.de/alkohol/schwangerschaft-und-stillzeit/alkohol-in-der-schwangerschaft/>, <https://www.rauchfrei-info.de/de/informieren/rauchen-gesundheit/schwangerschaft/>, <https://www.familienplanung.de/schwangerschaft/das-baby-vor-gefahren-schuetzen/drogen/> [accessed: 13 Jul. 2020]

“Pregnant, Addiction, Support” (Schwanger, Sucht, Hilfe) from the Charité Universitätsmedizin Berlin, the “Recommendations for dealing with addicted pregnant women and expectant families in obstetric clinics” (Handlungsempfehlungen zum Umgang mit suchtblasteten Schwangeren und werdenden Familien in geburtshilflichen Kliniken) from the Charité Universitätsmedizin Berlin, vista, the S3 guidelines on “Methamphetamine related disorders” (Methamphetaminbezogene Störungen) (in chapter 7.1 “Pregnant women, young mothers and prenatal harms”, (Schwangere, junge Mütter und pränatale Schädigungen)), the current “Addiction medicine” (Suchtmedizin) guidelines from the Medical Association of Thuringia (Landesärztekammer) (in chapter 3.2 “Addiction during pregnancy”, (Sucht in der Schwangerschaft)) and brochures such as “You’re pregnant – and taking drugs?” (Du bist schwanger – und nimmst Drogen?) from the DHS.

Results of the funding focus “New prevention approaches for the avoidance of addictive substance use during pregnancy and breastfeeding” (Neue Präventionsansätze zur Vermeidung von Suchtmittelkonsum in Schwangerschaft und Stillzeit) can be found on the BMG website<sup>71</sup>.

#### 1.2.4 Indicated prevention (T1.2.4)

Indicated prevention is focused on the identification of vulnerable people, in order to counteract individual risk factors and to support and strengthen this group's personal development as early as possible. The "usual" prevention measures are often almost impossible to apply when working with socially disadvantaged children and adolescents, as such measures do not always meet the needs of that target group.

**Note:** As there are many different projects from a wide variety of providers in Germany, an exhaustive listing is almost impossible. (New) projects in indicated prevention are listed, purely by way of example, in this reporting year. A comprehensive presentation of the projects can be found in the 2019 and 2018 Prevention workbooks<sup>72</sup>.

Seidel, Morgenstern & Hanewinkel (2020) identified the following risk factors for high-risk cannabis use: male, older, presence of a migration background, higher “sensation seeking”, early age of first use of cannabis, more frequent cannabis use by friends during schooltime, unstable relationship to parents and lower mental health of parents. No connections were found with the presence of an ADHD diagnosis, socio-economic status and style of parenting. The quality of the relationship in the parental home, as well as an early entry to cannabis use, are potentially influenceable risk factors (ibid.).

In addiction prevention, internet based interventions have been increasingly used successfully to reduce problem substance use: this is also the case with the online cessation programme

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<sup>71</sup> <https://www.bundesgesundheitsministerium.de/ministerium/ressortforschung/drogen-und-sucht/praevention-des-suchtmittelkonsums/foerderschwerpunkt-neue-praeventionsansaetze-zur-vermeidung-von-suchtmittelkonsum-in-schwangerschaft-und-stillzeit.html> [accessed: 13 Jul. 2020].

<sup>72</sup> Other projects for which responsibility or funding is at federal level (ministries, BZgA) can be found here: <https://www.drogenbeauftragte.de/themen/initiativen-und-projekte.html> [accessed: 18 May 2020].

“**Quit the Shit**”, which is integrated into the internet platform [drugcom.de](http://drugcom.de) (see section 1.2.3) and offers support in reducing or ceasing cannabis use through professional and specially trained counsellors. The central objective is to reduce users' cannabis consumption significantly within 28 days<sup>73</sup>. Since the start of the programme, more than 9,000 people have benefited from the service.

The follow-up project to “Women’s crystal meth use” (Crystal Meth-Konsum von Frauen) (Staudenmeyer, Kaschuba & Stumpp, 2018) addresses the subject of **gender and diversity in the counselling of crystal meth users (Gender- und Diversity in der Beratung von Crystal Meth-Konsumierenden)**. The project is aimed at the dissemination and deepening of research results on gender aspects of crystal meth use and gender and diversity-conscious professional work with crystal meth users, in a dialogue between research and practice. To this end, previous scientific findings on gender aspects of crystal meth use and the consequences for the professional support of crystal meth users in discussion with addiction support facilities, the support system beyond it and other related social areas will be further deepened in a diversity-conscious perspective by means of scientific led, practice-oriented workshops. The project is being funded by the BMG from April 2020 to November 2021 and is taking place in cooperation with the Institute of Educational Science (Institut für Erziehungswissenschaft) at Tübingen University<sup>74</sup>.

“**SHIFT parent training (Shift-Elterstraining)**”, a group programme for methamphetamine dependent parents with children was developed in the scope of the project “Crystal meth and family II” (Crystal Meth und Familie II), which is implemented and evaluated (Dyba et al., 2019) in seven practice locations in regions particularly affected by crystal meth use (Saxony, Thuringia). The standardised treatment and prevention manual was published in 2019 (Klein, Moesgen & Dyba, 2019). In the follow-up project “**SHIFT Plus**”, the intervention was further developed for the entire area of dependence on illegal substances (opioids, cannabis, stimulants as well as multiple substance use and mixed use). The nationwide implementation was carried out in ten practice locations in collaboration with addiction and youth support. Within the scope of a randomised controlled research design, SHIFT Plus is being reviewed with respect to acceptance and effectiveness. Initial results are expected from 2020. The project is being funded by the BMG up to 2021 and, once again, implemented by the DISuP at the KatHO NRW<sup>75</sup>.

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<sup>73</sup> Further information can be found at <https://www.quit-the-shit.net/qts/> and Jonas et al. (2018); Jonas et al. (2019); Tossmann et al. (2011).

<sup>74</sup> Further information can be found at <http://www.tifs.de/projekte/> [accessed: 13 Jul. 2020] and Staudenmeyer, Kaschuba & Stumpp (2018).

<sup>75</sup> Further information can be found at <http://www.shift-elterstraining.de> [accessed: 15 Jul. 2020].

### 1.2.5 Additional information (T1.2.5)

## 1.3 Quality assurance of prevention interventions (T1.3)

### 1.3.1 Standards, guidelines and targets (T1.5.1)

The "**National Strategy on Drug and Addiction Policy**" (**Nationale Strategie zur Drogen- und Suchtpolitik**) stipulates that addiction prevention measures have to be tested for their effectiveness and relevance. Moreover, to increase the effectiveness of addiction prevention measures, a stronger focus on at-risk groups is provided for (Drogenbeauftragte der Bundesregierung, 2012).

Good examples of the central factors in increasing the effectiveness and efficiency of addiction prevention are evaluation, networking and transfer. In order to ensure a structured and systematic exchange of information and experience, in recent years structures have successfully been developed and cooperations agreed at various levels with almost all relevant parties involved in addiction prevention. These include, for example, the development of quality standards, the further development of existing quality assurance measures and the deployment of recognised quality assurance instruments in addiction prevention.

In this context, the "BZgA-Laender cooperation group on addiction prevention" (BZgA-Länder-Kooperationskreis Suchtprävention) (see section 1.1.2) provides direction, as do the events and expert conferences of the German Monitoring Centre for Drugs and Drug Addiction (Deutschen Beobachtungsstelle für Drogen und Drogensucht, DBDD). In this context the DBDD workshop "Addiction seeks allies - municipalities as designers and partners"<sup>76</sup> (Sucht sucht Verbündete – Kommunen als Gestalter und Partner) should be mentioned), of the BZgA, of the DHS, of professional addiction associations as well as by many other parties involved.

Roughly every two years, one or more of the 16 *Laender* represented in the "BZgA-Laender cooperation addiction prevention working group" (BZgA-Länder-Kooperationskreis Suchtprävention) organises a nationwide, BZgA-funded expert conference on the topic of "**Quality assurance in addiction prevention**" (Qualitätssicherung in der Suchtprävention). The two-day expert conference provides a forum for the exchange of research and practice knowledge through plenary lectures and workshops and has the aim of making the professionals on the ground familiar with the quality assurance instruments currently in use in addiction prevention, so that the practical utilisation of these instruments will be promoted at regional and municipality levels. The target group of the "expert conference on quality assurance" (Fachtagung zur Qualitätssicherung) is therefore primarily the addiction prevention professionals from the municipalities allocated to the *Land* bodies. In 2018, the conference took place in

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<sup>76</sup> Further information can be found at <https://www.dbdd.de/projekte-tagungen/projekte-und-tagungen/> [accessed: 21 Jul. 2020].

Potsdam<sup>77</sup>. The sixth meeting in Lübeck, scheduled for 2020, was postponed to 2021 due to the coronavirus pandemic.

Commissioned by the BZgA, the IFT compiled The "Expert report on the effectiveness of addiction prevention measures" ("Expertise zur Wirksamkeit suchpräventiver Maßnahmen") (Bühler & Thrul, 2013), commissioned by the BZgA and produced by the IFT, was updated once more in 2018 and published in 2020. The aim of the publication "**Expertise on addiction prevention 2020**" (**Expertise zur Suchtprävention 2020**) (Bühler, Thrul & Gomes de Matos, 2020) is to comprehensively present the current state of scientific knowledge on the effectiveness of addiction prevention and to use it as a basis for deriving guidelines for action for addiction prevention practice. High quality overview papers such as reviews and meta-analyses of effective addiction prevention measures were systematically recorded in various databases, comprehensively presented and evaluated in the period 2012 to 2017. The conclusions for practical implementation are broken down into universal and selective prevention measures and related to different settings such as family, school, higher education, media, healthcare, municipality and legal frameworks. Thus professionals are given guidance as to which prevention effect can be expected with which prevention approach in the different settings. The expert report is aimed at professionals, decision makers, planners and people in positions of responsibility, as well as teachers in addiction prevention. It makes it possible to consider current prevention research knowledge in practice and teaching. In order to support the dissemination of the results, additional factsheets, commissioned by the BZgA, are currently being created (summaries of the core statements). A detailed presentation and discussion with addiction prevention professionals will take place at the "Quality in Addiction Prevention" in Lübeck which has been postponed to 2021.

Funded by the BZgA on the basis of the Cologne "**Memorandum on the evidence base in addiction prevention**" ("**Memorandum zur Evidenzbasierung in der Suchtprävention**") (expert group "Cologne Conference" (Kölner Klausurwoche), 2014) between 2019 and 2020 recommendations for the successful design of sustainably effective addiction prevention (Hoff & Schlömer, 2020a, b) developed which, as practice-oriented instructions, help to ensure the quality of addiction prevention and to establish evidence-based addiction prevention in Germany. The recommendations were developed both for specialists and managers in the practical work of addiction prevention as well as for decision-makers in management positions in agencies and associations, in politics, etc<sup>78</sup>.

With the online database "**Green List Prevention**" (**Grüne Liste Prävention**), the Lower Saxony *Land* Crime Prevention Council (Landespräventionsrat) offers a collection of examples of good practice in the prevention of addictive behaviour, violence, crime and other problem behaviours in children and adolescents. In the database, evaluated prevention programmes in

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<sup>77</sup> 2018 documentation available at <https://www.blsev.de/service/veroeffentlichungendownloads/tagungsdokumentation.html> [accessed: 12 May 2020].

<sup>78</sup> Further information and download of the papers can be found at <https://www.katho-nrw.de/?id=12191> [accessed: 21 Oct. 2020].

Germany are categorised according to the evidence level of the underlying studies and can be ordered according to target groups, settings and relevant risk/protection factors<sup>79</sup>.

Evidence-based prevention programmes are published at European level by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) in the online database “**XChange**”: 13 of the total of 44 programmes listed were evaluated in Germany, among other places (status: May 2020)<sup>80</sup>.

The documentation system “**Dot.sys**” has, since 2006, delivered extensive information on addiction prevention measures implemented in Germany. Following a comprehensive revision in terms of specialist content as well as security and data protection law, the database has been available once again to addiction prevention professionals since January 2019 for the documentation and evaluation at facility and *Land* level (see section 2.1).

“**PrevNet**”, a joint project by the BZgA and the *Laender* and a submodule of the multidisciplinary online platform **inforo**, networks the work of addiction prevention professionals, for example via protected working groups or the presentation of their own projects and events<sup>81</sup>.

The “**International standards on drug use prevention**” (UNODC & WHO, 2018), updated in their second version, have been available in German since 2019<sup>82</sup>. The 2013 “**European drug prevention quality standards**” (EDPQS) of the EMCDDA have also been available in German since 2020.<sup>83</sup>

“**DEVACHECK**” (previously *Devasys*) is a new web-based platform for the documentation and self-evaluation of health-related prevention measures. The system was developed based on a general evaluation scheme, the RE-AIM model, and tailored to an evaluation of target-group and setting-specific prevention and health promotion projects. The platform is free to use. The simple operation of the modules enables users to plan, structure, document and evaluate projects or measures in a short time. DEVACHECK was developed by the BZgA and the Leibniz Institute for Prevention Research and Epidemiology - BIPS (Leibniz-Institut für Präventionsforschung und Epidemiologie)<sup>84</sup>.

On the initiative of the working group on addiction support and financed by the BMG, the “Essen guiding principles on the digital transformation in addiction support” (Essener Leitgedanken zur digitalen Transformation in der Suchthilfe) were created on the basis of an expert

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<sup>79</sup> <https://www.gruene-liste-praevention.de> [accessed: 12 May 2020].

<sup>80</sup> <https://www.emcdda.europa.eu/best-practice/xchange> [accessed: 12 May 2020].

<sup>81</sup> [www.inforo.online/prevnet](http://www.inforo.online/prevnet) [accessed: 12 May 2020].

<sup>82</sup> [https://www.bundesgesundheitsministerium.de/service/publikationen/drogen-und-sucht/details.html?bmg\[pubid\]=3332](https://www.bundesgesundheitsministerium.de/service/publikationen/drogen-und-sucht/details.html?bmg[pubid]=3332) [accessed: 12 May 2020].

<sup>83</sup> <https://thueringer-suchtpraevention.info/europaeische-qualitaetsstandards-zur-suchtpraevention-edpqs/> [accessed: 12 May 2020].

<sup>84</sup> Further information can be found at <https://www.devacheck.de/devacheck.html> [accessed: 9 Jul. 2020].

discussion in January 2020 on the subject of **“Digitisation in addiction support” (Digitalisierung in der Suchthilfe)**<sup>85</sup>.

### **Qualification in addiction prevention/addiction support**

Within the scope of the national pilot project **“Digital lodesmen” (“Digitale Lotsen”)**, launched in 2019, the Hesse State Office for Addiction Issues (Hessische Landesstelle für Suchtfragen) is developing a curriculum, together with digitisation experts, that will form the basis of a qualification programme. Participants are to be enabled, by means of education courses taking place nationwide, to develop a scientifically-based attitude to the topic of digitisation in the field of addiction support, to derive, as “digital lodesmen” (ship’s pilots), approaches to action in practice and to sensitise people to the topic in their institutions. Pilot events are being held in 2020. The modular curriculum focuses on four dimensions of digital transformation which addiction support institution leaders have to deal with: addiction support services, addiction support as an organisation, legal consequences and ethical aspects. The project is funded by the BMG. After the pilot phase has finished, the qualification programme is intended to be rolled out nationally<sup>86</sup>.

The **“EUPC” (European Universal Prevention Curriculum)** is based on the most relevant findings of internationally recognised standards and prevention curricula<sup>87</sup>. The results will be made available to practitioners in the form of a manual and a qualification programme lasting several days. German participation is provided by the FINDER Academy for Prevention and Experience-based Learning (FINDER Akademie für Prävention und erfahrungsbasiertes Lernen). Sessions took place in 2019 and 2020, partly in digital form. The manual for the qualification program is also available in German<sup>88</sup>.

In 2018, the part-time **university course “Specialist in addiction prevention in the school/youth support context” (Fachkraft Suchtprävention im Kontext Schule/Jugendhilfe)** was set up in Berlin, which is aimed at teachers, social workers in schools, and both outpatient and inpatient facilities. The six-month course, organised by the Alice Salomon University of Applied Sciences (Alice-Salomon-Hochschule) in Berlin and the Special Unit for Addiction Prevention (Fachstelle für Suchtprävention), funded by the Senate Department for Health, Care and Gender Equality, is also being offered in webinar form for the first time in 2020<sup>89</sup>.

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<sup>85</sup> Further information can be found at <https://www.konturen.de/kurzmeldungen/digital-handeln-zukunft-gestalten/> [accessed: 9 Jul. 2020].

<sup>86</sup> Further information can be found at <https://www.hls-online.org/arbeitsbereiche/suchthilfe/themenfelder/digitale-lotsen/> and <https://digitalelotsen.net/> [accessed: 21 Jul. 2020].

<sup>87</sup> “International Standards on Drug Use Prevention”; “European Drug Prevention Quality Standards”; “Universal Prevention Curriculum”. Further information at <http://upc-adapt.eu/> and <https://finder-akademie.de/eupc/> [accessed: 21 Jul. 2020].

<sup>88</sup> <https://finder-akademie.de/eupc/#manual> [accessed: 21 Oct. 2020].

<sup>89</sup> Further information is available at <https://www.berlin-suchtpraevention.de/veranstaltungen/berufsbegleitender-zertifikatskurs-2020-fachkraft-fuer-suchtpraevention-im-kontext-schule-jugendarbeit/> [accessed: 9 Jul. 2020].

## 2 TRENDS (T2)

### 2.1 Changes in prevention measures (T2.1)

The project **Dot.sys**, jointly conducted by the BZgA and the *Laender*, has provided extensive information on addiction prevention measures implemented in Germany within a given calendar year. Dot.sys thus makes an essential contribution to reporting on prevention whilst not least improving quality and transparency in addiction prevention. The specialist and counselling centres, authorities, associations, specialist outpatient clinics and *Laender* coordination agencies of all *Laender* participating in Dot.sys, continuously document their activities in the electronic data collection system. Documentation takes place on a voluntary basis; therefore no claim can be made as to the completeness of the documented addiction prevention measures. The online-based, free of charge documentation system is used for recording and presenting addiction prevention measures on a federal, *Land*, and municipal level.

Between 2006 and 2016, on average 33,000 measures were documented each year. In 2017/2018, Dot.sys was extensively reworked in the scope of a technical relaunch, and optimised in terms of content and security. With the January 2019 relaunch, not all facilities could be reintegrated into the documentation, which is reflected in the number of measures recorded in 2019 (2016: 34,288 measures). However, the still large number of documented addiction prevention activities is testament to the high level of commitment from the facilities and professionals involved in dot.sys.

#### **Dot.sys: 2019 addiction prevention measures (selected results)**

For the reporting year 2019, 25,367 measures were documented by professionals from 14 *Laender*<sup>90</sup>.

The majority of the documented prevention activities (63%) were aimed at the final target persons, and 32.7% at opinion leaders. Almost 5% of the measures were targeted at public relations work.

#### **Measures targeted at the final target persons (n=15,635):**

- The majority of measures (69.9%) can be attributed to universal prevention. A further 14.9% are selective prevention measures. Indicated prevention measures have a 14.2% share.
- Children and adolescents remain the main target group of the facilities involved in Dot.sys. 68% of all measures are aimed at this group, followed by “adolescents/adults with use experience”, with a 19% share. This focus is also reflected in the age structure of the target groups reached by the measures: Almost 62% are between 14 and 17 years old. Young

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<sup>90</sup> Detailed graphic and tabular results of the 2019 data collection, including structural reports by the participating *Laender* and the presentation of results in the 2016 annual comparison can be viewed in the current Dot.sys annual report at: <https://www.dotsys-online.de/#/berichte> [accessed: 22 Jul. 2020].

adults (18 to 27 years old) and children (up to 13 years old) were reached approximately equally (25.9% and 29.7% respectively).

- The “school” environment is of huge importance for addiction prevention practice in Germany. 65.8% of all measures take place in the school setting. This proportion has once again sharply increased compared to 2016 (57.0%). In the “school” setting, most pupils were addressed in grammar schools (Gymnasium) (32.2%). With around 16% each, the “family” and “leisure” settings are in second and third place.
- Imparting knowledge (85.3%), changing attitudes (70.7%) and promoting skills (49.6%) are the most frequently cited objectives of the measures. This is also reflected at the concept level: the communication of information (83.4%) and changing or strengthening attitudes (70.8%) towards health-promoting attitudes and attitudes critical of addiction are the most frequent objectives of the activities for final target persons, followed by strengthening skills and resources (44.8%). These objectives are achieved primarily through training sessions (61.7%), followed by prevention counselling sessions (13.7%).

#### ***Measures targeted at opinion leaders (n= 8,295)***

- The majority of measures (59.1%) can be attributed to universal prevention. This is followed by structural or environmental prevention measures (20.6%).
- The most frequently addressed groups are teachers and lecturers (32.8%), youth work workers (25.1%) and addiction support workers (20.9%). Accordingly, most measures for this target group are focussed in the “school” setting (33.6%), followed by “youth work/youth support” (18.8%), then “addiction support” (16.2%).
- In terms of content, the focus is on the communication of information and an awareness (73.6%) of the relevance of the topic of addiction in different areas of life. Other objectives include strengthening networks (50.6%) and developing structures (38.0%). In accordance with the different objectives, most measures at the concept level were “communicating information” (81.3%), “designing structures” (43.9%) and “forming a critical attitude” (30.8%). To achieve the objectives, the most frequently implemented measures were training and education sessions (30.0%), cooperation and coordination activities (26.5%) and prevention counselling (19.4%).

#### ***Measures targeted at public relations work (n= 1,207):***

- The focus was on personal communication measures (34.6%), such as personal conversation or information campaign stands. In second place is the creation and use of print media (30.5%) such as billboards or brochures. The third most commonly reported measure is classic press work (28.3%) in the form of press releases or interviews.

#### ***Content:***

- In terms of content, 51.0% of all documented measures addressed life skills with a substance connection, 22.5% life skills unconnected to substances, 16.4% behavioural addictions and 10.1% a specific substance connection.

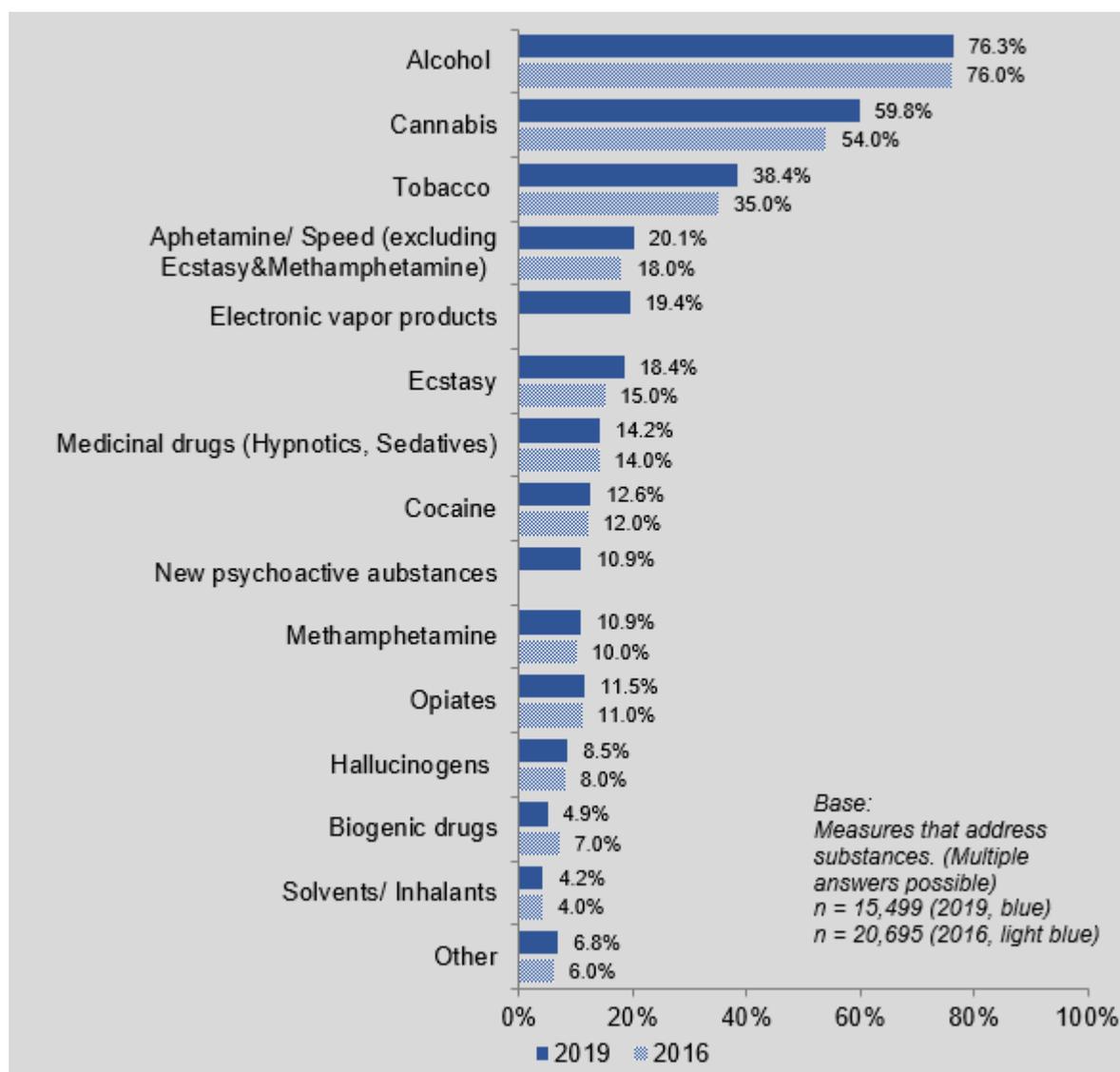


Figure 1 Substances covered in 2019 compared to 2016

- The focus (n=15,499) was on the prevention of the abuse of alcohol (76.3%), cannabis (59.8%) and tobacco (38.4%). There are increases in relation to almost all substances compared to 2016, with the largest increases for measures addressing cannabis (2016: 54.0%) (see Figure 1). In 2019, the categories of new psychoactive substances, tobacco (cigarettes, water pipes, tobacco heaters etc.) and e-vapour products (e-shishas, e-cigarettes etc.) were newly formed.
- 22.5% of measures were cross-substance (life skills unrelated to a substance). Life skills are understood to encompass, among other things, self-awareness, empathy, creative and critical thinking, decision making and problem solving skills, coping with emotions and stress as well as communication and relationship skills. Measures which exclusively address behavioural addictions were conducted in 16.4% of cases.

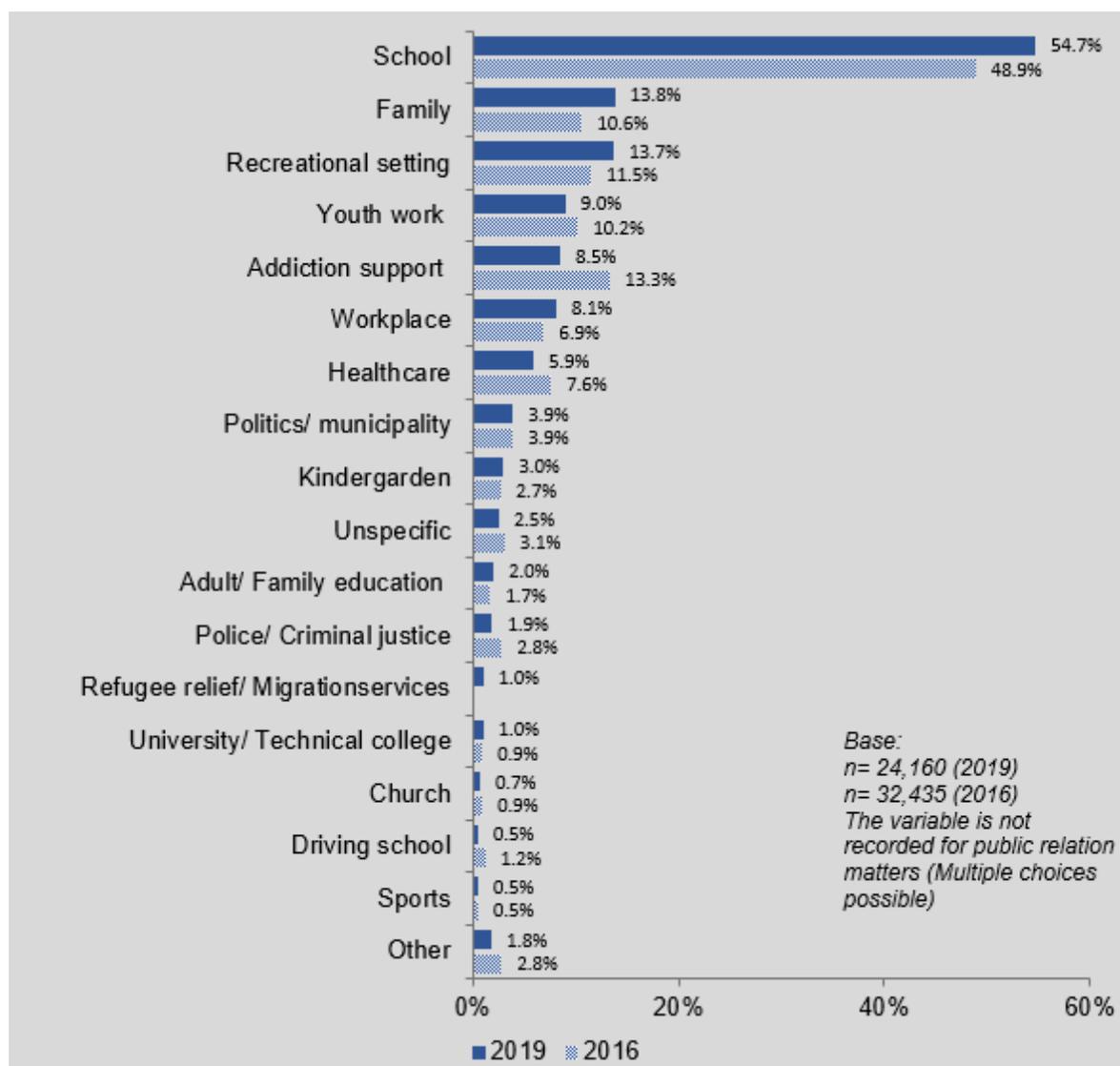
**Setting:**

Figure 2 Setting of the measures in 2019 compared to 2016

- 54.7% of all documented measures were located in the school setting, which continues to be the primary field of action of addiction prevention activities and is growing continuously (2016: 48.9%). In addition, most of the measures took place in the family (13.8%) and leisure (13.7%) settings, in which there were increases. Some settings saw fewer prevention measures take place than 2016 (Figure 2).

**Quality assurance:**

- Two-thirds of the addiction prevention measures recorded via the Dot.sys have been systematically documented (65.3%), and just over a quarter (27.2%) have been evaluated. The documentation of the measures takes place mostly for internal use (54.2%). Around every tenth measures (11.1%) was documented for external use, i.e. was published or

could at least be made available to external people (e.g. on request). The percentage of measures documented varies depending on the form of implementation. For example, lectures and presentations are the most seldom documented (50%), while in contrast cooperation and coordination activities are relatively frequent, at 74.6%. The highest rate of internal documentation is for prevention counselling (62.4%). The highest rate of external documentation are exhibitions and project days (16.5%).

### Dot.sys: 2019 cannabis prevention measures

- In the 2019 reporting year, a total of 9.262 measures were recorded on the subject of cannabis, which corresponds to 59.8% of all substance related measures. Of those measures, 7,814 were in the category of life skills with a substance connection and 1,448 in the specific substance category.
- The majority of cannabis related measures were aimed at the final target persons (68.5%). Just over a quarter (28.0%) of the measures implemented addressed opinion leaders. Around two thirds of all measures (65.1%) are attributable to universal prevention.
- Measures for final target persons are primarily (73.4%) aimed at adolescents (14 to 17 years old) and young adults (36.0%, 18 to 27 years old). In the opinion leaders target group, the main focus is teachers and lecturers (36.3%).
- The school setting is also the setting in which the most people are addressed for cannabis related measures: 65.5% of final target persons, and 37.3% of opinion leaders. Of those, measures are most frequently carried out in grammar schools.
- The central objectives are to increase knowledge and strengthen or change addiction relevant attitudes ( Figure 3). In collaboration with opinion leaders, the strengthening of networks also plays an important role.

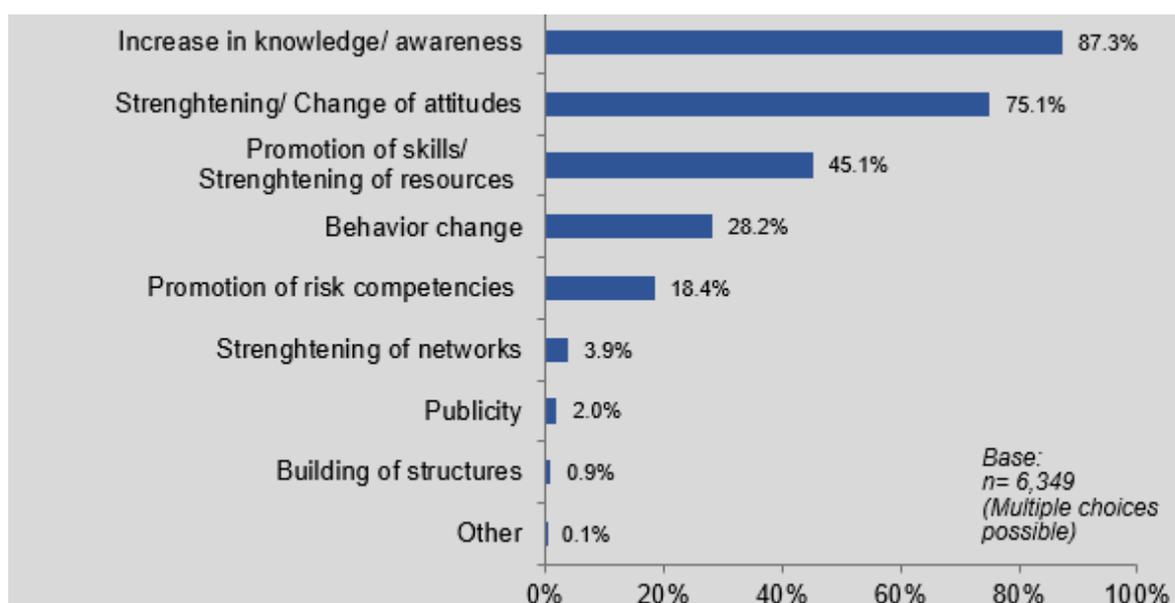


Figure 3 Objectives of measures for final target persons (cannabis related measures only)

- Most measures have the objective of conveying information. That applies both to activities aimed at opinion leaders (87.6%) and to those addressed to final target persons. For the latter, measures are also frequently aimed at forming a critical attitude (Figure 4).

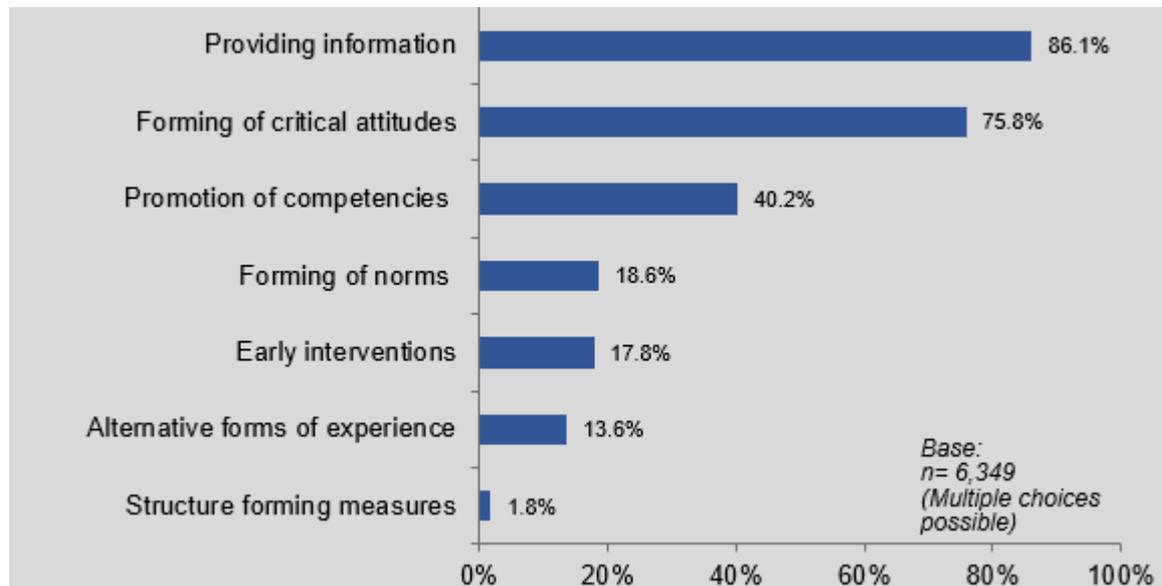


Figure 4 Conceptual level of measures for final target persons (cannabis related measures only)

- The spectrum of methods used to achieve the goals is very diverse. However, in the two overarching groups, measures that convey the respective content by means of training and education sessions dominate, following by prevention counselling.
- The majority of cannabis related public relations work (n=319) takes place in the form of personal communication measures (41.4%), followed by print media (26.3%) and online media (24.1%).

### 3 NEW DEVELOPMENTS (T3)

#### 3.1 New developments (T3.1)

The **First Prevention Report (Erster Präventionsbericht)** (NPK, 2019) was published in 2019 and is intended to make the implementation of the PräVg and the national prevention strategy transparent: for example, the services provided by the institutions involved in the NPK - including the Federal Government, the *Länder* and the municipalities - for prevention and health promotion in Germany are described, as well as the access routes and the people reached and recommendations for further development and figures on specific expenditure for health promotion and prevention<sup>91</sup>.

The State Association for Health and the Lower Saxony Academy for Social Medicine (Akademie für Sozialmedizin Niedersachsen e.V.) takes stock in 2020 and derives development needs from five years of the German Prevention Act (Präventionsgesetz, PräVg)<sup>92</sup>.

Since 2019, the five-year **Municipal funding programme (Kommunales Förderprogramm)** from the GKV Alliance for Health (GKV Bündnis für Gesundheit) has supported socially disadvantaged municipalities in setting up municipal structures and managing health promotion and prevention. In order to contribute to the reduction in socially based inequalities in health chances, the intention is for vulnerable groups of people in particular (such as single parents, people with a migration background, people with disabilities/impairments, older people, as well as children and adolescents from families affected by addiction and/or mental health problems) to be able to benefit more from health promoting and preventive measures. Up to June 2020, municipalities could apply for financial support for the establishment and expansion of health-promoting support structures. Over 40 municipalities have already applied for funding for a project to develop municipal structures<sup>93</sup>.

#### COVID-19 and addiction prevention 2020:

The 2020 World Drug Report comes to the conclusion that increasing unemployment and restrictions are associated with more people using drugs (UNODC, 2020). According to the EMCDDA, the effects of COVID-19 on the drug situation depends on the substance: while there are indications of an increase in cannabis use during the pandemic due to stockpiling before the lockdown (as well as alcohol, benzodiazepine and other medicinal drugs), a decline

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<sup>91</sup> The Prevention Report, according to Sec. 20d (4) SGB V represents the first comprehensive, cross-provider inventory of prevention, health promotion, safety promotion and participation promotion in Germany. Further information is available at [https://www.gkv-spitzenverband.de/krankenversicherung/praevention\\_selbsthilfe\\_beratung/praevention\\_und\\_bgf/npk/nationale\\_praeventionskonferenz.jsp](https://www.gkv-spitzenverband.de/krankenversicherung/praevention_selbsthilfe_beratung/praevention_und_bgf/npk/nationale_praeventionskonferenz.jsp) and <https://www.npk-info.de/> und <https://www.leitbegriffe.bzga.de/alphabetisches-verzeichnis/praeventionsgesetz/> [accessed: 21 Jul. 2020].

<sup>92</sup> Further information is available at <https://gesundheit-nds.de/index.php/medien/aktuelle-meldungen/1421-impulse-106> [accessed: 21 Jul. 2020].

<sup>93</sup> Further information is available at <https://www.gkv-buendnis.de/foerderprogramm/foerderangebote> [accessed: 21 Jul. 2020].

in the demand for drugs which would normally be used in leisure/party setting (e.g. cocaine, MDMA) has been recorded, as people stayed at home (EMCDDA, 2020).

A survey on changes in alcohol and tobacco habits during the lockdown in Germany shows that stress due to massive restrictions on social interactions can promote high-risk alcohol and tobacco consumption and addictive behaviour (Georgiadou et al., 2020)<sup>94</sup>. According to a forsa survey<sup>95</sup>, health experts are also recording growing alcohol and tobacco consumption due to the corona pandemic.

Some BZgA campaigns and services address addiction prevention in the context of the coronavirus separately, such as drugcom.de, rauchfrei-info, the “Make children strong” (Kinder stark machen) participation programme and “Alcohol? Know your limit.” (Alkohol? Kenn dein Limit)<sup>96</sup>.

Due to the pandemic events surrounding the novel coronavirus, events throughout Germany had to be cancelled, postponed or shifted online. Addiction prevention services were provided in new, digital formats for homeschooling or counselling situations. Examples include services from the ginko Foundation for Prevention (ginko Stiftung für Prävention) and the campaign #Prevention Digital (#Prävention Digital) from the Special Unit for Addiction Prevention (Fachstelle für Suchtprävention), Berlin<sup>97</sup>. For more digital services, see section 1.2.2.

The SRH University of Health (SRH Hochschule für Gesundheit), Gera, conducted the survey “Use of digital media during the corona crisis” up to July 2020. Results will be published on the university’s website<sup>98</sup>.

The DHS provides extensive information for addiction prevention professionals and addiction support on its website<sup>99</sup>.

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<sup>94</sup> Initiated by the Central Institute of Mental Health (Zentralinstitut für Seelische Gesundheit), Mannheim, and the University Hospital, Nuremberg.

<sup>95</sup> <https://www.kkh.de/presse/pressemitteilungen/sucht> [accessed: 21 Oct. 2020]

<sup>96</sup> <https://www.drugcom.de/topthema/kiffen-in-der-corona-krise-warum-der-verzicht-auf-cannabiskonsum-jetzt-sinnvoll-ist/>, <https://www.drugcom.de/news/coronavirus-drogenkonsumierende-zaehlen-zu-den-risikogruppen/>, <https://www.rauchfrei-info.de/informieren/rauchen-gesundheit/corona/>, [https://www.youtube.com/playlist?list=PLRsi8mtTLFAwl-FKQAR9Xeo31C\\_1gm\\_R6](https://www.youtube.com/playlist?list=PLRsi8mtTLFAwl-FKQAR9Xeo31C_1gm_R6), <https://www.kenn-dein-limit.de/aktuelles/artikel/zuhaus-wegen-corona-kein-alkohol-trinken/> [accessed: 21 Jul. 2020].

<sup>97</sup> Further information is available at <https://www.ginko-stiftung.de/landeskoordination/home/nachricht3114.aspx> or <https://www.berlin-suchtpraevention.de/aktuelles/themenheft/> (Issue 58) [accessed: 21 Jul. 2020].

<sup>98</sup> Further information can be found at <https://idw-online.de/de/news750162> [accessed: 21 Jul. 2020].

<sup>99</sup> Further information is available at <https://www.dhs.de/start/startmeldung-single/article/informationen-fuer-fachkraefte-in-der-suchthilfe.html> [accessed: 20 Jul. 2020].

## 4 ADDITIONAL INFORMATION (T4)

No additional information.

## 5 SOURCES AND METHODOLOGY (T5)

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