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European Monitoring Centre for Drugs and Drug Addiction

DrugNet Europe

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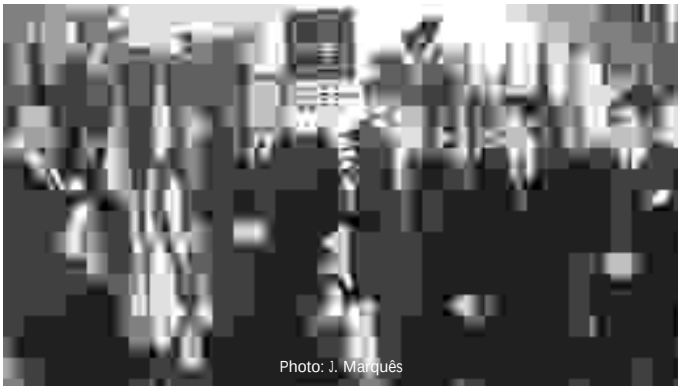
Presidents Chirac and Sampaio

welcome the work of the EMCDDA



Presidents Chirac and Sampaio speak to the press at the EMCDDA with Georges Estievenart (left), José Sócrates (second from right) and Franz J. Bindert (right).

On 4 February, at the start of a two-day State visit to Portugal, President Jacques Chirac of France, together with President of the Portuguese Republic Jorge Sampaio, paid a fact-finding visit to the EMCDDA. During the session, the two Heads of State met with Chairman of the EMCDDA Management Board Franz J. Bindert and Director of the EMCDDA Georges Estievenart. Also present were high-level representatives from both Portugal and France.

The French President, warning that the drug phenomenon was reaching dramatic proportions, urged European Union Member States to introduce common laws to help combat the problem. Speaking at an informal press gathering at the Centre, President Chirac said: 'It is unacceptable that European legislation in this area is not harmonised'. In order to address this issue of legislation, the President pointed to the need for EU countries to have at their disposal adequate scientific, technical and statistical knowledge. 'Europe must become aware of the drama with which it is confronted and be equipped with a coherent means to fight this problem' he stressed, reiterating the 'vital importance' of the EMCDDA in developing the required knowledge-base for sound judgements.

'We need to know more to make better decisions' was the message conveyed by President Sampaio in his statement to the press. The Portuguese Head of State highlighted the progress made over recent years in the level of knowledge on drugs and the need to continue to develop this expertise: 'We are here today to give impetus to the countries of the EU and to the EMCDDA to continue their initiatives that are so crucial to political decision-making'.

Guests attending the closed meeting with the Presidents included: José Sócrates, Portuguese Deputy Prime Minister responsible for drugs; Alexandre Rosa, Portuguese National Drugs Co-ordinator; Christian Sauter, French Secretary of State for Budgets; Hervé Mécheri, Delegate to the French Inter-ministerial Mission for the Fight against Drugs; and Paul Lafargue, National Drugs Expert at the Secretariat-General of the Prime Minister. The visit was of particular relevance to the EMCDDA in the run-up to the French and Portuguese Presidencies of the Council of the European Union in 2000.

Spotlight on 4-MTA

On 22 January, a preliminary report resulting from an exchange of information between the EMCDDA and Europol on the drug 4-MTA (P-Methylthioamphetamine or 4-Methylthioamphetamine) was submitted to the Horizontal Drugs Group of the Council of the EU for consideration.* The German Presidency subsequently invited the EMCDDA to evaluate the substance in the framework of Article 4 (risk assessment) of the 1997 Joint Action on New Synthetic Drugs.

Concern about 4-MTA was triggered by large seizures of the drug in the second half of 1998 – primarily in Belgium and the UK and, to a lesser extent, in the Netherlands – as well as by the number of deaths allegedly linked to the substance.

References to 4-MTA in the scientific literature appear to suggest that it has a similar physiological effect – although possibly stronger – to that of MDMA (ecstasy). The compound is largely found as cream-coloured pills or tablets with the street name 'flat-liners'.

Unlike MBDB – which underwent risk assessment under the Joint Action in 1998, and on which a decision regarding its control is still awaited – seizures of 4-MTA have been significant and the potential effects of the drug alarming. The EMCDDA's Scientific Committee will assess the health and social risks of 4-MTA in the context of its *Guidelines for the Risk Assessment of New Synthetic Drugs* adopted last November.

Alain Wallon

* Under Article 3 (information exchange) of the 1997 Joint Action concerning the 'information exchange, risk assessment and the control of new synthetic drugs', data is collected by Europol's National Units and the EMCDDA 's REITOX Focal Points in the 15 EU Member States.

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Literature Review on Drugs and Driving

The EMCDDA is currently concluding a comprehensive literature review on the effects of drug use (legal and illegal) on driving. Compiled by the Irish National Focal Point,* the review examines around 700 scientific publications.

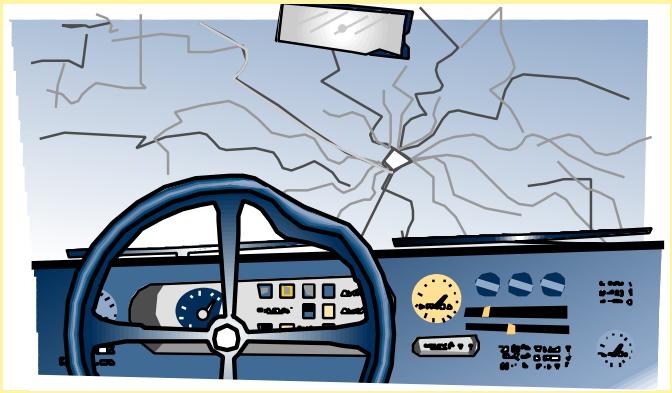
Although the effect of alcohol on driving is well established, as is its role in traffic accidents, there is far less evidence of the kind for other drugs. In general, however, the combination of other drugs with alcohol can be particularly dangerous.

Unfortunately, methodological problems often prevent clear conclusions from being drawn. Testing positive for drugs in many cases says little about intoxication at the time of driving (e.g., weak traces of cannabis can remain in the body for weeks). Furthermore, poor registration of traffic accident data often makes it impossible to distinguish the drivers causing the accident from the other victims. In addition, in most cases of drugs and driving, alcohol has also been consumed making assessment of the effects of other drugs very difficult. Last but not least, results from experimental studies are often inconsistent and difficult to apply to real-life situations.

Some tentative conclusions do, however, emerge. Benzodiazepines (legal tranquilisers) may have the strongest effects on driving after alcohol and may be highly prevalent in drivers, possibly being a contributory cause in up to 10% of traffic accidents. Studies suggest that heroin and methadone have only slight effects, which may even disappear with regular use, and that prevalence in drivers is very low. Cannabis is relatively prevalent, but its effect on driving is unclear, although at higher doses subtle effects on attention and short-term memory may exist. Amphetamines have no, or perhaps even enhancing, effects at lower doses and, although at higher doses risk-taking increases, there is little evidence of a link with traffic accidents. There is a need for further investigation to explore the likely impairing effects of ecstasy and other synthetic drugs.

All EU Member States in their respective Traffic Codes offer legal provisions for prohibiting driving under the influence of psychotropic substances besides alcohol. At present, however, there is still an insufficient scientific basis to develop more specific measures where drugs other than alcohol are concerned.

Lucas Wiessing



* For further information, please contact: Rosalyn Moran, Health Research Board, 73 Lower Baggot Street, Dublin 2, Ireland. Tel: ++ 353 1 676 1176. Fax: ++ 353 1 661 1856. E-mail: Rmoran@HRB.ie

EDDRA: New Developments

EDDRA, the EMCDDA's public database on drug demand-reduction initiatives in the European Union, is available on the Centre's homepage at http://www.emcdda.org/. The information system is fed by 'EDDRA Managers' at the 15 National Focal Points who input data on demand-reduction projects in their country that fulfil certain operational and scientific quality criteria.* By the end of the year, EDDRA is expected to carry data on over 200 projects.

At present, EDDRA's research tools and contents are available in English only. However, a multilingual version (in all 11 EU languages) is foreseen by the end of the year to ensure improved access for practitioners working in all EU Member States. A further development is expected in May 1999 when EDDRA will offer data on transnational projects undertaken in the context of the Community Action Programme on the Prevention of Drug Dependence.** In the near future, the system may also include projects implemented in the context of the European Commission's Phare Programme.

EDDRA is designed to cater to the information needs of practitioners and decision-makers involved in planning and implementing demand-reduction activities in the EU. The system provides information on the implementation, theoretical background, methodology and results of each project, as well as the evaluation process applied.*** The philosophy behind this is that transfer of expertise and best practice between professionals is only effective if all these elements are considered together.

EDDRA's potential has been illustrated through interest shown in developing such a tool in the USA, South America and Canada.

* Information is collected by the Focal Points on the basis of a standard questionnaire.

** European Commission (DGV – Social Affairs).

*** In parallel, the EMCDDA is producing guidelines for the evaluation of different drug demand-reduction activities and is developing an Evaluation Instrument Bank.

Those interested in participating in EDDRAare invited to contact the National Focal Point in their country.

QUALITATIVE RESEARCH

IN THE FIELD OF DEMAND REDUCTION

The EMCDDA has recently launched a study on qualitative research, this time in the field of drug demand reduction. The purpose of the study is to inform policy-makers and practitioners about recent demand-reduction research; to promote this research; and to facilitate networking among researchers in the field. Co-ordinated by the Nordic Council for Alcohol and Drug Research (NAD), the project complements the EMCDDA's qualitative research study in the area of epidemiology launched in 1996 to analyse drug-use patterns.

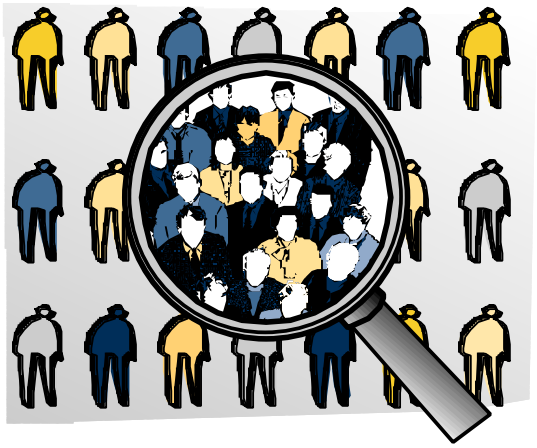
Empirical studies of the keyplayers, mechanisms, processes, organisational and structural frameworks of demand-reduction interventions will be the focus of the study. Among the questions it intends to address are: how are the interventions perceived by their target groups or clients? What are the objectives, motives and incentives for 'drug workers'? How do keyplayers and services co-operate? What occurs in different demand-reduction programmes?

Around half a dozen participants from across Europe met with the project team in Helsinki from 17–18 January for a first brainstorming session which defined the scope of the study and examined methods for data collection. National experts will consequently be asked to collect information according to specific guidelines.

The outcome of the study will be an annotated bibliography, an inventory of research projects and researchers, and a synthesis of key research findings, all of which will be published at the end of the year at http://www.qed.org.uk. The results of the study will be presented at an EMCDDA seminar in Lisbon from 7–9 October 1999.

Margareta Nilson

Researchers interested in contributing to the study are invited to contact: Pia Rosenqvist, NAD, Annekatu 29 A 23, FIN-00100 Helsinki, Finland.
Tel: ++ 358 9 694 80 82. Fax: ++ 358 9 694 90 81. E-mail: nads@kaapeli.fi



BOOKSHELF

Att komma för sent så tidigt som möjligt
Om prevention, ungdomskultur och droger
(To come too late as early as possible:
about prevention, youth culture and drugs)

The five Nordic countries (Denmark, Finland, Iceland, Norway and Sweden) have a long tradition of co-operation and inter-cultural exchange. This book upholds this tradition by examining Nordic youth culture as a whole which, it concludes, is largely influenced by international lifestyle trends. The book presents drug-use patterns and prevention strategies and their interaction with youth cultures. Also recorded is the lack of qualitative research on the role of drugs among youth groups and the lack of evaluation of drug prevention.

While acknowledging that the path to drug use is traditionally linked to social exclusion, the book concentrates on the path to drug use via youth culture. It states that: 'Openness to new ideas, trying new things, travelling and exploration are characteristics of young people and, at the same time, ideals of modern society which are easily associated with a positive attitude to drugs'. The book goes on to describe the meeting of youth culture and prevention as 'a clash of two wills: that of adult society to control; and that of young people to be free'.

Published by: Nordic Council for Alcohol and Drug Research (NAD).
Authors: Bengt Svensson, Johanna Svensson, Dolf Tops.
Date: 1998.
Language: Swedish, with summary in English and Finnish.
Price: FIM 70 / 11.77 EURO (+ FIM 11 / 1.85 EURO for postage and packing).
ISBN: 951-53-1876-9.
ISSN: 0358-7024.

For further information, please contact: NAD, Annekatu 29 A 23, FIN-00100 Helsinki, Finland.
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Progressive Harmonisation of Epidemiological Key Indicators

Improving comparability of data is a central task of the EMCDDA. To this end, the Centre has been working with scientific experts and partners from various National Focal Points (NFPs) to develop five key epidemiological indicators on the prevalence and health consequences of drug use.* At its meeting in October 1998, the EMCDDA Management Board adopted an important paper on the role and financing of the NFPs that committed the Member States to implement these indicators and defined how to facilitate their progressive fulfilment as a REITOX 'Core Task' from 1999 onwards.**

Although the nature of the standards to be implemented varies according to the indicator, each standard will include a core data set, definitions, and methodological guidelines for data collection, analysis and reporting.

Since structures for collecting data on each indicator differ between Member States, and since NFPs also vary considerably in terms of expertise and potential to influence the implementation of standards, the first task will be for each NFP to identify realistic targets and the corresponding work plans for achieving these goals. It will be important not only that NFPs establish national reference groups of key partners and experts for carrying work forward on individual indicators, but also that national authorities reinforce their commitment to this challenge with political and institutional support.

Although the Centre is optimistic, comparability across the EU will not be achieved quickly nor without difficulties. It is essential that improved comparability of statistics be accompanied by measures to ensure quality (including training) and to interpret and understand the data in national and local contexts.

Richard Hartnoll

* The five key indicators concern: the demand for treatment by drug users; drug-related deaths, mortality and causes of death among drug users; the incidence of drug-related infectious diseases (HIV, AIDS, hepatitis B and C); the comparability of surveys of drug use, behaviour and attitudes in the general population; and the comparability of prevalence estimates of problem drug use.

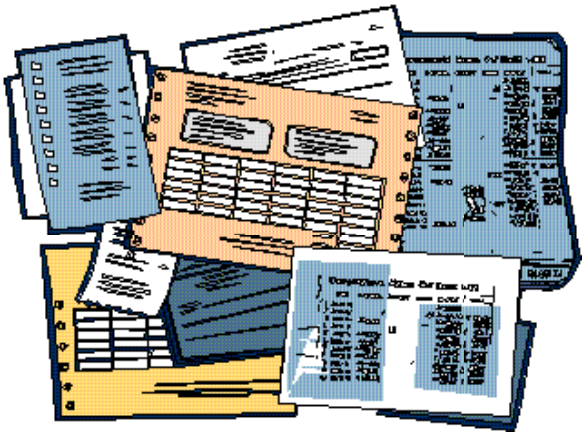
** See ***DrugNet Europe*** No. 14.

The EMCDDA and Drug Use in the General Population

The extent and pattern of drug consumption in the general population, the characteristics and behaviour of users, and the attitudes of different sections of the population to the phenomenon, provide the basic raw material for assessing the drug situation and for planning responses.

General-population surveys are a key way of obtaining this information, being based on the self-reports of those interviewed. These surveys should be complemented by other approaches, especially where emerging trends or more problematic patterns of use are concerned.

National-population surveys on drug use have been conducted in 10 EU Member States over recent years. Undertaking cross-national comparative analyses of these survey results would now help to identify and understand drug-use patterns and to formulate drug policies by examining similarities and differences in drug use between countries. However, such analysis is difficult because of social and cultural diversity with regard to drug use and different methods and data-collection instruments.



The EMCDDA is currently developing standard instruments and methodologies for general-population surveys on drugs across the EU. In 1996, it launched a project bringing together key experts from Member States to produce a set of common core items, reporting formats and draft guidelines for population surveys. In 1998, this working group: began testing an 'EMCDDA model questionnaire' in several EU countries; expanded the range of topics treated; and reviewed the methodological guidelines in the light of results of a preliminary joint analysis of national surveys in several EU countries. A parallel EMCDDA project is assessing the potential effects of different data-collection methods on the prevalence of self-reported drug use in general-population surveys in the EU (mailed questionnaires, telephone interviews, etc.).

The tasks of the working group and the parallel project will be completed over the coming months. The findings will form the basis of a future publication providing guidelines for population surveys on drug use in Europe.

Julian Vicente

THE EMCDDA AND ITS PARTNERS

EMCDDA and UNDCP strengthen ties

Over the past two years, the United Nations International Drug Control Programme (UNDCP) and the EMCDDA have been progressively strengthening their mutual knowledge and collaboration. Following the signing of a Memorandum of Understanding between the two bodies in March 1998, the two Directors, meeting at the end of the year, deemed the time ripe for more concrete and direct contacts between staff.

On 19 January 1999, the EMCDDA Director Georges Estievenart accompanied by staff working in the areas of epidemiology, demand reduction, synthetic drugs and legal monitoring, met the UNDCP Director Pino Arlacchi in Vienna along with other UNDCP staff and the Head of the Austrian National Focal Point. The meeting identified areas for further collaboration and focused on three areas of common interest: assessment of the drug-use situation and related consequences; identification of effective strategies in drug demand reduction; and legal monitoring systems.

With regard to assessing drug use, the meeting agreed to: implement collaborative activities such as mutual support in developing and implementing key indicators; organise joint meetings on epidemiology; support epidemiological activities in the Central and Eastern European Countries (CEECs); and streamline reporting from EU Member States to the UNDCP and the EMCDDA.

To pinpoint and promote effective strategies in demand reduction, the meeting agreed that co-operation between the two organisations would aim to: open the EMCDDA's EDDRA database to UNDCP-supported projects; facilitate links between community prevention networks in the EU and the CEECs; and develop studies on alternatives to prison. Mutual support to assess the feasibility of developing a legal database was also approved. Ongoing contacts and further meetings during the year will follow up the orientations discussed.

Joana Tomás

* See ***DrugNet Europe*** No. 15.

EMCDDA and UNDCP: Opportunities for Collaborative Research

In the context of the EMCDDA 's working visit to the UNDCP in January (see opposite), a topic that proved of particular interest to both organisations was the way in which markets in illicit drugs develop and the factors contributing to their evolution at European and global level. The Centre's views were sought on how a qualitative research project might be launched in this complex and under-investigated field.

Discussions with UNDCP research officers were complemented by an expert lecture to UNDCP staff on the study of local illicit drug markets, with particular reference to qualitative methodology. The topic aroused considerable interest and discussion.

In the area of epidemiology, the EMCDDA hopes to initiate pilot studies on illicit drug markets in two sites in the European Union in 1999 as part of its wider research programme. A further study is to be initiated in 2000 with the possibility of two parallel studies in Central and Eastern Europe. Meanwhile, the UNDCP will be launching a series of studies in a number of sites outside Europe. It is hoped that these initiatives will be mutually beneficial in terms of exchanging knowledge, experience and results.

Roger Lewis

German Drugs Co-ordinator: EMCDDA's Work Valuable to Policy-makers

On 11 February, at the start of a two-day official visit to Portugal, Mrs Christa Nickels, German National Drugs Co-ordinator and Parliamentary Under-Secretary of State for Health, visited the EMCDDA. With Germany currently holding the Presidency of the Council of the European Union, the purpose of the visit was to gather information on the drugs problem in Europe in general, and in Portugal in particular.

Mrs Nickels' main interest was the Centre's work on comparable information across the European Union and how information collected locally and regionally is used to achieve a complete overview of the drug situation in Europe. The overlap between the use of licit and illicit drugs was also discussed within the context of the Centre's overall remit.

Among the comments made by the visiting delegation was the need for the Centre to maintain its scientific independence from law enforcement bodies. Finally, Mrs Nickels stressed that the work of the EMCDDA was of great interest and value to policy-makers and welcomed this opportunity to learn of its activities.

Phare Project on Technical Assistance to Drug Demand Reduction

The evaluation group of the Phare Project on Technical Assistance to Drug Demand Reduction has recently presented its second report covering the second half of 1998.* The report relates that, while the first phase of the project (January–June 1998) was devoted primarily to planning, this phase (July–December 1998) saw the start of the implementation of four sub-regional projects (harm reduction, outpatient treatment, community prevention and innovative drug education) and several supporting activities. During the second phase, all sub-regional projects organised thematic seminars and embarked on research activities, while national and sub-regional teams met frequently to discuss the progress of different projects.

The evaluation group – of which the EMCDDA is a member – concludes that the above activities significantly contributed to the achievement of three major objectives: network strengthening; policy and strategy development; and capacity-building. The report closes with recommendations on project management, decision-making, reporting and communication and training.

Margareta Nilson

* The evaluation report is available from Stefan Loos, European Centre for Social Welfare Policy and Research, Berggasse 17, A-1090 Vienna, Austria.
Tel: ++ 43 1 319 450 522. Fax: ++ 43 1 319 450 519.
E-mail: Loos@euro.centre.org
The Phare Project on Technical Assistance to Drug Demand Reduction aims to: strengthen drug demand-reduction strategies in the 13 Phare partner countries; increase their preventive and harm-reduction impact; and harmonise them with strategies prevailing in EU countries.

The Final Seminar of the Phare Drug Information Systems (DIS) Programme was hosted by the EMCDDA from 15–16 February in Lisbon. For further information on the results of the meeting contact: Ann Mennens, Project Co-ordinator, eesv MSDP, Prinshendrik Laan, 23, 1075 AZ Amsterdam, The Netherlands.
Tel: ++ 31 20 675 0415. Fax: ++ 31 20 675 6986.

EMCDDA Statutory Bodies

Management Board

The 15th meeting of the EMCDDA's Management Board was held in Lisbon from 14–15 January. As is customary at the beginning of each year, the Board discussed the budget, the annual Work Programme and the ***General Report of Activities***. The Centre's involvement in the European Commission's Phare Drug Information Systems (DIS) Programme was also addressed.

The 1999 Work Programme was adopted unanimously by the Board as was the *General Report of Activities 1998* in its new and more synthetic form. In the context of Phare, the EMCDDA was encouraged to become more active towards the Central and Eastern European Countries and direct collaboration between the agency and the European Commission on this issue was recommended. A decision on a formal procedure for such collaboration is expected to be taken by the Management Board at its next meeting from 1–2 July.

The previous phase of the Phare DIS Programme, managed by a private company, will come to a close in March.

Finally, with regard to the 1997 Joint Action on New Synthetic Drugs and the first test case to assess the risks of MBDB, the Board welcomed the Centre's collaboration with Europol. It also recommended continued discussion between the Centre and the Pompidou Group of the Council of Europe in order to set the main goals for a Memorandum of Understanding between the two bodies.

Cornelia Faßbender

New! Project on Demand-Reduction Activities in the Field of Synthetic Drugs

In January 1999, the EMCDDA began a follow-up to its existing demand-reduction study on new synthetic drugs.* The aim of the new study will be: to update the 1997 overview of innovative activities targeting synthetic drugs; to assess the extent to which new projects in this area are being evaluated and the available results; and to include eligible programmes in the EDDRA database. The co-ordinator of the project, the Berlin-based Sozialpädagogisches Institut (SPI), will use its already established 'Rave Network' of researchers in European cities to fulfil these goals. Projects in Europe wishing to participate in the study and be included in the EMCDDA's next overview of demand-reduction projects on synthetic drugs are invited to contact Gregor Burkhart via e-mail at: gregor.burkhart@emcdda.org/.

Gregor Burkhart

* The EMCDDA1996 study on demand-reduction activities related to new synthetic drugs was adapted in 1997 for publication as ***New Trends in Synthetic Drugs in the European Union: Epidemiology and Demand Reduction Responses***, EMCDDA Insights Series No. 1 (Lisbon: EMCDDA, 1997). For ordering details, see page 7.

DRUGS-LEX

Based on a comparative report on Italy, Austria and Germany by ***Daniele Armand Ugon*** *Local Office of the National Government in Bolzano, Italy.*

THE CONCEPT OF 'SMALL QUANTITY' IN THREE COUNTRIES

It goes without saying that different drug laws in different countries lead to varying sentences for the same drug-related offence. Similarities are often noted, however, in a number of basic concepts. For example, once the fundamental position has been taken that the drug offender is a sick person (drug addict) rather than a criminal, different national legal systems apply their laws to the same end: to assist the drug addict and to punish only in specific cases.

While in Italy the possession of drugs 'for personal use' is distinguished from penal offences such as possession of drugs for trafficking, selling, importing or surrendering (i.e. ultimate 'use' being key), in Austria and Germany it is the amount of a substance and not its destined use that determines the application of penal measures.

In Italy, legal measures taken for possession of drugs 'for personal use' do not depend on a fixed amount of a given substance. Since 1993, when a referendum in Italy eliminated from the law the concept of the 'small daily dose', possession of drugs 'for personal use', has been subject to administrative sanctions independent of the quantities held.

In Austria and Germany, however, the concept and definition of the 'small quantity' is pivotal to whether criminal charges are brought or dropped. While in Austria a decree has defined the 'large quantity', the 'small quantity' is left to jurisprudence. In Germany, defining both the concept of 'small'and 'not small' is the responsibility of the Courts.

An analysis of judicial sentences and legal doctrine in Italy reveals a common jurisprudential base, where a series of criteria is used to help distinguish possession 'for personal use' from other criminal activities. These criteria include: the level of addiction; how the drug is kept; and the degree of purity of the substance. The public prosecutor is then left to determine whether the drug seized was destined for purposes other than 'personal use'(Appeal Court, Turin, 15.05.94).

In Austria, there is no difference in theory between possession 'for personal use' and 'for supply' (both are penalised), making comparisons with Italian law difficult. However, in the practical application of the law, common elements exist. Proceedings in Austria can be dropped in cases of possession of 'a small quantity of drugs for personal use' (Art. 35.2º) and, in the case of cannabis, the case is almost automatically dropped (LSK 197/99 SSt.58/22).

In Austrian law, the concept of 'small quantity' is evaluated case by case according to the type and purity of the drug; the circumstances of the case; the degree of addiction; and the pathological needs of the person. A similar situation is true of the German legal system where the Federal law refers to 'small quantity', but without fixing its size. A slight difference is perceived between the Courts in the different Länder.

The three legislative systems described above, although quite different in theory, do reveal a number of similarities in their concrete application of the law. It is important to emphasise here the concept of the drug addict first and foremost as a person to be cured and only to be punished in extreme cases.

In the three countries considered, the application of a measure is never solely based on a numerical determination of an amount of a substance but is calculated also according to the individual case.

In sum, it appears that the possession of small drugs for personal use very rarely leads to the application of penal sanctions.

The report is available by e-mail from the EMCDDA at: Danilo.Ballotta@emcdda.org

EMCDDA PUBLICATIONS

New Publications:

- *1998 General Report of Activities* (in English, French and German)

Coming soon:

- *Guidelines for the Risk Assessment of New Synthetic Drugs* (in English)
- *Conference proceedings: Euro-Ibero American Seminar on Co-operation in Drugs and Drug Addiction Policies* (in English, Spanish and Portuguese)
- *Outreach work among drug users in Europe: concepts, practice and terminology*, EMCDDA Insights Series, No. 2.

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.

A Glimpse at a REITOX Focal Point

EUROPEAN COMMISSION

The EC Focal Point of the REITOX network is situated in the Secretariat-General of the European Commission within the Task Force for Justice and Home Affairs. Also known as the EC 'Drugs Unit', it is responsible for co-ordinating all drug-related activities within the European Commission.

Among the tasks of the EC Focal Point are to provide the EMCDDA and its network with relevant information pertaining to the European Commission (e.g. Community Programmes, funding sources, etc.) and to improve links between the activities of EMCDDA and relevant Community initiatives in areas such as prevention, training and research. The Focal Point also provides the EMCDDA with up-to-date information on the latest political activities launched by the EU in the drugs field, an activity which is crucial if effective results are to be achieved by co-ordinated Member State or EC initiatives.

As a member of REITOX, the Focal Point participates in regular meetings of the network in Lisbon. It differs from the national centres, however, in that it is not required to contribute to the harmonisation of data collection at EU level.

In collaboration with other Commission drug-related services, the EC Focal Point has established a documentary EC–REITOX database containing information in four drug-related fields: EU judicial texts; EU-funded projects and studies; grey literature; and EC human networks. At present, the database contains over one hundred references to key judicial texts and to projects funded by different drug-related budget-lines between 1996 and 1998. The grey literature section contains over one hundred bibliographical entries while the data on EC human networks includes information on persons working on drug-related issues in the European Commission.

The smooth functioning of the database is based on the co-operation of 16 Drug Information Officers (DIOs) within the Commission. The DIOs are appointed by their respective Directorates-General to insert the available data from their units into the database. Following a recent decision to open this database to the public, the Focal Point is currently placing it on the Internet.

Timo Jetsu

For further information please contact: Timo Jetsu, Administrator, European Commission, Secretariat-General, EC Focal Point (Nerv 9 – 7/26A), Task Force for Justice and Home Affairs, Rue de la Loi 200, B-1049 Brussels, Belgium. Tel: ++ 32 2 2995784.
Fax: ++ 32 2 2953205.
E-mail: timo.jetsu@sg.cec.be

FOCAL POINT CLUSTER MEETING

A REITOX 'Cluster Meeting' involving the EMCDDA's REITOX Co-ordination Department and the National Focal Points of Belgium, Spain and the UK, was hosted by the Spanish Focal Point on 4 February in Madrid. The purpose of the meeting was to exchange views on how to respond to: different cultural identities; autonomous communities; local diversity in language; and national and regional parliaments and their descendant structures.

Despite very different national environments, the Focal Points described similar problems. As national information sources, one of their common requests was for clear definitions and criteria to clarify expectations at local level. Feedback and dissemination were also considered an essential way to motivate national networks where local sources needed to understand the utility and value of accurate data. Motivated networks operating through consensus were seen as far superior to fragmented services responding solely out of statutory obligation.

Roger Lewis

EMCDDA Calendar

3 March – First meeting of the EMCDDA Organisational Committee for the Second European Conference on the Evaluation of Drug Prevention, Lisbon.
11–12 March – EMCDDA Project meeting on National Estimates of Problem Drug Use, Lisbon.
15 March – Presentation of the EMCDDA 1998 Annual Report to the EP Committee on Civil Liberties and Internal Affairs, Brussels.
15–16 March – EMCDDA Workshop on Substitution Treatment, Rome.
22–23 March – Meeting on the EMCDDA Evaluation Instrument Bank, Lisbon.
26 March – Second EDDRA Co-ordination Meeting, Lisbon.

Other Meetings Attended

10–12 March – Heroin-supported Treatment for Drug-Dependent Users: State of the Art and New Research Perspectives, Bern.
12 March – Follow-up meeting to European Drug Prevention Week, Luxembourg.
15 March – Meeting on the UNDCP Action Plan on Drug Prevention, Vienna.
20–25 March – 10th International Conference on the Reduction of Drug-related Harm, Geneva.
29–31 March –'Sociodrogalcol' Conference, Teneriffe.
12–13 April – UNDCP "Drugs and Civilisation" Conference, Teheran.
19–21 April – Conference on Synthetic Drugs, Slovenia.
19–21 April – Seminar on Drugs and Driving, Strasbourg.
21 April – Meeting of the Nordic Steering Committee for Drug Questions, Bergen.
9–12 May – Working Together in Europe 1999. 4th International Private Sector Conference on Drugs in the Workplace and the Community, Sundsvall, Sweden.

Selected EU Meetings

10 March – Horizontal Drugs Group of the Council of the European Union, Brussels.
16 April – Horizontal Drugs Group of the Council of the European Union, Brussels.

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