

European Monitoring Centre for Drugs and Drug Addresson

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SECOND INTER-INSTITUTIONAL CONFERENCE ON DRUGS POLICY IN EUROPE

Making the EU Drugs Strategy work



igh-level experts in the field of drugs met in Brussels from 28-29 February for the second Inter-institutional Conference on Drugs Policy in Europe organised by the Portuguese Presidency of the European Union, the European Parliament and the European Commission. The aim of the Conference was to discuss optimal ways of implementing the goals set out in the European Union Drugs Strategy (2000-2004), approved by the European Council in Helsinki in December 1999, and to reach a consensus on priority actions.

The Conference was opened by: António Vitorino, European Commissioner responsible for Justice and Home Affairs; Vitalino Canas, Secretary of State to the Portuguese Presidency; and Marietta Giannakou-Koutsikou, Member of the European Parliament.

Commissioner Vitorino underlined that the 'European dimension' in tackling drugs had greatly progressed in the five years since the first Interinstitutional Conference on Drugs Policy in 1995, ¹ largely thanks to the advent of the Maastricht and Amsterdam Treaties and to the efforts of the EMCDDA and Europol. He hoped that the Conference would fulfil its objective in 'making the EU Drugs Strategy work'.

Vitalino Canas stated: 'We must surely reflect on the need to create a decisionmaking and discussion body

at EU level specifically devoted to the issues of drugs and drug addiction. This body would co-operate closely with the Justice and Home Affairs Councils which, in turn, could be invited to formulate actions in the drugs field more effectively, according to the provisions of the relevant treaties.' Mr Canas also considered that the time had come to reflect on the competencies and responsibilities of the EMCDDA, set up as a purely technical body in 1993 against a juridical backdrop very different from today's. 'The EMCDDA should begin to play a pertinent role in supporting and feeding decisionmaking at the heart of the Union', he said.

Marietta Giannakou-Koutsikou regretted Member States' lack of political commitment to the drugs issue as reflected in the scarce financial resources devoted to drug policies, both at national and European level. She called for the organisation of regular joint meetings between Health and Justice Ministers at EU level in order to co-ordinate, at the highest possible political level, action on drugs in the EU.

The new EU Drugs Strategy, unlike its predecessors, requires that EU action on drugs be subject to evaluation, using relevant tools and measures. EMCDDA Director, Georges Estievenart, called for a 'method by which the overall Strategy could be furthered, monitored, checked and assessed, putting information to the optimal use'. He proposed a number of developments related to the political and legal structures currently in place to address the drugs problem. These included the organisation of regular meetings, involving national drugs co-ordinators, the European Commission, the EMCDDA and Europol, to evaluate initiatives at both national and EU level.

Mr Estievenart embraced the challenges and opportunities brought by the Strategy and welcomed the 'space it created to help further our similarities and, to debate and, if possible, reduce our differences'.

Five working sessions at the Conference covered:

• law and practice in the European Union;

• prevention – reducing demand, reducing the negative consequences of drug abuse and evaluation tools;

continued on p. 8

¹ The First Inter-institutional Conference on Drugs Policy in Europe was organised by the Spanish Presidency of the Council of the EU, the European Parliament and the European Commission in Brussels in December 1995.

DrugNet

The gypsy community and drugs

thnic minorities are particularly vulnerable to problems of drugs and drug addiction, being susceptible to various forms and degrees of social exclusion (e.g., poor access to education and unemployment). General preventive and curative measures operating in the EU Member States – such as prevention campaigns and treatment facilities – are, by nature, not tailored to specific groups. As a result, they can neither fully reach nor benefit these communities.

Since 1995, with the support of the European Commission, the Spanish Gypsy Association (Asociación Secretariado General Gitano) has been developing a network of organisations in six EU countries¹ to help shape drug prevention programmes and tools specifically to the needs of gypsy populations.

On 20 January 2000, in co-operation with the Spanish co-ordinating body on drugs issues, the National Plan on Drugs (*Plan Nacional sobre Drogas*), the Association organised a seminar in Madrid entitled 'The gypsy community and drug addiction'. The seminar was attended by the EMCDDA and representatives of Spanish regional nongovernmental gypsy organisations and local authorities.

The purpose of the seminar was to share know-how and experience in developing drug-related activities in gypsy communities. On the one hand, the seminar underlined the need for awakening Spain's general social and health structure to the specific needs of gypsies and, on the other hand, the importance of involving members of that community in preventive strategies.

Philippe Roux

¹ The network includes the following countries: Finland, Greece, Italy, Portugal, Spain and the United Kingdom.



For further details, please contact: Pedro Puente Fernandez, Asociación Secretariado General Gitano, Calle Antolina Merino 10, E-28025 Madrid, Spain. Tel: ++ 34 91 422 09 60. Fax: ++ 34 91 422 0961. e-mail: gitanos@asgg.org Web site http://www.asgg.org

NEW EMCDDA DEMAND-REDUCTION PROJECTS

Evaluation guidelines for outreach work

s a follow-up to its 1999 study on 'Outreach work among drug users in Europe,'¹ the EMCDDA has commissioned a new project to promote and improve the evaluation of outreach work activities. Outreach work requires a particular type of evaluation due to the hard-toreach nature of its target groups and setting. The contractors – the Centre for HIV/ AIDS and Drugs Studies (Edinburgh) and the University of Amsterdam – will develop guidelines in the context of the EMCDDA's overall strategy to provide demand-reduction professionals with evaluation tools. They will also examine how to facilitate data-collection and how to enhance possibilities for training and co-operation. The project, which kicked off in February, will take into account the findings of the previous outreach work study. Results are expected in the autumn.

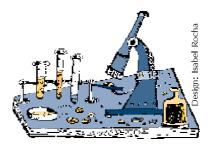
Gregor Burkhart

¹ The results were published in the EMCDDA's Insights series No. 2. ISBN: 92-9168-062-1.



On-site pill testing

n-site pill-testing interventions in the European Union', is the topic of the second EMCDDA-commissioned project launched in February. The contractors – Verein Wiener Sozialprojekte and Check-It (Vienna) – will draw up an inventory of existing on-site pill-testing programmes and examine



their: objectives; evaluation indicators; target groups; methods; potential; and pitfalls. The ultimate goal of the project is to assess how prevention and harm-reduction measures can be tied in with pill-testing work (e.g., in discos and raves) and how information generated by the EMCDDA under the Joint Action on New Synthetic Drugs may be channelled into this type of demand-reduction practice. The results of the study are expected in the autumn.

Gregor Burkhart

¹ Organisations running pill-testing programmes include: the Dutch Information Monitoring System; Eve and Rave (Germany); Médécins du Monde (France); and Modus Vivendi (Belgium).

CENTRE DRAWS ON YOUTH MEDIA

dentifying new, or poorly developed, data sources that may be useful for detecting and understanding the latest drug consumption patterns in the EU, is one of the current goals of the EMCDDA and could lead to more timely, targeted and effective drug programmes and policy responses in the future.

In recent years, early accounts of two major drug trends – the emergence of ecstasy and the rise in heroin smoking – were found in the youth, style, or music media ('youth media'). These accounts appeared long before specialised drug information sources began to report the trends, and attention was drawn to the wealth of data to be found in this domain.

In February 2000, the EMCDDA launched a feasibility study¹ into using easily accessible references to drug use in the youth media to develop indirect 'leading-edge' indicators of new patterns in drug consumption.² These indicators could result in new-trends data being collected and understood far earlier than in the past in the context of young people and their lifestyles. The sources to be examined in the study could include youth, style or music magazines and flyers as well as Internet sites and TV and radio programmes in the EU.

A major goal of the study is to explore the relationship between specific youth media and actual drug use. Understanding the relationship between the two poses a difficult challenge and undoubtedly explains why the youth media have not been used systematically by drug researchers in the past. While one item of media material may indicate the existence of a new drug-use trend, another may, inadvertently, promote one.

The study will bear in mind that the aim of most youth media is to entertain and that consequently fiction is produced, bearing no relationship to empirical events. Results are expected in the autumn.

Deborah Olszewski

¹ Contractor: *Gruppo Abele*, Italy. ² Leading-edge signifies being at the forefront of a new trend See *DrugNet Europe* No. 20.



Youth, style and music media: sources of leading-edge indicators of drug use?

BOOKSHELF



Report of the International Narcotics Control Board for 1999

The latest International Narcotics Control Board (INCB) annual report was released on 23 February. Among the many issues examined in the report is the question of ensuring an adequate licit supply of narcotic drugs for medical purposes, especially in developing countries. In a world of growing illicit drug taking, the Vienna-based INCB is concerned that people for whom drugs would be of great benefit, such as those experiencing pain in the later stages of cancer, have no access to well-established pain relievers such as morphine and other opiates. In contrast to the lack of pain-relieving medicines in developing countries, it highlights the problem of over-medication in the developed world.

The Board urges governments to adopt a flexible, more humanitarian approach based on a functioning drug-supply management system that would ensure the availability of controlled drugs for medical purposes, especially in developing countries and in situations such as humanitarian emergencies. Other topics discussed in the report include: the rise in cannabis use among young people and the increased use of, and trafficking in, amphetamine-type stimulants across East and South-East Asia.

Published by: International Narcotics Control Board. The INCB, established in 1968, is the independent and quasi-judicial control organ for the implementation of the United Nations drug conventions. The Board is independent of governments and of the UN, although is funded by the latter. Background information on its work can be found at http://www.incb.org. Contact: INCB, Vienna International Centre, Room E-1339, PO Box 500, A-1400 Vienna, Austria. Tel: ++ 43 1 26060. Fax: ++ 43 1 26060/5867/5868. E-mail: secretariat@incb.org. Date: Period covered, 1999. Released 23 February 2000. Language: English. • Price: 20 USD plus 12 USD postage and packing. Downloadable from http://www.incb.org. ISBN: 92-1-148123-6. • Volumes may be ordered from: United Nations publications offices in Geneva (Tel: ++ 41 22 917 2614 or e-mail: unpubli@unog.ch) or New York (Tel: ++ 1 212 963 8302 or e-mail: publications@un.org).

The EMCDDA is responsible for the selection of materials for the Bookshelf and for the text presented. However, responsibility for the content of these publications and the opinions expressed therein lies with the authors themselves.

ESTIMATES OF PROBLEM DRUG USE AND NATIONAL DRUG POLICIES

stimates of problem drug use have often been seen as a cornerstone of drug policymaking at national level. Only a few years ago, unfounded and arbitrary estimates were exploited in strong disputes on national policy both in, and between, some European countries. More recently, these emotional number exchanges have decreased, coinciding with the availability of new and more comparable and reliable national figures.

These new figures suggest little direct association between the actual prevalence of problem use (as well as other drug use) and national drug policy – although the latter is probably key in minimising the consequences of problem use, such as infections and overdose. Indeed, the countries with the most liberal or the most restrictive policies seem to have comparably moderate prevalence, while countries with 'middle-of-theroad' policies may have much higher levels of problem use.¹

The EMCDDA is developing more indepth analyses of the levels and spread of problem drug use through several expert groups.

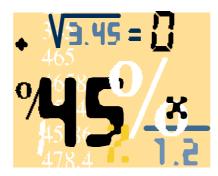


TSER expert meetings

From 3–5 February, two expert working group meetings were held at the German Focal Point (IFT) in Munich, within the framework of the 'European network to develop policy-relevant models and socio-economic analyses of drug use, consequences and interventions'.

This network – composed of 30 experts in quantitative analysis and divided into six working groups – is funded by the European Commission's Targeted SocioEconomic Research (TSER) programme (Directorate General Research) and is co-ordinated by the EMCDDA.

The meetings in Munich focused on estimating the national prevalence (all cases existing in a given year) and incidence (all new cases occurring in a given year) of problem use.



• Estimating prevalence

The working group on national prevalence of problem drug use (co-ordinator: IFT) concentrated on the methodological issues of one estimation method: the multivariate indicator method.²

Recent analyses using this method in the German Länder revealed little correlation between social indicators (e.g., unemployment) and drugs indicators.

For Italy, prevalence estimates using the above method were presented for the last 10 years. These compared well with the results from the incidence group (both showing a peak around 1991), suggesting cross-validity.

During and after the meeting, it became clear that new national prevalence estimates (using the above and other methods) are likely to be available for the 2000 EMCDDA *Annual Report* from seven countries, including Spain (which previously had provided no estimates).

• Estimating incidence

The working group on the incidence of problem drug use (co-ordinator: University 'Tor Vergata', Rome) presented methodological improvements to the back-calculation procedure, used to estimate incidence from treatment data, and introduced a data-collection tool. An additional estimation method was also presented, based on a reportingdelay-correction procedure, which seems promising for cases where only few years of treatment data are available.

An epidemiological sub-group has been set up that will describe the processes that may affect the quality of data for these analyses in the participating sites.

The *future*

More accurate prevalence estimates, estimates for sub-groups of problem users, and, especially, estimates for more consecutive years are necessary for more reliable analysis of the correlation between the prevalence of problem drug use and national policy. Incidence estimates may even be more important, as they should show more directly the effect of interventions directed at reducing rates of new problem drug use.

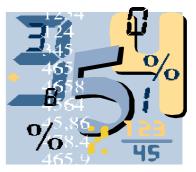
Data availability and quality is, however, the major drawback for obtaining reliable estimates and analyses. In Italy, a project is underway to improve data collection at treatment centres, while data collection from young problem users in out-oftreatment settings is being considered in several countries.

The EMCDDA is developing projects to improve data collection at EU level (key indicators), the support for which at national level is increasing.

Lucas Wiessing, Ludwig Kraus, Carla Rossi

¹ See 1999 EMCDDA Annual Report on the State of the Drugs Problem in the European Union.

² EMCDDA guidelines are being developed on national prevalence estimation, a draft version is available.





THE EMCDDA AND ITS PARTNERS

EMCDDA and WHO to sign Memorandum of Understanding

draft Memorandum of Understanding (MOU) formally establishing cooperation between the World Health Organisation (WHO) and the EMCDDA was endorsed by the Centre's Management Board at its meeting from 12–14 January. The official signing ceremony of the MOU will take place in Brussels in March.

The agreement will help the two organisations improve the collection, analysis and dissemination of existing data on drugs and develop and promote data-comparison methods. It will also allow them to better coordinate their efforts to:



- achieve optimal use of available information;
- enhance the quality of their respective reports;
- ensure the most effective use of resources;
- develop synergies in the planning and co-ordination of their activities;
- exchange information on matters
- of common interest;avoid duplication of effort.
- avoid duplication of effort.

Concrete joint projects of cooperation will be identified by the two bodies following conclusion of the agreement. The MOU will be drawn up in accordance with the statutes of the WHO and the founding regulation of the EMCDDA.

Ignacio V zquez Molin



International Drug Control Summit 2000

MCDDA Director, Georges Estievenart, participated in the International Drug Control Summit 2000 held from 8–9 February in Washington DC. The Summit was organised by the United States House of Representatives in conjunction with the United Nations International Drug Control Programme (UNDCP).

The Summit, which had a regional focus and a global scope, provided participants from the European Union, Canada, Japan, and the United States, with the opportunity to engage in a strategic dialogue on growing international drug concerns. Roundtables focused on issues of demand and law enforcement and the latest trends in illegal drug production, trafficking, consumption and money laundering. Speakers included: former Japanese Prime Minister, Ryutaro Hashimoto; Director of the US White House Office of National Drug Control Policy, Barry R. McCaffrey; Executive Director of the UNDCP, Pino Arlacchi; and Sir Jack Stewart-Clark, former Member of the European Parliament.

Georges Estievenart participated in the roundtable on demand issues where he presented the latest data on demandreduction responses in the EU as outlined in the Centre's 1999 Annual Report on the State of the Drugs Problem in the European Union.

Ignacio V zquez Molin

<u>ERIT 4th International</u> Conference

he European Federation of Professionals Working in the Field of Drug Abuse (ERIT) organised its 4th International Conference in Oporto (Portugal) from 3–5 February under the auspices of the Portuguese Presidency of the Council of the EU. Entitled 'Use, harm and addiction: working towards multicultural practices', the event was supported by the European Commission and the Portuguese government.

Over 1,400 professionals from 24 countries attended the Conference, including representatives from the EMCDDA. The packed programme included some 160 presentations covering all aspects of responding to drugs and related problems.

The Conference adopted a final Declaration which stated, among others, that European drug policies needed to take account of 'European specificity' (respecting the cultural diversity of populations), as well as the realities at ground level, as relayed by associations of professionals.

Prime Minister of Portugal, António Guterres, closed the Conference calling for a global and comprehensive approach to the drug phenomenon.

A new ERIT Management Board was nominated at the event with Roberto Bosi (Italy) elected as the new President.

Philippe Roux

Detailed information on ERIT's programme of activities and the above Conference is available on the ERIT web site

at http://www.erit.org/theoporto%20dec.htm

Further information may be obtained by e-mail from: info@erit.org





EMCDDA STATUTORY BODIES

Management Board

he 19th meeting of the EMCDDA Management Board will take place on 3 March in Lisbon and will be fully devoted to the results of a recent evaluation of the Centre by external consultants. The Board will discuss the conclusions and recommendations drawn up by the evaluators and take decisions on the necessary follow-up measures.

The EMCDDA was one of the first EU decentralised agencies to undergo an external evaluation. The exercise was requested by the European Commission and the EMCDDA Management Board in January 1999.

The next meeting of the Board will take place in Lisbon from 6–8 September 2000.

Kathleen Hernalsteen

Scientific Committee

he 13th meeting of the EMCDDA Scientific Committee will be held in Lisbon from 16–17 March. Discussions are expected to focus on the results of the recent external evaluation of the Centre as well as on the findings of a technical evaluation of the mechanisms set up to implement the 1997 Joint Action on New Synthetic Drugs.

The Committee's Steering Group on new synthetic drugs will meet on 16 March as will its two sub-committees responsible for developing quality indicators for epidemiological and demandreduction studies.

Lena Westberg

EMCDDA/Europol: Joint reports on Ketamine and GHB underway

oint reports resulting from an exchange of information between the EMCDDA and Europol are currently being prepared on the substances Ketamine and GHB (Gamma-hydroxybutyrate) under the terms of Article 3 of the Joint Action on New Synthetic Drugs.

This preliminary information-gathering process, covering the 15 EU Member States, was requested by the Horizontal Drugs Group (HDG) of the Council of the EU in September 1999. When finalised, the reports will be submitted to the HDG for consideration.

Lena Westberg



🕺 FORUM

News from around the European Union

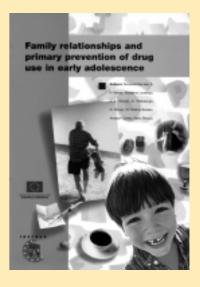
he European network IREFREA (Institut de recherche européenne sur les facteurs de risque chez l'enfant et l'adolescent)¹ has released the findings of its FARPA project undertaken in 1997 and 1998 on the role of the family in primary drug prevention.² Funded by the European Commission, the project includes study samples from four European cities: Coimbra (Portugal); Madrid (Spain); Modena (Italy); and Lyons (France).

The project assessed the family dimension of risk and protective factors related to drug misuse, with the aim of improving the planning and implementation of primary prevention interventions. Specific risk factors identified in the study, which are of practical relevance to prevention programmes, include parental permissiveness towards discipline and indulgence of anti-social behaviours. Specific protective factors include parental assertiveness, which the study distinguishes from parental severity or inflexibility. The importance of systemic family factors in drug prevention is confirmed by the project, despite their limited impact during adolescence due to peer group influence and individual characteristics.

This project demonstrates IREFREA's shift towards practical and intervention-based research, which can be used directly for the design, adjustment and evaluation of prevention programmes. The results, published in 1999, are welcomed by demand-reduction practitioners.

Gregor Burkhart

¹ IREFREA, a European network committed to promoting and investigating the primary prevention of different sorts of 'juvenile malaise' as well as the study of protective and risk factors. ² Substances use – family, risk and protective factors during adolescence.



The publication Family relationships and primary prevention of drug use in early adolescence is available free of charge in English (+ 10 EURO postage and packing) from IREFREA Spain, Ramblas 14 (2-3) 07003 Palma de Mallorca, Spain. Tel: ++ 34 971 727434, Fax: ++ 34 971 213306. E-mail: irefrea@correo.cop.es. ISBN: 84-605-9902-7.

Also downloadable from http://www.irefrea.org. Research co-ordinator, Fernando Mendes (Coimbra).

DrugNet

New Spanish strategy on drugs 2000–2008

n 17 December 1999, the Spanish Council of Ministers adopted a new 'National Strategy on Drugs 2000–2008' resulting from a consensus of opinion between the country's political and social movements.

The Strategy aims to respond to current needs and future challenges presented by the drug phenomenon and is based on experience and knowledge acquired in Spain since 1985, when the country set up its first co-ordinating body on drugs issues, the National Plan on Drugs (*Plan Nacional sobre Drogas*).

The priorities outlined in the Strategy for the coming years include: preventing drug abuse; adapting drug assistance networks to new realities; strengthening social reintegration programmes for drug addicts; and developing training and research activities specific to the drugs field. The main settings for preventive interventions will be: the school; the family; the community; and the media. In the area of demandreduction policy, actions geared to reducing drug-related harms are also foreseen.

With regard to supply reduction, the Strategy calls for the strengthening of the national drug information office (Oficina Central Nacional de Estupefacientes) as a centralised co-ordinating body. In addition, with the aim of improving the training of Spanish law enforcement bodies in combating drug trafficking, it proposes setting up a national monitoring centre on the use by drug traffickers of new information technologies (e.g., digital telephones, the Internet). The establishment of legal norms is also recommended both in relation to the trafficking and consumption of illegal drugs, as well as to the economic and commercial opportunities seized by criminal organisations.

Finally, on international co-operation, the Strategy promotes the active participation of Spain in all international fora dealing with the drug phenomenon, without prejudice to bilateral relations.

Camilo V zquez Bello, National Plan on Drugs, Spain

Tel: ++ 34 91 537 27 25. Fax: ++ 34 91 537 26 95. E-mail: cvazquez@pnd.mir.es The 'National Strategy on Drugs 2000–2008' is available in Spanish at http://www.mir.es/pnd



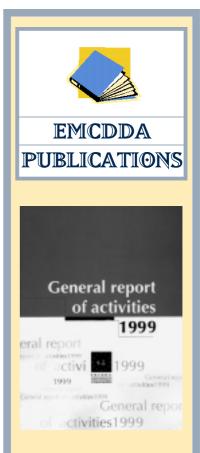
he EMCDDA has recently published its first CD-ROM, European Union Legal Texts on Drugs. The CD-ROM contains over 200 key legal texts issued by the European Union institutions in response to the drugs phenomenon, as well as the conclusions of major European meetings on drugs issues.

Produced in response to the growing interest in drug legislation and policies in Europe, the CD-ROM provides the European Union Member States, their EU partners, other institutions, practitioners in the drugs field and the general public with a practical overview of Community strategies and policies on drugs and related legislation passed since the late 1980s.



Presented in an accessible and userfriendly format, this specialised product provides a wealth of useful information for all those interested in the drug situation in the European Union.

CD-ROM: European Union Legal Texts on Drugs Available in English. ISBN: 92-828-2641-4. EURO 70 Ordering information available at http://www.emcdda.org/ publications/publications_ordering.shtml



New publications:

• EMCDDA CD-ROM: European Union Legal Texts on Drugs

• General Report of Activities 1999 (English).

Coming soon:

• General Report of Activities 1999 (French, German).

• Understanding and Responding to Drug Use: The Role of Qualitative Research, Scientific Monograph series No. 4 (English).

Further information on all EMCDDA publications and details of how to order titles are available on the EMCDDA web site at:

http://www.emcdda.org/publications/ publications.shtml.

REITOX meetings

he EMCDDA and the Heads of the REITOX Focal Points will next meet in Lisbon from 9–10 March. Key items on the agenda will include the Centre's 2000 work programme and its medium-term perspectives for the next three years. Workshops will also be held to: establish criteria for evaluation and feedback on *National Reports;* and discuss specific topics for the EMCDDA's 2001 Annual Report (drug co-ordination in EU Member States; cocaine; and infectious diseases).

As has been customary since 1999, the event will be preceded by a meeting of the Focal Points only, where the representatives will discuss matters of common concern.

New REITOX task group

'REITOX task group' has recently been set up at the EMCDDA to improve liaison between the Centre and the network. The group, composed of representatives from each of the Centre's departments, was created to ensure full collaboration in the preparation of guidelines, reports and other tasks. Members of the group will ensure that communication between their respective department and the National Focal Points – via the REITOX co-ordination department – is as fast and efficient as possible.

Roger Lewis

Assistance to drug users in EU prisons

n EMCDDA study on assistance practices for drug users in EU prisons, launched in December 1999, is examining issues ranging from access to drug assistance facilities and health care follow-up, to staff training and special populations.¹

The European Network of Drug and HIV/AIDS Services in Prisons (ENDHASP) has already mobilised its members to contribute pertinent information to this study. Meanwhile, representatives of Ministries of Justice in the EU Member States are being contacted for an official picture of assistance measures for drug users in this setting.

Those interested in participating in, or contributing to, this ongoing study are requested to contact: Petra.Paula.Merino@emcdda.org.

The results of the study are expected to be presented to over 300 participants at the 4th European Conference on Drug and HIV/AIDS Services in Prisons, to be organised by ENDHASP in October 2000.

Petra Paula Merino

¹ See DrugNet Europe No. 21.

continued from p. 1

• synthetic drugs and their chemical precursors;

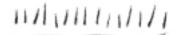
• prevention – reducing supply and trafficking, combating money laundering and controlling precursors; and

• international co-operation.

The Conference conclusions will be submitted by its organisers to the Horizontal Drugs Group for discussion and follow-up in the coming weeks. The resulting recommendations and proposals will then be presented for consideration and action to the European Summit in Portugal in June at the end of the current Presidency.



EUROPEAN COMMISSION



PORTUGAL 2000

EUROPEAN PARLIAMENT



EMCDDA Calendar

 2 March – EMCDDA Management Board working group meeting, Lisbon.
 3 March – EMCDDA Management Board meeting, Lisbon.

6—15 March — 43rd session of the Commission on Narcotic Drugs (CND), Vienna.

16–17 March – EMCDDA Scientific Committee meeting, Lisbon.

30–31 March – 4th EDDRA co-ordination meeting, Lisbon.

7-8 April – Meeting on the feasibility study using the youth media as a data source. Lisbon.

27-28 April – Meeting of the TSER-funded expert group on drug prevalence, Barcelona.

Other Meetings

10–12 March – International action on illegal drugs, Ditchley Park, Oxfordshire. 5 April – Seminar on drug misuse, UK Home Office, London.

7 April – Reducing harm from alcohol and drugs: making the research, policy and practice connections, Centre for Research on Drugs and Health Behaviour, 10th anniversary conference, London.

9–13 April – 11th International conference on the reduction of drugrelated harm. Iersev.

27–29 April – Conference on harmreduction in the field of drugs, Generalitat de Catalunya, Barcelona.

Selected EU Meetings

23 March — Horizontal Drugs Group, Brussels. 12 April — Horizontal Drugs Group, Brussels.

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