



European Monitoring Centre  
for Drugs and Drug Addiction



# Prevention

## GERMANY

### 2021 Report of the National REITOX Focal Point to the EMCDDA (Data year 2020 / 2021)

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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 include, 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 2020 and in part 2021. 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 2020 Dot.sys data (n=17,451). This includes setting out the addiction prevention activities by substance, objective and setting: the focus in respect of the substances addressed was on the prevention of the abuse of alcohol, cannabis and tobacco. 2020 was also characterised by the changes that were made in connection with the COVID-19 pandemic. It is noticeable that, with 17,451 documented addiction prevention measures in 2020, the volume of data is around one third less than in the reference year 2019 (25,367 measures). The *Laender* advise that addiction prevention work up to 2019 was mainly characterised by personal contact. Due to the restrictions on contact, however, training courses, school events and group services were not able to take place at times. Measures in the “school” setting reduced correspondingly, by around 10%. Overall, measures aimed at the final target persons declined by around 8% year on year.

In the scope of the German Act to Strengthen Health Promotion and Preventive Health Care (aka German Preventive Health Care Act) (Gesetz zur Stärkung der Gesundheitsförderung und der Prävention, aka Präventionsgesetz, PräVG) which has been in force since 2015, among other things the National Prevention Conference was constituted, federal framework recommendations approved and *Land* framework agreements passed. Of significance is that the PräVG is linked to the national process for setting health objectives and that two of the nine health objectives are dedicated to addiction prevention: “reduce alcohol consumption” and “reduce tobacco consumption”. The first cross-provider prevention report was presented 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 identification of and intervention in high-risk use behaviour as well as the reduction of abuse 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 is primarily used, in the sense of a strengthening of resources, 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>) (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 lies with, in addition to the relevant federal ministries, the BZgA, the *Laender*, the municipalities and the social insurance providers. Insofar as addiction prevention measures fall within the areas of health, social insurance, education and youth, they are subject to competing 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 Providers (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 people 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). One of the main tasks is to initiate and support preventive measures. In an annually produced "Drug and Addiction Report", the Commissioner reports on current developments and projects<sup>2</sup>.

In the *Laender* and the municipalities, a range of further structures exists for specialist 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 good spread of preventive measures across all federal levels in Germany is ensured. International cooperation also takes place 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)**

The *Laender* have the responsibility for education policy in Germany. This relates to both schools and higher education. For this reason, the school systems differ, in some aspects strongly, from each other, e. g. through the number of school years or different curricula. The

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<sup>2</sup> Further information can be found at <https://www.drogenbeauftragte.de/presse/detail/jahresbericht-der-drogenbeauftragten-der-bundesregierung-2020/> [accessed: 23 Jun. 2021].

*Laender* coordinate their joint interests in this area in regular meetings of the Standing Conference of Ministers of Education and Cultural Affairs (Kultusministerkonferenz, KMK<sup>3</sup>).

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.” The drug commissioner of the federal government calls for increased prevention work in schools.

Through guidelines and curricula, the *Land* cultural affairs ministries have, for some years, made addiction prevention a mandatory topic for the classroom, one example being the *Land* programme “Happy, healthy school” (“Gute gesunde Schule”)<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 are set out here.

#### Alcohol consumption in Germany

According to the current Drug Affinity Study (Drogenaffinitätsstudie) (Orth & Merkel, 2020), in 2019 63.4% of 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 rate, approximately every seventh adolescent (14.7%) reported at least one day of binge drinking. 94.9% of **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 the proportion of adolescents who have already drunk alcohol at some point in their lives is falling steadily

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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/landesprogramm-gute-gesunde-schule-mv/>), Berlin (<https://www.berlin.de/sen/bildung/unterstuetzung/praevention-in-der-schule/gesundheits>), Brandenburg (<https://mbjs.brandenburg.de/bildung/gute-schule/gute-gesunde-schule/gute-gesunde-schule-landesprogramm.html>) [accessed: 21 Jun. 2021].

and that regular alcohol consumption and binge drinking in this age group is also decreasing. Among young adults, the trend 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, among other places, 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 10.7 litres of pure alcohol per inhabitant over 15 years old in 2018, this is very high when compared to other countries (John et al., 2021). With regard to illness, healthcare costs and early death, a high level of 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 associated with harmful alcohol consumption to the economy as a whole<sup>5</sup> in Germany amounted to an estimated €57.04 bn in 2018 (Effertz, 2020; 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). Measures that have proven to be effective include youth protection, tax increases, geographical and time-related rules on the availability of alcohol and rules on drink driving (John et al., 2018). In order to limit the spread of COVID-19, several *Laender* introduced comprehensive bans during the reporting period, or bans, limited to certain times of day, on the serving or consumption of alcohol in certain public spaces or in certain publicly accessible establishments. The legal basis for these steps was explicitly created by Sec. 28a German Protection Against Infection Act (Infektionsschutzgesetz, IfSG).

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<sup>5</sup> Currently, the *direct* costs caused by harmful alcohol consumption in Germany amount to €16.59 billion annually (2008: €9.15 bn), which includes sickness and care costs, rehabilitation measures, services for participation in working life and accidents. The current *indirect* costs in the amount of €40.44 billion (2008: €30.15 bn) come from loss of resources due to mortality, long-term unemployment, lack of fitness 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; 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 the fact that alcohol is cheap to purchase in Germany.

**German Youth Protection Act** (*Jugendschutzgesetz, JuSchG § 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 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 2020 was virtually unchanged in comparison to previous years, at around €3.243 billion (John et al., 2021) 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*). An 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 and 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 is deemed 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, 316 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. Even a drunk pedestrian can have their driving licence revoked in certain instances, where the pedestrian has caused an accident. The same blood-alcohol levels apply to the driving of e-scooters as to other vehicles<sup>9</sup>.

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<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.

<sup>8</sup> The 2017 Alcohol Atlas from the German Cancer Research Centre (Deutsches Krebsforschungszentrum, DKFZ) (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).

**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>.

### 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 at some point in their life, 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 consumption 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 127,000 people died in 2018 from the consequences of smoking (DKFZ, 2020). 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: respectively €25.41 bn and €53.68 bn annually (Effertz, 2015b; DKFZ, 2015).

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<sup>10</sup> In the scope of the BZgA youth campaign "Alcohol? Know your limit." (Alkohol? Kenn dein Limit.), a legal expert report "Scope for action under the law in municipal alcohol environmental prevention" (Rechtliche Handlungsspielräume der kommunalen Alkoholverhältnisprävention) is available to relevant municipal stakeholders in an easy-to-understand version; <https://www.vortiv.de/publikationen/rechtliche-handlungsspielraeume/> [accessed: 24 Jun. 2020].

<sup>11</sup> Currently, the *direct* costs caused by smoking in Germany amount to €30.32 billion annually, which come from sickness costs, 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).

## 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 (Erfertz, 2020).

Germany ratified the Framework Convention on Tobacco Control (FCTC) of the World Health Organisation, which came into force in 2005, thus committing to the introduction of 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 warning notices 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 other 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 smoking tobacco products containing menthol (including cigarettes, cigarillos, water pipe tobacco)<sup>13</sup>. In the new Directive, electronic cigarettes containing nicotine (e-cigarettes) and refill cartridges are also 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 from passive smoking:** in 2015, around 11% of the adult, non-smoking population was regularly exposed to passive smoking in closed spaces. 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) oblige employers to protect non-smoking employees from the dangers of passive smoking. In 2007 the German Federal Act on the

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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/08\\_Rechtsvorschriften/04\\_Tabakerzeugnisse/bgs\\_tabakerzeugnisse\\_rechtliche\\_grundlagen\\_node.html](https://www.bvl.bund.de/DE/Arbeitsbereiche/03_Verbraucherprodukte/03_AntragstellerUnternehmen/08_Rechtsvorschriften/04_Tabakerzeugnisse/bgs_tabakerzeugnisse_rechtliche_grundlagen_node.html)) [accessed: 25 Jun. 2021].

<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).

Protection of Non-Smokers (Bundesnichtraucherschutzgesetz, BNichtrSchG) also came into force. Under the Act, employees in public authorities and 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.

**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 under-18s 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 by the German Tobacco Tax Act (Tabaksteuergesetz, TabStG) and in recent years it has been gradually increased (Sec. 2(1) No. 1a TabStG)<sup>17</sup>. On 24 March 2021, the German Federal Cabinet decided to increase the tobacco tax from 2022. In 2020, the revenue from tobacco taxes was approx €14.6 bn, and has once more slightly increased, by 2.7%, compared to the previous year (€14.2 bn) (German Federal Statistical Office (Statistisches Bundesamt) (publisher) (2021), 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). These have had to be used with cigarettes and 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>.

**Tobacco advertising:** Under the German Tobacco Products Act (Tabakerzeugnisgesetz, TabakerzG), there is an advertising ban on tobacco and e-cigarettes in the press and other printed publications. 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 multiple EU Member States. A complete advertising ban has increasingly been a

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<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: 21 Jun. 2021].

<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 still 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 (Drogenbeauftragte der Bundesregierung, 2019c).

topic of public discussion 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, a ban on outdoor advertising for tobacco products (billboards, public transport stops), it 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. On 2 July 2020, the tobacco advertising ban was passed in the Bundestag (German lower house), and it was confirmed by the Bundesrat (German upper house) on 18 September<sup>21</sup>. Germany was recently the only country in the EU that permitted unrestricted outdoor advertising for tobacco products (DKFZ, 2020).

As a party to the FCTC, Germany has an obligation to disclose the tobacco industry’s advertising expenditure: in 2018 this amounted to around €193 million, a decrease of around 21.8% on the previous year (around €247 million) (Drogenbeauftragte der Bundesregierung, 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 **adolescents** (10.6%) had already used an illegal drug at some point 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 prevalence 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, the rates 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) have 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

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<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: 21 Jun. 2021].

<sup>20</sup> <https://www.bundestag.de/dokumente/textarchiv/2020/kw22-de-tabakerzeugnisgesetz-696122> [accessed: 21 Jun. 2021].

<sup>21</sup> <https://www.drogenbeauftragte.de/presse/detail/jahresbericht-der-drogenbeauftragten-der-bundesregierung-2020/> [accessed: 21 Jun. 2021].

prevalence of 29.5%. Cannabis is the most prominent drug in this regard also. Further current data on the prevalence of illicit drug use in Germany is available through regularly repeated representative surveys, such as the 2019 Drug Affinity Study (Orth & Merkel, 2020), 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).

**Effects of consumption:** in 2020, 1,581 people died as a result of their drug use (2019: 1,398). As was the case in previous years, most deaths were attributed to opioid overdoses, involving, for example, heroin or morphine, as well as mixed use of opioids with other substances. The second most frequent cause of death is long-term harms caused by drug use<sup>22</sup>.

### Legislation 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 annexes to the BtMG: Annex I: non-marketable and non-prescribable narcotic drugs (e.g. MDMA, heroin or cannabis), Annex II: marketable but non-prescribable narcotic drugs (e.g. methamphetamine) and Annex III: marketable and prescribable narcotic drugs (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 (the German Criminal Code (*Strafgesetzbuch, StGB*), the German Road Traffic Act (*Straßenverkehrsgesetz, StVG*), the German Precursors Monitoring Act (*Grundstoffüberwachungsgesetz, GÜG*), the German New Psychoactive Substances Act (*Neue-psychoaktive-Stoffe-Gesetz, NpSG*), see on this point the Legal Framework workbook).

A pilot project planned by the Berlin Senate on the controlled supply of cannabis to a limited number of adult study participants, 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 its breaching the BtMG<sup>23</sup>.

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<sup>22</sup> <https://www.drogenbeauftragte.de/presse/detail/zahl-der-an-illegalen-drogen-verstorbenen-menschen-waehrend-der-coronapandemie-um-13-prozent-gestiegen/> [accessed: 23 Jun. 2021].

<sup>23</sup> <https://www.aerzteblatt.de/nachrichten/111852/Bundesinstitut-lehnt-Modellversuch-zu-Cannabis-in-Berlin-ab> [accessed: 2 Jun. 2021].

**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, an ordinance to amend the Schedule to the NpSG and the Annexes of the BtMG came into effect, according to which further individual substances were included in Annex II of the BtMG and substance groups in the NpSG were further developed and expanded (Drogenbeauftragte der Bundesregierung, 2019b; 2020; see Legal Framework workbook)<sup>24</sup>. On 2 July 2021, the Second Amending Ordinance on the Schedule to the NpSG<sup>25</sup> came into force. With this ordinance, the previous substance groups in the NpSG were adjusted in line with the current state of knowledge and updated to include additional NPS. Two new substance groups were also incorporated into the schedule: compounds derived from arylcyclohexylamine and those derived from benzimidazole. The schedule to the NpSG thus now covers seven substance groups (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: under 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 a test detects the substance in the blood. Sanctions range from fines or points in the Register of Driver Fitness to driving bans. 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 for 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 German Commission on Legal Limits (Grenzwertkommission)<sup>26</sup> includes a detectability threshold for cannabis of under 1ng 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

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<sup>24</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, in a targeted manner, into an information system for new developments in patterns of use and in the use of psychoactive substances and medicinal drugs. Further information can be found at <https://legal-high-inhaltsstoffe.de/de/phar-mon-plus.html> [Letzter Zugriff: 21.06.2021] and in the Drugs workbook.

<sup>25</sup> Federal Law Gazette I p. 2231. No. 38 from 2 Jul. 2021.

<sup>26</sup> Working group which comprises 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.

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 regarding the development of substance abuse behaviour (Bühler, Thrul & 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 and 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 areas they are aimed at. There are projects focussed on specific substances, 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 attitudes<sup>27</sup>.

**Note:** As there are so 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 2018 and 2019 Prevention workbooks<sup>28</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>29</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, among other things, *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,

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<sup>27</sup> Bühler, Thrul & Gomes de Matos (2020, p. 21 et seq.) provide an overview of theoretical foundations and models of modern addiction prevention.

<sup>28</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/> [accessed: 23 Jun. 2021, site is currently under revision].

<sup>29</sup> Guidelines and curricula from the *Land* ministries of education and cultural affairs make addiction prevention a compulsory teaching topic.

public commitment) and *offers of healthy alternatives* (Bühler, Thrul & Gomes de Matos, 2020, p. 34 et seq.)<sup>30</sup>.

The NRW pilot project “**Addiction prevention at vocational schools**” (**Suchtprävention an berufsbildenden Schulen**) is intended to reduce the start of high-risk use/abuse of the substances tobacco, alcohol and cannabis. The target audience is, in particular, 15 to 17-year-old vocational students. The plan is for different measures for addiction prevention to be developed and implemented between 2020 and 2024. The pilot project is funded by GKV-Bündnis für Gesundheit (GKV alliance for health) a joint initiative of public health insurance providers and the statutory accident insurance. The project will be led and coordinated by the North Rhine-Westphalia State Office for Addiction Prevention (Landesfachstelle für Suchtprävention, ginko), with consultation from certified psychologist, Gerd Rakete<sup>31</sup>.

Within the short workshop on addiction prevention “**Five x addiction in small doses**” (**Fünf x Sucht in kleinen Dosen**), pupils address very different facets of the topic of addiction in five 30-minute workshops. In small groups, the 7th and 8th grade school classes reflect on their own behaviour with regard to alcohol, illegal drugs, media/the internet and eating disorders. The adolescents taking part have the option of speaking to people affected in a self-help group and of getting to know their addiction stories. In addition, they can build mutual trust through an experiential learning exercise. The organisers are the Evangelische Schüler- und Schülerinnenarbeit (Evangelical Pupil Work), the Präventionsbüro SUCHT Stadt Karlsruhe (Prevention Office ADDICTION of the City of Karlsruhe) and Jugendhilfe – Jugendschutz Stadt Karlsruhe (Youth Support - Youth Protection of the City of Karlsruhe). The events take place in urban districts of Karlsruhe, in cooperation with the Diakonischen Suchthilfe Mittelbaden and the self-help group Freundeskreis Karlsruhe statt<sup>32</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 year groups. 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 Saxony Criminological Research Institute (Kriminologisches Forschungsinstitut), are expected to be published in the autumn of 2021<sup>33</sup>.

“**1000 little treasures – health and addiction prevention at primary school**” (**1000 Schätze – Gesundheit und Suchtprävention in der Grundschule**) is a scientifically-based, modular

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<sup>30</sup> On the effectiveness of addiction prevention life skills programmes, see also Bühler (2016).

<sup>31</sup> Further information can be found at <https://suchtkooperation.nrw/service/aktuelles/standard-titel-2> [accessed: 5 Jul. 2021].

<sup>32</sup> Further information can be found at [www.sucht-in-kleinen-dosen.de](http://www.sucht-in-kleinen-dosen.de) [accessed: 22 Jun. 2021].

<sup>33</sup> Further information can be found at <https://www.klasse2000.de/> and <https://kfn.de/forschungsprojekte/klasse2000/> [accessed: 21 Jun. 2021].

programme to strengthen the psychosocial health of pupils in the first grade, that promotes their life skills, exercise and mindfulness and focuses on their resources and strengths. Class modules for the pupils are supplemented by modules for parents (2 parent meetings, 2 parent brochures in 9 languages), for teachers (qualification for resource-oriented parental work and to support children from families impacted by addiction) and for the school as a living environment (regional networking, opportunities for structural health promotion).

The programme was tested in a pilot phase in the 2017/18 academic year. 10 schools (6 of which are located in socially deprived areas) took part in the evaluation. The results confirmed quality and practicability, enjoyment in its implementation and the achievement of the main objectives. Suggestions for improvement were actively encouraged as part of the programme. As a result, it now offers schools greater flexibility with regard to time and content in particular.

The Lower Saxony State Office for Addiction Issues (Niedersächsische Landesstelle für Suchtfragen, NLS) implements the programme, funded by the Kaufmännische Krankenkasse (statutory health insurance provider, KKH) together with the network of addiction prevention professionals in Lower Saxony and Berlin. The plan is to offer the programme nationwide from the 2022/23 academic year.

The BZgA has developed a publicity-oriented project called **“YouthFilmDays nicotine and alcohol – everyday drugs in focus” (JugendFilmTagen Nikotin und Alkohol – Alltagsdrogen im Visier)** which offers a motivating impulse for action-oriented prevention in schools on the topic of “everyday drugs”. The YouthFilmDays comprise showings of various films and participation activities for school classes. The project is supplemented with elements for teachers, as well as by press and PR work. Under the leadership of the Special Units for Addiction Prevention (Fachstellen für Suchtprävention) in Hesse, the YouthFilmDays are prepared and carried out by a network of numerous institutions. The BZgA and the Coordination Office for Addiction Prevention (Koordinationsstelle Suchtprävention) at the Hesse State Office for Addiction Issues (Hessische Landesstelle für Suchtfragen, HLS) support this on an ongoing basis.

In 2004, the BZgA created, as part of its youth campaigns, the **“ClearView-InteractiveCourse” (KlarSicht-MitmachParcours)**, a course on tobacco and alcohol. In order to strengthen the sustainability and synergy of these actions, the BzGA developed a **“Suitcase Course Version” (Koffer-Parcours-Variante)**, containing all six stations of the ‘large’ course in a handy small format. The “KlarSichtKoffer” imparts knowledge - to children and adolescents from 12 years old (7/8th grades) - on all relevant aspects concerning alcohol and tobacco consumption, in an age-appropriate and understandable way. The stations encourage participants to reflect on their own behaviour, make people aware of their habits surrounding enjoyment and consumption, educate them on the potential for addiction, sensitise them to protective mechanisms, provide decision-making aids for health-promoting behaviour and empower non-users. The HLS makes the **“KlarSichtKoffer-Variante”** available for addiction prevention work across Hesse through its *Land*-wide network of 28 Hessian special units for addiction prevention. 35 professionals from those units across the *Land* were trained up to work with the KlarSichtKoffer, passing on their knowledge as opinion leaders (multipliers) in the respective

regions to municipal authorities, schools, youth centres, and teaching trainers to use the suitcase in schools and support them in introducing it there.

### **Training and higher education**

In 2020, the Thuringia gambling addiction special unit developed the “**Prevention concept for the prevention of gambling addiction at higher education institutions**” (**Präventionskonzept zur Prävention von Glücksspielsucht an Hochschulen**), which puts the focus of gambling addiction prevention on adolescents and young adults, especially students. In the scope of a new project, consisting of two closely linked, complementary strands, students will firstly be sensitised to the risks of gambling so that they can reflect on their own gambling behaviour and, if necessary, gain access to the addiction support system at an early stage. Secondly, the aim is for students to be acquired as opinion leaders who can share knowledge on the risks of gambling within their circles, and who might consider gambling prevention as a career after they have finished their studies.

In order to permanently integrate these approaches and the multi-faceted topic of gambling into the health protection provided by further education institutions, it is necessary for an overarching gambling policy to be implemented in such places. One aim of this further education prevention concept is thus to develop such a gambling policy in collaboration with students, which contains clear guidelines for action on the part of the further education institutions, and clearly defined standards and values in an overarching sense. Within the course of the planned implementation of the further education prevention concept in 2021 and the implementation of the gambling policy, further education institutions can select individual prevention measures that correspond to their individual needs.

### **Local authorities**

A holistic and enduringly effective addiction prevention system needs to involve not only the family<sup>34</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 leisure as well as the public health sector serve as settings for municipal addiction prevention work.

In 2019, the national competition “**Model Strategies for Municipal Drug Prevention**” (**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 was “effective local addiction prevention” and focussed on municipal addiction prevention as a whole: cross-addiction prevention, substance-specific prevention (alcohol, tobacco, medici-

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<sup>34</sup> See the 2019, 2018 and 2017 Prevention workbooks for the “family” setting.

nal 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 the 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. The competition enjoyed broad nationwide participation, with 51 entries. A jury of academics and practitioners evaluated the entries and selected the prize winners. In September 2020, eleven municipalities were recognised for their exemplary and effective addiction prevention activities. The results from the eighth competition are presented and published in a competition document<sup>35</sup>.

The BZgA has been actively involved in municipal alcohol prevention for more than ten years, within the scope of the youth campaign “Alcohol? Know your limit.” (Alkohol? Kenn dein Limit.), with the support of the Association of Private Health Insurers (Verband der Privaten Krankenversicherung e.V., PKV). Since December 2020, the BZgA has bundled together, through its new service platform “**www.vortiv.de – locally active**” (**www.vortiv.de – Vor Ort aktiv**), the experiences gained from this active involvement, in order to support municipal institutions, professionals and opinion leaders in municipal alcohol prevention in a targeted manner, and to expand sustainable network management at a municipal level<sup>36</sup>.

The website “**Open Ears**” (**Offene Ohren**) offers help, especially in times of the coronavirus pandemic, in finding a telephone counselling service, crisis support and conversational services where needed. In a joint poster campaign, the *Land* Hesse and HAGE e. V., together with the HLS, are raising awareness of the website<sup>37</sup>.

In Lower Saxony, the NLS also created posters, on the occasion of the action day “**Addiction counselling, local, valuable!**” (**Suchtberatung – Kommunal wertvoll**), showing the great importance of addiction support. There are a total of eleven motifs under the motto “**Addiction support helps**” (**Suchthilfe hilft!**) that can be used by specialist addiction support and addiction prevention facilities to support their own campaigns<sup>38</sup>.

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<sup>35</sup> The winning entries and competition documentation from 2019/20 as well as the last years are available at <https://kommunale-suchtpraevention.de> [accessed: 6 Jul. 2020].

<sup>36</sup> Further information can be found at <https://www.vortiv.de/> or <https://www.bzga.de/aktuelles/2020-12-08-bzga-startet-neue-serviceplattform-vortivde-fuer-kommunale-alkoholpraevention> [accessed: 5 Jul. 2021].

<sup>37</sup> Further information can be found at <https://www.hls-online.org/aktuelle-meldungen/immer-mittwochs-digitale-sprechstunde-fuer-die-suchthilfe/> or <https://offeneohren-hessen.de/> [accessed: 5 Jul. 2021].

<sup>38</sup> Further information can be found at [https://nls-online.de/home16/index.php/downloads/cat\\_view/53-suchthilfe-hilft](https://nls-online.de/home16/index.php/downloads/cat_view/53-suchthilfe-hilft) [accessed: 5 Jul. 2021].

## Recreational and sport settings

The recreational and sport settings represent an important field of activity for early prevention measures which are universal in design 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 and in many different social environments ensures that even children from socially disadvantaged groups can be reached, with a low risk of stigmatising this target group.

The BZgA has various collaborations in this area, including:

- The programme for 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 part of everyday life 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>39</sup>. In August 2020, the Federal Government Commissioner on Narcotic Drugs assumed the patronage of the participation initiative.
- **“DFB-Give-and-go 2020” (DFB-Doppelpass 2020)**: The objective of this initiative is to strengthen synergies between schools and clubs in the area of early addiction prevention. In this context, the BZgA supports schools and clubs with action packs on addiction prevention topics<sup>40</sup>. The DFB (German Football Association) project is continuing seamlessly under the name **“Doppelpass 2024”**.
- 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>41</sup>.
- The campaign alliance **“Enjoy sport alcohol-free” (Alkoholfrei Sport genießen)** wants to encourage sports clubs to take part in the campaign “Alkoholfrei Sport genießen“ and call on them to take a responsible attitude to alcohol in their club. The following are involved in the alliance: the BZgA, the German Olympic Sports Federation (Deutscher Olympischer Sportbund, DOSB), the German Football Association (Deutscher Fußball-Bund, DFB), the

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<sup>39</sup> Further information can be found at <https://www.kinderstarkmachen.de> [accessed: 21 Jun. 2021].

<sup>40</sup> Further information can be found at: <https://www.dfb.de/schulfussball/doppelpass-2020> [accessed: 21 Jun. 2021].

<sup>41</sup> Further information can be found at <https://www.dtb.de/offensive-kinderturnen> [accessed: 21 Jun. 2021].

German Gymnastics Association (Deutsche Turner-Bund, DTB), the German Handball Association (Deutsche Handballbund, DHB) and the DJK Youth Sport Association (DJK-Sportjugend)<sup>42</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)**. The aims of the nationwide strategy are to provide education on the health and psychosocial risks of cannabis and promote a critical attitude, to avoid use-related harms by maintaining abstinence for as long as possible, and to stabilise non-consumption among adolescents. The new cannabis prevention measures offer support to parents, teachers and professionals on leading a critical dialogue with adolescents on the topic of cannabis and on initiating preventive measures. Among other things, the following will be implemented:

- Online-based, target-group-specific prevention services, directed at the respective living environment: The website [www.cannabispraevention.de](http://www.cannabispraevention.de) provides an information service for adolescents with use experience aged between 14 and 17 years old, as well as teachers and professionals. The website aims to encourage young people to critically evaluate cannabis and encourage them not to use it. The factually informative website is continuously expanded with all types of media (including short videos, interactive tools, print media) and supplements the established BZgA portal [drugcom.de](http://drugcom.de).
- An accompanying social media campaign (“Get smart”, Mach Dich schlau!) takes topics on the [cannabispraevention.de](http://cannabispraevention.de) website and provides young people with facts on the subject of cannabis in a youth-friendly way. 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-based prevention services in schools, vocational schools or youth recreation centres (including the course “Cannabis - Quo vadis?” and the “Cannabis prevention toolbox” (Methodenkoffer Cannabisprävention”, see below)) will be evaluated, up to 2022 and 2023, as to their effectiveness, optimisation potential and suitability for transferring nationwide. New didactic teaching material has been available since 2020 for cannabis prevention in schools; since the summer of 2021, the teaching material has been supplemented by two new videos with an accompanying booklet. The videos focus on the importance of the hemp plant in history, the active ingredients and explain the body’s own processes following cannabis consumption. The accompanying booklet offers didactic information for using the videos in class.
- In the area of research, the BZgA supports the expansion of content in the SCHULBUS survey 2021/22, including switching to an online survey and using a supplementary parent

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<sup>42</sup> Further information can be found at <https://www.alkoholfrei-sport-geniessen.de/> [accessed: 5 Jul. 2021].

questionnaire. The aim is, in particular, to gain knowledge on the new subject of the coronavirus.

- Regular discussions with interdisciplinary experts at Federal government, *Land* and municipality level help in the continuous development of quality assurance. National quality standards for cannabis prevention projects were formulated within the scope of a joint working group. The quality standards have been available for download since April 2021 on [www.cannabispraevention.de](http://www.cannabispraevention.de).

Within the project STAY STRONG! STAY YOURSELF! (BLEIB STARK! BLEIB DU SELBST!), which has been run in Hamburg since 2014 by SUCHT.HAMBURG together with the social welfare authorities, a **five-minute video clip, “Cannabis and you?” (Cannabis and you?)** was created by film maker Marc Witkowski. The video is aimed at professionals who would like to address the topic of cannabis with adolescents. Using quotes from adolescents, it offers low-threshold access and is a good way to open the door to conversations with young adults with and without experience of use. The service is supplemented with accompanying materials containing information on cannabis use as well as tips and suggestions for using the video in pedagogical work with adolescents<sup>43</sup>.

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...” (“Es ist doch nur...”). The goals are a critical examination of the subject of cannabis and a reflection on personal attitudes 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 to run the course. The course was revised in 2018/2019. Due to the coronavirus pandemic, the evaluation has been delayed. Initial results are expected in 2022. It is financed by the Schleswig-Holstein Ministry for Social Affairs, Health, Youth, Family and Senior Citizens (Ministerium für Soziales, Gesundheit, Jugend, Familie und Senioren) and the GKV<sup>44</sup>.

**“Green suitcase - cannabis prevention method set” (Grüner Koffer - Methodenset Cannabisprävention)**, is a new prevention service, started this year in Brandenburg aimed at 14 to 17-year-olds. The method suitcase conceived by the ginko Foundation for Prevention (ginko Stiftung für Prävention) pursues the aim of educating pupils on the psychological and physical effects of cannabis use, as well as the legal aspects, and to encourage an active discussion and reflection on their own attitudes to cannabis. To launch the service, a training course for opinion leaders was held in Potsdam in June 2021, to qualify specialists in the use of the

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<sup>43</sup> The film, handouts, and further information are available on [www.bleib-stark.com](http://www.bleib-stark.com), or from the SUCHT.HAMBURG web shop at [www.sucht-hamburg.de/shop](http://www.sucht-hamburg.de/shop). [Accessed: 30 Jun. 2021].

<sup>44</sup> Further information can be found at <https://lssh.de/cannabis-parcours/> [accessed: 21 Jun. 2021].

suitcase in vocational schools and general education schools. Funded by the BZgA, the use of the green suitcase is accompanied by a two-year results evaluation by the IFT-Nord<sup>45</sup>.

**Crystal Meth:** 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>46</sup> in the past, the prevention of the use of crystal meth was made 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>47</sup>.

The target-group-oriented prevention approach was implemented in close cooperation with organisations in the *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 de-stigmatising addicts, a number of activities were undertaken including events on addiction prevention which were held in public spaces and supported by various cooperation partners. The "Kulturjahr Sucht" was developed as a pilot project by the Dresden Public Health Department and funded by the BZgA up to 2019. Since September 2020 a manual has been available on adapting it for other municipalities<sup>48</sup>.

**Legal highs:** Various online projects and websites<sup>49</sup> provide extensive information on the risks of consuming so-called legal highs.

## Studies

The current Epidemiological Survey of Substance Abuse shows that cocaine use among adults has increased in recent years. In order to better reach cocaine users with addiction support and prevention services, target-group-specific knowledge on the motives for use and risk constellations is required. A study under the acronym “**KOKOS**” by the Centre for Interdisciplinary Addiction Research (ZIS) aimed to gain insight into the profiles and support needs of cocaine

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<sup>45</sup> Further information can be found at <https://www.blsev.de/aktuelles/lesen/neues-angebot-der-cannabispraevention-der-gruene-koffer.html> [accessed: 5 Jul. 2021].

<sup>46</sup> See on this point also the results of the SCHULBUS study (Baumgärtner & Hiller, 2016) and the JEBUS study (Baumgärtner & Hiller, 2018).

<sup>47</sup> Available at <https://www.bzga.de/infomaterialien/suchtvorbeugung/> and <https://www.dhs.de/infomaterial> [accessed: 21 Jun. 2021].

<sup>48</sup> Further information can be found at [https://www.dresden.de/media/pdf/gesundheit/SPDi/sucht/Kulturjahr-Sucht\\_Handreichung\\_Web.pdf](https://www.dresden.de/media/pdf/gesundheit/SPDi/sucht/Kulturjahr-Sucht_Handreichung_Web.pdf) [accessed: 21 Jun. 2021].

<sup>49</sup> For example <https://www.drugcom.de/drogenlexikon/buchstabe-l/legal-highs/>, <https://mindzone.info/>, <https://legal-high-inhaltsstoffe.de> and <https://infoberse-neue-drogen.de> [accessed: 21 Jun. 2021].

users who are at risk of developing high-risk or dependent use. The study was funded by the BMG and ran until September 2021<sup>50</sup>.

***New informational materials:***

- Using funding from the BZgA, the following ***DHS informational materials***<sup>51</sup> on the topic of illicit drugs were updated in 2020 and 2021: Basic information on “cannabis” and “synthetic drugs”; 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). Work aid on “methamphetamine”; “Information on alcohol and other drugs – counselling and support” (Informationen zu Alkohol und anderen Drogen – Beratung und Hilfe) (Arabic/German and English/German); “You’re pregnant... and taking drugs?” (Du bist schwanger ... und nimmst Drogen?); “Information on alcohol and other drugs – counselling and support” (Informationen zu Alkohol und anderen Drogen – Beratung und Hilfe) (Farsi, Pashto, French, English, Arabic); “A service for anyone who would like to help a love one” (Ein Angebot an alle, die einem nahestehenden Menschen helfen möchten) (German); a brochure in simple language on crystal meth (“Artificial drugs are risky”, Künstliche Drogen sind riskant) has been newly produced in 2021.
- The 3rd edition of the guidebook “**Strengthening children at an early age**” (**Kinder frühzeitig stärken**) has now been published, with a total print run of 35,000 copies. With illustrative examples from a child’s daily life, the guidebook attempts to show how children can be encouraged and supported to develop strong personalities<sup>52</sup>.
- The 2nd edition of the guidebook “**Protecting children and adolescents from high-risk use of alcohol, cannabis or mobile phones**” (**Kinder und Jugendliche vor riskantem Umgang mit Alkohol, Cannabis oder Handy schützen**) is aimed at parents and educators whose children have already reached puberty. The guidebook provides tips on how parents can strengthen their child in dealing with addictive substances and media usage.

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<sup>50</sup> Further information can be found at <https://www.drogenbeauftragte.de/presse/detail/neue-studie-zu-hintergruenden-und-motivation-von-kokainkonsum-kokos-gestartet/> bzw. <https://www.zis-hamburg.de/projekte/projektetails/Konsumgewohnheiten-Hintergruende-und-Hilfebedarfe-von-Erwachsenen-mit-Kokainkonsum-KO-KOS/> [accessed: 5 Jul. 2021].

<sup>51</sup> Materials can be obtained from: <https://www.dhs.de/infomaterial> [accessed: 21 Jun. 2021].

<sup>52</sup> Further information can be found at [https://www.hls-online.org/fileadmin/dokumente/materialien/suchtpraevention/200515\\_Elternratgeber\\_Hessen\\_FINAL\\_online\\_150dpi\\_Einzels.pdf](https://www.hls-online.org/fileadmin/dokumente/materialien/suchtpraevention/200515_Elternratgeber_Hessen_FINAL_online_150dpi_Einzels.pdf) [accessed: 5 Jul. 2021].

Using examples, advice is given for when a child in someone's care has their first experiences of intoxication with alcohol or cannabis products, as well as excessive media use<sup>53</sup>.

- 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 cannabis’ – prevention and support with group-specific services 2020/2021” (Thüringer Leitfaden zum Thema “Crystal Meth” – Prävention und Hilfen mit gruppenspezifischen Angeboten)**<sup>54</sup>.
- The **DHS** has published the following simple-language brochure on the topic of smoking: “Smoking is also dangerous to others” (Rauchen ist auch für andere riskant) and “Shisha smoking is risky” (Shisha-Rauchen ist riskant)<sup>55</sup>.

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

An overview, commissioned by the BZgA, of apps currently available on the market for changing behaviour (substance use, behavioural addictions) was compiled by the Nuremberg Institute of Technology. According to that overview, there is a wide range of apps on substance-related and behavioural addictions. Access to high-quality, scientifically evaluated apps remains difficult. Nevertheless, the in-depth analysis of the study revealed that high-quality German-language apps are already available in some areas<sup>56</sup>.

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” (“Whats on”)) were developed by the ginko Prevention Foundation (Stiftung für Prävention)<sup>57</sup>.

The **BePrepared app** was specially developed for young refugees. The authentic tool supports such young people, through informative texts and interactive exercises, in dealing with alcohol and cannabis safely. The app is available in five languages (Arabic, German, English, Farsi and Pashto)<sup>58</sup>.

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<sup>53</sup> Further information can be found at [https://www.hls-online.org/fileadmin/dokumente/materialien/suchtpraevension/200515\\_Elternratgeber\\_Hessen\\_FINAL\\_online\\_150dpi\\_Einzels.pdf](https://www.hls-online.org/fileadmin/dokumente/materialien/suchtpraevension/200515_Elternratgeber_Hessen_FINAL_online_150dpi_Einzels.pdf) [accessed: 5 Jul. 2021].

<sup>54</sup> Available at [https://www.dhs.de/fileadmin/user\\_upload/pdf/Broschueren/LS\\_Rauchen\\_ist\\_auch\\_fuer\\_andere\\_riskant\\_LS.pdf](https://www.dhs.de/fileadmin/user_upload/pdf/Broschueren/LS_Rauchen_ist_auch_fuer_andere_riskant_LS.pdf) bzw. [https://www.dhs.de/fileadmin/user\\_upload/pdf/Broschueren/Shisha-Rauchen\\_ist\\_riskant\\_LS.pdf](https://www.dhs.de/fileadmin/user_upload/pdf/Broschueren/Shisha-Rauchen_ist_riskant_LS.pdf) [accessed: 5 Jul. 2021].

<sup>55</sup> Available at [https://www.tmasgff.de/fileadmin/user\\_upload/Allgemein/Publikationen/gesundheit\\_leitfaden\\_cannabis.pdf](https://www.tmasgff.de/fileadmin/user_upload/Allgemein/Publikationen/gesundheit_leitfaden_cannabis.pdf) [accessed: 22 Jun. 2021].

<sup>56</sup> Further information can be found at <https://www.e-beratungsinstitut.de/projekte/beratungs-apps/verhaltensanderungs-apps/> [accessed: 23 Jun. 2021].

<sup>57</sup> Further information can be found at <https://www.ginko-stiftung.de/landeskoordination/Apps.aspx> [accessed: 21 Jun. 2021].

<sup>58</sup> Further information can be found at <https://www.katho-nrw.de/index.php?id=12052> [accessed: 5 Jul. 2021].

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>59</sup>).

In Hamburg, the association VIVID e. V. plans to **use social media to sensitise adolescents in Hamburg to the risks of addictive substances**. The project is aimed at adolescents and young adults in Hamburg between 14 and 25 years old who use legal and illegal psychoactive substances and who have not yet had any contact with the Hamburg addiction support system. An innovative approach using social media was chosen in order to reach these adolescents and young adults at an early stage. For so-called “digital natives”, the internet has long been an indispensable extension of their own living environment. This is the space the project places itself into, meeting the target group at a focal point for adolescents’ lives. Instagram, an image and short text-based platform, was selected as it is, by some margin, the most-used public medium among German adolescents. The focus of the project is therefore building up and maintaining an Instagram account. A final evaluation is planned for the end of the project, which is initially intended to run for 12 months.

Various addiction prevention institutions have started podcasts around the topic of addiction prevention. For example, “**SPZ dialogues**” (**SPZ im Dialog**) by the Addiction Prevention Centre (SuchtPräventionsZentrum) in Hamburg, “**drobs on-line**” by drobs Halle, “**Potcasts**” (**Pottkasten**) by the Saalekreis Special Unit for Addiction Prevention, or the podcast by the Charity Association for Gütersloh (Caritasverband für den Kreis Gütersloh e.V.) “**Independent – Gütersloh podcast on addiction prevention**” (**Unabhängig – Gütersloher Podcast zur Suchtvorbeugung**)<sup>60</sup>.

In the scope of the **#PreventionDigital** initiative, the Berlin Special Unit for Addiction Prevention (Fachstelle für Suchtprävention Berlin gGmbH) offers information on addiction prevention on its YouTube channel<sup>61</sup>.

The “**BZgA Infoline for addiction prevention**” (**BZgA-Infotelefon zur Suchtvorbeugung**) provides personal and anonymous counselling for people with 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>62</sup>.

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<sup>59</sup> Further information can be found at <https://bluprevent.de/angebote/die-bluapp/> [accessed: 21 Jun. 2021].

<sup>60</sup> Further information can be found at: <https://li.hamburg.de/spz/14839672/digitale-formate-suchtpraevention/>, <https://drobs-halle.de/information/podcast/>, <https://www.awo-halle-merseburg.de/angebote/projekte/suchtpraevention/pottkasten/> bzw. <https://www.caritas-guetersloh.de/sucht-und-drogenhilfe/suchtvorbeugung/podcast-unabhaengig> [accessed: 5 Jul. 2021].

<sup>61</sup> Further information can be found at <https://www.youtube.com/channel/UCpKAp240rrNryMxxyiyRI9w/featured> [accessed: 5 Jul. 2021].

<sup>62</sup> <https://www.bzga.de/service/infotelefone/suchtvorbeugung/> or <https://www.sucht-und-drogen-hotline.de/> Drug counselling centre addresses from all over the country: <https://www.bzga.de/service/beratungsstellen/suchtprobleme> [accessed: 21 Jun. 2021].

### 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 having exhibited 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) includes 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>63</sup>.

**Note:** As there are so many different projects in Germany, from a wide variety of providers, 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 2018 and 2019 Prevention workbooks<sup>64</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. Counselling programmes and programmes for changing behaviour are offered to adolescents and young adults up to 25 years old who occasionally or regularly use drugs. 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. The clips "How do I give up smoking?" (Wie höre ich mit dem Kiffen auf?), "How do hallucinogens work?" (Wie wirken Halluzinogene?), "How dangerous are bath salts (synthetic cathinones)?" (Wie gefährlich ist Badesalz (synthetische Cathione)?) and "What are legal highs?" (Was sind legal Highs?) have been publicly available since 2020<sup>65</sup>. Important target groups include, 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. With more than 300,000 visitors per month, drugcom.de is one of the most visited websites in Germany in the area of addiction prevention and was overhauled in the course of a relaunch in 2020<sup>66</sup>.

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<sup>63</sup> In the GKV "Prevention manual", "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 Jun. 2021]. A presentation of projects specifically for children from families affected by addiction can be found in the Prevention workbooks from previous years.

<sup>64</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/> [accessed: 6 Jul. 2020].

<sup>65</sup> To date, nine clips on different substances and topics have been created. These clips have reached a wide audience, with more than 1 million views: up to May 2021, drugcom.de's new YouTube channel already had 14,800 subscribers: <https://www.youtube.com/channel/UC3HKTiEt5MebQKd0wxx4o1Q>. [Accessed: 21 Jun. 2021]

<sup>66</sup> Further information can be found at <https://www.drugcom.de/> [accessed: 27 May 2021].

## Children and adolescents from families with addiction problems

The internet-based service **KidKit** was set up in 2003 to provide information, counselling and support to children, adolescents and young adults growing up in families with addiction disorders (including gambling), violence or psychological disorders. The counselling service on the KidKit online portal was optimised in 2020 and expanded to include the category “professionals”. In addition, the technical requirements were set up for the digital implementation of “KIDinaren” (online training sessions). The seminars, aimed at sensitising youth support professionals and educators to the concerns of children from families impacted by addiction are offered in all 16 *Länder* in 2021<sup>67</sup>.

The *Land* programme “**KIPS Prevention NRW: strengthening children of mentally ill and addicted parents**” (**KIPS Prävention NRW: Kinder psychisch kranker und suchtkranker Eltern stärken**), set up in May 2021, is the first funding programme to establish care structures for affected children in NRW. The GKV-Alliance for Health (GKV-Bündnis für Gesundheit) and the *Land* North Rhine-Westphalia are funding, with a programme intended to run for four years, the implementation of sustainable services for strengthening childrens’ resilience and the organisational and structural conditions required for this in addiction and youth support facilities and community psychiatry institutions<sup>68</sup>.

Addiction experts in Brandenburg come together to help groups of people who are particularly vulnerable with regard to their health. In addition to children from families impacted by addiction, care is provided for people with disabilities and cognitive impairment, as well as for people with a migration background and elderly people. These groups are considered to be particularly at risk with regard to high-risk or addictive use behaviour. The concept is focused on networking, sensitisation and qualification of different stakeholders, for example from prevention, counselling and addiction support centres. To implement the plan, the GKV-Bündnis für Gesundheit is cooperating with the Brandenburg Office for Addiction Issues (Brandenburgische Landesstelle für Suchtfragen e. V., BLS) and the Brandenburg Ministry of Social Affairs, Health, Integration and for Consumer Protection (Ministerium für Soziales, Gesundheit, Integration und Verbraucherschutz)<sup>69</sup>.

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

In December 2020, the new manual “**Children from families impacted by addiction – introduction to problems and recommendations for on-site cooperation**” (**Kinder aus suchtblasteten Familien – Einführung in die Problematik und Empfehlungen für die Kooperation vor Ort**) was created. The contents were discussed with the Saxony-Anhalt Office for Addiction Issues (Landesstelle für Suchtfragen im Land Sachsen-Anhalt, LS-LSA), the

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<sup>67</sup> Further information can be found at <https://www.kidkit.de/> [accessed: 22 Jun. 2021].

<sup>68</sup> Further information can be found at <https://www.belladonna-essen.de/kips-praevention-nrw/> [accessed: 5 Jul. 2021].

<sup>69</sup> Further information can be found at [https://www.blsev.de/fileadmin/bildmaterial/Fachbereiche/Praevention/20201222\\_PM\\_Suchtpraevention\\_MSGIV\\_BLS\\_GKV\\_f.pdf](https://www.blsev.de/fileadmin/bildmaterial/Fachbereiche/Praevention/20201222_PM_Suchtpraevention_MSGIV_BLS_GKV_f.pdf) [accessed: 5 Jul. 2021].

LIGA Expert Committee on Child and Youth Welfare (LIGA Fachausschuss Kinder- und Jugendhilfe), the specialist departments responsible for addiction prevention and early-stage support for families at the Saxony-Anhalt Ministry of Labour, Social Affairs and Integration (Ministeriums für Arbeit, Soziales und Integration), the Child and Youth Protection Service Office (Servicestelle Kinder- & Jugendschutz) and the Land Administrative Office/State Youth Welfare Office<sup>70</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 music and party event organisers<sup>71</sup>. Studies within the target group on the support services they would like to reduce risks of use (Helbig et al. 2019; Betzler et al. 2021) can identify a need for so-called drug checking services.

With the aim of preventing health harms, the Berlin pilot project “**Drug checking**” intends to give drug users in future the possibility of having samples of their substances, such as cocaine, cannabis or amphetamine, chemically analysed on site, on an anonymous basis in counselling facilities and have them checked for possible impurities or for too high active substance concentrations. It is unclear when the project will start<sup>72</sup>.

### 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 project, funded by the BMG, has to date surveyed 567 refugees in 31 transitional accommodations. The preliminary data shows that around 70% of refugees had already drunk alcohol in their home country. In Germany, this proportion of refugees increases significantly to 88%. Due to their poor mental health, 58% of refugees reported having taken medication in Germany, primarily painkillers, sleeping pills and sedatives and a quarter had taken anti-depressants. The study will run until the end of 2021. Final results will be available in the first quarter of 2022<sup>73</sup>.

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<sup>70</sup> Available at: [https://www.ls-suchtfraagen-lsa.de/wp-content/uploads/2021/01/Handreichung\\_KiSuFa\\_15122020\\_red.pdf](https://www.ls-suchtfraagen-lsa.de/wp-content/uploads/2021/01/Handreichung_KiSuFa_15122020_red.pdf) [accessed: 5 Jul. 2021].

<sup>71</sup> See the 2019 Prevention workbook for other projects and initiatives.

<sup>72</sup> Further information can be found at <https://www.berlin.de/special/gesundheit-und-beauty/nachrichten/6070505-211-drug-checking-straaffrei-testen-lassen-da.html>. [accessed. 28 October 2021]. Information on the topic of drug checking can be found in the Harms and Harm Reduction workbook.

<sup>73</sup> Further information is available at <http://www.zis-hamburg.de/projekte/projektetails/LOGIN/> [accessed: 28 May 2021].

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 German Federal Ministry of Education and Research’s (Bundesministerium für Bildung und Forschung, BMBG) funding initiative on the mental health of refugees and consists of four subprojects on the topics of addiction and refugee migration: a “Skills training on regulating emotions” (Skills-Training zur Affektregulation) (ZIS Hamburg), “Recording substance use and principles of good practice in support services” (Erfassung des Substanzkonsums und Prinzipien Guter Praxis bei Hilfsangeboten) (Charité, Berlin), the “Culturally-sensitive recording of substance use disorders” (Kultursensitiven Erfassung von Substanzgebrauchsstörungen) (Emden University of Applied Sciences) and a “Culturally sensitive digital brief intervention for young refugees to reduce problem alcohol and cannabis consumption (BePrepared)” (Kultursensiblen digitalen Kurzintervention für junge Geflüchtete zur Reduktion von problematischem Alkohol- und Cannabiskonsum (BePrepared))<sup>74</sup> (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 its dissemination. The first step was setting up an internet platform<sup>75</sup>.

The Coordination Office for Drug Related Issues of the Regional Authority of Westfalen-Lippe (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)<sup>76</sup>.

Within the scope of the project **“Culturally sensitive addiction prevention” (Kultursensible Suchtprävention)**, a written survey of professionals was conducted in 2020. The experiences and knowledge gathered by the project was summarised in the form of two brochures<sup>77</sup>.

In December 2020, the project **“Transcultural addiction prevention in migration work” (Transkulturelle Suchtprävention in der Migrationsarbeit)** by Condrops e.V. (Munich) and funded by the BzGÄ since November 2018, was concluded. In the scope of the project, a training concept had been developed for opinion leaders on the topic of addiction and addiction prevention with a focus on migration and refugee flight, and has been in use since then<sup>78</sup>. Target groups are professionals, volunteers and honorary staff who are involved in caring for and accompanying refugees. The training gives participants basic knowledge on how addiction

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<sup>74</sup> Further information can be found at <https://www.katho-nrw.de/index.php?id=12052> [accessed: 28 May 2021].

<sup>75</sup> Further information can be found at <https://www.mentalhealth4refugees.de/de> [accessed: 28 May 2021].

<sup>76</sup> Further information can be found at [https://www.lwl-ks.de/media/filer\\_public/91/62/916279c6-1148-487b-aaf7-b70e57b43a0d/quasie2\\_0\\_hilfreiche\\_materialien\\_fur\\_migrantinnen.pdf](https://www.lwl-ks.de/media/filer_public/91/62/916279c6-1148-487b-aaf7-b70e57b43a0d/quasie2_0_hilfreiche_materialien_fur_migrantinnen.pdf) [accessed: 30 Jun. 2021].

<sup>77</sup> Further information can be found at <https://www.suchtpraevention-sachsen.de/themen/suchtmittelspezifische-suchtpraevention/kultursensible-suchtpraevention/> [accessed: 6 Jul. 2021].

<sup>78</sup> Further information can be found at <https://www.condrops.de/fachportal/schulungen-migrationsarbeit> [accessed: 6 Jul. 2021].

develops, on support and prevention, with the aim of giving the professionals solid competence when carrying out their duties and integrating prevention into their day-to-day work.

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

The aim of the national pilot project “**TANDEM - special help for special people in the disabled and addiction support network**” (**TANDEM – Besondere Hilfen für besondere Menschen im Netzwerk der Behinderten- und Suchthilfe**), the funding of which has been extended by the BMG to 2022 due to the pandemic, is to be able to offer adequate support to people with intellectual disabilities and an addiction problem, by tailoring services to their needs. Pairs of facilities, one from addiction care and one from disabled care, operate together as “Project Tandems”. 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. Within the scope of the implementation of the project, materials were developed on the topic of “What is in a cigarette? – The harmful substances of a cigarette in plain language” (*Was ist in einer Zigarette? – Die Schadstoff-Zigarette in Leichter Sprache*)<sup>79</sup>. For the next steps in the project, the plan is to develop informational materials on other addictive substances, such as alcohol and cannabis, or even on media, in plain language. TANDEM is being run at three pilot locations nationally and is scientifically evaluated by FOGS GmbH and backed up by an advisory board<sup>80</sup>.

It is increasingly possible for people with intellectual impairments to take part in working life. However, mentally impaired people often remain disadvantaged, above all in the area of health. The stakeholders in the national pilot project “**aktionberatung – einfach.gut.beraten**” (approx. “Counselling initiative – simply.good.advice”) have developed a specific service for this particular group of people. The national pilot project’s online database has been available since May 2021. The database contains materials, media and techniques, as well as contact details for institutions<sup>81</sup>.

“**Sag Nein!**” (**Say no!**) is a short, early intervention for 13 to 18-year-old school pupils with an intellectual disability. Within a school week, the topics of alcohol, nicotine, cannabis and assertiveness are dealt with. The particular situation of young people with an intellectual disability is proactively taken into account. The programme “Sag Nein!” uses simple language, offers recurring rituals to provide reassurance and makes increased use of repetition and varied visualisations. In Hesse, this training course for opinion leaders was organised and carried out by the HLS, in September 2020. The training for the certified course was jointly funded by the Hesse AOK [major health insurance provider], the Hesse Ministry of Culture (Hessisches Kultusministerium) and the Hesse Office for Addiction Issues (Hesse Landesstelle für Suchtfragen e.V.). A total of 18 professionals at the Special Unit for Addiction Prevention in Hesse, and

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<sup>79</sup> Materials are available at <https://www.lwl-ks.de/de/projekte/tandem/tandem-downloads/> [accessed: 30 Jun. 2021].

<sup>80</sup> Further information can be found at <https://www.lwl-ks.de/de/projekte/tandem/> [accessed: 28 May 2021].

<sup>81</sup> Materials are available at <https://www.aktionberatung.de/datenbank> [accessed: 5 Jul. 2021].

teachers from special needs schools focussing on mental development were trained in “tandems”.

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

The counselling handbook “**Intellectual disability and substance use**” (**Geistige Behinderung und Substanzkonsum**) shows how integration and addiction support agencies can collaborate, in a target-group specific way, to enable the counselling of mentally impaired people with problem substance use. In addition to advice on how to facilitate access to addiction counselling, methods and materials are presented that can be applied in the areas of prevention and counselling of people with an intellectual disability<sup>82</sup>.

### **Pregnant substance users**

**IRIS** was developed by the Department for Addiction Medicine and Addiction Research at Tübingen University, and has been scientifically supported and optimised in close cooperation with the BZgA since 2018. The online counselling is configured in modules and can be taken step by step, in an order chosen by the participants. In addition to information and tips, it offers interactive online exercises. If required, a counsellor provides support as a so-called “e-coach”. Measures to prevent relapse and involve the participant’s partner are also included in the programme, as is the promotion of an addiction-free life following the birth of the child<sup>83</sup>.

In October 2020, the BMG-funded evaluation of a needs-oriented, interdisciplinary and cross-system pathway, the “**Dresden clinical pathway for crystal meth**” (**Dresdner Versorgungspfad Crystal**) focussed on the care of methamphetamine-using pregnant women, was completed. Findings from the study were compiled as derived requirements and recommendations for action in an implementation manual. In summary, the results demonstrate the advantages of providing methamphetamine-using pregnant women and mothers with multi-professional, inter-disciplinary, cross-system and trans-sectoral care<sup>84</sup>.

In addition, the BZgA provides information on substance use during pregnancy on its **various websites**<sup>85</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 “Pregnant, Addiction, Support” (Schwanger, Sucht, Hilfe) from the Charité Universitätsmedizin

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<sup>82</sup> Materials are available at <https://www.aktionberatung.de/datenbank?dbkat=23> [accessed: 5 Jul. 2021].

<sup>83</sup> Further information can be found at: <https://www.iris-plattform.de/> [accessed: 5 Jul. 2021].

<sup>84</sup> The “Dresden clinical pathway for crystal meth” has been implemented since 2015 in the routine clinical work of the University Hospital Carl Gustav Carus in Dresden and serves as fine example for the care and treatment of methamphetamine-using women within the context of parenthood. Further information can be found at [https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/5\\_Publikationen/Gesundheit/Berichte/Abchlussbericht\\_Versorgungspfad\\_Crystal\\_barrierefrei.pdf](https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/5_Publikationen/Gesundheit/Berichte/Abchlussbericht_Versorgungspfad_Crystal_barrierefrei.pdf) [accessed: 24 Jun. 2021].

<sup>85</sup> <https://www.drugcom.de/haeufig-gestellte-fragen/fragen-zu-schwangerschaft-und-drogen/> and <https://www.kenn-dein-limit.de/alkoholverzicht/alkohol-in-der-schwangerschaft/> and <https://www.rauchfrei-info.de/de/informieren/rauchen-gesundheit/schwangerschaft/> and <https://www.familienplanung.de/schwangerschaft/das-baby-vor-gefahren-schuetzen/drogen/> [accessed: 28 May 2021].

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 Thüringen) (in chapter 3.2 “Addiction in pregnancy”, (Sucht in der Schwangerschaft)) and brochures such as “You’re pregnant – and taking drugs?” (Du bist schwanger – und nimmst Drogen?) from the DHS.

Under the motto “**Baby blue is only beautiful as a colour – stay alcohol-free through pregnancy**” (**Babyblau ist nur als Farbe schön – alkoholfrei durch die Schwangerschaft**) [translator note: “blau” in German has the double meaning of “blue” and “drunk”], the administrative districts and cities in Hesse participating in the alcohol prevention programme “HaLT – Hart am Limit” (approx. “HALT – Close to the limit”) organised an event on International Foetal Alcohol Spectrum Disorders Awareness Day. It was intended to make adolescents and young adults aware of the need to abstain from alcohol and other drugs during pregnancy and breastfeeding. The hashtag **#BabyTrinktMit** (approx. BabyDrinksToo) was used on social media to call for digital support for the awareness campaign<sup>86</sup>.

### **Affected families**

In January 2021, the Berlin Special Unit for Addiction Prevention launched “**Berlin prevention practice – out of the grey area**” (**Berliner Präventionspraxis – Raus aus der Grauzone**). The aim of the initiative is to facilitate low-threshold access for those affected to multiple support services. The “Berliner Präventionspraxis” aims to reach families and adolescents before problems manifest themselves. With this programme, the Special Unit for Addiction Prevention assists in strengthening the bond between parents and their children in order to maintain their relationships during the difficult puberty phase. Using the motto “Raus aus der Grauzone!”, the selective prevention service fills the gap in care where addiction and education issues meet. Social workers work hand in hand with therapists in counselling, advising and, where applicable, further referral to other support systems<sup>87</sup>.

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

The focus of indicated prevention is on the identification of vulnerable people, in order to counteract individual risk factors and to support and strengthen this group's personality development as early as possible. The “usual” prevention measures are often almost impossible to

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<sup>86</sup> Further information can be found at <https://www.hls-online.org/aktuelle-meldungen/babyblau-ist-nur-als-farbe-schoen-alkoholfrei-durch-die-schwangerschaft> [accessed: 5 Jul. 2021].

<sup>87</sup> Further information can be found at <https://www.berlin-suchtpraevention.de/projekte/berliner-praeventions-praxis-raus-aus-der-grauzone/> [accessed: 30 Jun. 2021].

deploy 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 so many different projects in Germany, from a wide variety of providers, 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 2018 and 2019 Prevention workbooks<sup>88</sup>.

Seidel, Morgenstern & Hanewinkel (2020) identified the following risk factors for high-risk cannabis use: male, older, migration background, higher “sensation seeking”, early age of first use of cannabis, more frequent cannabis use by circle of friends during schooltime, unstable relationship to parents and poorer mental health of parents. There was no connection found with an ADHD diagnosis, the socio-economic status and the style of parenting. The quality of the relationship in the parental home, as well as an early start to cannabis use, are risk factors which can potentially be influenced (ibid.).

In addiction prevention, internet-based interventions are being increasingly used successfully to reduce problem substance use: this is also the case with the online cessation programme “**Quit the Shit**”, which is integrated into the internet platform 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>89</sup>. Since the start of the programme, more than 10,000 people have benefited from the service.

“**SHIFT parent training**” (**Shift-Elternteraining**), 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 findings show a significant effectiveness of the SHIFT+ intervention with regard to reducing depressive symptoms and an improved knowledge of the topic of family and addiction in the intervention group straight after taking part in training. With regard to the practicability and acceptance of the intervention, the perception of trainers and participating parents of the SHIFT+ parent training was consistently

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<sup>88</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/> [accessed: 28 May 2021].

<sup>89</sup> Further information can be found at <https://www.quit-the-shit.net/qts/> [accessed: 28 May 2021] and Jonas et al. (2018); Jonas et al. (2019); Tossman et al. (2011).

positive. The project is being funded by the BMG up to 2021 and, once again, implemented by the German Institute for Addiction and Prevention Research (Deutsches Institut für Sucht- und Präventionsforschung, DISuP) at the Catholic University of Applied Sciences of North Rhine-Westphalia (Katholische Hochschule Nordrhein-Westfalen, KatHO NRW)<sup>90</sup>.

The BMG funded “**FriDA**” project (“**Early Intervention for Drug Abuse in Adolescence**”, **Frühintervention bei Drogenmissbrauch in der Adoleszenz**) aims to sustainably improve access to outpatient addiction support for cannabis-using minors and their family members. Within the framework of a systematic, family-oriented counselling approach, users, parents and other relevant people are supported as affected people, those seeking support and important partners in the counselling process. The hope is that, through this approach, outpatient addiction support will be able to systemically and actively respond to the increased need for family-oriented counselling regarding adolescent cannabis use. During the project period, the FriDA manual will be trialled and implemented in a training programme, in 12 outpatient addiction support facilities. Initial results of the accompanying evaluation are expected in 2023.

### 1.2.5 Additional information (T1.2.5)

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

The “**National Strategy on Drug and Addiction Policy**” (**Nationale Strategie zur Drogen- und Suchtpolitik**) stipulates that addiction prevention measures have to be reviewed as to 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 organised by the German Monitoring Centre for Drugs and Drug Addiction (Deutsche Beobachtungsstelle für Drogen und Drogensucht, DBDD), by the BZgA, by the DHS, by professional addiction associations as well as by many other parties in the field.<sup>91</sup>

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<sup>90</sup> Further information can be found at <http://www.shift-elterntraining.de> [accessed: 21 Jun. 2021].

<sup>91</sup> Further information can be found at <https://www.dbdd.de/projekte-tagungen/projekte-und-tagungen/> [accessed: 21 Jun. 2021].

Roughly every two years, one or more of the 16 *Laender* represented in the “BZgA-*Laender* cooperation addiction prevention working group” organise 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 is therefore primarily the addiction prevention professionals from the municipalities allocated to the *Land* bodies. The sixth meeting in Lübeck, scheduled for 2020, was postponed to 2021 due to the coronavirus pandemic and took place as a purely online event, organised by the Hamburg and Schleswig-Holstein *Laender*, on 20/21 May 2021<sup>92</sup>.

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 again updated in 2018 and published in 2020. The aim of the publication “**Expert report 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, in the period 2012 to 2017 were systematically recorded in various databases, comprehensively presented and evaluated. The conclusions for practical implementation are broken down into universal and selective prevention measures and related to different areas of work 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 areas. 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, were created (summaries of the core statements).<sup>93</sup>

Funded by the BZgA, **Recommendations for the successful design of sustainable, effective addiction prevention** (**Empfehlungen für die erfolgreiche Gestaltung nachhaltig wirksamer Suchtprävention**) (Hoff & Schlömer, 2020a, b) was developed between 2019 and 2020 on the basis of the Cologne **Memorandum on the evidence base in addiction prevention** (**Memorandum zur Evidenzbasierung in der Suchtprävention**) (expert group “Cologne

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<sup>92</sup> <https://tagung-suchtpraevention.de/> [accessed: 16 Aug. 2021].

<sup>93</sup> Download and order at <https://www.bzga.de/infomaterialien/suchtvorbeugung/3492/> [accessed: 21 Jun. 2021]

Conference" (Kölner Klausurwoche), 2014). These recommendations help to ensure the quality of addiction prevention as practice-oriented guidelines for action, and to establish evidence-based addiction prevention in Germany. The recommendations were developed for both experts and leaders in the practical work of addiction prevention as well as for decision-makers in leadership positions of agencies and associations, in politics etc<sup>94</sup>.

On 18 August 2020, the working group AIDS Prevention NRW and the advisory board of the North Rhine-Westphalia Office for Addiction published a harm reduction recommendation for people who consume illegal psychoactive substances. The position paper, entitled **HARM REDUCTION: MINIMISE RISKS – PROMOTE HEALTH (HARM REDUCTION: RISIKEN MINDERN – GESUNDHEIT FÖRDERN)** intends to stimulate discourse on the design of services for the target group<sup>95</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 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>96</sup>.

Evidence-based prevention programmes at European level are published by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) in the online database "**XChange**": 11 of the total of 49 programmes listed were evaluated in Germany, among other places (status: May 2021)<sup>97</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 aspects, the database has been available to addiction prevention professionals again since January 2019 for documentation and evaluation purposes 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>98</sup>.

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<sup>94</sup> Materials can be downloaded, and further information found, at <https://www.katho-nrw.de/?id=12191> [accessed: 28 May 2021]

<sup>95</sup> Materials can be downloaded, and further information found, at [https://www.aids-nrw.de/front\\_content.php?idart=7569](https://www.aids-nrw.de/front_content.php?idart=7569) [accessed: 6 Jul. 2021]

<sup>96</sup> <https://www.gruene-liste-praevention.de> [accessed: 28 May 2021].

<sup>97</sup> <https://www.emcdda.europa.eu/best-practice/xchange> [accessed: 28 May 2021].

<sup>98</sup> [www.inforo.online/prevnet](http://www.inforo.online/prevnet) [accessed: 28 May 2021].

The “**International standards on drug use prevention**” (UNODC & WHO, 2018), updated in their second version, have been available in the German language since 2019<sup>99</sup>. The 2013 “**European drug prevention quality standards**” (EDPQS) of the EMCDDA have also been available in German since 2020<sup>100</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 procedure, 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>101</sup>.

On the initiative of the Working Group on Addiction Support (AG Suchthilfe) and financed by the BMG, the “Essen guiding principles on digital transformation in the addiction support system” (Essener Leitgedanken zur digitalen Transformation in der Suchthilfe) were created on the basis of an expert discussion in January 2020 on the subject of “**Digitalisation in addiction support**” (**Digitalisierung in der Suchthilfe**)<sup>102</sup>.

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

In the scope of the national pilot project “**Digital lodesmen**” (**Digitale Lotsen**), launched in 2019, leaders were trained, by means of education courses taking place nationwide, to develop a scientifically-based attitude to the topic of digitalisation in the field of addiction support, to derive, as “digital lodesmen” (ship’s pilots), approaches to action in practice and to sensitise people in their institutions to the topic. 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 results of the accompanying evaluation prove the practicability and acceptance of the chosen approach. For example, the participants reported having gained new knowledge on the topic of digitalisation and to have developed a more solid attitude towards digitalisation. In addition, the feedback given proves that first steps towards digitalisation were able to be initiated following participation in the programme, also necessitated by COVID-19. The project

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<sup>99</sup> [https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/5\\_Publikationen/Drogen\\_und\\_Sucht/Broschueren/Internationale\\_Standards\\_zur\\_Praevention\\_des\\_Drogenkonsums.pdf](https://www.bundesgesundheitsministerium.de/fileadmin/Dateien/5_Publikationen/Drogen_und_Sucht/Broschueren/Internationale_Standards_zur_Praevention_des_Drogenkonsums.pdf) [accessed: 28 May 2021].

<sup>100</sup> <https://thueringer-suchtpraevention.info/europaeische-qualitaetsstandards-zur-suchtpraevention-edpqs/> [accessed: 28 May 2021].

<sup>101</sup> Further information can be found at <https://www.devacheck.de/devacheck.html> [accessed: 28 May 2021].

<sup>102</sup> Further information can be found at <https://www.konturen.de/kurzmeldungen/digital-handeln-zukunft-gestalten/> [accessed: 28 May 2021].

is funded by the BMG. After the pilot phase has finished, the qualification programme is intended to be rolled out nationally<sup>103</sup>.

The “**EUPC**” (**European Universal Prevention Curriculum**) is based on the most relevant findings of internationally recognised standards and prevention curricula<sup>104</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). The manual accompanying the qualification programme is also available in German<sup>105</sup>.

Especially during the period of the coronavirus pandemic, people seeking support often contact addiction counselling facilities by telephone. In a new series of online seminars by the **Brandenburg Office for Addiction Issues (Brandenburgische Landesstelle für Suchtfragen e. V)**, principles of counselling by telephone, among other things, are presented as well as options to clarify framework conditions. The following topics are at the heart of the three-hour online seminars: The basics of telephone counselling, features of resource-oriented conversations as well as conversation goals and crisis intervention<sup>106</sup>.

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

## 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, public 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 free of charge, online-based documentation system is used for recording and presenting addiction prevention measures on a federal, *Land*, and municipal level.

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<sup>103</sup> Further information can be found at <https://www.hls-online.org/arbeitsbereiche/suchthilfe/themenfelder/digitale-lotsen/> / [accessed: 28 May 2021].

<sup>104</sup> “International Standards on Drug Use Prevention”; “European Drug Prevention Quality Standards”; “Universal Prevention Curriculum”. Further information can be found at <http://upc-adapt.eu/> and <https://finder-akademie.de/eupc/> [accessed: 28 May 2021].

<sup>105</sup> Further information can be found at <https://finder-akademie.de/eupc/#manual> [accessed: 28 May 2021]

<sup>106</sup> Further information can be found at <https://www.blsev.de/aktuelles/lesen/online-seminarreihe-ressourcenorientierte-telefonberatung.html> [accessed: 5 Jul. 2021]

Between 2006 and 2016, on average 33,000 measures were documented each year. In 2017/2018, Dot.sys was extensively overhauled and optimised in terms of content and security in the scope of a technical relaunch. Since the January 2019 relaunch, not all facilities have been able to be reintegrated into the documentation, which is reflected in the number of measures recorded (2019: 25,367 measures). A further decline in the measures recorded was also seen for the reporting year 2020, with a total of 17,451 measures recorded. It can be assumed that the decline is connected to the COVID-19 pandemic.

### **Dot.sys: 2020 addiction prevention measures (selected results)**

For the reporting year 2020, 17,451 measures were documented by professionals<sup>107</sup>.

The majority of the documented prevention activities (54.8%) were aimed at the final target persons, with 38.0% aimed at opinion leaders. Almost 7% of the measures were targeted at public relations work.

#### ***Measures targeted at the final target persons (n=9,562):***

- The majority of the measures (56.4%) that were aimed at the final target persons, can be categorised under universal prevention. A further 17.3% are selective prevention measures. Indicated prevention measures account for a 24.2% share.
- Children and adolescents continue to be the main target group for the facilities that took part in Dot.sys. Around 57% of all measures for final target persons were aimed at that group, followed by the target group “adolescents/adults with use experience” at 25.2%. This focus is also reflected in the age structure of the target groups reached by the measures: Almost 60% are between 14 and 17 years old. Young adults (18 to 27 years old) and children (up to 13 years old) were reached approximately equally (29.4% and 26.7% respectively).
- The “school” environment is of huge importance for addiction prevention practice in Germany. 52% of all measures take place in the school setting. This proportion has sharply declined from 2019 (65.8%). With 26.3% and 18.8% respectively, the “family” and “leisure” settings are in second and third place.
- Imparting knowledge (83.4%), changing attitudes (66.2%) and promoting skills (52.0%) are the most frequently cited objectives of the measures. This is also reflected at the concept level: the communication of information (81.1%) and changing or strengthening attitudes (66.5%) 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 (49.0%). These objectives are achieved primarily through training sessions

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<sup>107</sup>Detailed charts and tabular results of the 2020 data collection, including structural reports by the participating *Laender* and the presentation of results in the 2019 annual comparison can be viewed in the current Dot.sys annual report at: <https://www.dotsys-online.de/#/berichte> [accessed: 21 Jun. 2021].

(51.7%), followed by prevention counselling sessions (27.4%). The latter increased by about 10% in 2020 at the expense of training.

**Measures targeted at opinion leaders (n= 6,631)**

- The majority of the measures (56.4%) that were aimed at opinion leaders can be categorised under universal prevention. This is followed by structural or environmental prevention measures (22.3%).
- The most frequently addressed opinion leader groups are teachers and tutors (33.7%), youth workers (23.5%) and addiction support workers (23.0%). Accordingly, most measures for this target group are focussed in the “school” setting (33.4%), followed by “youth work/youth support” (19.9%), then “addiction support” (18.9%).
- In terms of content, for opinion leaders the focus is mainly on the communication of information and an awareness (70.0%) of the relevance of the topic of addiction in different areas of life. In addition, the strengthening of networks (54.8%) and developing structures (41.5%) are the primary objectives in the work with opinion leaders.
- To achieve the objectives, most frequently conducted measures were cooperation and coordination activities (27.6%) as well as training and education sessions (24.5%). This was followed in third place by prevention counselling (24.2%).

**Measures targeted at public relations work (n= 1,258):**

- The focus of public relations work in 2020, in contrast to previous years, was not on personal communication measures, but on measures in connection with online media. At almost 42%, this category accounted for the largest proportion of public relations work. In second place, as in previous years, is the creation and use of print media (31.5%) such as billboards or brochures. The third most commonly reported measure is classic press work (25.8%), for example in the form of press releases or interviews. Personal communication measures only accounted for 13% during the observation period.

**Content:**

- In terms of content, 49.6% of all documented measures addressed life skills with a substance connection, 24.0% life skills unconnected to substances, 16.2% behavioural addictions and 10.1% a specific substance connection.

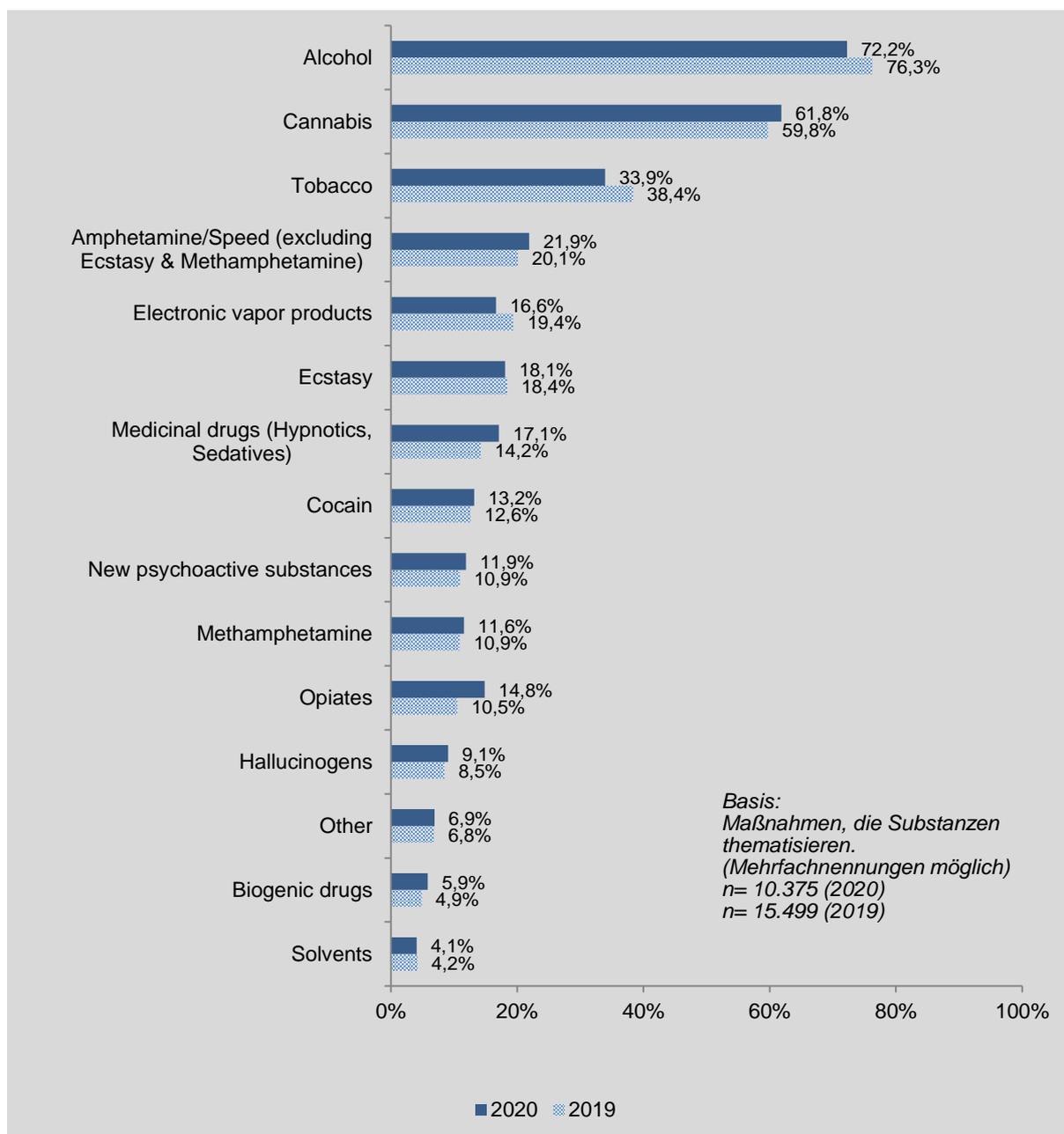


Figure 1 Substances covered in 2020 compared to 2019

- The focus (n=10,375) as far as the substances addressed is concerned, was on the prevention of the abuse of alcohol (72.2%), cannabis (61.8%) and tobacco (33.9%). The number of measures relating to cannabis slightly increased in the observation period, and slightly decreased for alcohol and tobacco. The largest increase in measures was recorded in the area of opiates.
- 24.0% 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 16.2% of cases.

**Setting:**

- 44.3% of all documented measures were based in the school setting. The decline of around 10% in 2020 compared to the previous year is highly likely due to pandemic-related hygiene measures and the associated school closures. As in previous years, other measures were most frequently in the family (18.7%) and leisure (14.6%) settings.

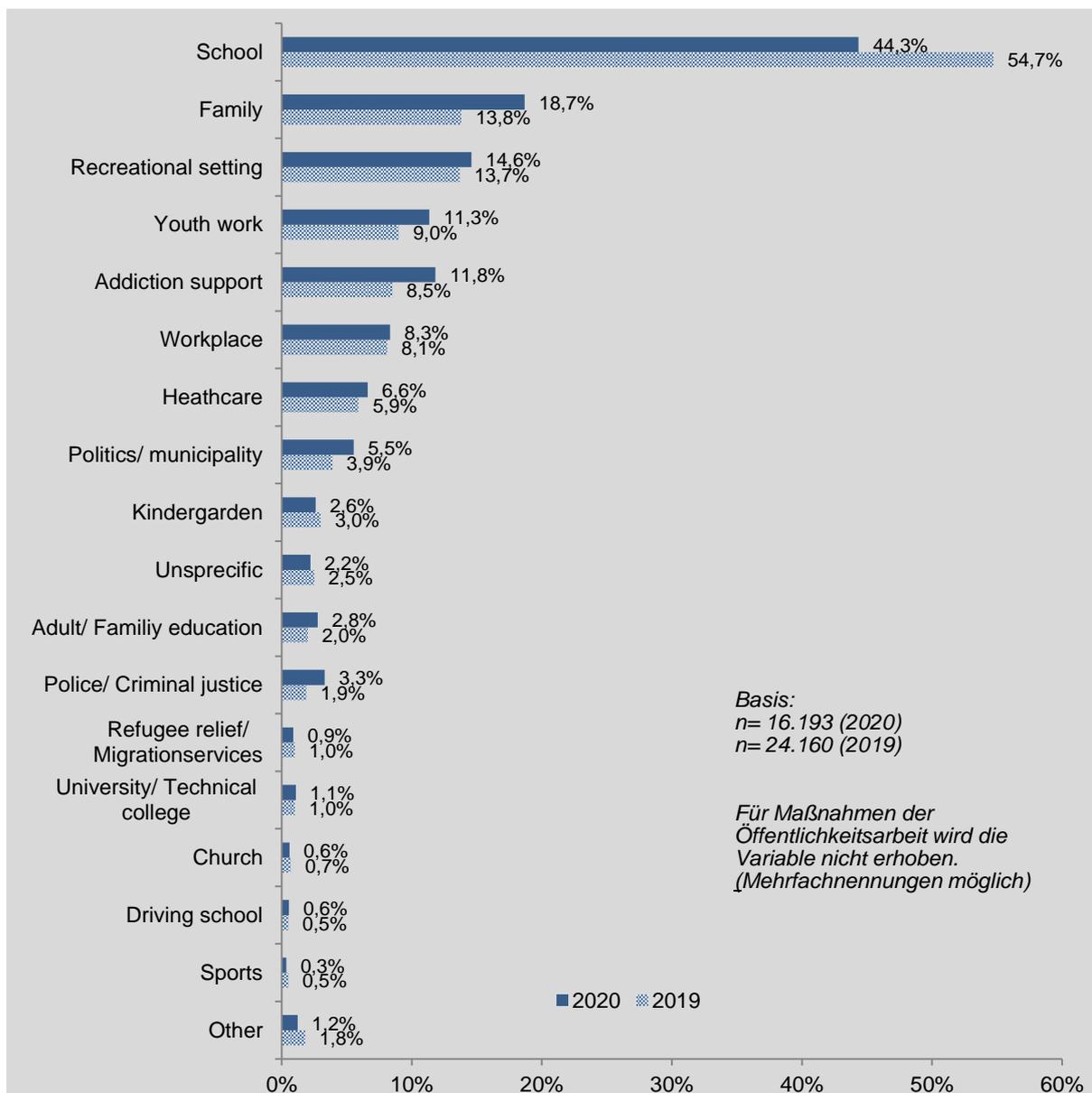


Figure 2 Settings of the measures in 2020 compared to 2019

**Quality assurance:**

- More than two-thirds of the addiction prevention measures recorded via the Dot.sys have been systematically documented (70.2%), and almost 30% have been evaluated. The documentation of the measures takes place mostly for internal use (59.0%). Approximately every tenth measure (11.2%) 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, providing information on or referral into support services is documented the least frequently (56.7%), while in contrast expert conferences are documented relatively frequently (82.7%). The highest rate of internal documentation is for prevention counselling (67.8%). The highest rate of external documentation is found for expert conferences (27.2%).
- The majority of evaluated measures are internal, i.e. evaluated by the respective institution (60%), in which process-oriented evaluations are most often carried out (43.8%). Currently, prevention counselling measures are the most often evaluated (23.9%).

### 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, the people reached, recommendations for further development and figures on specific expenditure for health promotion and prevention<sup>108</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 reducing socially-determined 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 to set up and expand health-promoting support

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<sup>108</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 can be found at <https://www.npk-info.de/> and <https://www.leitbegriffe.bzga.de/alphabetisches-verzeichnis/praeventionsgesetz/> [accessed: 21 Jun. 2021].

structures. Over 40 municipalities have already made an application for funding for a project to develop municipal structures<sup>109</sup>.

In the **GKV Prevention Manual (Leitfaden Prävention)**, the GKV umbrella association, in cooperation with the national health insurance provider associations, lays down the content-related areas for action and qualitative criteria for the health insurance providers' services in primary prevention and operational health promotion, which are binding for on-site service provision. The most recent version of the manual was published in December 2020<sup>110</sup>.

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

According to the EMCDDA, in comparison to 2019, overall use during the pandemic period appears to have been similar for most drugs, and in some cities has even increased. While data from Europe implies that drug use decreased during the various lockdowns, these trends were subsequently reversed as the various restrictions were lifted. During the lockdowns, the consumption of drugs that would usually be associated with recreational events (for example MDMA) seems to have decreased in particular. The situation is different for substances that are easy to consume in the home environment (EMCDDA 2021a, 2021b).

The Mannheim Central Institute of Mental Health (Zentralinstitut für Seelische Gesundheit, ZI Mannheim) and the Nuremberg University Hospital (Universitätsklinik Nürnberg) evaluated the trends in the consumption of alcohol and tobacco during the pandemic in Germany (Georgiadou et al., 2020)<sup>111</sup>. According to their findings, 41.0% of respondents stated that their alcohol consumption had not changed since the start of the restrictions on going out. In contrast, 37.4% reported that they had drunk more (29.1%) or even much more (8.3%) during this period. The team around Jakob Manthey (2020) also arrived at similar findings: According to them, the decline in Germany was mainly due to a reduction in the opportunities for binge drinking; drinking frequency even increased slightly compared to other countries. Above all, they found an increase among women and people who have experienced negative effects with regard to their job or finances, and among those with high-risk patterns of use. The data suggests that people with low-risk consumption have drunk less since the start of the pandemic, while consumption among those with high-risk patterns of use has increased (Manthey et al., 2020).

In the Phar-Mon Plus study of users (Lochbühler et al 2020), almost one third of respondents reported that their alcohol consumption had increased since the start of the coronavirus pandemic. With regard to binge drinking, 24% of respondents reported an increase and 31% a

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<sup>109</sup> Further information can be found at <https://www.gkv-buendnis.de/foerderprogramm/foerderangebote-im-ueberblick/> [accessed: 21 Jun. 2021].

<sup>110</sup> Available at: [https://www.gkv-spitzenverband.de/media/dokumente/krankenversicherung\\_1/praevention\\_\\_selbsthilfe\\_\\_beratung/praevention/praevention\\_leitfaden/Leitfaden\\_Praevention\\_2020\\_barrierefrei.pdf](https://www.gkv-spitzenverband.de/media/dokumente/krankenversicherung_1/praevention__selbsthilfe__beratung/praevention/praevention_leitfaden/Leitfaden_Praevention_2020_barrierefrei.pdf) [accessed: 5 Jul. 2021].

<sup>111</sup> Initiated by the Mannheim Central Institute of Mental Health and the Nuremberg University Hospital. Available at <https://www.tls-suchtfraegen.de/wp-content/uploads/2020/07/Die-COVID-19-Pandemie-als-idealer-N%C3%A4hrboden-f%C3%BCr-S%C3%BCchte-Befragung.pdf> [accessed: 2 Jul. 2021].

slight increase. 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 exacerbate high-risk alcohol and tobacco consumption and addictive behaviour (Georgiadou et al., 2020).

In the Phar-Mon Plus study, the majority of respondents also reported that the frequency of consumption of psychoactive substances had not changed on average since the start of the pandemic. Almost one fifth of respondents reported that their use has increased since the start of the pandemic. One quarter also reported that the dose of substance taken in each instance had increased since the start of the pandemic. An increase in dosage per instance was observed primarily for heroin, alcohol and speed (Lochbühler et al., 2020). In the same study, almost 10% of respondents reported increased use of cannabis since the start of the pandemic. This increase is above all due to increased consumption among regular users.

In a survey by Werse & Kamphausen (2021), the proportion of people using cannabis more since the start of the pandemic is even higher. Of the cannabis users surveyed, 16% reported having used less since the start of the pandemic, 45% the same amount and 39% more than before (Werse & Kamphausen, 2021).

Lochbühler et al. found no change with regard to MDMA and cocaine use. Data from the Global Drug Survey, however, shows a decrease in substance use of MDMA and cocaine in social settings (Lochbühler et al. 2020). The reduced consumption is explained by the lack of use opportunities, clubs and bars being closed and contact restrictions being imposed (Winstock et al., 2020). Current wastewater analyses<sup>112</sup> and the quantity of cocaine seized, however, indicate that the consumption of cocaine in Europe has also continued to increase during the pandemic period (EMCDDA 2021b).

With regard to the sources of supply of psychoactive substances, no large changes were reported compared to the pre-pandemic period. Psychoactive substances continue to be most frequently obtained from friends or acquaintances (Lochbühler et al., 2020).

In addition, the availability of “hard” drugs appears to have been only partly limited during the pandemic period. According to a survey by Werse und Klaus (2020), the bigger problem for people compulsively using “hard” drugs was a more severe shortage of money due to the changed living conditions (Werse & Klaus, 2020).

## Initiatives

The contact restrictions during the lockdowns as a result of the coronavirus pandemic and the new conditions for personal interaction also impacted addiction prevention. Interactive prevention services in schools were suspended, as well as support for interactive campaigns in sports clubs or the conducting of peer programmes. In its place, the use of digital possibilities has become a new focus, both in providing addiction prevention services, and in the cooperation

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<sup>112</sup> Further information can be found at <https://www.tagesschau.de/investigativ/kontraste/kokain-abwasser-101.html> [accessed: 2 Jul. 2021].

and networking with the *Laender* (Goecke, 2020). 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) interactive programme and “Alcohol? No your limit.” (Alkohol? Kenn dein Limit)<sup>113</sup>.

The **DHS** provides extensive information for addiction prevention and addiction support professionals on its website<sup>114</sup>.

Within the implementation of the German Online Access Act (Onlinezugangsgesetz, OZG), a national portal to be used across agencies providing social services (“social platform”) is to be created, which will also contain initial functionality for digital addiction counselling. In May 2021, the project began preparing the implementation of the portal. The intention is, by way of an iterative implementation, for addiction counselling to be available online, with initial functionality, to individual pilot municipalities and pilot counselling centres by the end of the first quarter in 2022. The North-Rhine Westphalia Ministry of Labour, Health and Social Affairs (Ministerium für Arbeit, Gesundheit und Soziales in Nordrhein-Westfalen, MAGS NRW) is charged with the implementation. MAGS NRW will be supported by the Federal Ministry of Health-funded **DigiSucht** project<sup>115</sup>.

The special units for addiction prevention have also adapted their services to the new situation. Addiction prevention services were provided in new, digital formats. The **Hamburg Addiction Prevention Centre (Hamburger Suchtpräventionszentrum, SPZ)** within the school authority has responded to the coronavirus pandemic by developing its own new digital format for addiction prevention. As universal addiction prevention in Hamburg is mainly provided on a cross-substance basis, the topics on illegal drugs are included, for example, in a podcast series or the learning arrangements on nicotine, alcohol and cannabis<sup>116</sup>. On 1 July 2021, one of the platforms created by the Hamburg Office for Addiction Issues (Hamburgische Landesstelle für Suchtfragen e.V., HLS) went live, via which drug and addiction support agencies will, in future, be able to video and chat counselling in a technically secure manner and in full compliance with data protection law.<sup>117</sup>

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<sup>113</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 Jun. 2021].

<sup>114</sup> Further information is available at <https://www.dhs.de/service/aktuelles/meldung/informationen-fuer-fachkraefte-in-der-suchthilfe> [accessed: 1 Jul. 2021].

<sup>115</sup> Further information can be found at <https://digsucht.delphi.de> [accessed: 5 Jul. 2021].

<sup>116</sup> Further information can be found at <https://li.hamburg.de/spz/14918590/digitale-formate-suchtpraevention/> [accessed: 29 Jun. 2021].

<sup>117</sup> Further information can be found at <https://www.landesstelle-hamburg.de/2021/07/01/digitalisierung-in-der-suchtkrankenhilfe-die-hamburger-suchthilfe-geht-voran-hls-e-v-schafft-eine-plattform-fuer-video-und-chatberatung> [accessed: 5 Jul. 2021].

In March 2020, the **Berlin Special Unit for Addiction Prevention (Fachstelle für Suchtprävention Berlin)** launched the **#PreventionDigital (#PräventionDigital)** campaign, under the motto “We are here for you now more than ever!” (Gerade jetzt sind wir für Sie da!“). Since then, digital prevention services for various target groups have been conceived and implemented under that umbrella. These include: interactive online seminars for professionals (for example, a certificate course for addiction prevention professionals within the school/youth work context), digital expert conferences (for example, an expert discussion on cannabis, “Don’t let the issue get forgotten!” (Nicht erst Gras über die Sache wachsen lassen!) and the input and exchange series “coffee corner” on current prevention topics. Videos have been created for end users (for example “Digital media: mobile phone, gaming, social media and how to deal with them in the family” (Digitale Medien: Handy, Gaming, Soziale Medien und der Umgang in der Familie)) and online events were offered that were in high demand, such as courses for parents on the topics of cannabis and digital media. By switching services to digital versions, it was possible to continue to reach the important target groups with prevention services, and in particular to further educate professionals on current topics and prevention approaches<sup>118</sup>.

The **Hesse Special Units for Addiction Prevention** currently offer additional information and online modules on addiction prevention (and on cannabis prevention): digital training, newsletters and handouts with further web-based information on addiction prevention, online modules for cooperation partners or tips for parents in crisis. Under the format “Autumn Academy Addiction Prevention – digital on site” (Herbst-Akademie Suchtprävention – digital vor Ort), it will also highlight the topic of addiction prevention online from the 27 October 2021. The one and a half-hour web seminars offer alternating professional areas of focus and address different target groups.

## Studies

Between 9 June 2020 and 31 July 2020, the SRH University of Health (SRH Hochschule für Gesundheit), Gera, conducted the survey “**Use of digital media during the corona crisis**” (**Einsatz digitaler Medien während der Coronakrise**). The 137 participants mainly came from Thuringia (42.34%) and Saxony (28.47%). The results were published in 2021 in a collection of papers on the topic of “Coronavirus, social work and society. New perspectives and paths” (Corona, Sozialarbeit und Gesellschaft. Neue Perspektiven und Pfade) (Verlag Beltz Juventa)<sup>119</sup>.

Further findings on the topic of “**The coronavirus pandemic in North Rhine-Westphalia addiction support – a boost to digitalisation?**” (**Die Corona-Pandemie in der Suchthilfe**

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<sup>118</sup> Further information can be found at <https://www.berlin-suchtpraevention.de/digitale-angebote/> [accessed: 30 Jun. 2021].

<sup>119</sup> Further information can be found at <https://idw-online.de/de/news750162> and <https://www.srh-gesundheitshochschule.de/forschung/abgeschlossene-forschungsprojekte/> [accessed: 2 Jul. 2021].

**NRW – ein Anschub für die Digitalisierung?**) were provided by a survey of counselling centres in North Rhine-Westphalia by the North Rhine-Westphalia Addiction Cooperation Office (Geschäftsstelle der Suchtkooperation NRW). The current results show that in the counselling centres, triggered by the coronavirus pandemic, operated using video much more than previously. This applies both to internal communication among colleagues and to communication with the target group. The reservations that existed towards video counselling before the pandemic (data protection, relationship with clients) have, due to the experience gained during the course of the pandemic, reduced. However, according to the feedback given, there is a further need for improved digital infrastructure (software, hardware). The results also show that digital processes in counselling centres were accelerated by the pandemic<sup>120</sup>.

A cooperation project between the Hamburg Institute for Interdisciplinary Addiction and drug Research (Institut für interdisziplinäre Sucht- und Drogenforschung, ISD) and the Berlin Special Unit for Addiction Prevention (Fachstelle für Suchtprävention Berlin gGmbH), the Hesse Office for Addiction Issues, the Saxony Specialist Coordination Centre for Addiction Prevention (Fach- und Koordinierungsstelle Suchtprävention Sachsen), the addictive substance-specific addiction prevention division and the Institute for Educational Development in Schools in Schleswig-Holstein (Institut für Qualitätsentwicklung an Schulen Schleswig-Holstein, IQSH) is also investigating **“The effects of COVID-19 on addiction prevention in Germany – opportunities and risks of greater digitalisation” (Auswirkungen von Covid-19 auf die Suchtprävention in Deutschland – Chancen und Risiken einer stärkeren Digitalisierung).**” The aim of this project is, among other things, to collect information on and analyse opportunities and barriers in addiction prevention practice in the coronavirus pandemic for addiction prevention professionals and opinion leaders in the family, school and open child and youth work settings, as well as experiences with digital addiction prevention projects, but also experiences with further training services on digitalising addiction prevention and possible changes to addictive substance use. Following that project, the intention is for recommendations for a digitalised practice of addiction prevention to be developed based on the results. The project is funded by the BZgA<sup>121</sup>.

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<sup>120</sup> Further information can be found at [https://suchtkooperation.nrw/fileadmin/user\\_upload/Evaluationsbericht.pdf](https://suchtkooperation.nrw/fileadmin/user_upload/Evaluationsbericht.pdf) [accessed: 5 Jul. 2021].

<sup>121</sup> Further information can be found at <https://www.hls-online.org/aktuelle-meldungen/auswirkungen-von-covid-19-auf-die-suchtpraevention-in-deutschland-chancen-und-risiken-einer-staerke/> [accessed: 1 Jul. 2021].

## 4 ADDITIONAL INFORMATION (T4)

## 5 SOURCES AND METHODOLOGY (T5)

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