



E.M.C.D.D.A.

European Monitoring Centre  
for Drugs and Drug Addiction

# DrugNet Europe

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## UNITED NATIONS

adopts first Action Plan  
on Drug Demand Reduction



In June 1998, the United Nations General Assembly Special Session on Drugs (UNGASS) adopted a *Declaration on the Guiding Principles of Drug Demand Reduction*. The UNGASS subsequently requested the Commission on Narcotic Drugs (CND)\* to propose an action plan to implement this Declaration and, in the ensuing months, the United Nations International Drug Control Programme (UNDCP) prepared a preliminary text. This was discussed and amended in December 1998 by an intergovernmental working group and by other specialised agencies, including the EMCDDA.

Reviewing the steps being taken by countries to meet drug control targets set at the UNGASS was a major focus of the 42<sup>nd</sup> annual session of the Commission on Narcotic Drugs held from 16–25 March in Vienna.\*\* Naturally, drug demand reduction was high on the agenda and, following long debates between Member States, the first 'United Nations Action

Plan for the Implementation of the *Declaration on the Guiding Principles of Drug Demand Reduction*' was adopted.

This Action Plan is designed to orient States in their implementation of the *Guiding Principles*, which contain standards to help governments set up drug demand reduction programmes by 2003 and significantly reduce the demand for drugs by the year 2008. The Action Plan lists 16 objectives focusing, among others, on: the participation of relevant sectors of society in tackling drugs; and the development of appropriate tools and measures to assess and communicate the causes and consequences of substance misuse. In particular, the Action Plan assigns a significant role to regional organisations, such as the EMCDDA, to: help set up national monitoring systems, including regionally and internationally recognised core indicators; promote methodologies for assessing the costs and consequences of drug abuse; undertake cost-benefit analyses of measures and actions; and encourage research on drug demand-reduction issues and the dissemination and application of research findings.

The adoption of the Action Plan constitutes a major step forward in international efforts against drugs as it highlights that demand reduction is a crucial pillar in the global approach to countering the world drug problem. The Plan is also in line with efforts made over recent years by the European Union and its Member States in addressing the drug problem.

Juana Tomás and Philippe Roux

\* The CND is the United Nations' main policy-making body on drug control. The UNDCP is the central coordinating body of UN action against illicit drugs and acts as Secretariat to the CND.

\*\* In a Political Declaration adopted at the UNGASS, nations were asked to report to the Commission on Narcotic Drugs (CND) every two years on steps they had taken to meet agreed drug control targets for 2003 and 2008. At the CND session in 1999, the Commission reviewed guidelines to be set up for governments to report on progress. The EMCDDA's work in improving the comparability of epidemiological indicators was mentioned as an experience on which to be drawn.

## SCIENTIFIC EXPERTS ANALYSE 4-MTA

A small scientific meeting on the pharmacotoxicology of the new synthetic drug 4-MTA was held at the EMCDDA on 19 April. Discussions were based on scientific literature on the substance and provided a contribution to the EMCDDA's risk assessment of the drug initiated through a formal request from the German Presidency of the Council of the European Union on 3 February 1999.

The meeting was attended by scientific experts and members of the EMCDDA Scientific Committee's Steering Group, established in November 1997 to draw up risk-assessment guidelines in the context of the Joint Action on New Synthetic Drugs. The participants presented an overview of the current incidence of 4-MTA, including deaths and overdoses in the United Kingdom.

The literature review on 4-MTA, and the results of the above discussions, will be submitted to the EMCDDA's Scientific Committee and a special risk assessment meeting in May (see page 6). These will be included in the technical annexes of the final report on the drug in accordance with the *Guidelines for the Risk Assessment of New Synthetic Drugs* adopted last November.

Lena Westberg

## 10<sup>TH</sup> INTERNATIONAL CONFERENCE ON DRUG-RELATED HARM: 'HARM REDUCTION WORKS'

**T**he 10<sup>th</sup> International Conference on the Reduction of Drug-related Harm was held in Geneva from 21–25 March where over 500 delegates exchanged experiences on addressing drug problems with a harm reduction approach.\*

'Harm reduction works' affirmed Ruth Dreifuss, President of the Swiss Confederation, at the opening session, an assertion echoed throughout the Conference. Among others, national harm reduction networks were seen to be showing positive results in terms of new HIV prevention programmes and their influence in legalising needle distribution. The importance of peer-driven interventions was also underlined, particularly community outreach work initiatives employing Intravenous Drug Users (IDUs) to reach other and more diverse sets of IDUs at reduced expense.

On treatment, heroin trials currently operating in the Netherlands and Switzerland are now being planned in other European countries as well as in the USA and Canada. Meanwhile, in Australia, new trends in substitution therapy include the use of LAAM\*\* and slow release oral morphine, buprenorphine and naltrexone. In France, a strong increase in buprenorphine substitution was noted, but this had also led to uncontrolled and intravenous use. Co-morbidity (other mental health problems besides addiction) was shown to impede the effectiveness of harm reduction measures. This was demonstrated by the occurrence of HIV infections among well-informed addicts in Swiss methadone maintenance programmes.

Drug-injecting in prisons received much attention during the Conference as an important cause of HIV and hepatitis B/C transmission in IDUs in Europe. The legalisation of cannabis continued to prove a controversial topic, although medical benefits of the substance are increasingly recognised. Finally, cost-effectiveness studies were presented as a means of evaluating the different options available for interventions in terms of input (costs) versus output (problems prevented).

### Lucas Wiessing

\* Harm reduction implies a focus on reducing drug-related problems for drug users and society, rather than exclusively on reducing the consumption of drugs.

\*\* Levo-alpha-acetyl-methadol, an opiate substitute.



Needle exchange programme reducing drug-related harm in Portugal

## National Prevalence Estimates of Problem Drug Use

**T**he EMCDDA, in co-operation with the National Focal Points (NFPs) and scientific experts, is developing five key epidemiological indicators on the prevalence and health consequences of problem drug use in the EU. One of the indicators, national prevalence estimates of problem drug use, is the focus of an EMCDDA project aimed at improving cross-country comparability.\* At a meeting in Lisbon from 11–12 March, representatives from all 15 Member States and Norway evaluated the results achieved to date.

A draft report presented at the meeting was discussed in terms of the quality and comparability of available estimates as well as the applicability of various estimation methods in different countries.

Six methods are recommended by the project, each of which has its own weaknesses and, in isolation, can only offer a crude indication of the national prevalence of problem drug use (mostly opiate use). The project therefore recommends applying multiple methods per country and using the results gained if these prove comparable. The methods use data from other drug indicators (e.g. drug treatment, police arrests, drug deaths, HIV infections) and social indicators (e.g. unemployment, property crimes, migration, housing density) in statistical models.

The results to date prove encouraging. At present, preliminary estimates have been reached for 13 countries, 10 of which are based on multiple methods. Following the recommendations of the meeting to improve estimation methods, these preliminary estimates will be recalculated and peer-reviewed by country experts and NFPs. New estimates of problem drug use will be available in July 1999 and revised guidelines on the methods in September.

### Lucas Wiessing

\* Co-ordinated by the German Focal Point (IFT).

## SECOND EUROPEAN CONFERENCE ON THE EVALUATION OF DRUG PREVENTION

**E**valuation: a key tool for improving drug prevention' will be the title of the Second European Conference on the Evaluation of Drug Prevention to be organised by the EMCDDA, in co-operation with the European Commission, from 2-4 December in Strasbourg. The meeting will aim to: broaden knowledge on evaluation; improve evaluation practices; and increase dissemination of information in the field. The First European Conference on the Evaluation of Drug Prevention took place in Lisbon from 12-14 March 1997 on the basis of which a scientific monograph was compiled in 1998 entitled *Evaluating Drug Prevention in the European Union*.\*

Philippe Roux and Gregor Burkhardt

\* EMCDDA Scientific Monograph No. 2. Further details available at:  
<http://www.emcdda.org/html/publications.html>

## EDDRA CO-ORDINATION MEETING

**E**DDRA managers from the 15 National Focal Points met in Lisbon on 26 March to discuss work plans for 1999 following a decision in July last year to introduce EDDRA as a REITOX Core Task.\* Key points discussed at the meeting included quality criteria for selecting projects to be inserted into the database, particularly criteria related to evaluation.

This year, work will focus in particular on projects organised in 1998 in the framework of the third European Drug Prevention Week, as well as on synthetic drugs and cannabis. In 2000, EDDRA will also cover heroin substitution, criminal justice aspects and drug abuse among women and children, in line with priorities set for the EMCDDA's *Annual Report*. In time, however, the Centre intends for all areas of drug demand reduction to be covered by the system.

This summer, the European Commission (DG V – Social Affairs) will begin introducing data on Community projects into the system. Meanwhile, in the longer term, data on Phare projects may also be included.

EDDRA has encountered a number of technical problems over recent months which are being resolved thanks to a new technical environment and a more user-friendly structure.

Philippe Roux and Cornelia Faßbender

\* A permanent duty formally assigned by the EMCDDA to the REITOX Focal Points.

## BOOKSHELF



### European Conference '98 Drug Prevention and Drug Policy Conference Documentation

This 238-page volume is a tri-lingual report on the 'European Conference '98 – Drug Prevention and Drug Policy', organised in Vienna from 5-6 November as the flagship event of the third European Drug Prevention Week (EDPW). Among others, the report presents highlights of speeches delivered at the opening and plenary sessions, as well as the results of the three Conference workshops.

The Conference provided an opportunity for over 300 leading drug prevention and drug experts from the EU and CEECs to: compare local, national and international strategies; present innovative models in a joint European context; and identify new and promising possibilities for co-operation.

Published by: Europaforum, Wien. The Conference and publication were co-financed by the European Commission. Author: Eugen Antalovsky/Christoph Lamprecht.

Date: December 1998.

Language: Single tri-lingual volume (English, French and German).

Price: Free.

ISBN: 3-9500576-4-1.

Volumes may be ordered from: Odd Hordvin, European Commission DG V/F2, rue Robert Stumper, 10, L-2557 Luxembourg.

Tel: ++ 352 4301 32838. Fax: ++ 352 4301 34511.

For further information please contact: Europaforum Wien, Centre for Urban Dialogue and European Policy, Rahlgasse 3/2, A-1060 Vienna, Austria. Tel: ++ 43 1 585 85 100.

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E-mail: [institut.efw@europaforum.or.at/](mailto:institut.efw@europaforum.or.at/).

web site: <http://www.europaforum.or.at/wien/>.

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

## INTERNATIONAL SYMPOSIUM ON HEROIN PRESCRIPTION: STATE OF THE ART

Some 150 researchers, treatment professionals and policy-makers attended an International Symposium on 'Heroin-assisted treatment for dependent drug users: State of the art and new research perspectives' held at the University of Bern, Switzerland, from 10-12 March. The objectives of the Symposium were to: review existing knowledge; debate the relative role of heroin-assisted

were held on research needs, international collaboration and the merits of heroin prescription over other treatment options.

The presentations and discussions were diverse and rich. From a methodological perspective, a lively debate focused on whether random controlled trials, often seen as the 'gold standard' in epidemiology, were the most appropriate method for assessing heroin prescription or whether naturalist designs should be used. Further issues included: how to distinguish the impact, at individual level, of the drug prescribed (heroin) from the extent and quality of the supporting services provided; and how to assess, at societal level, the link between heroin prescription and indicators in order to evaluate the public health impact.



treatment in a public health perspective; discuss conceptual and methodological issues; consider knowledge transfer between science and policy; and identify new research directions.

The conference papers covered a wide range of issues including ongoing and proposed research on heroin prescription in Australia, Germany, Spain, Switzerland, the Netherlands and the UK. These were presented and discussed from various points of view in sessions on drug policy, conceptual and methodological issues, psychiatric public health and psychosocial research. Parallel sessions were devoted to biological, pharmacological and medical aspects; research design; and legal and criminological questions. In addition, round table discussions

Besides the historical example of the UK, and the results of the recent Swiss study, there is still insufficient evidence to answer all questions. However, it is apparent that heroin prescription is feasible, retention rates are high and individual behaviour changes in the desired direction are observed. The question of the relative advantages and disadvantages of heroin prescription compared to those of methadone requires more detailed analysis. The more fundamental questions concerning the objectives and target groups for heroin prescription, as well as entry and exclusion criteria, are still controversial involving decisions based on policy priorities and values as well as on scientific and clinical evidence.

*Richard Hartnoll*

## European Drug Prevention Week 1998 7th Meeting of National Co-ordinators

National co-ordinators involved in the third European Drug Prevention Week (EDPW 16-22 November 1998) met in Luxembourg on 12 March to hear the preliminary results of the EDPW media campaign and to discuss evaluation of the overall event.

The European media campaign, based on the slogan 'Talking is the first step', took the form of TV and radio spots broadcast throughout the European Union and Norway. According to the advertising agency *Publicis*, 31 TV channels in 10 Member States and 24 radio stations in 7 Member States transmitted the spots during the week.

To facilitate the European Commission's evaluation of the event, national co-ordinators have been asked to report information on their national drug prevention programmes in the format of an EDDRA questionnaire provided by the EMCDDA. The Commission has assigned the Association of Schools of Public Health in the European Regions (ASPHER) to ensure analysis of these national inputs. Detailed results will be available in September 1999. Broad dissemination of information on the projects organised during the EDPW, will be assured, among others, through the EDDRA database available at <http://www.emcdda.org>.

*Philippe Roux*



## Substitution

### Treatments in the EU

**M**ethadone maintenance and other substitution treatments have expanded rapidly in the European Union in recent years where an estimated 300,000 people now undergo therapy of the kind. The manner in which different Member States document and monitor treatment activities varies considerably from country to country as does the organisation of health and social services. Largely thanks to the EMCDDA and its National Focal Points, information systems designed to collect objective, reliable and comparable information in this area are now developing throughout the EU.

In the framework of an ongoing EMCDDA project to identify the availability of substitution treatments in the EU,\* experts from across the European Union and Central and Eastern European Countries (CEECs) met in Rome on 12 March to assess progress and analyse results. A final report on the project is scheduled for completion in June 1999. The report will consider issues such as: entry requirements for substitution treatments for heroin addicts; quality control; links between general and specialised medical care; reactions of local communities to the setting up of substitution treatment centres on their doorstep; and substitution programmes for groups such as pregnant women and ethnic minorities.

Petra Paula Merino

\* Co-ordinated by the Osservatorio Epidemiologico Lazio, and the National Addiction Centre, London.



## EMCDDA STATUTORY BODIES

### Management Board

**T**he EMCDDA Bureau will meet in Lisbon on 7 May to discuss and prepare the 17<sup>th</sup> meeting of the Management Board to be convened at the Centre from 30 June to 2 July. During the July meeting, the Management Board will discuss among others: relations between the EMCDDA and international organisations; the implementation of five harmonised epidemiological indicators; the agency's involvement in the European Commission's Phare Programme; a pilot project for a legal information system; developments in the area of new synthetic drugs; and the election of the Director of the EMCDDA. Also to be debated will be the evaluation of the Centre, to be conducted by an independent partner at the request of the Management Board.

Kathleen Hernalsteen

### Scientific Committee

**T**he EMCDDA's Scientific Committee will convene in Lisbon on 17 and 18 May to prepare a special meeting on the risk-assessment of 4-MTA\* (18–19 May) in accordance with Article 4 of the Joint Action on New Synthetic Drugs. The Scientific Committee's Steering Group will report new findings on 4-MTA, while other agenda items will include the creation of sub-committees, composed of Scientific Committee members, to assist the EMCDDA in improving the quality of data and output. The ensuing risk assessment meeting will focus specifically on the health and social risks of 4-MTA and the possible consequences of prohibition.

\* (P-Methylthioamphetamine or 4-Methylthioamphetamine).

Lena Westberg

## Sociodrogalcol

### Conference

**T**he annual conference of the Spanish NGO, Sociodrogalcol, was held in Tenerife from 29–31 March in the presence of some 200 Spanish professionals and selected international experts in the drugs field. The Director of the EMCDDA, Georges Estievenart, delivered the inaugural speech at the event, stressing the need

for objective, reliable and comparable information on the key issues of the conference: prevention; treatment; drug use in prisons; new patterns of drug use; and driving under the influence of drugs. He also highlighted the importance of evaluating activities in these domains.

Margareta Nilson, head of the EMCDDA's Demand Reduction Department, presented tools developed by the agency regarding the evaluation of drug prevention. These included *Guidelines for the Evaluation of Drug Prevention* and the database on demand reduction activities, EDDRA.

Commenting on drug-related issues in Spain, some delegates reported that, LAAM was gaining ground in substitution treatment. It was advocated that LAAM was less sedative and easier to detoxify than methadone and presented conditions for successful treatment with stable methadone patients. Also noted was that recreational drug users in Spain tended to be sensation-seeking rather than marginalised individuals. Finally, Spanish youngsters were reported to drink more, mix more drugs and perceive less risks in drug taking than their peers in other European countries.

Margareta Nilson

*The Effects of Data-  
Collection Methods on  
Population Survey Results*

**P**opulation surveys measuring drug use in the general population are based on self-reported information. Evidence suggests that willingness by individuals to report information on drug use may vary according to the method of data collection used (i.e. face-to-face interviews, telephone surveys or mailed questionnaires) and may relate to the informants' perceptions of guarantees of confidentiality. The significance or importance of this factor may differ according to the country concerned or to socio-demographic variables such as age, gender or education.

Eleven European Union countries have conducted national population surveys in recent years, but different methods of data collection have been used, thus limiting comparability across countries. In order to tackle this problem, the EMCDDA embarked on a project in 1998 to assess the possible effects of data collection methods on results of self-reported prevalence of drug use. In Greece, the Netherlands and Sweden, data were collected by different methods but using questionnaires and sampling techniques that were as similar as possible, taking advantage of the framework of previously planned national surveys with face-to-face data collection. The results of this project will be available before the summer and are expected to contribute to the understanding of cross-national differences in drug-use figures.

*Julian Vicente*

**DRUGS - LEX**

**IRELAND TAKES STEPS  
TO ESTABLISH DRUG  
COURTS**



**I**n July 1997, the Irish government listed among the priorities in its measures to combat the drug problem the creation of a Drug Courts System aimed at introducing Court-supervised treatment programmes for less serious drug-related offences. In line with these priorities, an existing Working Group on a Court Commission was requested to consider the establishment of a Drug Courts System in Ireland.

On 25 September 1998, Irish Minister for Justice, Equality and Law Reform, Mr. John O'Donoghue, announced that the government had approved the 5<sup>th</sup> report of the Working Group (entitled 'Drug Courts'). The Minister also announced government approval for the constitution of a Drug Courts Planning Committee to prepare for implementing a Drug Courts Pilot Project in the District Court in 1999. The Planning Committee became operational in February 1999 with the remit to initiate, develop and oversee a Drug Court Planning Programme and to conduct a cost-benefit analysis of the Pilot Project.

The above-mentioned report states that: 'It would not be advisable for Drug Courts to target only offences of possession of drugs'. It recommends, on the other hand, that 'a conservative approach' be adopted, underlining that 'serious crimes of violence should not be included in the project'.

Experiences of Drug Courts over the last 10 years in the United States have been encouraging, with results marking a visible decrease in drug-related crime and an increase in opportunities for drug offenders, including completion of rehabilitation programmes. A study on the Drug Court experience in Oregon has also pointed to the cost-benefit advantages of the system which has proven to be significantly cheaper than imprisonment (it reported that 15,044 US dollars were spent per individual under the Drug Court System as opposed to 38,279 US dollars under the conventional system).

The development of a pilot Drug Courts System in Ireland marks a major policy initiative in its criminal justice system. The Irish Government looks forward to assessing the results of the forthcoming Pilot Project early next year, in the belief that the initiative is likely to significantly decrease drug-related crime.

*Danilo Ballotta*

Further information in relation on the development of a Drug Courts System in Ireland and/or to obtain related reports, please contact:

Mr Sean Murphy, Courts Division, Department of Justice, Equality and Law Reform, 72/76 St. Stephens Green, Dublin 2, Ireland.

E-mail: sean\_o\_murphy@justice.ie/.

Tel: ++ 353 1 602 8438.

Fax: ++ 353 1 661 9876.

**A** delegation of the Committee on Hygiene and Health of the High Chamber (Senato) of the Italian Parliament visited the EMCDDA on 7 April in the framework of its tour of major European capitals to investigate how drug policies are applied in the European Union. During an information session with the Director and staff of the Centre, the Committee complimented the agency on its efforts to develop and promote standard methods of data collection and analysis. The delegation

**VISITS TO THE  
EMCDDA**

also welcomed the enhancement of relations between the EMCDDA and Italian institutions and organisations.

**A** delegation of the Swedish Ministry of Justice visited the EMCDDA on 23 April.

The delegation comprised: Swedish Ambassador in Portugal, Mr Krister Isaksson; Deputy State Secretary, Mrs Kristina Rennerstedt; General Director, Mr Fredrik Wersäll; and Legal Adviser, Mr Stefan Johansson. The meeting focused on EMCDDA activities primarily in the areas of legislation and criminal justice systems as well as its work on epidemiological indicators and new synthetic drugs.

*Danilo Ballotta*

## THE EMCDDA AND ITS PARTNERS



Centre presents

1998 Annual Report  
to European  
Parliament

**D**irector of the EMCDDA, Georges Estievenart, presented the agency's 1998 *Annual Report on the State of the Drugs Problem in the European Union* on 15 March to the Committee on Civil Liberties and Internal Affairs of the European Parliament (EP). The meeting took place in the context of the Committee's 1998 Schaffner Report which evaluated the EMCDDA's second Annual Report (1997).\*

The Director's presentation was followed by questions from the floor and a detailed discussion on the achievements and potential of the EMCDDA. Among others, the Committee complimented the Centre on the improvements made to the 1998 *Annual Report*, following its recommendations for a more concise yet comprehensive volume. In his closing remarks, Mr Estievenart stated that the Centre's role in the future would be to provide a 'platform for creating a prevention and information culture and offering technical instruments for the assessment of national and EU policies'. Later that day, the EMCDDA met with several MEPs where talks centred on the financing of the National Focal Points in the context of the paper adopted by the Management Board in

October 1998 on 'The Role and Financing of the National Focal Points'. The paper called for a new funding formula for 1999.\*\* Both meetings were attended by Mr Marcel Reimen, Vice-chairman of the EMCDDA Management Board.

*Sonja van Buggenhout*

\* This report, drawn up by Committee member Anne-Marie Schaffner, was adopted on 16 September 1998 in Strasbourg and focused on the EMCDDA's 1997 *Annual Report*. Among others, the report called on the EMCDDA to play a leading role in strengthening co-operation between the 15 REITOX National Focal Points in order to achieve high-quality comparable statistics. In the area of drug policy, the Centre was asked to provide policy-makers and the European Union institutions with a reliable assessment of EU anti-drug strategies, thereby developing its work in the area of information on legal issues both through publications and database products. The report also recommended that high priority be attributed to cost-benefit analyses of national drug policies.

\*\* This paper focused on the role and financing of the NFPs, in general, and in relation to the Early-warning System on New Synthetic Drugs, in particular. The Management Board acknowledged in the paper that previous NFP funding was inadequate for the proper execution of recently revised Core Tasks. A new, enhanced funding formula was therefore adopted for 1999.

European Parliament

adopts report on  
post-1999

EU anti-drug strategy

**T**he European Parliament has adopted a report by Hedy d'Ancona, Chair of its Committee on Civil Liberties and Internal Affairs, on an EU anti-drug strategy post 1999.\* In a proposal to the Council, and in the context of the new European Commission, the report recommends that all drug-related initiatives of the European Parliament be co-ordinated by a single rather than several European Commissioners. The report also approves a project for more effective co-operation between the police, customs and law enforcement bodies designed to remove illegally-acquired properties from criminal control. The confiscated funds would be used for projects and programmes linked to combating drug addiction. In the report, the EP also calls for the participation of EC candidate countries in the work of the EMCDDA.

\* Report DOC\_EN\RR\375\375768 PE 230.393/fin. 31 March 1999 a4-0185/99.

Phare Drug

Information Systems

Project

A Look to the Future

**T**he Final Seminar of the Phare Project on Drug Information Systems was hosted by the EMCDDA from 15–16 February 1999. Discussions focused on the progress achieved by the project since 1993 in developing Drug Information Systems in the Central and Eastern European and Countries (CEECs) as well as recommendations for future work.

Among others, the project – which completed its third and final phase in March 1999 – centred on building a human network of drug experts in the CEECs, along with a supporting technical network (e-mail accounts and home-pages in the [fad.phare.org](http://fad.phare.org) domain). Focal Points were also nominated and undertook various REITOX Core Tasks.

In 1998, the results achieved were considerable: *National Reports* and *Information Maps* were prepared by 11 CEECs along EMCDDA guidelines; three sub-regional reports and a regional overview were drafted on Central and Eastern Europe by EU Focal Points (France, Germany, the Netherlands and Sweden) based on the CEEC *National Reports*;<sup>\*</sup> a chapter on the drug situation in the CEECs was included in the EMCDDA's 1998 *Annual Report*; the [fad.phare.org](http://fad.phare.org) e-mail domain was extended; and catch-up activities were organised in the former Yugoslav Republic of Macedonia.

Following the completion of this final phase, it is now vital that activities undertaken to date be continued. It will also be necessary to secure a legal basis and adequate human and financial resources for the CEEC Focal Points, so that they may fulfil their tasks as fully-fledged partners of the EMCDDA and its REITOX programme.

*Ann Mennens*

\* The *National Reports*, *Information Maps* and sub-regional reports mentioned above are available as downloadable files from <http://www.fad.phare.org/dis>. These describe the drug situation in Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, the former Yugoslav Republic of Macedonia, Poland, Romania, Slovakia and Slovenia, in Central Europe, the Balkan Region and the Baltic Region.

## A Glimpse at a National Focal Point

PORTUGAL

The Portuguese National Focal Point of the REITOX network is the recently-created Portuguese Institute for Drugs and Drug Addiction (Instituto Português da Droga e da Toxicodependência/IPDT). The IPDT was created on the recommendation of an Expert Commission for the National Strategy on the Fight against Drugs in 1998 and took over the role and function of the previous Focal Point, Observatório Vida, on 5 February 1999.

The main functions of the IPDT are to: collect, analyse and disseminate technical and scientific data, information and documentation in the area of drugs and drug abuse in Portugal; set up and

develop a national information system on drugs and drug abuse; and promote research in the area.

The Institute consists of several departments, with Focal Point tasks largely undertaken by the Information Centre on Drugs and Drug Abuse. This department collects, analyses and disseminates data to and from governmental and non-governmental sources; studies and develops methodologies for data collection and analysis; and ensures the exchange of information with the EMCDDA. It also promotes the development of studies assessing the drug phenomenon and its evolution; develops and supports scientific research; and manages the IPDT's documentation centre.

The IPDT has a scientific committee which oversees all scientific reports, studies and research promoted or supported by it and works closely with the ministries involved in the national

drug abuse prevention programme, Projecto VIDA. Via a network created with these ministries and other organisations, the Focal Point collects and analyses relevant available data enabling it to produce a yearly *National Report* and *Information Map* for the EMCDDA's *Annual Report* and to respond to EMCDDA requests regarding the Early-warning System on New Synthetic Drugs, the EDDRA database and the harmonisation of key indicators.

The same network is drawn upon to respond to national information requests. Among others, the National Focal Point provides information to governmental and non-governmental bodies and researchers and produces the *Annual Report on the Drug Phenomenon and Governmental Action in the Field*, a document presented every year by the government to the national parliament to evaluate the evolution of the problem and action taken to counter it.

For further information please contact: Maria Moreira, Instituto Português da Droga e da Toxicodependência, Rua da Alcolena, 1, 1302 Lisboa Codex - Portugal. Tel: ++ 351 1 721 02 70. Fax: ++ 351 1 727 38 03. E-mail: maria@ipdt.pt

### EMCDDA Calendar

4 May – EDDRA and Evaluation of Prevention, training session, Lisbon.  
7 May – Infectious diseases indicator meeting, Lisbon.  
7–8 May – Meeting on population surveys on drugs, Amsterdam.  
10 May – Visit to the EMCDDA by Ms Monika Knoche, German Parliament.  
17–18 May – EMCDDA Scientific Committee, Lisbon.  
18–19 May – Risk assessment meeting on 4-MTA, Lisbon.  
26 May – Informal visit to the EMCDDA by Mr Mike Trace, Deputy UK Anti-drugs coordinator, Lisbon.  
4–5 June – Meeting on hepatitis indicator, Glasgow.  
21 June – Meeting on drug-related deaths, Utrecht.  
21–22 June – 17<sup>th</sup> EMCDDA meeting of the Heads of the REITOX Focal Points, Lisbon.  
23 June – Meeting between the Heads of the REITOX Focal Points, Lisbon.  
24–25 June – EMCDDA meeting on the impact and costs of hepatitis B/C and HIV, Bilthoven, the Netherlands.  
28–29 June – Preparation of the 2<sup>nd</sup> EMCDDA Conference on the Evaluation of Drug Prevention, Lisbon.  
28–29 June – Meeting on the treatment demand indicator, Munich.  
28–29 June – Meeting on time trends and incidence (EMCDDA/DG XII TSEr network), Bilthoven, the Netherlands.  
30 June–2 July – EMCDDA Management Board, Lisbon.

### Other Meetings Attended

3–7 May – CICAD 5<sup>th</sup> Meeting of the Inter-governmental Working Group on the Multilateral Evaluation Mechanism, Washington.  
25<sup>th</sup> Regular Session of the CICAD, Washington.  
4 May – Health Monitoring Programme Committee, DG V European Commission, Luxembourg.  
8–12 May – 4<sup>th</sup> International Private Sector Conference on Drugs in the Workplace, Sundsvall, Sweden.  
13–16 May – Presentation of the EMCDDA's Guidelines for the Evaluation of Drug Prevention and EDDRA at COST-A6 meeting, Ferrara, Italy.  
19 May – Informal meeting between the EMCDDA and the Swedish Narcotics Commission, Stockholm.  
20–21 May – REITOX Demand Reduction Network Project, Stockholm.  
28–29 May – Meeting of the European Network on HIV/AIDS and Hepatitis Prevention in Prisons, Milan.  
7–8 June – 29<sup>th</sup> Meeting of Experts in Epidemiology, Pompidou Group, Strasbourg.  
8–11 June – International and Community Epidemiology Working Group meetings, organised by NIDA, Vancouver, Canada.  
10–11 June – European telephone helpline network (FESAT) hosted by EMCDDA, Lisbon.  
15–19 June – Phare Summer Course, Budapest.  
24–25 June – 8<sup>th</sup> Conference of European Cities on Drug Policy, Halle, Germany.

### Selected EU Meetings

6 May – Horizontal Drugs Group, Brussels.  
18 June – Horizontal Drugs Group, Brussels.

## EMCDDA PUBLICATIONS



### New Publications:

- 1998 *General Report of Activities* (in English, French and German).
- EMCDDA Presentation Brochure (in 11 EU languages).

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