

European Monitoring Centre for Drugs and Drug Addiction

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HELSINKI EUROPEAN COUNCIL

Green light for latest EU Drugs Strategy (2000-2004)

he European Council met in Helsinki from 10–11 December and took note of the latest European Union Action Plan to Combat Drugs (now the European Union Drugs Strategy 2000–2004).¹ The Summit invited the European institutions and bodies concerned by the Strategy to proceed rapidly with its implementation and to report on initial results by the end of 2002.

The Drugs Strategy, which aims to achieve a 'global, multidisciplinary and integrated response to illicit drugs', outlines five key objectives:

• to ensure that addressing the drugs issue remains a major priority in EU internal and external action;

• to continue the EU integrated and balanced approach to tackling drugs, in which supply and demand reduction are seen as mutually reinforcing elements;

• to ensure the collection, analysis and dissemination of objective, reliable and comparable data on the drugs phenomenon in the EU with the support of the EMCDDA and Europol;

• to promote international co-operation and the integration of drug control into EU development co-operation and to support the efforts of the United Nations, and the UNDCP in particular, in developing international co-operation based on the principles adopted at the United Nations General Assembly Special Session on Drugs (June 1998); and

• to emphasise that, while not bidding for new funds, the successful implementation of the Strategy will require appropriate resources.

EMCDDA Director, Georges Estievenart, has stated that the document 'puts forward

a number of new and significant elements in the areas of information, evaluation, research and co-ordination on drugs which are of immediate interest to the EMCDDA and directly linked to its ongoing work programme'. In particular, he welcomes the importance attributed by the Strategy to reliable information on drugs as a basis for sound political decision-making and applauds its proposal to make evaluation an integral part of the EU approach to tackling the problem.

The Finnish Presidency submitted the strategy paper to the Helsinki Summit following due consideration of the views of the European Parliament, the Council of the EU, the Economic and Social Committee, the Committee of Regions, and the EMCDDA and Europol.

Ignacio V zquez Molin

¹ The 2000–2004 draft Action Plan was first tabled by the European Commission in a communication to the Council of the EU and Parliament on 26 May 1999 under the German Presidency of the EU. The Plan follows on from the 'Post-1999 drugs strategy' endorsed at the European Council in Cardiff in June 1998 and the conclusions of the Vienna European Council in December 1998, which requested the Council, Commission and Parliament to further develop this strategy in the light of the Amsterdam Treaty. See DrugNet Europe No. 18.

1999 Annual Report: `3—5 million in the EU could have tried heroin'

eroin lies behind most problem drug use in the EU and 3-5 million people in the EU could have tried it at least once. But cannabis is still the illegal substance most frequently used in all EU countries. Recent surveys suggest that over 40 million people EU-wide have tried it – on average, one in five 15-16 year-olds and at least one in four 15-34 year-olds.

These are among the findings of the EMCDDA's 1999 Annual Report on the State of the Drugs Problem in the European Union launched on 22 November at the Presse- und Informationsamt der Bundesregierung, Berlin. The *Report* reveals that the overall prevalence of problem drug use – caused mainly by heroin – 'appears to be largely stable in most EU countries, although there is a continuing incidence of new cases balanced by others who become abstinent or die'. EU problem drug users total an estimated 1–1.5 million out of a population of some 375 million. Problem users are mostly men, the average age of those entering treatment varying between 24 and 33 across countries.

The *Report* warns that, although heroin use often goes hand-in-hand with urban deprivation, the link should not be oversimplified. 'While, in general, heroin is more prevalent in urban areas, it is spreading to smaller towns and rural areas'. The Report also reveals that substitution treatment for opiate dependency is expanding rapidly, with family doctors often involved. Some 300,000 people EU-wide are thought to be receiving substitution therapy, mainly with methadone. Throughout the Union some 20% of all problem opiate users and 30% of dependent users may be receiving such treatment. In several Member States, medical prescription of heroin is under discussion.

The 1999 Annual Report may be downloaded from the EMCDDA's web site in all EU languages. An Extended 1999 Annual Report may also be downloaded from:

http://www.emcdda.org/publications/ publications_annrep_99.shtml. News releases summarising the main findings of the Annual Report are available in 11 EU languages at: http://www.emcdda.org/press/press.shtml.



hroughout 1999, the EMCDDA and the REITOX National Focal Points offered joint training sessions aimed at promoting the evaluation of drug prevention in the European Union and at improving skills among demand-reduction professionals in the context of the EDDRA project (Exchange on Drug Demand-Reduction Action).

Professionals in the demandreduction field – particularly those with a peer-leader function – were invited for training, at national level, by the NFPs. The objectives of these country sessions included raising national and regional decision-makers' awareness of, and skills in, evaluation practice and collecting feedback and recommendations directly from the field. The initiative thus helped strengthen links between the EMCDDA and front-line demand-reduction practice.

The 1999 training sessions, organised by the NFPs and cofinanced by the EMCDDA, reached over 1,000 participants in seven countries: Austria; Belgium; Germany; Greece; Portugal; Spain and the Netherlands. The goals and results of the training sessions varied according to national and cultural characteristics and priorities.

National Focal Point representatives were satisfied with the acceptance level of the training sessions as well as with the increased visibility they brought for the Focal Point itself.

Gregor Burkhart

Assistance to drug users in EU prisons

re doctors in prisons willing to provide methadone maintenance? Are occasional cannabis users considered a target population for assistance measures? Is urine testing used as a control or a support? Do needle-exchange programmes work better when provided by prison staff or by a machine?

These and other questions were discussed at an expert meeting held at the EMCDDA on 13 December 1999. The meeting provided the departure point for a study on assistance practices for drug users in EU prisons.

The participants noted that defining the target population of assistance programmes in prisons is not always straightforward: persons convicted of drug-related offences might not always be drug dependent while persons convicted of other offences might have a background of problem drug use. Moreover, data-collection on drug use in this setting is often impaired by differences in information systems. The EMCDDA exploratory study will help map: drug use in prisons; access to assistance facilities; types of assistance available; health-care follow-up; staff training; special populations (women, migrants, etc.); and best practice.

For further information and for contributions to the study, please contact: Heino Stöver, Oldenburg University (e-mail:Heino.Stoever@UniOldenburg.de).

Petra Paula Merino



Qualitative research in the field of demand reduction

IE arly in 1999, the EMCDDA launched a study on qualitative research in the area of demand reduction, complementing a similar ongoing project in the area of epidemiology to analyse drug-use patterns. Co-ordinated by the Nordic Council for Alcohol and Drug Research (NAD), the project involved drawing up an inventory of qualitative research studies in demand reduction.

The inventory includes: an annotated bibliography; country profiles on the state of the art of qualitative research; and lists of recent and ongoing projects and researchers. Its purpose is to provide a critical and reflective picture of existing research in the demand reduction field.

The preliminary results of the study were discussed by some 20 researchers at a seminar at the EMCDDA from 7–9

October 1999. The study reveals that qualitative research in the field of demand reduction can be categorised on three levels, all of which have been approached to a differing degree:

• individual responses to drug demandreduction activities (e.g., clients' attitudes towards treatment – most commonly found);

 evaluation of single demandreduction projects (e.g., process evaluation – less commonly found and rarely including the delivery of services);

• studies of demand-reduction networks, systems, co-operation between services (rarely found).

The inventory is available on the Centre's qualitative research web site at http://www.qed.org.uk.

Margareta Nilson

NEW RISES IN HIV AMONG IDUS

ew rises in HIV among injecting drug users (IDUs) are being reported from Finland and Portugal. Notifications in Finland, where infection rates were previously very low, indicate that at least 89 IDUs have become infected since the summer of 1998. Meanwhile in Lisbon, a recent streetrecruited study has reported a prevalence of 48% among 252 IDUs, suggesting recent transmission.¹

These new rises may reflect decreased awareness among IDUs regarding HIV. In Finland, low incidence of the infection may have led to carelessness among IDUs. Finnish researchers² are now planning to evaluate the effectiveness of the country's needle-exchange programmes. In Portugal, a second study among IDUs undertaken in 1999 found that the information available to this group on how to protect themselves was insufficient.³ The needle-exchange programme operating through pharmacies has recently been improved through the inclusion of an information leaflet on injecting risk behaviours.

Awareness of HIV among policy-makers also appears lower than at the beginning of the 1990s, possibly due to the perception that AIDS has become less of a problem in Western Europe. However, high infection rates among IDUs affects not only these drug users but also their sexual partners and new-born children, thus posing a real threat to the general population.

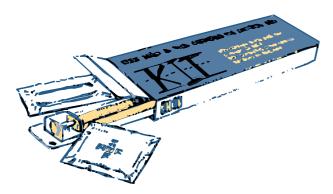
In Spain, where a large HIV epidemic among IDUs occurred in the 1980s, heterosexually acquired AIDS is attributable largely to infections from partners of IDUs. AIDS incidence in Portugal has recently surpassed levels in Spain, and the transmission of HIV in the general population also appears high as evidenced by data from blood donations in three major cities (30/100,000 in 1997).⁴ Despite strong increases in harm-reduction measures in some countries, these measures may still be insufficient. The EMCDDA is undertaking projects to improve data on infectious diseases in IDUs and to provide insight into the implementation of harmreduction measures in the EU.

Lucas Wiessing (EMCDDA), Airi Partanen (STAKES, Helsinki), Maria Jos Campos (Abraço, Lisbon)

¹ Valle, H,. et al. 'HIV, HCV and HBV infection in a group of drug addicts from Lisbon'. Seventh European Conference on Clinical Aspects and Treatment of HIV-Infection. October 23–27, 1999. Lisbon, Portugal [abstract 866].

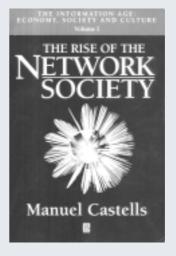
² A-Clinic Foundation, the Finnish Focal Point and the National Institute of Public Health.
³ MIRO (Methods Impact Research Outreach).

⁴ Source EuroHIV.



Needle-exchange programme operating through pharmacies in Portugal

BOOKSHELF



The Information Age: Economy, Society and Culture

Castells three-volume exegesis on the age of information The Information Age: Economy, Society and Culture is an academic tour de force that outlines global issues of which most of us are only vaguely aware. Volume I: The Rise of the Network Society, addresses the revolution in information technology, the information economy, globalisation and the upsurge of interactive networks. Volume II: The Power of Identity examines power and its meaning in the network society and its challenge to the state, information politics and the crisis of democracy. Volume III: End of Millennium covers the collapse of the Soviet Union, information capitalism, the unification of Europe, the network state and the global criminal economy. It also examines drug trafficking, dependency and Latin America. Intellectually stimulating and well-written, these books are essential reading for anyone with an interest in networks, drugs and the global economy.

Published by:Blackwell Publishers Ltd, 108 CowleyRoad, Oxford, OX4 1JF, UK. Tel: ++ 44 1865 791100.Fax: ++ 44 1865 791347.http://www.blackwellpublishers.co.uk/Static/ordering.htm

Author: Manuel Castells. Date: 1996–98. Language: English.

Language. English

Price: £30 for the series + £2.50 postage and packing. **ISBN for the series:** 0-631-21594-8.

Volume I: 1-55786-617-1 (paperback)/1996. **Volume II:** 1-55786-874-3 (paperback)/1997.

Volume III: 1-55786-872-7 (paperback)/1998.

Volumes may be ordered from: Marston Book Services, PO Box 269, Abingdon, Oxon OX14 4YN, UK. Tel: ++ 44 1235 465550. Fax: ++ 44 1235 465555.

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.

2nd European Conference on the Evaluation of Drug Prevention

T he 2nd European Conference on the Evaluation of Drug Prevention, entitled 'Evaluation: a key tool for improving drug prevention' was held from 2–4 December 1999 at the European Parliament building in Strasbourg. Organised by the EMCDDA and the European Commission, the Conference welcomed over 160 participants from the EU Member States, Central and Eastern European Countries (CEECs) and further afield, from Canada, Chile, Iceland, Liechtenstein, Norway and the USA. Representatives of the Pompidou Group, the World Health Organisation and the United Nations International Drug Control Programme also attended.

Key speakers at the opening session included Jacques Bury of the Association of Schools of Public Health in the European Region (ASPHER), who gave the keynote speech 'Is evaluation a key tool for improvement?', and Georges Estievenart, Executive Director of the EMCDDA, who outlined the aims of the Conference. Mr Estievenart stressed that: 'Evaluation ... shall not be seen as a control mechanism for sanctions on programmes, leading to decisions on funding based only on results...'. He proposed 'if we want to push evaluation ahead as a tool for improvement and guidance of projects, we should also appreciate the value of information from not-so-successful interventions'.

At the closing session, Margareta Nilson, Head of the EMCDDA's Demand Reduction Department, delivered an insight into 'The future of evaluation', while Jean François Girard, Conseiller d'État of France, spoke on 'A different perspective on evaluation'.

The Conference assessed developments in the area of prevention evaluation since the first EMCDDA conference on the topic held in Lisbon in March 1997 and promoted systematic evaluation as a tool for improving prevention practice. Conference sessions demonstrated to professionals how evaluation theory and knowledge can be implemented into daily practice via evaluation tools and instruments such as those developed by the EMCDDA (guidelines, evaluation instruments bank, EDDRA, etc.). Also addressed was the issue of committing policy-makers to the evaluation of prevention projects they intend to fund.

The Conference adopted a set of recommendations aimed at facilitating and promoting an 'evaluation culture' in drugprevention programmes and strategies in the EU Member States (see opposite). The full results of the Conference will be published in the EMCDDA's Scientific Monograph series in the course of 2000.

Gregor Burkhart and Ulrik Solberg



 2^{nd} European Conference on the Evaluation of Drug Prevention

RECOMMENDATIONS TO BOOST EVALUATION

he objectives of the 2nd European Conference on the Evaluation of Drug Prevention were two-fold:

to assess achievements in the field of the evaluation of drug prevention in the EU Member States;
to brainstorm on the needs for ensuring that evaluation becomes an integral part of drug prevention projects.

The Conference concluded that evaluation is a tool for more cost-effective drug prevention strategies. In six workshops, the meeting adopted 24 recommendations¹ covering: prerequisites and means of evaluation; evaluation quality criteria; evaluation objectives; evaluation techniques; training and sharing of know-how; and research needs. In particular, it was stressed that key persons involved in a programme should also be involved in the planning of the evaluation thereof and that all persons concerned should receive continuous feedback.

The European Commission informed participants of its wish to examine and use the Conference recommendations as a basis for a formal proposal to the Council of the EU stressing the importance of appropriate evaluation. Evaluation will be an integral part of all Community initiatives and programmes in the framework of the 2000–2004 European Union Drugs Strategy to which the EMCDDA is expected to contribute. Formal EU recommendations would undoubtedly boost evaluation practices in the Member States. The EMCDDA will strongly support this follow-up.

Philippe Roux

¹ Those wishing to receive the full Conference recommendations are requested to contact Philippe Roux at Philippe.Roux@emcdda.org

'Quote, unquote'

On the eve of the Strasbourg Conference, Georges Estievenart, Executive Director of the EMCDDA, called for 'a shift in ideology towards greater evaluation of drug prevention initiatives' which, he said, 'could make young Europeans healthier, save money on drug treatment and cut drugrelated crime'. He declared: 'It is vital to know what works and what doesn't work in keeping people off drugs. If all drug-prevention programmes were routinely evaluated, the EU would reap big rewards in the global campaign against drugs'. He added: 'Only if drug programmes are routinely evaluated can we ensure that money spent on tackling the challenge of drugs – on prevention and on public health – is achieving the maximum social benefit'.

4

EMCDDA/Europol: annual meeting

The third annual meeting between the EMCDDA and Europol in the framework of the Joint Action on New Synthetic Drugs was held at Europol's headquarters in The Hague on 15 October 1999. The Joint Action grants equal responsibility to the EMCDDA and Europol to establish an early-warning system to collect and exchange information on the production, traffic and use of new synthetic drugs, taking into account the respective mandates of the two bodies.

At the meeting, the agencies identified areas of work in the field of data collection and the development of harmonised indicators. As regards lawenforcement indicators, a first division of labour was agreed. On the one hand, Europol would focus on seizures and price/purity indicators while the EMCDDA would develop its five epidemiological indicators and act as an 'EU clearing house' for all drugrelated indicators and statistics.

A draft Memorandum of Understanding (MOU) between the two agencies was discussed at the meeting, the feasibility of which will be examined by Europol's legal service. In the meantime, cooperation instruments already existing under the Joint Action will be strengthened.



THE EMCDDA AND ITS PARTNERS

EMCDDA/Pompidou Group: Implementing the MOU

mplementing the Memorandum of Understanding (MOU) signed by the EMCDDA and the Pompidou Group on 29 September 1999 was the focus of a working meeting between the two bodies held in Lisbon on 9 November. The meeting helped identify specific projects and activities that might enhance co-operation between the organisations through developing synergies and avoiding duplication of effort.

The meeting agreed on the following steps:

• to pursue efforts to launch a joint pilot study on the implementation of indicators of the social costs of drugs in one EU Member State and one country of Central or Eastern Europe;

• to participate jointly in the OECD's Financial Action Task Force (FATF), in co-operation with Europol;

• to ensure complementarity and synergy with the Phare countries, taking into account the future participation of the EU candidate countries in the activities of the EMCDDA;

• to ensure that the EMCDDA take into account the knowledge and experience of the Council of Europe in the development of its Legal Information System on Drugs.

In addition, the organisations agreed to continue information exchange on epidemiological issues and to increase co-operation in the field of women and drugs, in particular via a joint publication in 2000. Also discussed was the EMCDDA's contribution to the Pompidou Group Ministerial Conference to take place in October 2000 in Sintra (Portugal) focusing on harm-reduction policies.

Ignacio V zquez Molin

Alain Wallon

EMCDDA/UNDCP: expert working group

he EMCDDA participated in an expert working group meeting from 6–10 December 1999 in Vienna, sponsored by the United Nations International Drug Control Programme (UNDCP).¹ The purpose of the meeting was to allow an exchange of information and experience on the role of the criminal justice system in the treatment and rehabilitation of drug-use offenders.

Judges and representatives of prosecution services in Austria, Ireland, Sweden and the UK, as well as Australia, Canada and the USA, analysed good practice in handling these offenders. In particular, they underlined the importance of the 'Drug Courts System' that, in some jurisdictions, has been operating for decades.

The Drug Courts System is a structure assigned the responsibility of managing drug-use offenders. The judge is the central figure in a team effort that focuses on offenders' sobriety and sense of responsibility. The system aims to ensure accountability through: judicial monitoring; comprehensive supervision; drug testing; treatment; rehabilitation services; and immediate sanctions and awards. Its goal is to reduce the level of criminal activity resulting from drug dependency, by means of effective treatment and rehabilitation. Treatment providers keep the Court informed of participants' progress so that sanctions or incentives may be issued.

In the European Union, experiences with Drug Courts are, at present, few and far between. In 2000, Ireland will launch a pilot scheme for a Drug-Court programme lasting 18 months. In the UK, the 'Drug Treatment and Testing Order', adopted in 1998, aims to strengthen the existing power of the courts in reviewing the offender's progress during the scheme (e.g., via mandatory drug-testing). This Order shows similarities to the US Drug Court Programme (http://www.drugcourt.org) targeted at drug users who commit a crime and who show willingness to cooperate in treatment.

Danilo Ballotta

¹ The meeting was entitled 'Expert working group on improving intersectoral impact on drug abuse offender case work'.

EMICIDIDA STATUTORY BODIES

Management Board

he EMCDDA Management Board held its 18th meeting in Lisbon from 12–14 January and adopted, among others, the Centre's work programme and budget for the year 2000 and the 1999 General Report of Activities.

Other agenda items included: implementation of the EMCDDA's five harmonised key indicators; the Legal Information System on Drugs; a proposal for an EMCDDA media strategy; and relations with international partners and the Phare programme.

The 2000 work programme aims to conclude implementation of tasks outlined in the ongoing 1998–2000 work programme and to prepare the groundwork for the next three years (2001–2003) with a view to progressively covering the five priority areas listed in the Centre's founding regulation, taking into account the new European Union Drugs Strategy (2000–2004). In order to achieve these goals, the EMCDDA will rely on a budget of 8.25 MEUR and 48 staff members.

Kathleen Hernalsteen

6



Scientific Committee

he EMCDDA Scientific Committee held its 12th meeting in Lisbon from 6-7 December 1999 and adopted an opinion on the Centre's 2000 (draft) work programme. It also offered comments on the Centre's 1999 Annual Report and its medium-term perspectives for 2000-2004. During the meeting, results were presented from the two sub-committees set up in 1999 to assess quality indicators for epidemiological and demandreduction studies.¹

The National Focal Point spokesperson (Portugal) was invited to attend the meeting to present current developments within the REITOX network. In relation to the Joint Action on New Synthetic Drugs, updated information was presented on the substances MBDB, 4-MTA, Ketamine and GHB. A progress report was also delivered on measures to improve future riskassessment procedures as mentioned in the 'Report on the risk-assessment of MBDB' (i.e., risk-assessment methodology, inventory of toxicitytesting laboratories within the EU for providing toxicity data on new synthetic drugs, etc.).

Lena Westberg

¹ See DrugNet Europe No. 18.

Royal and Presidential visit

ing Albert II and Queen Paola of the Belgians, accompanied by President Jorge Sampaio and the First Lady of Portugal, paid a visit to the EMCDDA on 23 November 1999. The country delegations were composed of distinguished guests including Louis Michel, Vice-Prime Minister of Belgium and Minister for External Affairs and Portugal's Ambassador to Belgium, Quevedo Crespo. The Belgian member of the EMCDDA Management Board, Claude Gillard and representative of the Belgian Focal Point, Denise Walckiers also participated in the event.

The visit took the form of a closed discussion opened by Vice-Chairman of the EMCDDA Management Board, Marcel Reimen. Georges Estievenart, Executive Director of the EMCDDA outlined the ongoing activities of the Centre as well as its perspectives for the future. Richard Hartnoll, Head of the EMCDDA Epidemiology Department, presented the main drug consumption trends in Europe.

A press reception unit was set up for the Belgian and Portuguese journalists accompanying the visit where the newly released 1999 *Annual Report* was distributed. Interviews were given to a number of TV, radio and newspaper journalists on the activities of the Centre. At the close, their Majesties met with the Belgian staff members of the EMCDDA.

Kathleen Hernalsteen

EMCDDA/Europol: Progress report on the monitoring of MBDB

n 17 November 1999, an 'EMCDDA-Europol progress report on the results of the monitoring of MBDB' was formally presented to the Horizontal Drugs Group (HDG) of the Council of the European Union. On examination of this report, the HDG decided not to request Member States to submit the substance to common control at EU level and to inform COREPER of this advice.

The decision followed the EMCDDA's submission in November 1998 of the risk-assessment report on MBDB to the Council and Commission for consideration and control procedures.¹ No consensus on the matter was reached by the HDG in April 1999 when it was decided that a six-month monitoring of the market for the substance and its hazardous effects should be undertaken. This monitoring was jointly undertaken by the EMCDDA and Europol through their respective networks under the terms of Article 3 of the Joint Action.

Lena Westberg

¹ See DrugNet Europe No. 15.

Steering Group on New Synthetic Drugs

he Scientific Committee's Steering Group on new synthetic drugs, met on 30 November and 7 December 1999 and centered on improving risk-assessment methodology through criteria for allocating scores and weighting evidence. In this context, the group considered the possibility of using ranking and scoring criteria for developing the *Guidelines for the risk assessment on new synthetic drugs.* A detailed report on the results of this exercise will be presented at the next meeting of the Scientific Committee in March 2000.

Lena Westberg

EMCDDA hosts 1999 ELISAD meeting

he 11th annual meeting of the European Association of Libraries and Information Services on Alcohol and other Drugs (ELISAD) was hosted by the EMCDDA in Lisbon from 4–6 November 1999. Over 50 participants, representing some 30 organisations in 16 countries,¹ tackled the issue of 'Organising professional information on alcohol and drug abuse in Europe'.

During three conference workshops, the participants shared knowledge and practice on: networking; use of information sources; and the 'information profession'. Also discussed at these sessions and in plenary were the goals, targets and methods adopted by the EMCDDA and ELISAD in the field of information.

This exchange of views led the ELISAD members to create two new working groups that would focus on the following projects:

• building a 'Subject Gateway' for professionals, researchers and other users, designed to select and facilitate access to information and documentation in the field of alcohol and drugs;

• creating an ELISAD Electronic Journal (contact: asinger@club-internet.fr).

Addressing the closing session, Georges Estievenart, Executive Director of the EMCDDA, and Marianne van der Heyden, ELISAD Chairperson, focused on the respective roles and perspectives of their organisations.

The main findings of the Conference will be available from January 2000 on the ELISAD web site at http://www.geocities.com/aodlib.

The 12th ELISAD meeting will take place in Autumn 2000 in Prague (Czech Republic).

Adelaide Seita Duarte

¹ Austria, Belgium, Czech Republic, France, Germany, Greece, Hungary, Italy, Netherlands, Norway, Portugal, Spain, Sweden, Switzerland, UK, and USA.



Launch of new EMCDDA web site at Online Information 99

n 7 December 1999, the EMCDDA launched its newlook web site at the international exhibition and conference Online Information 99 in London. The web site, at http://www.emcdda.org, has been extensively restructured and redesigned both to improve navigability and ease of access to the information it contains, and to improve its visual appeal.

Highlights of the new site include:

• details of all the EMCDDA's major lines of activity with individual project descriptions and downloadable project reports;

• downloadable publications in all 11 EU languages;

 links to the REITOX National Focal Points, EU institutions and a host of other drug-related organisations and sites;

• a new section of free-access specialised databases which will be further expanded as new databases become available.

The Centre exhibited the web site at the European Union stand together with 12 other EU services including Eurostat, the European Environment Agency (Copenhagen), the European Foundation for the Improvement of Living and Working Conditions (Dublin) and the Enterprise Directorate-General (former DG III).

The new site was very well received by a wide variety of users, including librarians and documentalists, pharmacists and medical professionals, education specialists, EU officials and the media. The Centre will continue to work to improve the site further and welcomes any suggestions or comments at feedback@emcdda.org.

A newly-published brochure *EMCDDA Online* is available from the EMCDDA in English, French, German and Portuguese.

Rachel Neaman



New publications:

• EMCDDA Online, publicity brochure (English, French, German, Portuguese).

Coming soon:

• EMCDDA General Report of Activities 1999 (English, French, German);

• Reviewing Current Practice in Drug Substitution Treatment in Europe, EMCDDA Insights series, No. 3 (English);

• Alternatives to Prison for Drug Offenders, EMCDDA Insights series, No. 4 (English);

• Methods to Integrate Epidemiological Indicators to Address Policy-related Questions on Drug Use, EMCDDA Scientific Monograph series, No. 4 (English);

• Understanding and Responding to Drug Use: The Role of Qualitative Research, Scientific Monograph series, No. 5 (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. 7

REITOX: Heads of Focal Points meet in Lisbon

he Heads of the REITOX Focal Points met in Lisbon from 16-17 November 1999 for a free and frank exchange of views on a variety of subjects. In a tight programme, the network members examined the EMCDDA's 2000 work programme and reported on their national situations in a roundtable involving all Member States. Among other matters, the NFPs were asked to indicate topics that could be featured as key issues in their 2000 National Reports. Topics suggested included: drug use in prison; new drug trends among young people; ethnic minorities; infectious diseases; and cocaine. NFPs later shared experiences in workshops on building local networks and developing leading-edge indicators from qualitative research.

Following the meeting, the EMCDDA's **REITOX** Co-ordination Department communicated its commitment to the future smooth-running of the network. This included steps such as making documents available two weeks ahead of meetings; providing calendars of events; and discussing draft agendas and items for consideration with the NFP spokesperson (Portugal). The EMCDDA also pledged to ensure adeguate time schedules for the adoption and implementation of REITOX contracts and agreed to set dates for feedback from the Centre to the NFPs on their National Reports. Regular updates on current departmental projects, contractors and time scales were also promised.

Roger Lewis

8

Happy New Year!

The EMCDDA would like to wish the readers of *DrugNet Europe* a happy 2000 and a cheerful start to the new millennium.

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EMCDDA Calendar

12–14 January – EMCDDA Management Board, Lisbon.

20–21 January – EMCDDA/UNDCP meeting on key epidemiological indicators and the global programme on assessing the magnitude of drug abuse, Lisbon. 2–3 February – TSER-funded expert meeting on estimating prevalence of problem drug use at national level, Munich.

4–5 February – TSER-funded expert meeting on estimating incidence of problem drug use and latency time to treatment, Munich

25–26 February – EMCDDA project meeting on drugs, social exclusion and minorities, Brussels.

3 March – EMCDDA Management Board, Lisbon.

17 March – EMCDDA steering group on new synthetic drugs, Lisbon.

17–18 March – EMCDDA Scientific Committee meeting, Lisbon. 9–10 March – Meeting of the Heads of the REITOX Focal Points, Lisbon.

Other Meetings

4–5 February – Meeting of the Targeted Socio-Economic Research (TSER) programme, Munich. 5 February – Meeting of the International Reference Group, Centro Italiano di Solidariet, Rome.

Selected EU Meetings

19 January, 16 February and 23 March – Horizontal Drugs Group, Brussels. 28–29 February – 2nd Joint Conference, European Commission/Portuguese Presidency/European Parliament on Drug Policies in Europe: EU Drugs Strategy 2000–2004, Brussels.



VISITS TO THE EMCDDA

Brazil: On 8 November 1999, Walter Fanganiello Maierovitch, National Anti-drug Secretary of Brazil held an exchange of views with the EMCDDA Director and staff on the Centre's activities. The discussions led to a number of preliminary proposals for future co-operation and joint activities.

Ireland: On 15 November 1999, a delegation of the Joint Committee on European Affairs of the Irish Parliament, chaired by Bernard Durkan, visited the EMCDDA. Topics discussed included: heroin intervention measures; different national strategies towards methadone maintenance; and Community and national responses to the drug problem in general.

Switzerland: On 18 November 1999, Ueli Löcher, Vice-Director of the Swiss Federal Office of Public Health and Head of the Main Unit Substance Abuse and AIDS, and Diane Steber Büchli, Head of the International Drug Affairs Unit, shared information and experience with EMCDDA staff on a number of topics. These included: data-collection systems on drugs; developments in drug legislation; and the evaluation of demand-reduction activities in Switzerland and in the EU.

Bulgaria: On 13 December 1999, Vladimir Shopov, Counsellor for Justice and Home Affairs at the Mission of the Republic of Bulgaria to the European Communities visited the Centre following Bulgaria's application to participate in EMCDDA activities (officially notified to the Commission in November 1999). The meeting provided the opportunity to examine the ongoing co-operation between the EMCDDA and Bulgaria in the framework of the Phare Drug Information Systems (DIS) project and to explore the needs and possibilities for further co-operation.

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