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Drugnet Europe

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Defining drug-related crime

Ensuring a high level of security for the general public is prominent on the European policy agenda and stepping up work to prevent drug-related crime is one of the key goals of the current EU drugs action plan (2005–2008). But before countries can measure the extent of such crime, or assess the impact of measures to counter it, they must first agree on a common language to describe the problem. This issue is taken up in the latest edition of the EMCDDA's policy briefing *Drugs in focus* ⁽¹⁾, released on International day against drug abuse and illicit trafficking (26 June).

According to EMCDDA Chairman Marcel Reimen: 'Adopting a clear definition of drug-related crime is an essential first step if we are to develop the methodologies needed to assess, not only the true extent of this problem, but also the impact of our policies and actions.'

2007 is the deadline set by the EU drugs action plan for presenting a common European definition of 'drug-related crime'. The European Commission is expected to propose such a definition to the Council of the EU at the end of this year based on studies brought forward by the EMCDDA.

The policy briefing, one of the resources to be submitted by the EMCDDA to the Commission, presents elements for a definition of 'drug-related crime' encompassing four categories: *psychopharmacological crimes* (committed under the influence of a psychoactive substance); *economic-compulsive crimes* (committed to obtain money (or drugs) to support drug use); *systemic crimes* (committed within the functioning of illicit drug markets, as part of the business of drug supply, distribution and use); and *drug law offences* (committed in violation of drug laws and other related legislations).

At present, routine data in the EU are only collected on the last type of crime and even then are gathered through very different reporting practices. Data on the first three types of crime are rare or patchy, usually gathered through ad hoc local studies.

Drug law offences increased in the majority of the EU Member States in the period 2000–2005.

⁽¹⁾ *Drugs in focus* No 16: 'Drugs and crime – a complex relationship'. <http://www.emcdda.europa.eu/?nnodeID=439>



2007 is the deadline set by the EU drugs action plan for presenting a common European definition of 'drug-related crime'.

Assessing the risks of BZP

'Due to its stimulant properties, risk to health and lack of medical benefits, there is a need to control BZP' but 'control measures should be appropriate to the relatively low risks of the substance'. These were among the conclusions of the recent risk-assessment exercise carried out by the EMCDDA Scientific Committee with additional experts from the European Commission, Europol and the European Medicines Agency (EMA) ⁽¹⁾.

The final risk-assessment report ⁽²⁾ was submitted to the European Commission and the Council on 4 June concluding the second phase of a three-step legal procedure (information exchange, risk assessment and decision-making) designed to respond to potentially threatening new psychoactive drugs in the EU ⁽³⁾.

In line with this procedure, the European Commission had six weeks from receiving the report to decide whether or not to present an initiative to the Council recommending it to subject BZP to control measures and criminal sanctions throughout the EU. On 17 July, the Commission duly presented such an initiative. The Council is expected to take its final decision on whether or not to subject the drug to control measures in the EU after the summer.

BZP is a psychoactive drug belonging to the group of aryl-substituted piperazines which includes substances such as mCPP and TFMPP.

⁽¹⁾ See *Drugnet Europe* No 58.

⁽²⁾ <http://register.consilium.europa.eu/pdf/en/07/st10/st10458.en07.pdf>

⁽³⁾ See description at <http://www.emcdda.europa.eu/?nnodeID=17869>

July–September

2007

Drug situation

Identifying and monitoring emerging drug trends

The current EU drugs action plan (2005–2008) calls for the development of 'clear information on emerging trends and patterns of drug use'. The new EMCDDA mission statement also demands that the agency play a more active role in monitoring in this area and obliges it to inform Member States on such new developments.

Identifying and monitoring emerging trends calls for a different approach from the key indicators and other routine datasets used by the EMCDDA for estimating levels of drug use and associated problems. From the EU-wide perspective, the lack of quantitative data on emerging trends and the difficulties in assessing the relative importance and validity of indicators present considerable challenges.

The EMCDDA is addressing these challenges via its European Perspectives On Drugs (E-POD) project, launched in 2006. Through E-POD, the agency uses a bottom-up or case-study approach to detect, track and understand emerging drug trends in Europe. The main features and outputs of the project are: timely, informed and objective publications or information sheets; and low-cost data collected through existing networks (e.g. Reitox, early-warning system, forensic scientists, the Internet and the media).

'Hallucinogenic mushrooms: an emerging trend case study', published in June 2006, was the first E-POD case study (1). It illuminated the circumstances in the EU that contributed to an increase in use of these mushrooms in the late 1990s and early 2000s and identified the conditions that may have served as barriers to the diffusion of the trend. The value of this work is evidenced in the extent to which the study has been cited since publication. A recent edition of the EMCDDA's *Drugs in focus* briefing summarises the key findings for policy-makers (2).



Photo: isbackphoto

The next E-POD case study will look at GHB

An E-POD expert meeting held in Lisbon from 21–22 May concluded that future emerging trend case studies should be selected according to: the potential of the trend to spread and cause harm; Member State reports on changes in levels of use or seizures; evidence of misinformation; and media reports. Identifying and describing efficient and effective sources of information to detect, monitor and respond to emerging trends in the EU is a perennial task of the EMCDDA. The next E-POD case study will look at GHB.

Deborah Olszewski, Jennifer Hillebrand, Roumen Sedefov

(1) <http://www.emcdda.europa.eu/?nnodeID=7079>

(2) <http://www.emcdda.europa.eu/?nnodeID=439>

Key indicator toolkit

The EMCDDA is currently developing a toolkit of instruments designed to offer guidance to all those involved in implementing the five EMCDDA epidemiological indicators of drug use. The toolkit, which is scheduled for completion by the end of the year, is intended as a training resource and also a methodological reference package for experienced professionals.

The toolkit will consist of the following:

- a top-level document providing a short overview of each of the five indicators, targeting policy-makers and interested public;
- a presentation introducing the indicator, explaining basic methodological issues and offering further references for each topic, targeting professionals or experts new to working with the indicator;
- a structure for a web-based repository, to be finalised at a later stage, where those interested in a specific issue will be able to locate relevant documents.

Danica Klempová

Expert meeting: Prevalence and patterns of drug use in the general population

Over 40 European and international experts working on household and school surveys gathered in Lisbon from 28–29 June for the annual EMCDDA meeting on the prevalence and patterns of drug use in the general population.

In an intensive programme featuring 30 presentations, the EMCDDA described the main results of its 2006 data-collection process (via Reitox national reports, standard tables) and outlined levels and trends in the use of cannabis, amphetamines, ecstasy and cocaine, with particular attention to the latter.

Cocaine use has been on the increase in a number of EU countries in recent years. The EMCDDA 2007 *Annual report* will be accompanied by a 'Selected issue' dedicated to the topic which will look at cocaine-related interventions, market indicators and health effects.

Subsequent presentations focused on thematic areas: polydrug use (Italy, UK, ESPAD–EMCDDA), psychoactive medicine use and mental health (Belgium, Greece); long-term trends in cannabis use (Finland); and geographical analysis of drug use (Belgium, Italy).

One thematic session focused on methods and instruments (scales) to assess intensive forms of cannabis use (dependence/problem use). Several countries are working actively on this issue and presented results (France, Germany, the Netherlands, Poland, Canada).

Finally, ongoing EMCDDA projects were discussed including: Fonte (see pp 6 and 7); the assessment of perceived drug availability; and a field trial on collecting information on the frequency of cannabis use.

Julián Vicente, Danica Klempová, João Matias

Responses

Raising awareness on HPV

The recent authorisation by the European Commission of a prophylactic vaccine against the Human Papilloma Virus (HPV) ⁽¹⁾ could greatly improve the prevention of HPV infections in Europe and help reduce the incidence of cervical cancer.

HPV is highly transmissible and is linked to virtually all cervical cancer cases. According to the World Health Organisation (WHO), it is the second biggest cause of female cancer mortality worldwide, claiming around 250,000 lives annually ⁽²⁾. Every year, some 15,000 women die from this preventable disease in Europe, with the newer EU Member States reporting twice as many cervical cancer cases as the old EU-15.

Germany, France, Italy and Austria have already included the vaccine in their national immunisation programmes for girls aged around 12–13 years. Meanwhile Belgium, Luxembourg and Norway recommend doing so. A secondary target, recommended by the WHO ⁽³⁾, are young women aged 14–26 years. Vaccinating this group against the virus may considerably accelerate countries' impact on this type of cancer.

Young female drug users, especially those involved in sex work, are at a high risk of contracting sexually transmitted infections (STIs), including HPV, due to high levels of risky sexual behaviour. Studies conducted in Spain ⁽⁴⁾ and Denmark ⁽⁵⁾ showed that, in all age groups, HPV prevalence was highest among female sex workers (over 65% in the 'under-20' year group), followed by women attending STI clinics and in prison. Women from the general population had much lower age-specific HPV prevalence rates.

Outreach health services and STI or HIV clinics linked to drug treatment services can contribute to raising awareness on HPV and to increasing vaccine coverage by disseminating information to young female drug users. However, targeted cervical screening and safe-sex practices remain crucial components in preventing cervical cancer.

Alessandro Pirona and Dagmar Hedrich

⁽¹⁾ The vaccine was granted market authorisation by the European Commission in September 2006 following the positive opinion of the European Medicines Agency (EMA) in July 2006 (<http://www.emea.europa.eu/humandocs/Humans/EPAR/gardasil/gardasil.htm>). Another HPV vaccine is currently under evaluation by the EMA.

⁽²⁾ <http://www.who.int/immunization/topics/hpv/en>

⁽³⁾ 'Preparing for the introduction of HPV vaccines: policy and programme guidance for countries', WHO 2006 (<http://www.who.int/reproductive-health/publications/hpvvaccines>).

⁽⁴⁾ De Sanjose *et al.* (2000), 'Prevalence of HPV cervical infections among imprisoned women in Barcelona', *Sex Transm Infect*; 76–58.

⁽⁵⁾ Kjaer *et al.* (2000), 'Human papillomavirus infection in Danish female sex workers. Decreasing prevalence with age despite continuously high sexual activity', *Sex Transm Dis*; 27: 438–445.

Service standards for therapeutic communities

Service standards are increasingly recognised as an important pillar of quality assurance mechanisms in the field of drug demand reduction. This was highlighted at the 11th European Conference on Rehabilitation and Drug Policy, organised by the European Federation of Therapeutic Communities (EFTC) from 6–9 June in Ljubljana, Slovenia ⁽¹⁾.

At the event, representatives of the Royal College of Psychiatrists (UK) presented a set of 'Service standards for addiction therapeutic communities' ⁽²⁾. These are the result of collaboration between the Community of Communities Network ⁽³⁾ and various partners including the Association of Therapeutic

Communities (ATC), the Australasian Therapeutic Communities Association (ATCA) and the EFTC. The publication includes various core standards and presents best practice in areas including therapeutic environments, staff issues and external relations.

The EMCDDA is collecting information on quality standards developed for a variety of interventions. A selection of these applied in drug prevention will be published in the first module of the agency's best-practice portal, to be launched at the end of 2007.

Jennifer Hillebrand

⁽¹⁾ For more on the conference, see <http://www.efc-europe.com/conferentie>

⁽²⁾ <http://www.rcpsych.ac.uk/crtu/centreforqualityimprovement/communityofcommunities/addictions.aspx>

⁽³⁾ <http://www.communityofcommunities.org.uk>



Some countries have already included the vaccine in their national immunisation programmes for girls aged around 12–13 years

Society for prevention research conference

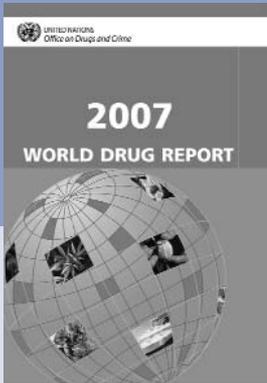
'Advancing science-based prevention: creating real world solutions', was the theme of the 15th annual meeting of the Society for Prevention Research (SPR), held in Washington from 29 May to 1 June. The EMCDDA was invited to hold a roundtable at the event on selective prevention.

Discussions at the roundtable revealed interesting differences between US and EU prevention generally. European drug professionals tend to focus more on the consequences of drug use (e.g. dependency, related crime) and see drug use as one of many symptoms of social exclusion. Their

Continued on page 8

Bookshelf

World Drug Report 2007



This year's edition of the UNODC *World Drug Report* presents signs of long-term containment of the world problem. However, this overall trend, according to the report, masks contrasting regional situations. For instance, while a multi-year reduction in opium poppy cultivation continued in South-East Asia in 2006, Afghanistan recorded a large increase during that year.

Growing interceptions of cocaine and heroin shipments across the world have played an important part in stabilising the market, says UNODC, but the agency also warns of new challenges. Countries along major and new drug trafficking routes, such as those now passing through Africa, may face increasing levels of drug consumption. The report also discusses a possible method to better assess and monitor the role played by organised crime in transnational drug trafficking.

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 Tel. ++ 41 22 917 26 14.
Summary: http://www.unodc.org/unodc/en/world_drug_report.html
Press releases: http://www.unodc.org/unodc/en/press_release_2007-06-26.html

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

Local authorities, a 'logical partner' in tackling drugs

Sadly today drugs affect all our communities. Responding to problems caused by the production, trafficking and use of drugs is a challenge and a responsibility we all share, whether we are working at international or local level. Below Wolfgang Götz, EMCDDA Director looks at some of the challenges at local level to address Europe's drug problems.

Today the EMCDDA supplies the scientific evidence base for many of the laws, strategies and programmes being drawn up to respond to the drug problem in the EU Member States, whether at European, national, regional or local level.

Local authorities are a logical partner in dealing with drug-related problems. They are best placed to fine-tune and adapt drug policies to the needs and resources of their community. They are also at the frontline in the fight against drug-related crime and in dealing with the social repercussions of drug use.

One of the main tests for local decision-makers is finding the right balance between protecting the wider community against drug-related crime, on the one hand, and, on the other hand, helping drug users through social and healthcare interventions to reduce their risk-taking and guide them into treatment.

Treating drug users is very often the domain of local authorities, as services are frequently managed and financed at local level. I believe that one of the main challenges for local authorities in the coming years in tackling drugs will be precisely in this area. One reason is that, although treatment centres are generally more numerous and better equipped today than they were a decade ago, they are still very much geared towards problems relating to heroin use (e.g. there are now over half a million people in Europe in drug substitution treatment). But, as more and more individuals seek treatment for problems linked to synthetic drugs, cannabis, cocaine or polydrug use, services will need to adapt to more, and very varied, problems.

Among the new developments we have witnessed in the last five years in the prevention of drug use in Europe is 'selective prevention', aimed at high-risk groups, families and communities who are often by-passed by prevention work in more traditional settings. Our 2006 *Annual report* noted a greater involvement here of municipalities, as selective prevention calls for cooperation between youth, education, health, social and law enforcement services which is typically local.

The drug problem is not one that will easily disappear and so our job is to persevere in monitoring its characteristics. It is likely that new forms of drug use will be adopted at first by a few individuals, among small groups or in particular regions, localities, cities or social settings. Our aim is quickly to pick up on new substances and emerging trends, detecting them before they have had time to become major problems.

A longer version of this article was published on the EMCDDA website on 26 June at <http://www.emcdda.europa.eu/?nnodeID=410>



Photo: istockphoto

Local authorities are at the frontline in the fight against drug-related crime

Portuguese Presidency

Cooperation with West Africa

Portuguese drug coordinator and President of the *Instituto da Droga e da Toxicodependência* (IDT), Dr João Goulão, visited the EMCDDA on 25 June to present the programme of events in the field of drugs planned for the Portuguese Presidency of the EU (1). Dr Goulão took up the position of Chairman of the Horizontal working party on drugs (HDG) of the Council for the six-month presidency on 1 July.

Speaking to EMCDDA and IDT staff, Dr Goulão said that the overriding goal of the presidency in the drugs field would be to develop and intensify EU drug policy in line with the current EU drugs strategy and action plan. But specifically the main focus would be on reinforcing cooperation with West Africa in order to tackle the cocaine flow into Europe from that region.

The first of four thematic debates on the HDG agenda would be the 'West Africa cocaine platform' (11 July). Mechanisms for the exchange of information and intelligence; harm reduction in prisons and preventing the distribution of drugs at street level are the focus of the remaining three debates.

A high point of the presidency will be the conference on the 'Evaluation of Public Policies and Programmes on Drugs' to take place from 19–20 September in Lisbon (2). Portugal has a proven track record in drug policy evaluation but, as Dr Goulão said, there is now a need to improve methods and deepen the analysis, moving beyond a mere evaluation of implementation to the evaluation of impact.

(1) <http://register.consilium.europa.eu/pdf/en/07/st11/st11433.en07.pdf>

(2) http://www.idt.pt/media/eventos/PresidenciaUE_2007/Conference_Evaluation_draft_Programme.pdf

Drug coordinators

Strengthening cooperation between European and international institutions

National drug coordinators from the EU Member States gathered in Berlin from 14–15 May to exchange information on national and Community-wide developments and to explore stepping up cooperation. The meeting was hosted by the German Presidency of the EU and chaired by the Federal Government Commissioner for Drugs, Sabine Bätzing.

The specific focus of this meeting was how to strengthen cooperation between European and international institutions in the field of drugs policy. Antonio Maria Costa, Executive Director of the United Nations Office on Drugs and Crime (UNODC), welcomed the initiative and called on the EU to adopt a leading role in a drugs policy with worldwide implications. He proposed that the EU also take a stronger role in drug-related research and in the worldwide exchange of best practice in treatment.

Carel Edwards of the European Commission spoke on cooperation between the EU and international organisations. While cooperation was good, he called on countries to ensure better coordination between their representatives assigned to the different EU and international fora. EMCDDA Director Wolfgang Götz spoke on the agency's international cooperation work and said that coordination with international partner organisations would be a central theme in a future EMCDDA conference on drug monitoring over the last 15 years.

In the light of the discussions, Piotr Jablonski, Chairman of the Council of Europe's Pompidou Group, invited the international organisations present to a meeting in Warsaw in the autumn to develop specific measures to improve cooperation.

Danilo Ballotta

The national drug coordinators will next meet on 24 October in Lisbon under the Portuguese Presidency. The focus of the meeting will be 'Cocaine use and the provision of treatment services' and an 'Update on coordination mechanisms'.

Evaluation

External evaluation update: fieldwork in full swing

The independent evaluation of the EMCDDA, launched in January 2007, is now reaching the end of its second phase (<http://www.cses.co.uk>). Following a preparatory phase in the spring centring on methodology and discussions with staff, the second fieldwork phase is now focusing on internal and external surveys and an interview programme involving staff and key stakeholders.

An interim report on the evaluation's progress was presented to the steering committee in Brussels at the end of May. Fieldwork is now in full swing. The Reitox national focal points have been surveyed

and most have been interviewed on a face-to-face basis in their countries. Where possible, the national interview programmes included meetings with members of the EMCDDA statutory bodies (Management Board, Scientific Committee). The evaluators have also made several visits to Lisbon to interview the agency staff and to brief the statutory bodies and the Reitox network on progress.

Key stakeholders (MEPs, policy-makers, EMCDDA experts, international partners, etc.) have been surveyed and an interview programme is underway. The target audience survey (*via Drugnet Europe*)

has yielded satisfactory results. Furthermore, a quality assessment of EMCDDA publications and scientific outputs has been launched in the form of a review by an academic panel. A benchmarking exercise with other EU agencies (e.g. OSHA, EEA, Dublin Foundation) has also commenced.

Phase 2 will be concluded over the summer and the results fed into a draft final report in early September. The final evaluation report will be presented to the EMCDDA Management Board in December 2007.

Rosemary de Sousa

Spotlight

Presenting Fonte



In the run-up to the launch of its new data tool 'Fonte' on 10 July (see p. 7), the EMCDDA organised two Reitox Academies to train national focal point staff in how to use the system. The EMCDDA collects a vast amount of data through its Reitox network which is then processed to provide policy-makers and experts with an accurate and up-to-date picture of Europe's drug situation. Fonte was conceived to make the collection, storage and use of these data more efficient.

The first academy was held in Lisbon on 22 May during the Reitox Heads of focal point meeting. At this half-day session, all five Fonte modules — templates, reports, validation, history and query — were presented and the different steps in the data lifecycle covered.

The second academy took place at the Turkish national focal point in Ankara from 5–6 July. This course was specifically designed to familiarise the end-users at the NFPs with all aspects of Fonte. The intention was that participants not only learn how to use the application but also that they understand the possible consequences of using Fonte in their daily work and get to know the EMCDDA Fonte team and helpdesk. Following a comprehensive presentation of each module, participants undertook a number of practical 'user' exercises.

Both events included question-and-answer sessions and encouraged feedback from participants. This provided the EMCDDA with useful and constructive input on how to improve the system. The evaluation by the participants at the Ankara session was very positive (average score 4.3 on a scale to 5). More training sessions of this kind are likely to be organised in 2008. Meanwhile, the Fonte team will continue the dialogue with the evolving Fonte user community.

Ulrik Solberg

Reitox

Reitox Academy on drug-related public expenditure

'Producing estimates of public expenditure on drugs' is a key objective of the current EU drugs action plan (2005–2008). In this context, the EMCDDA will support the European Commission and EU Member States in developing a common methodology to estimate direct and indirect drug-related expenditure in the EU, candidate countries and Norway.

Current research at the EMCDDA is aimed at identifying, developing and testing methods at EU level for quantifying public expenditure in this field. In close collaboration with the Reitox network and international experts, the agency is also working on a 'Selected issue' on public expenditure to be released alongside its 2008 *Annual report*.

These were among the issues examined at a 'Reitox Academy on public expenditure analysis in the field of drugs', held in Luxembourg on 11 May in cooperation with the national focal point.

The academy looked at past and current research methodology in this area and provided practical tools to be used by the Reitox network in preparing the 'Selected issue', which requires excellent collaboration at national level as well as well-developed systems to monitor public spending in the country. The meeting provided the opportunity for around 45 experts from 26 countries to exchange experience, examine research carried out in the field and foster a common understanding of different concepts.

Speaking at a press conference on 11 May, Mars Di Bartolomeo, Luxembourg Minister of Health, said that the quality and comparability of data on drug-related public expenditure is a key aspect of national and EU drug policy. It is hoped that the outputs of the academy, and the future development of a common methodology, will help policy-makers better target and plan future European activities to tackle the drugs problem.

Xavier Poos

Scientific Committee

Data quality issues addressed

Quality assurance procedures for annual data provided by the EU Member States to the EMCDDA were among the discussion points at the latest Scientific Committee meeting held in Lisbon on 31 May and 1 June. After examination of the outcomes of these procedures to date, the Committee decided to alert the Management Board on data analysis problems resulting from delays in the delivery of Reitox national reports. It also stressed the need to support the national focal points in order for them to submit data on time.

Following a request from the Director, the Committee gave its opinion on the quality and comparability of data on drug-related deaths and concluded that indicators should be compared with caution across countries. Substantial progress had been made in the quality of data on drug-related deaths but it was stressed that monitoring activities can only generate hypotheses and more focused research was needed.

The recast of the EMCDDA regulation in January calls for a smaller Scientific Committee of 15 members selected on the basis of scientific excellence and their independence. The proposed rules for selection were discussed and were later approved by the Management Board in July (see p. 8). A 'Call for expressions of interest' for membership in the new Scientific Committee will be launched early in September in the *Official Journal of the European Union* and on the EMCDDA website.

Margareta Nilson

Products and services

EMCDDA launches new data tool, Fonte

On 10 July, the EMCDDA launched its new data tool, Fonte, a web application through which data can be entered and stored directly into a central knowledge pool (see p. 6). With the creation of such a pool for more efficient data-collection and retrieval, the EMCDDA and its national focal points (NFPs) will be able to concentrate more on core scientific work and in-depth analyses to better inform policy-makers (1).

In practical terms the launch means that, from now on, data reported from the NFPs to the EMCDDA through selected templates (standard tables and structured questionnaires) will take place through Fonte (2). Reports or data from previous years, and formerly stored in the Epidemiological Information System on Drug Data (EISDD), have already been migrated to Fonte while other data will be inserted gradually in the course of the year. From 2008, Fonte will be the sole EMCDDA data tool in operation.

Fonte represents a major step forward in the EMCDDA's move to streamline and improve data handling and mining in line with a core priority of its three-year work programme 'to consolidate monitoring and reporting structures'.

Ulrik Solberg

(1) See *Drugnet Europe* No 54. For more see: <http://www.emcdda.europa.eu/?nnodeID=15919>

(2) Relating to: Drug-related deaths; national and local estimates of prevalence of problem drug use; purity of drugs; price of drugs and selective prevention.

New-look homepage

On 26 June, International day against drug abuse and illicit trafficking, the EMCDDA unveiled a new-look homepage. With the aim of enhancing the overall user experience, the new design makes use of a simpler layout and a clearer graphic distinction between the different thematic areas of the page.



One of the highlights of the new layout is an improved presentation of news items. Announcements of new publications are now made in a special showcase area, whereas more general news items are presented as a compact list of headlines at the top of the page. In addition, a dedicated 'News' section has been created on the website to provide a better news listing to visitors. Other fresh items on the redesigned web page include a 'Spotlight' zone promoting content from elsewhere within the website as well as an area of the page dedicated to partner links. The home page redesign is the first step in a major website redesign process that will be ongoing over the coming months.

David Penny

Cocaine literature review

Previously perceived as a drug for the wealthy, cocaine use has become more prevalent in Europe in the last decade and problem use of the drug has put a strain on providers of drug treatment. Now available on the EMCDDA website is a literature review of current research on cocaine treatment responses.

<http://www.emcdda.europa.eu/?nnodeID=18945>

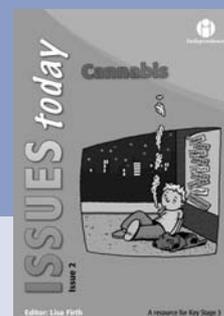
General report of activities 2006

This annual publication presenting the EMCDDA's achievements under its 2006 work programme is now available for download.

<http://www.emcdda.europa.eu/?nnodeID=426>

Resources

Useful materials and events on the drugs issue



Issues today

Independence Educational Publishers Ltd (UK) have recently published in their new 'Issues today' series an edition dedicated to cannabis. The publication, targeted at students aged 11–13 years, is divided into two sections: 'Cannabis issues' and 'Cannabis and the law'. The first section looks at a range of topics including the effects of cannabis, cannabis and problem behaviour and the cannabis market. It also looks at the state of the cannabis problem in Europe using material from EMCDDA *Annual reports*. The second section covers issues such as drug laws, citizens' rights on arrest, medicinal use and the repercussions of growing cannabis. Further topics to be covered in the series will include: binge drinking, smoking and crime.

E-mail: issues@independence.co.uk

For more, see

<http://www.independence.co.uk/publicationslist/index.html>

Cannabis: essential facts

(*Cannabis: données essentielles*)

On 10 July, the French Reitox national focal point, the *Observatoire français des drogues et des toxicomanies* (OFDT) published this monograph on France's most consumed drug. The 230-page volume presents the results of recent research studies, looks at consumption in different professions and social groups and examines intensive use, the geopolitical dimension of trafficking and the impact of cannabis on road safety. Estimates are also given of France's cannabis market and the social costs of the drug for the country.

Downloadable from

<http://www.ofdt.fr/ofdtdev/live/publi/cde.html>

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources are invited to contact Kathryn.Robertson@emcdda.europa.eu

Calendar 2007

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15
16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

EMCDDA meetings

- 6–7 September: Expert meeting on quality standards in drug prevention, Lisbon.
- 12–13 September: Reitox Academy on best practices, Oslo.
- 24–25 September: Annual expert meeting on the treatment demand indicator and meeting with international organisations, Lisbon.
- 9–10 October: Annual expert meeting on the drug-related infectious diseases indicator, Lisbon.
- 11–12 October: Annual expert meeting on the problem drug use indicator, Lisbon.
- 23 October;
5 November: Budget Committee and Executive Committee, Lisbon.

External meetings

- 26–30 August: 18th International conference on alcohol, drugs and traffic safety, Seattle (<http://www.icadts2007.org>).
- 10–12 September: 2007 European association of addiction therapy conference, Vienna (<http://www.eaat.org>).
- 18–20 September: UNGASS expert consultations, Vienna.
- 19–20 September: Evaluation of public policies and programmes on drugs, Portuguese Presidency, Lisbon (<http://www.eu2007.min-saude.pt/PUE/PT>).
- 1–2 October: FESAT conference, 'Taking a call on cannabis: drug helplines response', Lisbon (EMCDDA, IDT).

EU meetings

- 5 September: Horizontal working party on drugs, Brussels.
- 10 October: Horizontal working party on drugs, Brussels.

Statutory bodies

Management Board assesses impact of EMCDDA recast

The strategic consequences of the recast of the EMCDDA founding regulation on the agency's activities were among the points for discussion at the latest Management Board meeting held in Lisbon from 4–6 July.

The new regulation, which entered into force on 16 January 2007, broadens the scope of the agency's tasks, granting it a more active role in monitoring new patterns of drug use and related trends. Specifically it allows the agency to collect, register and analyse information on 'emerging trends in polydrug use', including the combined use of licit and illicit psychoactive substances. It also states that the EMCDDA should provide information on best practice in the EU Member States and may be called on to transfer its know-how to certain non-EU countries, such as official candidates for EU accession.

Areas with potential for development were discussed, although the speed at which these will be taken forward will depend on priority setting and resource availability. The Management Board revised its rules of procedure in the light of the recast and adopted procedures for the selection and appointment of the members of a new Scientific Committee (see p. 6). The Board also took note of a new EMCDDA communication strategy.

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Society for prevention research conference

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American counterparts, on the other hand, prioritise drug use itself and how to tackle it.

Selective prevention in the US tends to be delivered under the umbrella of universal prevention, with abstinence generally the goal. Most European prevention interventions state explicitly that their main goal is to avoid public harm and prevent development of dependency, especially among those most vulnerable. On both sides, high-risk groups are found to benefit most from prevention and it is noted that targeted prevention (selective, indicated) is now stimulating more interest. Senior US researchers are likely to visit the EMCDDA in 2008 to discuss possibilities for EU–US collaboration.

Gregor Burkhardt