

# ANNUAL REPORT 2007



## MISSION STATEMENT

We do not wish to walk indifferently away from those who have lost faith in themselves, in their fellows, in their very human existence.

Those who on their path through life have sought refuge in a drug and have thereby come to know its hidden face, a face which reveals itself with a ruthless logic – the face of suffering, pain, loneliness, oppression, and death. We wish to offer a helping hand to all who yearn for it, to all who have sounded an SOS. And we wish to warn those who see in drugs the symbol of a magical, mysterious, or romantic revolution, or the escape from an otherwise hostile reality.

**SANANIM in 2007**

Currently, the association operates eleven major systems - Outreach Programs, Contact Center, specialized outpatient services CADAS, Day Care Centre, Therapeutic Communities Karlov and Nemcice, Aftercare Centre with protected housing, Drug Information Center, Centre For People In Conflict With Law, Agency for Employment and Social Services, Consulting Room for Parents - and provides a range of completing and additional projects or programs. The most important include telematic consulting and information services (Drug Advice Centre, Promile INFO, and Alkotest etc.), Roma Outreach program and Program for Mothers with Children. Other projects focus particularly on education, primary prevention, publications and international cooperation. There are also significant activities in a separate legal entity (founded and fully-owned by our association) - SANANIM Charity Services Ltd. (Café Therapy, Charity shop). The activities of our association provided for the hiring of 142 employees of permanent staff and 40 of external staff.

Despite many difficulties and setbacks the year 2007 could be considered as a success. Not only in the sense that we were able to obtain funding for the basic operation of our programs, but we also made sure that resources additionally procured by us, would be effectively invested in the basic material and technical security, education and also in order to deepen the concept of professional care, international cooperation and other activities.

From the professional point of view it is unequivocal, that the association succeeded to maintain high quality and effective services standing professionally at the European level, which is corroborated not only by the concrete results of our work, our participation to planning and implementation of government policy, but also by our activities within the framework of European projects.

**KEY OBJECTIVES OF THE ASSOCIATION SANANIM**

- Provision of effective, professional assistance to persons threatened by drug addiction through the intermediary of a network of programs and services forming a complex system of prevention, care, treatment and re-socialization.
- Development of a system in the area of provision of specific services.
- Cooperation at local and central level planning and implementation of drug policy, including international cooperation and change the public view on the issue of drug addiction.
- Education of laymen, professionals and para-professionals on drug addictions.

**FUNDING AND CONTROL**

Implementation of all programs and operation of equipment is approximately of 75% financially supported by state subsidies and subsidies in the region or municipality. Other funds, i.e. about 25%,

the association receives from private parties, internally and finally, from Czech and foreign foundations, funds and programs. In the funding of health care CADAS is partially involved the General Health Insurance Company (VZP), its contribution, however, covers only 19% of the budget of facilities. The contract with it was as also our only contract with a health insurer in the year 2007.

Since the beginning of its existence the SANANIM manages state subsidies in a transparent and accountable way and seeks to provide the most professional and efficient services. Accounting of the association undergoes an annual audit and in 2007 it was submitted to several state controls. Stable, adequate and continuous funding, however, remains a key issue affecting the daily operation and in particular the development of the organization.

Positively, we must evaluate our high rate of success in the acquisition of grants for projects supported from the European Structural Funds. In 2007, we implemented six separate projects, and in another one we participate as partners. Due to the termination of their funding (four were focused on the development of new services) and to non-existent system of follow-up funding we have great concern about whether we will be able to maintain them. We consider as particularly important to continue providing those services that had immediately found their place in the service network.

## **COOPERATION**

As crucial for maintaining the network of services and further development of the association we consider in particular the close collaboration with the state sector and self-governments and the development of our foreign activities. We neither underestimated the cooperation with non-governmental community. We actively participate in the Association of NGOs A.N.O., both in the governing bodies and in individual sections. In the professional area the employees of the association actively participate in the activities of various professional bodies such as the Society of Addictive Diseases CLS JEP.

Within the framework of implementation of individual professional programs and services we work closely with many state professional facilities (e.g. PL Cerveny Dvur, PL Bohnice, Department of Addictions Apolinar, and FN Plzen) and non-government organizations such as Podane ruce, TK Nova Ves, TK Sejrek, and Drop In etc. The association alone or also in collaboration with other organizations organizes various educational activities and provides professional internships.

Also in 2007, we tried to develop cooperation with the commercial sector. However, it is clear that the current legislative conditions and the general public attitudes (and thus of the private sector) to drug dependencies are a limiting factor. We name our partners in this area with great thanks elsewhere in this report.

We continue to consider the international cooperation as an opportunity to gain new experiences and to draw funds for development activities for which there are insufficient domestic resources. Today, however, it also represents an area where we could offer help and a relatively long experience. Foreign activities in 2007 are briefly mentioned in another chapter of this report.

## **GENERAL ASSEMBLY AND MANAGEMENT BOARD OF THE ASSOCIATION**

In 2007 the association had 34 full members; most of whom regularly attended the General Assembly meeting convened by the association chairman always in December. In addition to standard tasks (changes in the statutes, approval of the budget, etc.), the General Assembly addressed in particular the issues related to organizational changes and to the development of the organization. In December 2007 the elections were held in administrative and supervisory bodies of the association.

The Management Board met on four regular meetings, which mainly discussed conceptual and economic issues, organizational changes, our plans for financial coverage, wage policy and the PR of the association.

## **ASSOCIATION'S OFFICE; MANAGEMENT**

The management of the organization and the secretariat of the association currently provide economic, personnel and administrative services, coordinating the activities of individual facilities and all contractual relationships. The office of the association is responsible for the development of international activities and the management of several international projects, public relations and sponsorship program (in collaboration with the Drug Information Center) and personnel policies as well as for all investment projects of the association.

Stable elements in the organizational structure are professional managers forming a connecting link between leadership and individual facilities.

## **TECHNICAL AND ECONOMIC SUPPORT OF THE ASSOCIATION**

All facilities are now relatively adequately satisfied in their technical and material needs, can communicate with the Internet network and have electronic addresses.

In recent years, however, it shows that some facilities do not have enough space, especially given the increase in the number of clients (Contact Center) or the increase of clientele with specific needs (Day Care Center and its program for mothers with children). We have been looking for a long time for a solution, but without success.

Given that the existing subsidy titles do not provide investment funds, as a crucial problem shows the gradual deterioration of tangible fixed assets, which is essential to the realization of our projects and to ensure basic activities (e.g. cars, technical equipment of kitchens, offices etc.).

## **ECONOMICS AND ADMINISTRATION**

In the system of economic operation were avoided major changes and whole the process is being secured using standard mechanisms. All economic data are subject to ongoing review and

primary financial documents are available for financial management and skilled supervision right after the monthly clearance. Economics and accounting are subject to detailed economic regulation and a number of internal regulations. The secretariat handles the administration of the association and equally has to comply with detailed internal regulations.

## **PERSONEL SUPPORT**

The system of financial appraisal of our workers, which would adequately reflect their education, training, initiative and creativity, unfortunately, could not be given in full in practice even this year, especially due to the very low subsidies on wage resources. This fact is very limiting for any staff policy. However, we managed to keep the trend favoring professional growth within the organization that allows the worker to progress in the system of our facilities.

The system of internal training of workers had stabilized by now and there are regular introductory courses for new employees, internships in various programs, clinical days and Balint workshops. All teams work under both external and internal supervision.

## **CERTIFICATION**

Certificates of proficiency were acquired in previous years by all the facilities suitable to apply for them with regard to the existing standards; in the year 2007 was certified our publishing activity in the area of primary prevention and training programs in the area of specific primary prevention.

Outside the certification process remain some services and programs (e.g. work in prisons, information services, employment of clients) that are in our view an integral part of the network services, inter alia, because they address audiences that are not in contact with other services of the care and treatment system.

## **AIMS OF THE ASSOCIATION AND THEIR FULFILMENT IN 2007**

Last year was again a period in which - despite major problems with the funding of individual associations - we managed to operate a comprehensive system of care for drug addicts. This year was also important for us that the SANANIM has continued developing itself as a highly professional organization, both in the care for clients and in the management area.

## **KEY AIMS, THEIR FULFILMENT AND SIGNIFICANT ACHIEVEMENTS IN 2008**

### **In the area of provided services**

As a key aspect may be considered the fact that we not only managed to maintain the existing services in operation, but also their quality and efficiency, including the interdependence of elements of the system.

As a success, among other things, we also consider stable attendance of all operated servers, high quality of the implementation of the projects subsidized by the ESF and supporting PR and fundraising activities.

### **Securing the network of programs and services**

- Legal Project - Increasing awareness of the rights of users of services for the people dependent on addictive substances, which took place in 2007, was supported by the European Social Fund budget of the Czech Republic and the budget of the City of Prague.
- Employment programs for improving the after-treatment of persons dependent on addictive substances and for their better chances of returning to society and the labor market were operated during the years 2006 to 2007; the project was supported by the ESF budget, CR and the budget of the City of Prague. The aim was to provide the indicated clients with protected jobs that would prepare them for employment in the current labor market.
- The project of Employment and Social Agencies aimed at improving the life circumstances of former users of addictive substances through successful implementation on the labor market was based on long experience of the SANANIM in treatment and rehabilitation after-care of users of addictive substances and their reintegration into society. Until August 31, 2007 it was supported by the ESF, from the state budget and the budget of the City of Prague and it formed an important link among treatment of clients and their successful transition to normal life.
- Expanding the offer of telematic services with Alkotest and Promile INFO.

### **Cooperation in planning and implementation of drug policy**

With few exceptions our cooperation with central authorities and the self-governments in the year 2008 continued at a very good level, the association has also been very actively involved in cooperation activities under the umbrella organization A.N.O.

- **Professionalization of provided services**
- Already for several years, despite the financial limits we manage to ensure a system of internal and external training (e.g. for new employees) as well as of trainings in specific activities (therapeutic communities etc.)
- Systematic support was given to the professional growth of teams and individuals through specialized training.
- A training program supported from the ESF was realized in full extent.

### **Key technical issues in 2007 included in particular the following**

- addressing the situation in low-threshold services, where the interest in individual services for a longtime already exceeds the capacity of individual facilities;
- ensuring the consistency of the various facilities and programs and their permeability for clients;
- implementing the Act 108/2006 Coll. on social services.

As important we consider the fact that all teams were working under quality internal and external supervision.

**Organizational and economic security**

- Management support and internal and external communications, including the development of international activities were found satisfactory by the Board. Given the scale and a broad range of association activities, however, we planned the necessary extension and restructuring of management organization, which did not allow us the financial limits in 2007.
- Given the growing administrative and economic agenda related to the inadequate system of financing, we were also prepared to start restructuring the economic system, but as in the previous case, mainly due to limited finances we could not make the planned changes.

*Mgr. Jiri Richter, Executive Director*

**SANANIM IN NUMBERS****CLIENTS AND OUTPUTS**

	TP	TP ROM	KC	CADAS	DST	TKK	TKN	DC	DC MAT	COKUZ	PSA	PPR
<b>Clients</b>	1660	293	2762	329	294	65	50	138	22	350	128	21
<b>Children in treatment with mother</b>	0	0	0	0	96	21	0	0	15	0	0	0
<b>Average age (users)</b>	27,5	26,5	28	29	28	26 mothers 20 minors	31,5	28	27	28	29	N/A
<b>Family members</b>	0	88	8	39	222	135	43	36	18	42	0	228
<b>Contacts</b>	27832	4911	28003	3751	5438	0	0	2817	1022	1262	471	720
<b>Bed occupancy</b>	0	0	0	0	0	8625	6148	4425	2363	0	0	0
<b>Individual therapy</b>	461	111	1257	1182	1620	2814	1618	2025	512	1618	902	1192
<b>Group therapy</b>	80	36	6	52	992	1092	773	257	257	34	0	0
<b>Family therapy</b>	0	0	18	17	138	187	75	10	4	17	0	66
<b>Parents group</b>	0	0	0	1	49	12	14	16	16	0	0	31

## Abbreviations

TP – Outreach Programs

TP ROM – Roma Outreach Programs

KC – Contact Centre

CADAS – Specialized Outpatient Services

DST – Day Care Centre

TKK – Therapeutic Community Karlov

TKN – Therapeutic Community Nemcice

DC – Aftercare Centre

DC MAT – Aftercare Centre for Mothers with Children

PPR – Consulting Room for Parents

COKUZ – Centre for People in Conflict with Law

PSA – Agency for Employment and Social Services

DIC – Drug Information Centre

## **PROGRAMS**

### **Outreach Programs**

*Outreach Programs are low-threshold facilities, which focus primarily on working with drug users on the open drug scene in busy places in the center of Prague.*

Outreach Program clients are intravenous drug users from both, majority society and minorities (Roma, Slovaks and other foreigners, mainly Russian-speaking), moving on the open drug scene. Open drug scene is situated in the Main railway station and in the surroundings of the Metro station Museum. In addition to the center the fieldwork was also conducted in the suburban agglomeration of Prague 13, where the drug scene has a rather closed character.

Number of contacts with clients after a sharp increase in 2003 was constant and regularly in excess of 25 000 contacts per year, representing a maximum capacity of the program. In 2007 the professional field staff worked daily on average with 113 clients and distributed 552 sets of injection. Consequently the large number of clients limits the room for consultation and increased the stress for workers and the clients themselves.

#### **The program achievements in 2007 include:**

- Maintaining regular contact with the Olah Roma and Russian-speaking clients who represent a relatively closed group and mostly are not in contact with any other institution.
- Clients were well informed about the possibilities of a follow-up care, the principles of harm reduction, risks associated with drug use etc. Field staff is being respected - in 2007 happened only eight cases of an aggression of a client to the worker, and only verbal.
- Implementation of the research into HIV / AIDS among Russian-speaking clientele, where the field staff worked with the Center of Addictology of the Psychiatric clinic of the 1<sup>st</sup> Medical School and the General Faculty Hospital of the Charles University in Prague, thus enabling the program to involve more people from this group, which was carried on by two Russian-speaking field workers.

### **Roma Outreach Program**

*Additionally to the current exchange program and contacting the Roma clients with the aim of intensifying the work with it in a personal contact, it equally focuses on advice and assistance services directly in the community and to the work in the families.*

Field work was carried out on Monday and Thursday from 14.00 to 19.00 hours in public spaces especially in the center of Prague. After an agreement the staff also visited the families for consultations.

#### **The achievements of the program in 2007 include:**

- The willingness of Roma injecting drug users to equally communicate with non-Roma field staff and also to search for other services within the care system (detoxification, psychiatric clinic). This was accomplished by mixed teams, which experience in working with Roma use also other Outreach programs in Prague.
- Staffing the fieldwork with two Roma workers operating in regular time and permanent locations, including assistance services (escort clients to doctor, to the substitution program etc.).
- Establishing contact with a larger number of Roma families.

### **Contact Center**

*These centers are low-threshold medical facilities for users of addictive substances older than 15 and their near persons providing mainly health, social and legal assistance even on anonymous basis.*

The clients are users of drugs over fifteen years (experimenters, problem users and people with moderate to severe addiction) and their parents, relatives, friends, partners and friends.

The client traffic in the center is still high. In the winter months daily came in 92 clients on average, the most (136) were on 13th March. This increase represents an enormous overload on the personnel and space sides. A crisis solution would be to limit the operation of the center and of its laundry services. In the second half of 2007, the number of contacts decreased to 77 clients a day, which is on the limit of center capacity.

### **The achievements of the program in 2007 include:**

- Number of hours of provided individual counseling sessions increased over 2006 by 91 hours to 629 hours (i.e. 1257 performances). Providing quality information on harm reduction has led to a reduction in demands for outpatient treatment.
- Good linking of clients to the center's exchange program. Although the number of contacts decreased, the volume of exchanged injecting material has not changed.
- Increase of the number of tests for HIV (from 56 in 2006 to 77 in 2007). We recognize the importance of screening tests, and therefore in particular during the treatment in the consulting room we try to motivate clients to do these tests.
- Among the clients was conducted an extensive questionnaire survey. The target group was monitored by age, sex, drug use, residence, type of housing and services used. Hotline recorded almost 4 calls per day. Compared with the previous year, increased the number of parents (especially mothers) requesting advice on children using drugs.

**Specialized Outpatient Services CADAS**

*These are private medical facilities which provide for the users with substance abuse outpatient psychiatric treatments and outpatient detoxification and substitution. The only one in the SANANIM has signed a contract with the NGA (General Health Insurance Company).*

For the CADAS clients is typical a high co-morbidity of the use of psychotropic substance together with another mental illnesses, and the overuse of benzodiazepines, which also constitutes a serious problem

**Programs of outpatient psychiatric treatment**

Number of clients in outpatient treatment compared to the year 2006 increased to 174 clients, drug users and 39 clients, non-users, mostly drug users' near persons. Part of them was treated in parallel in other care facilities; some stabilized clients were in an extensive contact only with the CADAS.

**Substitution and detoxification program**

The increase of number of clients that grew approximately by a quarter compared to 2006 concerned particularly those who are in short-term care. In the long-term substitution therapy developed a core of stabilized, socially integrated clients requiring a minimum of psychiatric care.

Long-term outpatient detoxification program successfully completed 65% of clients (45% of full abstiners, less than 10% enrolled into another treatment or program).

Transitional and single substitutions (23% of clients) are based on the needs of clients, e.g. to ensure the entry into substitution treatment. The clients of this program are usually enrolled at the request of another facility or on a certified statement of the client (for example, the term of the beginning of treatment). Part of the clientele are foreigners with permanent residence in the CR, or without it, most citizens of the former USSR. Their enrollment is made in collaboration with Outreach programs.

**Day Care Center - Outpatient Psychotherapeutic Center**

*It is a private medical facility, which is designed for clients over 16 years with a diagnosis of abuse in particular of non-alcohol drugs or dependence on them. The centre provides outpatient services, intensive stationary program of three months and a specific program for mothers with children.*

All Day Care programs were attended by 492 clients-users and non-users and the number of performances over the previous year increased by 16 percent. An even stronger growth of performances was noticed in the programs of individual and social work (40%), which managed to combine the therapeutic component with social and rehabilitation ones, which is necessary for the successful adaptation of the client to normal civil life. The program of social work was used by all clients.

**Daily program**

The program was successfully completed by about 50% of clients and those should be added a further 20% who decided to continue it in 2008. Prematurely decided to terminate the program (mainly in the first week of treatment) 10% of clients in particular with complicated social background and complicated dual diagnoses.

Expelled were 20% of clients, mainly because of non-compliance with the regime. The clients, who abandoned the program or were expelled, are using a different type of care after agreement, either directly in the center or in cooperating facilities.

The factor affecting the daily group is the frequent combination of drugs and alcohol, which leads in some aspects to modifications of the content and the program of the facility. It also shows a lack of outpatient services for clients with alcohol dependence, who are increasingly contacting our facilities, which exceed our operational and personnel capacity.

**Program for mothers-users**

In relation to the data about whole the facility, this program recorded the highest growth of performances and of the number of clients. Services were used by 106 mothers, representing an annual increase of 10%, while 38% of mothers were clients of the daily group.

**Outpatient program**

The numbers of performances and first contacts remained essentially at the same level as in the previous year. Also the retention indicator (average number of visits per client) was comparable with the previous period.

Open-patient group (so-called motivational) was ran twice a week. Work was more intensively complemented by individual counseling and social work.

**The program achievements in 2007 include:**

- Intensive stationary treatment of three months became part of the stable offer of health care facilities, as a possible alternative to institutionalization or residential treatment is sought after by clients and respected by the professional public.
- We were able to maintain the care for dependent mothers and their children, and despite the lack of space and personnel capacities even expand it. The program was enriched by the care strengthening the mutual relationship of mother and child and of mother's parental responsibilities.
- Collaboration with state and non-state institutions in the Czech Republic took place smoothly and with mutual respect. Given the significant representation of clients with dual diagnoses in the center, the cooperation with medical institutions proved to be very appropriate.

### **Therapeutic Community Karlov**

*It was designed for teenagers and young adults and mothers with children. The community started in 1998; the first mothers with children were accepted three years later. Out of the 31 beds, which are available in the community, nine are designed for mothers and ten for children.*

#### **Treatment of minors**

The average age of clients was in 2007 as well as in the previous twenty years, but the largest part was under eighteen years of age. They are characterized by a shorter drug career and their stay at the community Karlov is usually their first treatment. Many were excluded from school for the use of drugs. Their motivation for treatment is lower than at older clients or mothers. Usually they start it under the pressure of an institution or parents. Ideally, they return to the family and begin to go back to school.

A special group are the clients from foster-care institutions, often with a criminal past and follow-up (conditional sentences, mandated treatment, pending trial). Overall, are increasing social problems, for which solution is complex.

#### **Treatment of mothers with children**

These clients were brought to treatment primarily due to pregnancy or maternity. They enter without the necessary treatment patterns and experience with the care of a child, and therefore should initially focus on the child to establish a relationship and acquire the basic skills. Demands placed on them during the treatment are great, and therefore the initial phase of the program focuses mainly on the educational part and the stay in the community, which is the basis of the therapeutic program.

#### **The program achievements in 2007 include:**

- Treatment was successfully completed by 16 young clients - i.e. 50% due to the target group, which is not very motivated or having a very ambivalent motivation, it is a good result.
- We succeeded in engaging in treatment clients from diagnostic and foster-care institutions, at whom due to their low motivation for the treatment such success means perseverance and desire to get away.
- Almost all mothers were able to take proper care for their children after the treatment.

### **Therapeutic Community Nemcice**

*It focuses on long-term treatment of older clients with a long drug career. It was founded in 1991 as the first facility of this kind in our country.*

The trend of enrolling older clients with a long period of regular drug use to Nemcice community continued even in 2007. The average age of new clients was 33.5 years for men and 29.4 for women; the average length of regular use of so-called hard drugs was 12 years.

The community worked with 50 clients, including 30 new enrollments. All used drugs by injection. Only 11 clients had previous experience with treatment in a therapeutic community. Treatment was successfully completed by 10 clients.

Typical was also the high proportion of patients with chronic hepatitis (23 clients), 15 clients had experience with criminal penalties, which greatly complicated the course and the outcome of treatment. Nine clients were subject of criminal proceedings during the treatment, 16 clients were in psychiatric treatment, medicated, and several others were regularly psychiatrically monitored.

**The achievements in 2007 include:**

- The average duration of treatment amounts to two thirds of the estimated treatment period, which can be regarded as a major success.
- In 2007, the Nemcice community took full care of a retired local priest.
- For clients who had to interrupt the treatment in the community and to serve their sentence in prison, we managed to make them return and continue the treatment.

**After-treatment Center with Protected Housing and Workshop**

*Provides aftercare for clients with particular drug treatment through protected housing program and outpatient programs. The menu also includes protected jobs for clients disadvantaged in the labor market.*

Of the 138 clients 95 had used outpatient after-treatment program, 43 program of protected housing and 26 protected employment program. On average, clients completed the after-treatment program in full length, whereas in the previous year it was only 77% of the recommended length of the program. In the protected housing they spent an average of 4.7 months in 2007. Several clients terminated the contract before term, because themselves they were able to find an affordable housing. However, the majority of them continued in the outpatient after-treatment.

**The achievements in 2007 include:**

- Significant increase in the average duration of the stay of clients in the program to 26.4 weeks, which is 102% of the recommended duration of after-treatment.
- Successful completion of the ESF project Work Programs, thanks to which during the period of 2006 to 2007 were employed 33 clients; 24 of whom subsequently found a long-term employment.
- Extending the offer of leisure activities.

### **After-treatment Center for Mothers with Children**

*Since 2003 it is a separate project, which builds on the motivation and pre-treatment care provided for by the Day Care Center and on the treatment of mothers accompanied by children in the Therapeutic Community SANANIM Karlov.*

Mothers with children are provided three basic types of services: outpatient after-treatment program, protected housing program and protected employment program. In 2007, the services used 22 mothers (with 15 children), including 12 in the outpatient program and 10 in the protected housing program.

In the protected jobs (cleaning work and work in the garden, work in the cafe as assistant cook or waitress, working in the pottery workshop) a total of 8 clients worked 1279 days.

#### **The achievements in 2007 include:**

- Intensive use of the group program, not just special groups for mothers with children, but also for other groups of the After-treatment Center.
- Increase of the average after-treatment period of 145 days in 2006 to 356 days in 2007.
- Due to the extended offer of protected jobs in the ESF project Work Programs the clients could adapt their working hours and work-loads in order to be able fully take care of their children.

### **Centre for People in Conflict with Law**

*Provides support, advice, assistance and treatment to drug users in all stages of criminal proceedings. Activities started in the autumn of 2006 and followed up on the earlier program Work with drug users in custody.*

The program focuses on clients for whom the existing network of services is difficult to be reached; therefore they are at an increased risk of drug and criminal recidivism.

#### **Project Work in prisons**

It is addressing the needs of users in custody or serving their sentences before release to freedom. The number of 334 clients benefited from the services (278 men and 56 women).

#### **Project of Post-penitentiary Care**

It focuses on social and consultancy activities on behalf of clients after serving a detention or penalty or conditional sentences, and who are highly vulnerable to social exclusion due to the combination of problematic factors (experience with custody or criminal penalties, therefore they have a criminal record, and experience with drugs). The number of 66 clients (50 men and 16 women) participated to the program; for 16 of them were made arrangements in order to enroll them into some form of a treatment. Employment and social counseling benefited to 51 clients (36 men and 15 women), of which 27 successfully found a job, or they were offered retraining or further education.

**The achievements of the program in 2007 include:**

- Compared with the previous year, we managed to contact more clients in prisons and more of them followed into the after-treatment care.
- Individual work was effectuated more intensively with clients, for whom after their release were mediated follow-up services related in particular to housing, employment or treatment.
- Program can flexibly respond to the needs of the target groups.

**Agency for Employment and Social Services**

*It focuses on improving the life conditions of former users of drugs through their accomplishment on the labor market, and interconnects the treatment with a successful transition to the normal life. It was established in the autumn of 2005 as the first project of the SANANIM supported by the European Social Fund, by the budgets of the City of Prague and of the Ministry of Labor and Social Affairs.*

**Clients**

Within the framework of employment consultancy it offers the basic orientation in employment relations, assistance in the job search, writing of structured CVs, preparation for job interviews, negotiating work contracts etc. It also helps clients to deal with social problems. The services offered also include the help to improve their education and to re-qualify.

**Cooperating employers**

An integral part of the Agency activities is the search for potential employers able to recruit clients who are handicapped with regard to their application on the free labor market (criminal record, poor health, poor education, little experience), and to establish with them a long-term cooperation.

In 2007, the Agency worked with 128 clients, which is 31 more than in 2006, the number of contacts was of 471, i.e. 55 more than in 2006. At the same time increased the number of employers who are steadily cooperating with the Agency and offer our clients vacant positions.

**The achievements of the program in 2007 include:**

- Mediation of employment and training to find jobs for 82 clients, among which 40% of people with criminal record and 50% of people with only completed basic education.
- Continued cooperation with more than 10 employers.
- Publication of the *Manual of good practice* - comprehensive material on the experience gained through procedures and methods of work.

### **Consulting Room for Parents**

*Offers assistance not only to parents but also to partners and other relatives of drug users.*

As in the previous year, the number of all types of services gradually increased. In individual psychotherapy and counseling, which are the most frequently provided services, the number of contacts increased almost four times compared to the last year. For the group of parents in a long-term supporting therapeutic contact the most effective approach was to combine individual contact with group psychotherapy.

Family or couple therapies with an average number of 4.5 sessions used a total of 48 persons.

#### **The achievements in 2007 include:**

- almost one hundred percent on-year increase in the number of new clients
- extension of the offer of groups for parents from one to two
- increasing the interest in family therapy

### **Drug Information Center**

*Collect, collate and publish information on the drug problem. Operates the websites of the SANANIM - Drug Information Server, Internet drug counseling website and the website of the association itself.*

**Drug Information Server** ([www.drogovyserver.cz](http://www.drogovyserver.cz)) was extended in 2007 with a portal for professionals (project implementers, NGOs workers etc.).

The total of published new articles was of 1297; compared to the previous year the visitors rate of the website increased to 124 315 unique visitors. Drug news DRAK were received by 1209 subscribers.

**Drug Advice Centre** ([www.drogovaporadna.cz](http://www.drogovaporadna.cz)) had seen a sharp increase in visitors. In 2007, were directly answered 2475 questions, the site had 91 923 unique visitors. In general, increased the number of inquiries related to alcohol problems. Among the already published answers to questions our visitors usually seek advice on pervitine.

**Professional Library** manages over 2000 titles of books and magazines.

#### **The achievements of the program in 2007 include:**

- The campaign Drugs and Parents (press conference, television and radio spots, banner campaign in the iDnes etc.)
- Significant increase in the traffic of all sites, but particularly of the Drug Information Server
- Re-design of the SANANIM website

## Health Facility SANANIM

In this professional segment are networked non-state health facilities of the civic association SANANIM – Day Care Center, Contact Centers, After-treatment Centers and CADAS. Individual workplaces are under the responsibility of their heads and of professional managers, but as a guarantor is responsible the Health Care Director.

The Health Facility SANANIM provides outpatient psychiatric and psychotherapeutic care, psychotherapeutic day care; Contact Centers also provide the basic health care for somatic diseases, which is essential for the clientele that typically wouldn't go to medical practices. The target group represent clients with a diagnosis of harmful substance use and dependence on them, especially on non-alcohol drugs (opioids and stimulants).

Among the opioids, it is especially heroin (18%), and illegally obtained buprenorphine - Subutex (17%). Stimulant drugs are exclusively represented by pervitine (41%); cocaine has been exceptional (2 cases). The representation of cannabis since 2000 continuously decreased; in 2005 it was of 2.8%, but rose slightly in 2006 to less than 5% and remained roughly the same amount even in 2007. If these clients ever seek the care of the SANANIM, it's mostly for the psychological complications caused by smoking marijuana. The proportion of clients registered with somatic and psychological complications is increasing, for example in CADAS it attained up to 80%. Among prevailing somatic complications are hepatitis B and C, which in particular the CADAS registers in more than half of the clientele. The most common psychological complications are toxic psychosis, anxiety, personality disorders and particularly depression, to which we pay more and more focused attention. The Health Facility SANANIM for many years focused its programs to the challenging outpatient treatment of clients with dual diagnoses and somatic complications as one of the few providers of care in the CR and cooperates with a number of professional facilities.

All units of the Health Facility SANANIM were granted the certificate in proficiency RVKPP. The statute of health facility represents a guarantee of the quality of provided care for its clients and for the SANANIM as organization it means a considerable legal protection, while for the professional public it is a factor facilitating communication and cooperation for the benefit of clients. Professionalism of the provided care and its documentation is consistently at a good level.

According to Law No. 48/1997 on the Public Health Insurance the provided services account for health care and the insured person is legally entitled to them. As far as by now, only the facility CADAS concluded (in June 2004) a contract on outpatient psychiatric care with the General Health Insurance Company (VZP). The amount of payments from the VZP is rather complementary to still indispensable public subsidies, because the payments are set to extensive medical care, which is inconsistent to the intensive comprehensive care that we provide, and which meets the needs of our clients.

**INTERNATIONAL COOPERATION**

In the year 2007 the SANANIM participated in various international activities, particularly in projects carried out within the European professional networks. Hence, the international cooperation was hampered by the total lack of financial means. Till now - given the known limits and constraints - we were dependent on the willingness of the organizers and international organizations to pay all costs associated with our participation. Even so, through our membership in the European professional networks (umbrella organizations, federations, etc.) we try to actively engage in professional events and contribute to the realization of the EU drug policy.

As for a service provider it is very important for us to participate in conferences, workshops and trainings in European and global professional networks, such as IHRD, CEEC-HRN, EFTC, ENDIP, FESAT and PREVNET, and actively cooperate with many renowned European organizations and agencies e.g. Trimbos, EATI, European Forum for Urban Safety (EFUS), DrugScope, Cranstoun Drug Services, Euro-Methwork etc.

**FINANCIAL REPORT SANANIM 2007****Revenues 2007****Outreach Program 5 418 284 Kč**

MZ 200 000 Kč  
MPSV 934 000 Kč  
RVKPP 2 309 000 Kč  
MHMP 1 707 000 Kč  
ÚMČ P1 200 000 Kč  
ÚMČ P2 20 000 Kč  
Own\* 48 284 Kč

**Roma Outreach Program 851 779 Kč**

MZ 70 000 Kč  
MPSV 238 000 Kč  
RVKPP 281 000 Kč  
MHMP 250 000 Kč  
Own\* 12 779 Kč

**Contact Centre 7 396 634 Kč**

MZ 200 000 Kč  
MPSV 1 538 000 Kč  
RVKPP 3 364 000 Kč  
MHMP 2 146 000 Kč  
ÚMČ P1 50 000 Kč  
ÚMČ P2 20 000 Kč  
ÚMČ P7 30 000 Kč  
Own\* 48 634 Kč

**Specialized Outpatient Services CADAS 2 282 963 Kč**

MZ 690 000 Kč  
MPSV 100 000 Kč  
RVKPP 412 000 Kč  
MHMP 720 000 Kč  
ÚMČ P1 50 000 Kč  
ÚMČ P2 20 000 Kč  
VZP 220 337 Kč  
Own\* 70 626 Kč

**Day Care Centre 3 699 638 Kč**

MZ 170 000 Kč

MPSV 716 000 Kč

RVKPP 1 159 000 Kč

MHMP 1 230 000 Kč

ÚMČ P1 165 000 Kč

ÚMČ P7 62 000 Kč

Own\* 197 638 Kč

**Therapeutic Community Karlov 8 069 704 Kč**

MPSV 1 660 000 Kč

RVKPP 3 404 000 Kč

MHMP 2 270 000 Kč

ÚMČ P10 50 000 Kč

Jihočeský kraj 150 000 Kč

Own\* 535 704 Kč

**Therapeutic Community Němčice 6 157 703 Kč**

MPSV 1 380 000 Kč

RVKPP 2 453 000 Kč

MHMP 1 740 000 Kč

Jihočeský kraj 150 000 Kč

Own \* 434 703 Kč

**Aftercare Centre 4 571 690 Kč**

MPSV 1 179 000 Kč

RVKPP 1 711 000 Kč

MHMP 1 413 000 Kč

ÚMČ P1 50 000 Kč

Own \* 218 690 Kč

**Aftercare Centre for Mothers with Children 977 495 Kč**

MPSV 262 000 Kč

RVKPP 347 000 Kč

MHMP 340 000 Kč

Own\* 28 495 Kč

**Consultancy Room for Parents 954 626 Kč**

MPSV 100 000 Kč

RVKPP 440 000 Kč

MHMP 300 000 Kč

ÚMČ P1 50 000 Kč

Own\* 64 626 Kč

**Centre for People in Conflict with Law 373 464 Kč**

MS 161 000 Kč

MHMP 200 000 Kč

Own\* 12 464 Kč

**Drug Information Centre 1 508 787 Kč**

MŠMT 158 000 Kč

RVKPP 674 000 Kč

MHMP 500 000 Kč

HWC 115 064 Kč

Own\* 61 723 Kč

**Drug Information Centre – Internet Primary Prevention 208 970 Kč**

MŠMT 208 000 Kč

Own\* 8 970 Kč

**Manual of Drug Prevention in Schools 191 590 Kč**

MŠMT 191 590 Kč

**Alkotest 157 765 Kč**

RVKPP 107 000 Kč

MHMP 40 000 Kč

Own\* 10 765 Kč

**Aftercare Centre – Theatre Project 173 397 Kč**

MK 50 000 Kč

MHMP 80 000 Kč

Own\* 43 397 Kč

**Evaluation of Treatment in Therapeutic Communities 159 000 Kč**

RVKPP 111 000 Kč

Own\* 48 000 Kč

**Democracy, Cities & Drugs 534 888 Kč**

DCD 534 888 Kč

**Project with Support from ESF 9 256 800 Kč**

XTP 1 333 438 Kč

DC 2 222 241 Kč

PSA 1 025 861 Kč

Education 625 719 Kč

Project Equal 1 013 680 Kč

COKUZ 2 162 619 Kč

Legal project 873 242 Kč

**Summary of Revenues according to Sources****State Institutions and Ministries**

MZ 1 330 000 Kč

MPSV 8 107 000 Kč

RVKPP 16 770 116 Kč

MŠMT 549 590 Kč

MS 161 000 Kč

MK 50 000 Kč

Městské úřady a kraje

Magistrát hl. m. Prahy 12 936 000 Kč

Městská část Praha 1 605 000 Kč

Městská část Praha 2 60 000 Kč

Městská část Praha 7 92 000 Kč

Městská část Praha 10 50 000 Kč

Jihočeský kraj 300 000 Kč

**International Projects**

AMOC-CORR 8 471 Kč

DCD 476 846 Kč

ESF 9 256 800 Kč

**Foundations**

Nadace České spořitelny 3 500 000 Kč

Nadace Život umělce 15 000 Kč

Other financial contributions 416 100 Kč

**Presents and Contribution by Individuals 175 606 Kč****Revenues from Own Sources**

Aromka 765 284 Kč

Rents (clients) 280 540 Kč  
Contributions (clients) 498 489 Kč  
VZP 572 905 Kč  
Interests 48 626 Kč  
Other 919 444 Kč

## **PROFIT AND LOSS STATEMENT**

### **A. Expenses**

1. Material 10 141 155 Kč  
2. Repairs 1 538 460 Kč  
3. Energy 1 520 745 Kč  
4. Services 8 459 084 Kč  
5. Personal expenses 32 330 242 Kč  
6. Taxes and fees 274 040 Kč  
7. Depreciation 185 687 Kč

**EXPENSES IN TOTAL 54 449 413 Kč**

### **B. Revenues**

1. Sales 765 284 Kč  
2. Other revenue 2 318 003 Kč  
3. Reserves 2 000 Kč  
4. Received contributions in total 2 850 152 Kč  
5. Operational subsidies in total 49 370 506 Kč

**REVENUES IN TOTAL 55 305 945 Kč**

**Income tax 77 040 Kč**

**C. Profit before taxes 856 532 Kč**

**D. Profit after taxes 779 492 Kč**

## **BALANCE SHEET**

### **Assets**

#### **A. Long-term assets**

Long-term tangibles 37 535 848 Kč  
Long-term financial assets 731 600 Kč  
Depreciation of long-term tangibles...- 283 126 Kč

#### **B. Short-term assets**

Receivables 1 219 611 Kč  
Short-term financial assets 6 245 102 Kč

Other assets 262 214 Kč

**ASSETS IN TOTAL 45 711 249 Kč**

**Liabilities**

A. Own revenues

Equity 42 847 242 Kč

Profit 779 492 Kč

B. Other revenues

Short term payables 1 376 637 Kč

Other liabilities 707 878 Kč

**LIABILITIES IN TOTAL 45 711 249 Kč**

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\* By own means own revenues, sponsors' gifts and payments from clients, VZP etc.

**AUDIT REPORT FOR THE ADMINISTRATION BOARD OF THE ASSOCIATION**

SANANIM, civic association  
Ovci hajek 2549/64a, 158 00 Praha 5  
ICO: 00496090

Prague, June 6, 2008

I performed an audit of the accounts in terms of expenditure and revenue items and incurring operating results achieved and the financial statements as of December 31, 2007 of the civic association SANANIM, ICO 00496090.

The management of the association is responsible for compiling the accounts and bookkeeping in order to be complete, relevant and appropriate in accordance with applicable laws and regulations, including proper reporting of costs for individual projects, which have been granted subsidies.

My duty was to express an opinion on various aspects of the audited accounts specified in the contract between the auditor and the association and the specifications here under, and of the financial statements based on our audit.

The audit was conducted in accordance with the Act No. 254/200 Coll., on audits and international standards, especially the Standard ISA 800 - Auditor's Report on the audit for specific purposes and appropriate application guidelines. These international auditing standards require that we plan and perform the audit to obtain reasonable assurance that the company reported correct accounting entries on specific accounts and using the operating results of the previous year 2006 in the year 2007 and fulfilled the conditions of the contracts with the providers of subsidies.

The audit includes verification of accounting records and other evidence supporting the accounting and financial statements and assessing the accounting principles used in the accounting and the establishment of accounts of the association, in particular of the subsidized programs. During the audit were checked these specific aspects:

1. verification of the correct amount of cost and revenue items of the accounting entity for the audited period in subsidized programs.
2. examination of the adequacy of cost and revenue items
3. examination of the appropriateness of expenses, in particular in the subsidized programs
4. verification of the compliance of the Management Board's decision on the use of economic results for the previous financial year with the account postings in the audited period.

I believe that our audit provides a reasonable basis for our opinion.

In my opinion, the financial statements and accounting of the costs and revenues in subsidized programs in all significant aspects, provided

**a true and fair view**

of the financial position, of the reported results of its operation with subsidies, and of the results as a whole and the equity of the civic association SANANIM as of 31.12.2007 in accordance with the laws and accounting regulations applicable in the Czech Republic and the terms of the granting of subsidies.

The association presented a positive result for the year 2007 thanks to the contributions of private individuals and the sale of products manufactured by clients in therapeutic workshops.

The amount of cost and revenue items of the association in the accounting period of 2008 was appropriate to the activities of its various programs and to the normal operation of the association and necessary renewing and expansion of its assets and resources required to implement the object of its activities.

Funds were spent efficiently and economically in accordance with the idea of main activities and mission of the association.

The net return for the year 2006 as well as the return for 2007 were not used in 2007 and 2008 until the release of this report for any purposes others than for the costs of the main activity, the normal operation of the association and investments for which the funds were provided by private companies.

Ing. Jan Harapes

Auditor

Audit certificate nr. 1420

Proilova 5/437, 108 00 Praha 10