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NEW DRAFT EUROPEAN ACTION PLAN TO COMBAT DRUGS

Promising news for EMCDDA, says Director



Photo: DGX, European Commission

The draft European Action Plan to Combat Drugs (2000–2004), which aims to achieve a global, multidisciplinary and integrated response to illicit drugs, is expected to be adopted during the Finnish Presidency of the EU later this year.

Following the European Commission's proposal for a European Union Action Plan to Combat Drugs (2000–2004),* tabled in a communication to the European Council and Parliament on 26 May, EMCDDA Director Georges Estievenart has welcomed the Plan's innovative ideas.

Commenting on the draft in his annual declaration to the press on UN International Day against Drug Abuse and Illicit Drug Trafficking (26 June), the Director stated that the Plan '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, the Director welcomed one of the Plan's five key objectives, namely: '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'. Mr Estievenart applauded 'the importance attributed by the draft Plan to reliable information on drugs as a basis for sound political decisions'. He affirmed: 'The agency greatly looks forward to the contribution it can make in this area, especially via the series of harmonised epidemiological indicators of drug use it is developing ... These indicators will increasingly be used as a model by the Central and Eastern European Countries and may provide a potentially interesting model to Latin America, another region where contacts with the Centre are increasing'.

The draft Action Plan also calls for the regular evaluation of initiatives, programmes and policies launched over the 2000–2004 period, underlining that: 'Evaluation must be an integral part of the EU approach to fighting illicit drugs'. The EMCDDA, which has played a pioneering role in

the evaluation of drug-prevention activities by developing a number of practical evaluation tools, is expected to provide considerable support in this domain.

With regard to research, the draft proposal goes a step further than the current Action Plan (1995–1999) – which largely focuses on the biomedical aspects of drug misuse – to highlight the socio-economic impact of the drugs phenomenon. Again, this aspect may be developed in close co-operation with the Centre which is instituting pilot studies in the field. Finally, the Plan underlines that 'co-ordination is essential', due to the multifaceted nature of the drugs phenomenon, and calls for it to be enhanced at all levels and to involve all EU institutions and entities. Mr Estievenart underlined the close link between information on drugs and co-ordination of anti-drug activities: 'Information is the fuel in the engine of national and European co-ordination on drugs. The more reliable and understandable the information provided, the smoother and better the co-ordination'.

The draft Plan, which aims to achieve a global, multidisciplinary and integrated response to illicit drugs, is expected to be adopted during the Finnish Presidency of the EU later this year, following debates within and between the Council and Parliament. European Commissioner responsible for Justice and Home Affairs Anita Gradin, who presented the proposal in Brussels, is scheduled to visit the EMCDDA in July where the Plan is likely to feature among topics for discussion between the Commissioner and Drug Co-ordinators from EU Member States.

Kathy Robertson and Philippe Roux

* The five objectives of the new draft Action Plan are outlined on page 2. The draft follows up on the 'Post-1999 drugs strategy' (Doc. 7930/98 Rev. 2 Cordroque 26 of 2/06/98), endorsed at the European Council in Cardiff in June 1998, and the conclusions of the Vienna European Council (December 1998) which requested the Council, the Commission and the European Parliament to further develop this strategy into a comprehensive plan.

*Draft European
Action Plan to Combat
Drugs (2000–2004):*

OBJECTIVES

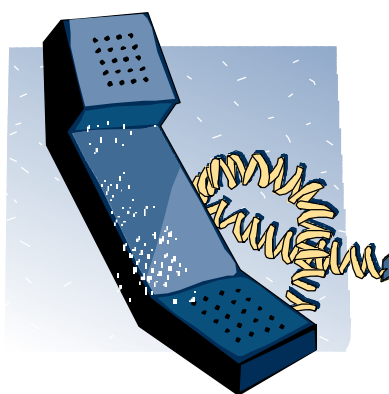
The draft European Action Plan to Combat Drugs proposes to:

- ensure that the fight against drugs remains a major priority in EU internal and external action;
- continue the EU integrated and balanced approach to fighting drugs, in which supply and demand reduction are seen as mutually reinforcing elements;
- 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;
- 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, to develop international co-operation, based on the principles adopted at the United Nations General Assembly Special Session on Drugs (June 1998);
- emphasise that, while not bidding for new resources, the successful implementation of the strategy and actions mentioned in the Action Plan will necessitate appropriate resources.

The Plan identifies five areas of action at European level: information; action on demand reduction; action on the reduction of illicit trafficking in narcotic drugs and psychotropic substances; action at international level; and co-ordination. It also takes on new challenges including: consumption of cannabis and new synthetic drugs; urban delinquency; related health, social and criminal-justice problems; and preparations for EU enlargement.

*Drug helplines to
provide analysts with
key data*

The European Foundation of Drug Helplines (FESAT) is making moves to adapt its work to research and evaluation needs. With methodological support from the



EMCDDA, the Foundation is identifying common elements in helpline questionnaires across Europe in order to create a common data-pool that would strengthen evaluation practice.

At a meeting between the EMCDDA and FESAT from 21–22 May in Milan, the Foundation reported that its members had already begun registering: information on callers (while ensuring anonymity); questions and answers; data on specific drugs mentioned in calls; and the approximate location of the caller.

The data gathered by drug helplines may provide analysts with an insight into issues such as the socio-cultural status of drug users (their parents or relatives) and their geographical distribution. Such information may prove useful in the planning of demand-reduction activities and may help to identify: needs (target groups, services); information gaps; or attitudes that may hinder drug-prevention efforts.

Gregor Burkhardt

*Sundsvall conference
promotes
'ARMADA concept'*

The 4th Private Sector Conference on Demand Reduction in the Workplace and the Community was organised by the International Labour Organisation (ILO) and the United Nations International Drug Control Programme (UNDCP) from 8–12 May in Sundsvall, Sweden. Among the topics debated by the 200 participants present was the so-called 'ARMADA concept',* developed and promoted by the ILO and the UNDCP. This concept actively involves schools, companies, social services and trade unions in drug prevention in the workplace.

A number of the issues promoted by the 'ARMADA concept' were aired in the EMCDDA's study on 'Demand Reduction in the Workplace' in November 1997 (e.g., the importance of ensuring the involvement of workers and middle-management employees in programme development and training). The EMCDDA presented the results of this study to the conference, including the need for

greater co-operation and exchange between companies developing demand-reduction initiatives. The Centre hoped that professionals working in the field of drugs would become increasingly familiar with promising and innovative concepts, such as ARMADA, and that approaches to drug prevention in the European workplace be brought into line with emerging trends.

A general consensus was reached at the conference that good practice and experience in the workplace would be of little value unless accompanied by evaluation initiatives and publicised to political and other organisations working in the drugs field.

Gregor Burkhardt

The results of the five workshops held during the conference will form the basis of a Framework for Joint Business-Community Action on Substance Abuse Prevention to be developed and followed up by the conference organisers. This Framework will be included in the final report of the conference to be available from: Mr Gale Day, UNDCP. Tel: ++ 43 1 26 06 04 094. E-mail: gday@vienna.un.or.at.

* The two organisations define an ARMADA (Association of Resource Managers Against Drug Abuse) as a forum of managers committed to mobilising work forces and workplaces against substance abuse. They also use the term to define a concept for promoting employee well-being as an essential factor in overall quality management and improved productivity.

ESTIMATING PROBLEM DRUG USE LOCALLY

In the framework of a DGXII/TSER-funded* network on dynamic modelling, a working group on prevalence estimation of problem drug use at local level met in Dublin on 20 and 21 May. The aim of this first meeting was to discuss the novel estimation methods being developed by the group as well as how these may eventually be applied by a wider audience in the EU Member States.

The Capture–Recapture Method (CRM), used to estimate the prevalence of problem drug use locally (by assessing the degree of overlaps between different drug-user registries such as treatments or arrests), was discussed at the meeting with particular regard to its broader geographical application (e.g., regionally or nationally). In an example of this broader application involving Barcelona, the characteristics of problem drug users were seen to differ between the inner city and the wider metropolitan area, possibly indicating an outward spread of the opiate epidemic.

In a recent Dutch study on homelessness, a specific one-sample variant of CRM, known as Truncated Poisson Regression (TPR)** – already used to estimate drug users in Rotterdam – was shown to provide results comparable to those gained from the well-established three-sample CRM,*** suggesting that TPR may offer reliable estimates. Another example based on a single sample is provided by Dublin, where two-sample CRM was applied using consecutive time periods within one treatment data source. One-sample methods may prove positive as they could considerably enhance the possibilities of obtaining prevalence estimates in cities where data are scarce, since only one sample of drug users is needed to estimate the size of the whole population.

A series of prevalence estimates obtained over the years may be used to assess the effects of policy interventions on the prevalence of problem drug use. It is expected that the achievements of the working group will be integrated into the EMCDDA's 'Guidelines for Prevalence Estimation at Local Level' available as a working document at <http://www.gla.ac.uk/Inter/DrugMisuse/EMCDDA/>.

Lucas Wiessing

* DGXII/TSER – Directorate General XII of the European Commission (Science, Research and Development) Targeted Socio-Economic Research programme.

** Truncated Poisson Regression – Anovel statistical method to estimate the 'hidden' population of drug users.

*** Three-sample CRM is a more standard method requiring three data sources. Two-sample CRM uses two data sources and is less reliable.

BOOKSHELF



Night Life in Europe and Recreative Drug Use – SONAR '98

This work is the result of a European Commission-funded research survey, carried out by the European network IREFREA, to study the recreational night life of young people in nine European cities and its relation to drug use. The cities participating in the research project were: Athens; Berlin; Coimbra; Manchester; Modena; Nice; Palma; Utrecht; and Vienna.

Quantitative and qualitative exploratory methods (questionnaires and semi-structured interviews) were employed in the survey. The first provided abundant data on 'night-lifers', while the second enabled this data to be put into context. Ten informants were appointed in each of the cities involved in order to provide first-hand descriptions of issues such as: most popular venues; habits and cultures; and legal and illegal drug use. These informants were chosen from professionally-involved groups, such as waiters, disc jockeys, police officers and club and disco owners. The survey focuses on multi-drug use in recreational environments and illustrates that alcohol, tobacco, marijuana, ecstasy and amphetamines are significant elements of multi-drug use. Also studied were the risks perceived by individuals in relation to drug consumption.

Published by: 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.

Author: Various. Research co-ordinator, Amador Calafat.
Date: 1999.

Language: English.

Price: Free.

ISBN: 84-6059103-4.

Volumes may be ordered from: IREFREA, Rambla, 15,
2º, 3ª, E-07003 Palma, Mallorca, Spain.

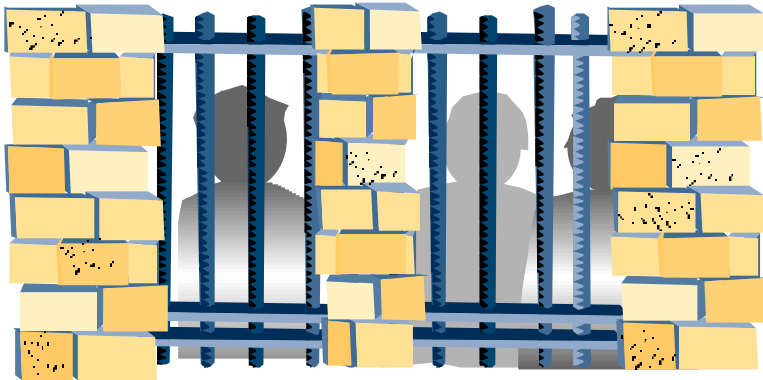
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PREVENTING HIV AND HEPATITIS IN PRISONS



The 3rd European Seminar on HIV and Hepatitis Prevention in Prisons, organised by WIAD (Bonn) and ORS-INSERM (Marseilles),* was held in Milan from 28–29 May. A European Commission-funded network set up to monitor this issue presented the results of its work, as did other researchers and practitioners working on the theme across Europe.

Presentations were delivered on the following topics: epidemiological surveillance; analysis of risk factors and risk behaviours; and the implementation of harm-reduction measures in prisons. One important outcome of the meeting was a series of practice-oriented recommendations embracing both the prevention of HIV and hepatitis infection in prisons and the care of infected inmates.

The prevalence of HIV and hepatitis in Injecting Drug Users (IDUs) in prisons is high in many European countries. Results from some countries in the network show rates ranging from 1.4% (Germany) to 28% (Portugal) for HIV and from 14.4% (Germany) to 64% (Italy) for hepatitis C. As IDUs comprise a large percentage of prison populations, participants stressed the public-health relevance of preventing infectious diseases among inmates. In some studies, the incidence of transmission inside prisons has been proven, while one UK study reported that individuals start

to inject in prisons. Circumstances in prisons often render prevention, treatment and research difficult, due to the opposing objectives of detention and care.

An overview on liver disease in hepatitis C-infected persons, presented at the meeting, pointed to the fact that progression from infection to liver disease depended strongly on age, gender, alcohol abuse and treatment. Research shows that the average time-span from infection to cirrhosis may vary from 44 years in those under 20 to 12 years in those over 50. It also suggests that vaccination against hepatitis B seems to be increasingly offered to IDUs in Europe. Antibody prevalence data – such as those presented at the seminar by the EMCDDA – should therefore be interpreted as an indication of immunity rather than of current or past infection. However, in several countries, vaccination is probably still not offered on a sufficient scale, despite recommendations existing for many years (e.g., in Sweden). In the closing session, attention was drawn to the human rights of inmates, while HIV and hepatitis prevention in prisons was designated a ‘frontline issue’ in public-health research.

Lucas Wiessing

* WIAD (Wissenschaftliches Institut der Ärzte Deutschlands e.V.) and ORS-INSERM (Observatoire Regional de la Santé, Provence).

REFORM OF EUROPEAN UNION SERVICES

Mr Klaus Ebermann, Director at the Secretariat-General of the European Commission, visited the EMCDDA on 3 June to deliver a presentation on ‘The reform of the European Commission and the role of the agencies’.

Mr Ebermann underlined the context in which the new Commission would be required to operate once it takes up its role this summer. In particular, he referred to the changes introduced by the Treaty of Amsterdam (e.g., greater powers for the European Parliament); the introduction of the Euro; the institutional and budgetary consequences of EU enlargement; and changing public opinion vis-a-vis administrations.

Mr Ebermann expected the ‘modus operandi’ of the new Commission to centre on dialogue, co-operation and transparency. He also summarised the results of the recent internal screening process of the Commission which evaluated the work of its many services. Mr Ebermann welcomed the smooth running of the 11 EU agencies, an example which, he said, would be taken into account in the general reflections on the Commission reform process. He also commented on the potential decentralisation of further issues (e.g., the reconstruction of Kosovo) to specialised EU agencies.



Pompidou Group: Permanent Correspondents

A draft Memorandum of Understanding between the Pompidou Group of the Council of Europe and the EMCDDA was approved during the 43rd meeting of Permanent Correspondents of the Pompidou Group from 28–30 April in Strasbourg. The formal signature of the agreement by Council of Europe Secretary-General Daniel Tarschys and EMCDDA Executive Director Georges Estievenart is expected after the summer, following its recent endorsement by the Council's Ambassadors Committee and the EMCDDA Management Board.

Ignacio Vazquez Molini



THE EMCDDA AND ITS PARTNERS

Pompidou Group: Experts in Epidemiology

The Experts in Epidemiology of the Pompidou Group of the Council of Europe met from 7–8 June in Strasbourg. Discussions centred on the organisation's third Multi-city Study (1991–1997), covering 26 cities, to be published later in 1999.* Also

discussed were progress reports on ongoing projects including those related to: treatment demand and first treatment; extension of the Group's treatment-demand project at national level in the countries of Central and Eastern Europe; a project to develop a treatment discharge form; and drug use among prisoners.

Chloé Carpentier

* The Multi-city Study of Drug Use is a study carried out by the epidemiology experts of the Council of Europe. The first study (1987) covered seven cities and the second (1994) covered 13.

Meeting of International Epidemiology Work Group

The EMCDDA participated in the 6th meeting of the International Epidemiology Work Group on Drugs (IEWG) held in Vancouver (Canada) from 8–11 June.* The Vancouver meeting was attended by 90 experts from international (UNDCP, WHO), regional and national organisations, and from Asia, Australia, Europe, Latin America, North America and South Africa. The encounter was linked to sessions organised by city networks from the USA and Canada in which 21 US and 12 Canadian cities participated.

The meeting reviewed recent trends in the different world regions and discussed developments in epidemiological monitoring.

In Europe, it was noted that heroin remains the main 'problem' drug, although use of amphetamines and cocaine is increasing. In the USA, cocaine (crack) still appears the dominant problem drug, with a stable or declining trend, while heroin, methamphetamine and marijuana are increasing. Drug use is growing among young people and the age of first use is declining. Canada reported lower levels than the USA for all drugs, although cocaine is generally increasing and alcohol was determined the main problem drug.

Meanwhile, Mexico noted increases in cocaine and heroin use, but at much lower levels than in the USA. Monitoring systems were seen to be developing in Latin America, where an increase in cocaine is noted. In Asia, heroin is the dominant drug, although there are large variations, and an important increase in methamphetamine is observed. Australia reported a high prevalence of drug use, with heroin the main problem and cocaine and amphetamines increasing. In South Africa, alcohol, cannabis and methaqualone are the main drugs, with some increase in cocaine observed.

Richard Hartnoll



* Two earlier meetings were held at the EMCDDA in Lisbon in 1994 and 1998. (See *Drug Net Europe* No.13). The IEWG is an informal network of regional epidemiological networks (often of cities) involved in monitoring trends in illegal drug use and related problems in different parts of the world. The purpose of this 'network of networks' is to provide an international forum for exchanging information on epidemiological surveillance systems and methods and for comparing and discussing changing patterns of drug use observed in different regions or sub-regions.

EMCDDA STATUTORY BODIES

Scientific Committee meeting



The EMCDDA's Scientific Committee met in Lisbon on 17 and 18 May where agenda items included: implementation of the 1999 Work Programme; the Committee's contribution to the EMCDDA's 1999 *Annual Report*; and the creation of two sub-committees (composed of Scientific Committee members) responsible for ensuring the quality of epidemiological and demand-reduction data respectively.

The Committee's Steering Group* prepared the ensuing risk-assessment

session on 4-MTA (see below). Discussions centred largely on progress made regarding methodology (criteria, guidelines, etc.). Also stressed was the importance of rapidly disseminating harm-reduction information to (potential) users through the Early-warning System on New Synthetic

Drugs once a new substance has been detected.

Lena Westberg

* The Steering Group, composed of Scientific Committee members, was set up by the Scientific Committee in November 1997 to prepare the risk-assessment procedure on new synthetic drugs.



RISK ASSESSMENT OF 4-MTA

In the framework of Article 4 of the June 1997 Joint Action on New Synthetic Drugs, an enlarged EMCDDA Scientific Committee* met from 18–19 May in Lisbon to assess the risks of the synthetic drug 4-MTA (4-Methylthioamphetamine). The Committee's tasks were to assess the health and social risks of the substance and the possible consequences of prohibition. The result was the formal adoption on 19 May of the 'Report on the Risk Assessment of 4-MTA in the Framework of the Joint Action on New Synthetic Drugs'.

The Report concludes that 4-MTA should be placed under control in the EU Member States largely due to the high risks of overdose associated with the drug. These stem from the slow onset of the drugs' effects – often misinterpreted by users as the result of a weak dose, leading to the consumption of more pills – and their long-lasting nature. Also highlighted in the Report are the serious risks resulting from mixing the drug with alcohol, MDMA, amphetamines, ephedrine and certain foods.

The meeting stressed the urgent need to educate and inform (potential) user groups of the above-mentioned hazards of 4-MTA. While presenting prohibition as the most viable model for controlling use of the drug, the meeting underlined

that this should not hinder non-repressive preventive or harm-reduction initiatives, nor thwart data-collection on drugs such as 4-MTA on the market or the dissemination of information to users or relevant professionals. The meeting also recommended that, when a new synthetic drug is identified for risk assessment, arrangements should be made for providing standard reference material and associated analytical data to forensic and toxicology laboratories within the European Union.

The Report was submitted on 24 May to the German Presidency of the Horizontal Drugs Group (HDG) of the Council of the EU and to the European Commission for further action in accordance with Article 5 of the Joint Action (procedures for bringing specific new synthetic drugs under control). The Report was presented and discussed at the meeting of the HDG on 18 June after which it became an official public document. The EMCDDA foresees the publication of this risk-assessment report later this year.

Lena Westberg

* The special risk-assessment meeting of the Scientific Committee was attended by: Scientific Committee members; experts from the Member States; and representatives of the European Commission, the European Agency for the Evaluation of Medicinal Products and Europol.

EMCDDA alerts

national

networks

on 4-MTA risks

On 24 June, the EMCDDA released an urgent information release through the REITOX network on the effects of 4-MTA, urging the National Focal Points to disseminate this briefing through their national channels (including health services and the media). This initiative follows recent press reports suggesting that 4-MTA is '33 times stronger than normal ecstasy'. The EMCDDA considers such reports seriously misleading and scientifically unfounded. The agency is concerned that this type of coverage may inadvertently promote use of 4-MTA among ecstasy users and lead them to expect a relatively quick and dramatic effect. As stated opposite, the effects of 4-MTA are slow, often leading to additional consumption of 4-MTA pills and/or of other drugs.

EMCDDA participates in 7th meeting of the European Publishers' Forum

On 30 April, the EMCDDA participated in the 7th Meeting of the European Publishers' Forum, a joint initiative of the Federation of European Publishers, Directorate-General X (Information, Communication, Culture and Audio-visual Media) of the European Commission and the Office for Official Publications of the European Union (EUR-OP). Among the issues discussed at the meeting in Brussels, attended by 116 commercial and EU publishers, was the current status of EU publishing, the dichotomy between commercial publishing and public-information publishing, and the merits of priced versus free publications.

The publishing policy of the European institutions, and above all of the Commission, is currently being re-evaluated with results due this autumn. Among the issues being reviewed are:

- the need to reduce the very large number of publications produced by the European institutions, to target these publications more carefully and to improve their quality;
- the feasibility of promoting greater use of electronic publishing as a way both of saving production costs and of increasing the distribution and immediacy of information; and
- pricing policy.

The evaluation is being undertaken in the context of a Green Paper on Public Sector Information in the Information

Society, adopted by the European Commission in January 1999, and the entry into force on 1 May 1999 of the Treaty of Amsterdam. The Green Paper (see <http://www.echo.lu/info2000/en/publicsector/greenpaper.html>) examines how the information gathered by public bodies can provide the greatest benefit to citizens and businesses in Europe and states the importance of easy access to information, both politically and economically. The Treaty of Amsterdam calls for greater transparency and increased access to information for European citizens. The Forum thus proposed that 'basic' institutional information should be available free of charge to citizens, while 'added value' information would be sold.

While commercial publishers aim to cover their costs and make some profit, the European Commission's publishing programme prioritises maximum visibility at the lowest cost. The two are not, however, mutually exclusive. Collaboration between EU institutions and commercial publishers centres above all on the agreements arranged via the Forum whereby institutions license the right to publish specific manuscripts to commercial publishers. The EMCDDA is currently exploring this option.

In setting pricing policies, EU institutions should remember that the more specialised their publications the more finite their market. It does not follow that if the price is lowered, more copies will be sold, or if the publication is distributed free it will become more attractive.

The eighth meeting of the EU Publishers' Forum will be held at the Frankfurt Book Fair on 14 October.

Rachel Neaman

Further information on the European Publishers' Forum is available on its web site at <http://eur-op.eu.int/forum/> or from the European Publishers' Forum Secretariat, 200 rue de la Loi, B-1049 Brussels. Fax: +32 2 296 06 24. E-mail: info.forum@opoce.cec.be.



EMCDDA PUBLICATIONS

New Publications:

- *General Report of Activities 1998* (English, French, German).
- *Report on the Risk Assessment of MBDB in the Framework of the Joint Action on New Synthetic Drugs* (English).



- *Outreach Work Among Drug Users in Europe: Concepts, Practice and Terminology*, Insights series No. 2 (English).
- *Euro-Ibero American Seminar: Co-operation on Drugs and Drug Addiction Policies – Conference Proceedings* (English, Spanish, Portuguese).
- *Guidelines for the Risk Assessment of New Synthetic Drugs* (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/html/publications.html>.

Visits to the EMCDDA

The German strategy on drugs and co-operation with the EMCDDA were the topics discussed on 10 May during a visit to the Centre by Member of the German Parliament, Ms Monika Knoche. Ms Knoche highlighted Germany's increasing attention to the health and social

aspects of the drug problem since November 1998 when the drugs portfolio moved from the Ministry of the Interior to the Ministry of Health.

This visit was followed on 26 May by another from Deputy UK 'Drug Tsar', Mr Mike Trace. Mr Trace presented the UK strategy on drugs and the achievements outlined in the first annual report of the UK Drug Co-ordination Unit. Discussions focused on data collection in general and the development by the

EMCDDA of five harmonised epidemiological indicators in particular.

On 11 June, then incoming Chairman of the Horizontal Drugs Group of the Council of the EU, Mr Matti Bäckman, visited the Centre in the context of the Finnish Presidency of the Council. Mr Bäckman discussed the role of the EMCDDA in the work of the six-month Presidency (June–December 1999).

Danilo Ballotta

**REITOX Cluster
Group discusses
eastern prospects**

A REITOX network 'Cluster Group' (a meeting of topic-focused NFPs) met in Munich on 29 April to discuss common interests and collaboration with the Central and Eastern European Countries (CEECs). The meeting, which addressed broad ideas and principles rather than operational matters, was attended by the NFPs from France, Germany, the Netherlands and Sweden.*

The Cluster Group felt that progress should be made as soon as possible in developing networks for the collection and dissemination of drug-related data in the CEECs and across Europe. The Group considered that once a REITOX-style network had been established in the CEECs, the dissemination of data and feedback on *National Reports* would be of particular importance to national centres in the region.

The Group agreed that the greater involvement of the CEECs in the work of the EMCDDA would doubtless require increased co-ordination and staffing within the Centre's REITOX Co-ordination Department. The Cluster Group concluded that it would be preferable to harmonise Europe-wide networking and data-collection activity within the REITOX department rather than create a separate CEEC body.

Finally, the session recommended that Management Board and REITOX decision-making mechanisms and processes would need to be explained and clarified to potential REITOX members before any assimilation into the network. For this reason, participants proposed that REITOX expert meetings and consultation sessions be shifted geographically eastwards to facilitate CEEC involvement.

Roger Lewis

* Each of these Focal Points has a certain expertise in this area having participated in the final phase of the Phare Drug Information Systems Project during which they drafted three sub-regional reports and a regional overview of the drug problem based on CEEC *National Reports*. See *DrugNet Europe* No 17.

REITOX meeting

The 17th meeting of the Heads of the REITOX National Focal Points (NFPs) was held in Lisbon from 21–22 June. Topics on the agenda included discussion on both the EMCDDA's 1999 and 2000 Work Programmes; NFP *National Reports*; the EMCDDA's 1999 *Annual Report*; and web site communication between the EMCDDA and the national centres. Chairman of the EMCDDA Management Board Franz-Josef Bindert and EMCDDA Director Georges Estievenart outlined the Centre's future plans and perspectives. Two workshops were also held on the evaluation of the Joint Action on New Synthetic Drugs, and the Centre's work on HIV, hepatitis and drug use.

An internal REITOX meeting took place on 23 June during which Maria Moreira (Portugal) was elected spokesperson for the NFPs and Françoise Claeys (Belgium) deputy spokesperson. Furthermore, experiences were shared and ideas discussed regarding the future implementation at national level of the EMCDDA's five epidemiological harmonised key indicators.

Roger Lewis

**Demand-reduction
networking**

In recent years, the need to consolidate information networks in the field of drug demand reduction has arisen from difficulties experienced by the REITOX Focal Points in accessing projects during preparations for the EMCDDA *Annual Report* and the EDDRA database. The EMCDDA embarked on a project to overcome these obstacles in September 1998, in co-operation with the Austrian, Dutch, Irish, Spanish and Swedish National Focal Points. A final seminar on the project was hosted by the Swedish Focal Point (co-ordinator) from 20–21 May in Stockholm and a final report will be presented at the next REITOX meeting in November. By creating demand-reduction networks, the NFPs can disseminate information to professionals for support in daily practice. At the same time, relevant information may be collected by the EMCDDA and NFPs and shared with partners, thereby contributing to the further development of the European dimension of demand reduction.

Margareta Nilson

EMCDDA Calendar

- 30 June–2 July – EMCDDA Management Board, Lisbon.
- 16 July – Visit to the EMCDDA by Commissioner responsible for Justice and Home Affairs Anita Gradin and Drug Co-ordinators, Lisbon.
- 17 July – Meeting of the evaluation group of the Phare project on Technical Assistance to Drug Demand Reduction EMCDDA, Lisbon.

Other Meetings Attended

- 2 July – Expert meeting on drug-related deaths, Trimbos-Instituut, Utrecht.
- 11–13 July – Finnish EU presidency seminar 'Best practice in drug prevention by the law enforcement authorities', Helsinki.
- 12–13 July – Project meeting to improve data quality for surveillance of hepatitis B/C and HIV infection in injecting drug users in the EU, Scottish Centre for Infection and Environmental Health, Glasgow.
- 19 July – Meeting on the treatment demand indicator, IFT, Munich.
- 25–31 July – Summer course on drugs with presentation by EMCDDA Director, El Escorial, Spain.
- 26–28 August – Second annual meeting of the Global Research Network on HIV Prevention in Drug-Using Populations, NIDA, Atlanta, Georgia.
- 29 August–1 September – European Summer School on Comparative Social Research on Drugs and Drug Policy, Aarhus, Denmark.
- 30 August–4 September – Satellite meeting on the 'Epidemiology of Drug Use' during the 'XV International Scientific Meeting of the International Epidemiological Association: Epidemiology for Sustainable Health', Florence.

Selected EU Meetings

- 7 July – Horizontal Drugs Group, Brussels.
- 7 September – Horizontal Drugs Group, Brussels.

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