

Drugnet Europe Newsletter of the Centre for Drugs a

Newsletter of the European Monitoring Centre for Drugs and Drug Addiction

July-September 2013

In this issue: Screening for hepatitis B and C infection in Europe | Second international conference on novel psychoactive substances | EMCDDA report explores models of addiction | New Zealand enacts innovative regulatory system on new drugs | 5-IT recommended for control at EU level.



Third international multidisciplinary forum on new drugs

Only a few years ago, new psychoactive substances or 'new drugs' were generally regarded as being of limited significance to drug policy. The continued growth of the market, however — particularly the 'legal highs' phenomenon — has seen the issue develop into a complex policy challenge that is now of major international concern.

Leading European and international experts met in Lisbon from 27–28 June for the Third international multidisciplinary forum on new drugs, organised by the EMCDDA in cooperation with Europol. The event built on the results of the Second interdisciplinary forum on new and emerging psychoactive substances — co-hosted by NIDA and the EMCDDA in Palm Springs in June 2012 — and the First international multidisciplinary forum on new drugs, held in Lisbon in May 2011.

Commenting at the event, EMCDDA Director Wolfgang Götz said: 'Growth of the new drugs market has been driven partly by entrepreneurs who have exploited gaps in drug regulation. It has also been fuelled by the increasingly globalised and interconnected world in which we live. We are now seeing an unprecedented rise in the number, type and availability of new drugs and a growing interplay between the new drugs and illicit drug markets'.



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The forum opened with keynote speeches addressing distinct, yet connected, features of the new drugs phenomenon, including the: historical

Continued on page 8

New EU action plan on drugs 2013–16

A new EU action plan on drugs (2013–16) was adopted by the Justice and Home Affairs (JHA) Council on 6 June (1). Consisting of 16 objectives and 54 actions, it is the first of two four-year action plans designed to translate the priorities of the EU drugs strategy (2013-20) into concrete outcomes (2). The plan is structured around two policy areas - drug demand reduction and drug supply reduction — and three cross-cutting themes: coordination; international cooperation; and information, research, monitoring and evaluation. The European Commission will assess the implementation of this plan every two years and will organise a final external evaluation in 2016.

The plan is the 10th of its kind adopted by EU Member States since the 1990s. It emphasises the 'balanced, integrated and evidence-based' approach to the drug phenomenon, which, internationally, is increasingly seen as the 'EU trademark' in the field.

Each action outlined in the document is accompanied by a timetable, responsible parties and data collection/assessment mechanisms. For the first time, 15 overarching indicators, as well as a number of additional indicators, have also been listed to assess implementation of the plan. The issue of measuring performance is extended in the plan to the field of supply reduction, with the requirement of setting up drug supply indicators. In the area of demand, equivalence of care between prison and the community is a key commitment, as is the role given to civil society to engage in developing and implementing national and EU drug policies and in reviewing execution of the EU action plan.

Danilo Ballotta

(¹) www.consilium.europa.eu/uedocs/cms_data/ docs/pressdata/en/jha/137407.pdf

(²) The new EU drugs strategy, endorsed by the JHA Council in December 2012, is the focus of an EMCDDA *Perspectives on drugs* online resource, available at www.emcdda.europa.eu/topics/pods/ eu-drugs-strategy-2013-20

DRUG SITUATION

PRISONS

Identifying common monitoring tools on drugs and prison



The new EU drugs strategy (2013–20) places an emphasis on drug use in prison and the need to ensure that the care received by drug users in penal institutions is equivalent to that provided by health services in the community.

In this context, the EMCDDA has drawn up a proposal for improving the monitoring of drugs in prisons, which was presented to the Horizontal Working Party on Drugs of the Council of the EU earlier this year. This proposal presents common monitoring tools for collecting information on drug use among prisoners and on drug-related health services in prison in Europe (¹).

EMCDDA proposal presents common monitoring tools for collecting information on drug use among prisoners and on drug-related health services in prison

Experts on drugs and prison from 11 European countries and three international organisations (Pompidou Group, UNODC, WHO) met in Lisbon from 30–31 May to discuss an EMCDDA proposal for a questionnaire on drug use. The so-called European Questionnaire on Drug use among Prisoners (EQDP) — designed to establish a European minimum common data set — will gather information on: socio-demographic and contextual issues; drug use outside and inside prison; drug injecting and other risk behaviours; health status; and use of health and drug services.

Methodological specifications for the implementation of the questionnaire were also discussed at the meeting, including guidelines, general principles and ethical issues. An agreement on a revised draft questionnaire, including annexed methodological specifications, was reached by the group.

The agreement on the common questionnaire represents a major achievement for monitoring drugs and prison at European level and lays the foundations for obtaining a comparable description of the issue across the Member States (²).

Linda Montanari and Luis Royuela

(1) For more, see www.emcdda.europa.eu/topics/prison

(²) A survey of prison health facilities is also under development. This will follow the model of a new European Facility Survey Questionnaire developed in the context of the EMCDDA's treatment monitoring strategy. This was also discussed at an expert meeting in Lisbon in June. For more, see www.emcdda. europa.eu/html.cfm/events/2013/treatment-strategy-implementation

MEDICINES

Misuse of medicines in the EU

The misuse of medicines in Europe is an issue of growing concern. With studies revealing that analgesics, sedatives/ hypnotics and opioid substitution medicines are being consumed in ways other than those medically intended, this phenomenon merits greater awareness.

In order to assess the severity and magnitude of the problem, experts from the EMCDDA and the German national focal point (IFT) carried out a systematic review of the literature on the misuse of these drugs (with the exception of benzodiazepines). Relevant literature was identified between 2001 and 2011. The results show that the main groups of misused medicines include opioid analgesics, methadone, buprenorphine and the so-called Z-drugs (e.g. zopiclone, zaleplon, zolpidem). Regional trends in medicine misuse indicate heterogeneity across the EU with respect to misused medicine types and research activities. Prevalence, high-risk populations and factors contributing to medicine misuse are discussed in the review, as are the implications of the findings for prevention, treatment and policy in the EU.

Casati, A., Sedefov, R. and Pfeiffer-Gerschel, T. (2012) 'Misuse of Medicines in the European Union: A Systematic Review of the Literature', *European Addiction Research* 2012, 18, pp. 228–245. DOI: 10.1159/000337028.

INFECTIOUS DISEASES

Screening for hepatitis B and C infection in Europe

With a view to informing screening policies, a group of experts has recently carried out a systematic review of the prevalence of chronic infection with the hepatitis B (HBV) and C (HCV) virus for 34 countries, examining the general population and five sub-groups $(1)(^2)$.

Available data suggest a wide variation in the prevalence of chronic HBV and HCV infection in European countries, at 0.1–5.6% and 0.4–5.2% respectively. Those in the south and east of the EU and Turkey have a much higher prevalence of the infections than countries in north-western Europe. Within countries, the prevalence among three sub-groups (PWID, MSM, migrants) (²) was generally much higher than in the general population. The review found that considerable health benefits can be gained cost-effectively by screening PWID for the anti-hepatitis C virus antibody (anti-HCV-Ab). Screening of pregnant women and migrants for the hepatitis B surface antigen (HBsAg) was also considered very likely to be cost-effective.

^{(&}lt;sup>1</sup>) Hahné, SJM., Veldhuijzen, IK., Wiessing, L., Lim, T., Salminen, M., Van de Laar, M. (2013) 'Infection with hepatitis B and C virus in Europe: a systematic review of prevalence and cost-effectiveness of screening'. *BMC Infectious Diseases* 2013, 13: 181 www.biomedcentral.com/1471-2334/13/181

 $^{(^2)\,}$ Pregnant women, first-time blood donors, people who inject drugs (PWID), men who have sex with men (MSM) and migrants.

RESPONSES

PREVENTION

EMCDDA on SPAN advisory board

Since 2008, the EMCDDA has been following drug-related training projects funded by the European Commission's Lifelong Learning Programme (LLP). After a successful collaboration with the LLP-funded European Masters on Drugs and Alcohol (EMDAS), the agency has recently been appointed to the advisory board of a new LLP project: the Science for Prevention Academic Network (SPAN)(¹).

SPAN aims to improve the integration of prevention science in the higher education sector and address related qualityassurance standards, methods and approaches. The network also focuses on sharing best practice and developing innovative approaches in prevention science education and training. The project is led by Oxford Brooks University and brings together 33 partners from across Europe.

Maria Moreira and Gregor Burkhart

(1) For more, see http://euspr.org/span

NEW PREVENTION HUE

Mentor International, an NGO specialising in the prevention of substance abuse among children and young people, launched on 26 June its first online global drug prevention service. The aim of the service — known as the 'Prevention hub' — is to raise the visibility of drug prevention and promote the delivery of effective initiatives worldwide. The hub will bring together, under one virtual roof, all those interested in drug prevention and provide opportunities for professional development, training and support. Open to organisations and individuals, the hub will host a 'Who's who?' database of those working in the global prevention community, plus a variety of resources relating to research, policy and best practice. Upcoming features will include user guides and webinars. Mentor International works closely with the EMCDDA and will draw on the agency's Best Practice Portal for some of the content for this project.

Gregor Burkhart

For more, see www.preventionhub.org — www.emcdda.europa.eu/ best-practice

ACADEMIA

European summer school on illicit drugs

The University Institute of Lisbon (ISCTE–IUL) and the EMCDDA joined forces from 1–12 July to hold the second European summer school on 'Illicit drugs in Europe: supply, demand and public policies'. The summer school brought to Lisbon 25 academics and professionals from Europe, Asia and Latin America, seven of whom received scholarships from ISCTE–IUL and from the International Programme of the US National Institute on Drug Abuse (NIDA).

Over the two-week course, EMCDDA scientific experts, ISCTE-IUL professors and policymakers presented a multidisciplinary and inclusive approach to the study of the drugs problem. Week 1 of the summer school focused on 'Defining the problems', while Week 2 explored 'Understanding drug policies and interventions'.

New in this year's programme were three keynote lectures delivered on: 'Detecting new drugs and new trends in drug use' (Björn Hibell, ESPAD project coordinator); 'Best practice: from evidence to implementation' (Professor Gabriele Fischer, Medical University of Vienna); and 'Towards a comprehensive model of addiction' (Professor Robert West, University College London) (¹). At the end of the proceedings, students expressed (via evaluation questionnaires) their high satisfaction with the course and their appreciation for its comprehensive and interactive approach. The feasibility of continuing the project in 2014 will be analysed in the coming weeks.

NEW DRUGS

Second international conference on novel psychoactive substances

Novel psychoactive substances are often misrepresented as 'safe' for recreational use but can prove as harmful as controlled drugs



Novel (or new) psychoactive substances (NPS) are an ever-increasing group of synthetic, semi-synthetic or natural compounds, often advertised and sold as 'legal' alternatives to illicit drugs. Often

misrepresented as 'safe' for recreational use, they can, however, prove as harmful as controlled drugs. Over the last decade, three European Commission-funded projects — Psychonaut 2002, the Psychonaut Web Mapping System 2008–09 and ReDNet 2010–12 — have catalogued some 700 NPS and products allegedly containing them. Furthermore, the EU early-warning system, operated by the EMCDDA, currently monitors over 300 new drugs. This second international conference, taking place from 12–13 September, is hosted by the College of Human and Health Sciences at Swansea University and is organised in collaboration with Hertfordshire University and the EMCDDA. A panel of international experts will examine the latest scientific research in this rapidly-changing field.

Liesbeth Vandam

BOOKSHELF

World Drug Report 2013



The use of traditional drugs, such as heroin and cocaine, appears to be declining in some parts of the world, while the abuse of prescription drugs and new psychoactive substances (NPS) is growing. This is according to the *World Drug Report 2013*, launched by UNODC on 26 June at a special high-level event of the Commission on Narcotic Drugs (CND) in Vienna.

Launching the report, UNODC Executive Director Yury Fedotov called for concerted action to prevent the manufacture, trafficking and abuse of NPS, a subject receiving the thematic focus of this year's report. The number of NPS reported by UN Member States to UNODC rose from 166 at the end of 2009 to 251 by mid-2012, an increase of more than 50%. For the first time, the number of substances reported exceeded the total number of substances under international control (234). The report describes how the international drug control system is now challenged by the speed and creativity of the NPS phenomenon.

Publisher: UNODC

Languages: Full report available in English; Executive summary in Arabic, Chinese, English, French, Russian and Spanish.

Date: 26 June 2013 ISBN: ISBN: 978-92-1-148273-7 e-ISBN: 978-92-1-056168-6 Downloadable: www.unodc.org/wdr

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

FEATURE

New report reveals how a better understanding of the science of addiction can improve our response to drug problems



Addiction is a global issue that costs many millions of lives each year and causes untold suffering. In a new report, released to mark International day against drug abuse and illicit trafficking (26 June), the EMCDDA looks at how far the science of addiction has come and how this knowledge can be used to help tackle the problem (¹).

Designed to encourage debate and promote understanding of the concept, *Models of addiction* provides a critical review of existing addiction theories and explores how these can be organised into an overarching structure to inform how we assess, prevent and treat addictive behaviours. This is not limited to the traditional illicit drugs of abuse, but also covers alcohol and tobacco use and even non-pharmacological addictions, such as gambling or compulsive use of the Internet.

The new report shows that there is no single model of addiction but competing perspectives sharing common elements. With this peer-reviewed analysis, the EMCDDA supports drug policy by providing a broad definition of the term, covering substance-based and behavioural addiction and reflecting current scientific developments. The definition of addiction adopted in the report is: 'a repeated powerful motivation to engage in a particular behaviour, acquired through enacting the behaviour with a potential risk of significant harm'.

We are seeing a number of European countries establishing centres of addiction that potentially cover the full range of addictive behaviours An essential take-home message from the analysis is that, whilst there are advantages to be drawn from our growing understanding of the biological basis of addiction (e.g. 'brain disease' model), it is not helpful to be over reductive. The report argues that understanding the broader social and psychological aspects of addictive behaviour can also be important for successful prevention and treatment responses. It provides a basis for a more comprehensive and structured approach to developing responses and highlights the need to draw on a pool of interventions (education, persuasion, training).

Addiction continues to be one of the key concepts in the scientific and policy debate around drug use and interventions and lies at the very heart of the responsibilities of the EMCDDA.

Commenting on the issue, EMCDDA Director Wolfgang Götz said: 'Addiction continues to be one of the key concepts in the scientific and policy debate around drug use and interventions and lies at the very heart of the responsibilities of this agency. A better understanding of this complex concept not only informs our monitoring of those in need of help with drug problems, but also how we design and implement effective responses'.

Götz added: 'Addiction is a multifaceted issue that does not stop at substancebased problems but can also include phenomena such as gambling or compulsive use of the Internet. Indeed we are seeing a number of European countries establishing centres of addiction that potentially cover the full range of addictive behaviours. In future, we need to undertake a broader analysis of addictive behaviours, than is usually undertaken, to allow for the development of more effective intervention strategies. This report raises key questions, such as whether we should continue to monitor addictive use by substance, as at present, or at a more general level'.

(1) Models of addiction, EMCDDA Insights www.emcdda.europa.eu/publications/insights/ models-addiction

DRUGS-LEX

Portugal controls new psychoactive substances

Decree-law 54/2013, which entered into force in Portugal on 18 April, establishes a list of psychoactive substances that pose a public health risk comparable to that posed by controlled drugs (¹). Under the new legislation, advertising and distributing these substances, or their derivatives, are punishable by administrative fines of up to EUR 45 000, as well as the closure of the premises involved. Those found using the substances are referred to one of Portugal's 18 Commissions for the Dissuasion of Drug Abuse, bodies set up under the Portuguese drug policy in 2001 to assess individual drug use cases and the corresponding level of response. New substances may be added to the list by Ministerial Decree.

The new law is enforced by the Portuguese Economy and Food Safety Authority (*Autoridade de Segurança Alimentar e Económica*/ASAE) (²). This criminal police authority, is also empowered to confiscate and analyse any substance which is suspected to pose a grave risk to human health, as decided by the General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD) (³). Since the legislation was passed in April, 27 of the 40 sales outlets (head/smart shops) monitored by SICAD and the judicial police have closed, and only one of those remaining was found to be selling new psychoactive substances.

Brendan Hughes

(¹) Decreto-Lei n.º 54/2013 (17.4.2013) www.pgdlisboa.pt/leis/lei_mostra_articulado. php?nid=1903&tabela=leis&ficha=1&pagina=1

(²) www.asae.pt

(3) www.emcdda.europa.eu/countries/portugal

New Zealand enacts innovative regulatory system on new drugs

The New Zealand government has developed an innovative regime to regulate the manufacture and sale of 'low-risk' psychoactive substances. The regime takes the form of the Psychoactive Substances Act 2013, which entered into force on 18 July (¹). Further supplementary regulations are also expected.

The new approach aims to balance the demand for access to such substances with the risk of the likely harm posed to individuals and society. The act requires manufacturers to prove that the finished products they wish to sell are 'low risk', before they are approved. Even when approved, there are restrictions on their distribution. For instance, approved products can only be sold to those over 18, and no sales are permitted from convenience stores, supermarkets, fuel stations or alcohol outlets. Advertising is limited to the 'point of sale' and any other promotion is prohibited. Internet sales are also subject to limitations and penalties. Packaging is required to be childproof and to list clearly the ingredients and health warnings. Manufacturers and sellers are obliged to notify the Ministry of Health of adverse reactions to the product.

Manufacturing or importing any psychoactive substance that has not been approved is punishable by up to two years in prison, while its sale is punishable by up to three months. Personal possession of an unapproved substance is punishable with a civil fine of up to NZD 500 (i.e. no criminal conviction is registered). A 'psychoactive substance' is defined as any substance having the primary purpose to induce a psychoactive effect, with several named exceptions (e.g. alcohol, tobacco, herbal medicines). A new Psychoactive Substance Regulatory Authority, situated in the Ministry of Health and supported by an Advisory Committee, rules on borderline cases. The entire policy must undergo a review within five years.

Brendan Hughes

(¹) Psychoactive Substances Act 2013 www.legislation.govt.nz/act/public/2013/0053/latest/whole.html

INTERNATIONAL

Report on the drug problem in the Americas

On 17 May, the Secretary-General of the Organization of American States (OAS), José Miguel Insulza, delivered to the President of Colombia, Juan Manuel Santos, the latest *Report on the drug problem in the Americas*, commissioned by Heads of State and Government at the Sixth Summit of the Americas held in Cartagena de las Indias (Colombia) in 2012 (¹).

Totalling around 400 pages, the report is divided into two volumes: the *Analytical report* and the *Scenarios report* (²). The former explores the use of different drugs in the OAS countries, the effects on social exclusion and respect for human rights and the possible forms of treatment and prevention practised today. The *Scenarios report*, on the other hand, examines the various paths the drug phenomenon could take in the hemisphere in the coming years if different responses were

followed. These alternatives are presented as four scenarios — Together, Pathways, Resilience and Disruption. Rather than policy options, the scenarios are presented as contributions to support strategic policymaking. The report was presented and discussed by the 34 OAS Member States meeting in Antigua Guatemala at the 43^{rd} regular session of the OAS General Assembly from 4–6 June (³). It will now be used to foster dialogue on the future of the drug strategy in the Americas.

Francisco Cumsille (CICAD-OAS) and Alexis Goosdeel

(¹) www.oas.org/en/media_center/press_release.asp?sCodigo=E-194/13
 (²) www.oas.org/documents/eng/press/Introduction_and_Analytical_Report.pdf
 (²) www.oas.org/documents/eng/press/Scenarios_Report.pdf
 (³) www.oas.org/en/media_center/press_release.asp?sCodigo=E-233/13

SPOTLIGHT



LIBE visits EMCDDA

Members of the European Parliament Committee on Civil Liberties, Justice and Home Affairs (LIBE) visited the EMCDDA on 18 and 19 July where they met Director Wolfgang Götz and staff and heard why a sound evidence base is essential for effective policymaking and action in the drugs field (¹).

The visiting delegation was composed of LIBE members Ioan Enciu (Romania, Group of the Progressive Alliance of Socialists and Democrats) as well as Marco Scurria (Italy) and Carlos Coelho (Portugal), both of the Group of the European People's Party (Christian Democrats). Accompanying the LIBE delegates was Barbara Dürhkop Dürhkop (Spain) and Carla Rossi (Italy), members of the EMCDDA Management Board designated by the European Parliament. João Goulão, Chairman of the EMCDDA Management Board, also attended.

During the visit, the members were presented with the findings of the *European Drug Report 2013* and with updates on the agency's work in the areas of: new drugs; monitoring supply and supply reduction; best practice and international cooperation.

The visit also included discussions on: cooperation between the EMCDDA and the European Parliament in general; the implementation of a joint statement of the European Parliament, the Council of the EU and European Commission on decentralised agencies (2012); and cooperation between EU agencies active in the area of justice and home affairs (in particular CEPOL, EMCDDA, Eurojust, Europol, FRA and Frontex).

Monika Blum

(1) For more, see Fact sheet 4/2013 at www.emcdda.europa.eu/news/2013/fs4

REITOX

Round table with Croatian journalists



'New trends and challenges: what do we know about the drugs phenomenon?' was the title of a round table with the media organised in Zagreb on 16 July by the EMCDDA, the Office for Combating Drug Abuse of the Government of the Republic of Croatia (national focal point/ NFP) and the Forensic Science Centre of the Ministry of Interior. The event aimed to: raise journalists' awareness on new drugs and emerging trends; promote evidence-based reporting on these issues; and stimulate dialogue between the media and policymakers. Some 20 journalists from print and broadcast media attended the event.

The round table was sparked by a number of unsubstantiated reports in the Croatian media earlier this year regarding the alleged emergence of the drug 'krokodil', which had led the public to believe that its use had reached epidemic proportions in the country. The NFP and the police had followed up on these reports — and on allegations that the drug was being sold by a group of dealers in the eastern part of Zagreb — and found the information to be false.

During the session, EMCDDA staff provided an overview of the agency's products and services — including the European Drug Report 2013 — which could serve as valuable resources to help achieve balanced reporting. Journalists were also shown examples of good and bad practice in media coverage on new drugs and the potential detrimental effects on public health of 'sensationalising, trivialising, glamorising and advertising' these substances. The event ended with presentations from the University of Zagreb on two upcoming studies (1) and from the Forensic Science Centre on new psychoactive substances detected in Croatia since 2010. The programme, which generated considerable national media coverage, ended with a tour of the Ministry's forensic science laboratory and a Red Cross needle-exchange facility.

Kathy Robertson and Andrew Cunningham

(1) The two studies, to be made public in the autumn, are: 'The availability and prices of psychoactive substances in Croatia' and 'Online survey of psychoactive substance use and availability in Croatia'.

NEW PSYCHOACTIVE SUBSTANCES

5-IT recommended for control at EU level

The European Commission proposed on 25 June that the new psychoactive substance 5-(2-aminopropyl)indole (5-IT) should be subject to EU-wide control measures, following a risk assessment conducted by the extended EMCDDA Scientific Committee on 11 April (¹)(²).

5-IT, a synthetic stimulant drug, was reported to the EU early-warning system (EWS) in 2012 and appears to have been available in Europe since around November 2011. The substance has been linked to 24 fatalities and 21 non-fatal intoxications, which occurred over a period of five months in 2012, raising concerns for public safety. Recognising the threats posed by this substance, a number of EU Member States have already taken steps to control it under their own drug legislation. The Council of the EU will now decide whether the substance should be subject to control measures across the Union.

Andrew Cunningham and Ana Gallegos

(¹) European Commission news release: http://europa.eu/rapid/press-release_IP-13-604_ en.htm?locale=en

(²) Risk-assessment report: http://register. consilium.europa.eu/pdf/en/13/st08/st08693. en13.pdf

See also www.emcdda.europa.eu/publications/ joint-reports/5-IT

PRODUCTS AND SERVICES

General report of activities 2012



The EMCDDA General report of activities is an annual statutory publication providing a detailed progress report of the agency's achievements over a 12-month period. The 2012 edition — released on International day against drug abuse and illicit trafficking (26 June) — describes how the EMCDDA implemented its annual work programme, highlighting the key accomplishments of the year. The structure adopted for the report mirrors that of the annual work programme and is designed to facilitate the cross-checking of results against expected outcomes. In so doing, the report provides a strong management tool for the agency.

Available in English at www.emcdda.europa.eu/publications/general-report-of-activities/2012



A year in review

Launched on 26 June, *A year in review* conveys the essence of the *General report of activities 2012*. The four-page publication is designed to provide interested audiences with a summary of the agency's achievements over the year concerned, with a focus on key topics and events. It shows how the agency worked with limited resources to meet increasing information needs and released a broad range of products on Europe's evolving drug situation.

Available in English at www.emcdda.europa.eu/publications/general-report-of-activities/2012-highlights

New EMCDDA Thematic paper

Some commentators argue that prevention programmes developed in Canada and the United States are unlikely to work in European countries due to differing cultural contexts and to the fact that most of the evidence for their effectiveness comes from North America. This latest EMCDDA Thematic paper — *North American drug prevention programmes: are they feasible in European cultures and contexts?* — presents experiences of adapting and implementing four innovative and proven North American drug prevention programmes in Europe. Prevention research is generally less developed in Europe than in North America. The report shows the clear potential of transferring such programmes and avoiding the cliché of culture as a barrier to implementation.

Available in English at www.emcdda.europa.eu/publications/thematic-papers/north-american-drug-prevention-programmes

Drug policy advocacy organisations in Europe

Drug policy advocacy organisations come under the spotlight in a new EMCDDA drug policy paper published in September. Presenting the results of a mapping study of such bodies in Europe, the report, entitled *Drug policy advocacy organisations in Europe*, provides an insight into these entities and contributes to our understanding of policy actors in the drugs area.

The paper explores the range, location, scope and type of advocacy organisations operating in Europe, as well as their policy objectives and advocacy orientation. It also examines those operating at the European and international level.

RESOURCES



New e-book contributes to the professionalisation of outreach work

Outreach aims to facilitate improvements in health and reductions in harms for individuals and groups who are not effectively reached by fixed-site services or through traditional health education channels. Increasingly adopted in the drugs field in Europe since the 1990s, outreach has proven its effectiveness in reaching hidden populations, enabling them to reduce their drug-related risk behaviours and improve their health. The Portuguese Agencia Piaget para o Desenvolvimento (APDES) has undertaken the timely task of bringing together the vast range of professional experiences collected by major outreach organisations in Europe, galvanising them into a manual released in August 2013 (1).

In the format of an e-book, the manual outlines the professional profile of the harm reduction outreach worker, including the activities he/she should be capable of developing, the skills and attitudes they should possess and the areas of knowledge that should be included in training curricula. The manual allows insight into the reality of outreach work in Europe, along with examples of good practice. Aimed at policy planners and at those working in the field, it is a valuable resource for developing detailed job descriptions and exact procedures for situations likely to be faced by outreach workers. The project, entitled PrOWfile, received funding from the European Commission in the framework of the Lifelong Learning Programme's Leonardo da Vinci Partnerships.

Dagmar Hedrich

^{(&}lt;sup>1</sup>) The e-book is a result of collaboration between major outreach organisations from 10 EU countries (BG, DE, ES, FR, IT, NL, PT, FI, SE, UK) and Norway. For more, see www.apdes.pt/ files/prowfile

CALENDAR 2013

EMCDDA meetings

| problems in Europe, Lisbon. | | |
|--|----------------|--|
| September:methamphetamine, Lisbon.23–27EMCDDA week on measuring, understanding and responding to drug- problems in Europe, Lisbon.30 September- 2 October:COPOLAD thematic twinning training 'Analysis and interpretation of drug- related data', Lisbon.3-4 October:EMCDDA Legal correspondents meeting, Lisbon.8 October:Reitox academy on best practice in prevention, Valetta, Malta.16-18 October:Expert meeting on the drug-related deaths and mortality indicator and expert meeting on the drug-related infectious diseases indicator, Lisbon.29-30 October:Regional Reitox academy on the prevention and control of infectious diseases and other health-related consequences among people who | 4–5 September: | psychoactive substances, NFP, |
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| deaths and mortality indicator and expert meeting on the drug-related infectious diseases indicator, Lisbon. 29–30 October: Regional Reitox academy on the prevention and control of infectious diseases and other health-related consequences among people who | 8 October: | , |
| prevention and control of infectious diseases and other health-related consequences among people who | 16–18 October: | deaths and mortality indicator and expert meeting on the drug-related |
| | 29–30 October: | prevention and control of infectious diseases and other health-related consequences among people who |
| | | |

External meetings

| 10–12 September: | CICAD–OAS meeting, Washington DC. |
|---------------------|---|
| 12–13 September: | Second international conference on novel psychoactive substances, Swansea (www.novelpsychoactivesubstances.eu). |
| 25–27 September: | 2013 annual meeting of the precursor network. Pompidou Group, Strasbourg. |

EU meetings

| 10–12 September: | Horizontal working party on drugs, EU–Russia dialogue, EU dialogue on drugs with CELAC, Brussels. |
|---------------------|---|
| 18–19 September: | National drug coordinators' meeting, Vilnius. |
| 16–17 October: | Horizontal working party on drugs and EU–USA dialogue, Brussels. |

Management Board welcomes monitoring report and plans for performance measurement

The 47th EMCDDA Management Board meeting, held from 4–5 July, welcomed the end-term monitoring report of the agency's three-year strategy and work programme for 2010–12 and an update on future plans for performance measurement. An exchange of views took place on the budgetary situation for 2014, and the possible consequences for the work of the EMCDDA, in view of the adoption of the budget and work programme for 2014 in December.

The Board also gave a favourable opinion on the EMCDDA's 2012 final accounts and mandated the Director to negotiate a Memorandum of Understanding between the EMCDDA and the National Security Council of the Republic of Armenia. Also agreed was a draft cooperation agreement between the EMCDDA and Eurojust. The members welcomed for the first time representatives from the Republic of Croatia, following the country's entry to the EU on 1 July 2013.

Monika Blum

Continued from page 1

context, public health perspective, motivations of users, the role of law enforcement and challenges for drug policy. Global updates — from the EU, UN, Australia, Israel, Japan, Ukraine, the USA and Russian Federation — then revealed some of the latest developments in how new drugs are being monitored, detected, risk-assessed and controlled. These perspectives were complemented by contributions from forensic science, toxicology and healthcare which demonstrated how, together, these disciplines can play a key role in detecting, monitoring and understanding the emerging harms associated with new drugs.

Recognising the growing interplay between the new drug and the traditional illicit drug markets, law-enforcement experts provided an overview of some of the initiatives being used to respond to this issue. What can be learnt from the users of new drugs was also illustrated in a session showcasing novel approaches and examples of best practice. An innovative regulatory regime in New Zealand (see p. 5) was presented in the final session, which ended with a panel and participant discussion on key issues related to new drugs. The forum illustrated how a multidisciplinary approach is crucial to understanding and responding to the new drugs phenomenon.

Roumen Sedefov and Michael Evans-Brown

The conclusions of the forum will be available in the coming weeks at: www.emcdda.europa.eu/activities/action-on-new-drugs

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