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INFORMAL DRUGS FORUM:

Gradin highlights role of national drug co-ordinators



 ${\it Georges} \ {\it Estievenart} \ {\it and} \ {\it Anita} \ {\it Gradin} \ {\it at the} \ {\it EMCDDA}.$

he important role of the EU Member States' national drug co-ordinators in the implementation of the fourth European Action Plan to Combat Drugs (2000–2004)* was highlighted at an informal Drugs Forum in Lisbon on 16 July.

Anita Gradin, then European Commissioner responsible for Justice and Home Affairs, stressed that the involvement of the co-ordinators in the course of the Plan would be highly valuable in view of their unique overview of individual national drug strategies and policies.

Mrs Gradin delivered this statement during her presentation of the draft Action Plan at the EMCDDA. Commenting on evaluation, one of the Plan's key topics, Mrs Gradin underlined the need to develop rapidly a 'specific methodology' to evaluate the Plan as well as programmes and activities being carried out at national and EU level. She referred to the

considerable amount of 'knowledge and experience in our Member States to assist such a process' and the need for 'proper political mobilisation, adequate resources and a certain amount of strategic planning'. The national co-ordinators had an important part to play here, she said.

The Commissioner's words won wide support at the meeting, particularly from French and German co-ordinators Nicole Maestracci and Christa Nickels and deputy UK drugs co-ordinator Mike Trace. The UK delegate called for 'improved co-ordination on drugs at top level between Member States in the form of annual meetings between the countries' co-ordinators'. Mr Trace agreed that the Action Plan should be reviewed on a regular basis to ensure that the quality of activities organised matched the quality of the document itself.

'The European Commission believes that a European Union anti-drug

strategy must promote and safeguard a well-balanced policy of interdiction supported by a strong social and preventive commitment and extensive international co-operation', stated Mrs Gradin at the Forum.

The Action Plan, which proposes a 'global, multidisciplinary and integrated approach to drugs', was broadly praised by the 13 national representatives present. Constructive improvements included increased reference to poly drug use and the social aspects of the drugs problem. The delegates also felt that the Plan's emphasis on the rise of synthetic drug use overshadowed the use of other problem drugs such as heroin and cocaine.

An exchange of views was held on: the evaluation of activities and performance indicators; information on the drug phenomenon and harmonised epidemiological indicators; national and European co-ordination; and the integration of research into the fight against drugs.

Particularly relevant to the EMCDDA were the Commissioner's comments on the importance of developing Member States' information capacities. 'Information in the field of drugs is a highly politicised issue' she said. 'It is also crucial if we are looking for consistency and continuity in our actions'.

Mrs Gradin also commented on the much-improved overview of the drug situation in the European Union, thanks to efforts by the EMCDDA to reduce the differences between existing information systems in the Member States. Nevertheless there were still 'white spots' on the map, she said.

* The draft Action Plan was tabled by the European Commission in a communication to the Council of the European Union and European Parliament on 26 May and is expected to be adopted during the Finnish Presidency of the Council later this year.

See *DrugNet Europe* No. 18.

2

EMCDDA

SEMINAR:

QUALITATIVE

RESEARCH IN

DRUG DEMAND

REDUCTION

he EMCDDA will host a seminar in Lisbon from 7-9 October on the topic of 'Qualitative Research in Drug Demand Reduction in Europe'. The seminar will discuss the findings of a recent EMCDDA-commissioned study on the subject* and assess the impact of the results on drug policy and research.

The study, undertaken by the Nordic Council for Alcohol and Drug Research (NAD), offers an overview of qualitative, empirical studies on the keyplayers, mechanisms, processes and structures existing in the field of drug demand reduction today.

Methodological questions will be addressed at the seminar as will perspectives and possibilities for following up research on topical issues. The purpose of the meeting will be to provide an overview of ongoing projects in the field, identify partners and promote cooperation.

Margareta Nilson

* See DrugNet Europe No. 16.

Further details are available at: http://www.qed.org.uk/european.html

To participate in the seminar, please contact Margareta Nilson at the EMCDDA (Margareta.Nilson@emcdda.org) or Petra Kouvonen at NAD (Kouvonen@mail.kaapeli.fi)
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Evaluating drug prevention

eveloping a culture of evaluating drug demand-reduction activities in the European Union is a key objective of the EMCDDA. Nearly three years after its first 'European Conference on the Evaluation of Drug Prevention' (Lisbon, March 1997), the EMCDDA is now following up this meeting with a second Conference entitled 'Evaluation: a key tool for improving drug prevention'.

Some 120 professionals involved in the practical and strategic implementation of evaluation activities in the European



EMCDDA Director at the first 'European Conference on the Evaluation of Drug Prevention'.

Union will attend the event at the European Parliament building in Strasbourg from 2–4 December. The meeting will assess developments in evaluating prevention since 1997 and will promote the concept as a means of improving practice and impact.

Conference sessions will demonstrate how evaluation theory and knowledge may be implemented in daily routine, particularly via the systematic use in drug-prevention programmes of evaluation tools such as those developed by the EMCDDA. These include: the *Guidelines for the Evaluation of Drug Prevention* (published by the EMCDDA in English and available as a working document in 11 EU languages); the Evaluation Instruments Bank (an Internet-based database of documents containing a collection of evaluation instruments); and EDDRA (an infor-

mation system which offers greater exchange of experience among professionals).

It is foreseen that the Conference, jointly organised with the European Commission, will adopt a set of recommendations geared to instituting an evaluation culture in prevention programmes and strategies in the EU Member States.

Gregor Burkhart

Preventing drugrelated crime: EU law-enforcement authorities consider the issues

reventing drug-related crime was the focus of a seminar on 'Best Practice in Drug Prevention by Law-Enforcement Authorities' organised by the Finnish police in Helsinki from 11-13 July. The event was organised under the Finnish Presidency of the Council of the European Union and co-financed by the EU's Oisin Programme which aims to enhance the training of lawenforcement authorities and foster cooperation between them. The seminar's recommendations were adopted in a 22-point paper which will be submitted to the Horizontal Drugs Group of the Council in September.

The participants concluded that, not only social and health authorities, but also prosecuting and judicial authorities, should participate in drug prevention activities. They also felt that preventing social exclusion should be part and parcel of tackling drugrelated crime and that the key to this was reducing repressive action. Inter-sectoral co-operation was also deemed important, but, as a preseminar survey had revealed, this was not the case for all EU countries. Evaluating drug prevention and assessing good practice were underlined as key issues and the use of the EMCDDA's EDDRA database was recommended as a tool.

Some 60 delegates attended the seminar, largely from ministries of the Interior and Justice. The EMCDDA, the European Commission and Europol were also represented.

Margareta Nilson

TREATMENT DEMAND: EUROPEAN PROTOCOL PUT TO THE TEST

emand for the treatment of drug problems can be used as an indicator of the profile of problem drug users in the community as well as their patterns of use (injection, etc.). Information on the subject can also be utilised to track trends in the use of available treatment services, help plan and evaluate these services and assess resource needs. Furthermore, treatment demand acts as an indirect indicator of trends in problem drug use, often forming the basis of prevalence estimation studies.

Following preparatory work by the EMCDDA to assess the availability and comparability of drug treatment information in the EU, and previous studies carried out by the Council of Europe's Pompidou Group, a 'Joint Standard Protocol for Drug Treatment Information' was released by the organisations in April 1998 for testing.* The Protocol defines when a treatment case should be recorded and describes how anonymous common data sets (20 variables) should be collected on each client starting treatment.

From May to July 1999, the Joint Protocol was field-tested in all EU countries. To achieve this, the EMCDDA's National Focal Points nominated an expert to provide information on treatment demand in accordance with the definitions and variables set out in the Protocol. The results of the trial will allow the EMCDDA to assess to what extent existing reporting systems comply with the Standard Protocol or to clarify the tasks required to enable countries to meet it in the future. The information collected is expected to provide a more comparable picture of the characteristics of treated drug users and their patterns of use.

An EMCDDA 'Group of Experts on Treatment Demand Information' will meet from 18–19 October in Lisbon. The group will discuss any methodological problems encountered in the field trial as well as problem drug use profiles found in different EU countries. The meeting will also: consider further steps to be taken to implement the Joint Protocol; reassess the purposes and potential utility of treatment information; and finally explore perspectives for analysis and uses of such data.

Julian Vicente

* This project was co-ordinated by the German Focal Point (IFT)



BOOKSHELF



Drug and Alcohol FINDINGS

Drug and Alcohol FINDINGS is a quarterly magazine co-published by three UK organisations: Alcohol Concern; the National Addiction Centre; and the Standing Conference On Drug Abuse (SCODA). Its aim is to bridge the gap between research and practice and to bring the evidence of the effectiveness of drug and alcohol interventions to those responsible for implementing them. The emphasis lies on the practical implications of research findings from Britain and around the world.

Although largely targeted at drug and alcohol service practitioners, managers, planners, commissioners and researchers in the UK, much of the material found in the magazine will be of interest across the European Union.

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Editor: Mike Ashton at e-mail: findings@mashton.cix.co.uk

Date: Quarterly. Launched June 1999.

Language: English.

Price: £60 for a year's subscription (4 issues). Free pilot issue on request from SCODA. (Single copies to non-subscribers £16).

Volumes may be ordered from: SCODA, Waterbridge House, 32–36 Loman Street, London SE1 OEE, UK. Tel: ++ 44 171 928 9500. Fax: ++ 44 171 928 3343. E-mail findings@scoda.demon.co.uk.

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

ortality related to drugs is an important indicator of the health impact of more severe forms of drug use. Although information on drug-related deaths can be useful for monitoring trends, some conceptual and practical problems arise when using or comparing data.* Improving the quality and comparability of information on drug-related deaths is one of the priorities of the EMCDDA.

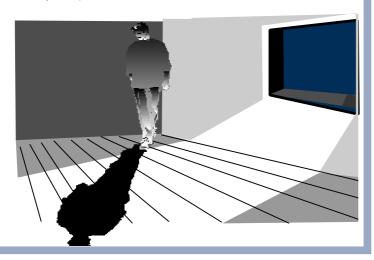
An EMCDDA project co-ordinated by the Trimbos Institute (Dutch Focal Point) in 1998, and involving Eurostat and the WHO, resulted in the development of 'European Guidelines for Data Collection on Drug-related Deaths'. In July and August 1999, these Guidelines were used by national experts (nominated by the REITOX Focal Points) to collect data.

The Guidelines provide a standard format for reporting data from the two existing sources of information on drug-related deaths: the General Mortality Registries (GMR) and the Special Forensic or Police Registries (SR). The present Guidelines refer to the 9th edition of the International Classification of Diseases (ICD-9). Due to the fact that the 10th edition (ICD-10) is now being implemented in the EU, the Centre will also be in a position to recommend Guidelines for data collection using ICD-10 which should help reduce the national variations in data experienced in the past. In the context of this project, the Trimbos Institute convened an *ad hoc* expert group meeting in July, in collaboration with Eurostat, where an initial proposal was discussed for Guidelines for data collection using ICD-10.

An 'EMCDDA Group of Experts on Drug-related Death Statistics' will meet in Lisbon from 8–9 November where the Guidelines will be discussed and, if necessary, revised. The meeting will also discuss the results of this summer's data-collection exercise in terms of methodological problems (coverage, consistency across sources, etc.) and findings on distribution and characteristics of drug-related deaths in the EU. Further steps for implementation of EMCDDA standards will also be discussed.

Julian Vicente

* See *DrugNet Europe* No. 11.



IMPROVING DATA

QUALITY FOR THE

SURVEILLANCE

OF HEPATITIS B/C

AND HIV IN IDUS

n the framework of the EMCDDA's 'Project to Improve Data Quality for the Surveillance of Hepatitis B/C and HIV Infection in Injecting Drug Users in the EU',* a first expert meeting was held in Glasgow from 12–13 July. Co-ordinated by the Scottish Centre for Infection and Environmental Health and the UK Centre for Drug Misuse Research, the meeting assessed different options for surveying drug-related infectious diseases in Europe.

At the meeting, it became clear that developing a perfect surveillance system would prove difficult. Options such as collecting existing data from drug treatment centres or public health laboratories could result in broad national coverage but might offer data of insufficient quality. On the other hand, repeated local cross-sectional studies could offer good-quality data but with a low coverage or at very high costs.

The experts considered that the 'best' system might be one based on a combination of these options. Collecting existing data could achieve wide or national coverage and be used as an early-warning system for regional rises in prevalence. Meanwhile repeated cross-sectional studies could offer better information on trends in infections and risk behaviour and be used to validate important rises detected through the wider system.

One possibility to obtain at least a 'surrogate' marker for incidence would be to concentrate on the prevalence of infections in young or newly injecting IDUs. The EMCDDA will look into the possibilities to further develop this 'two-tiered' surveillance approach in the near future.

Lucas Wiessing

* Among the tasks of this project is the development of guidelines for the EU Member States to collect comparable data on infectious diseases in injecting drug users (IDUs).

Commission proposes control measures for 4-MTA

n 7 July, in accordance with Article 5 of the 1997 Joint Action on New Synthetic Drugs, the European Commission submitted a proposal to the Council of the European Union calling for the new synthetic drug 4-MTA (4-methylthioamphetamine) to be brought under control measures and criminal penalities at European Union level.*

This initiative follows the adoption on 19 May of a 'Report on the Risk Assessment of 4-MTA in the Framework of the Joint Action on New Synthetic Drugs'.** The Report, resulting from an assessment by the EMCDDA's extended Scientific Committee of the health and social risks of 4-MTA, recommends that the drug be placed under control due to the high risk of overdose associated with it.

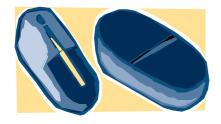
Adoption by the Council of the Commission's proposal would again confirm the speed and effectiveness of the early-warning and risk-assessment mechanism provided under the two-year old Joint Action. (In the case of 4-MTA, the proposal to the Council came just five months after first notification of the substance by the EMCDDA and Europol).

This result would also represent the first concrete development under the Joint Action of 17 December 1996 concerning the 'approximation of the laws and practices of the Member States of the European Union to combat drug addiction and to prevent and combat illegal drug trafficking'.

Alain Wallon

* Document reference COM (1999) 307 Final. Article 5 of the Joint Action covers 'Procedures for bringing specific new synthetic drugs under control'.

** See **DrugNet Europe** No. 18.





THE EMCDDA AND ITS PARTNERS

Testing WHO

workbooks on

treatment

evaluation

n 1997, co-operation between the EMCDDA, the United Nations International Drug Control Programme (UNDCP) and the World Health Organisation (WHO) led to the launch of a project entitled 'Evaluation of the Treatment of Substance Use Disorders'. The overall aim of the project was to increase the effectiveness, scope and impact of information dissemination in the area of treatment evaluation.

Forty-five treatment centres throughout Europe are participating in the project's feasibility phase. This entails filling in a 'pre-workbook questionnaire' designed to collate data on the participant's background, professional activities and expectations. The questionnaires sent to the Centre to date reveal a high degree of knowledge and expertise in the field of treatment as well as a wide variety of activities underway in the field. Replies have been received from clinicians, programme-planners, researchers and decision-makers.

While respondents generally appear to have extensive knowledge of substance use disorders and their treatment, they generally know less about planning and implementing evaluation. It is therefore hoped that the workbooks will be a step towards making evaluation activities routine.

Ulrik Solberg

EMCDDA

to host

ELISAD

annual meeting

he 11th annual meeting of the European Association of Libraries and Information Services on Alcohol and other Drugs (ELISAD) will be hosted by the EMCDDA in Lisbon from 4–6 November.

The meeting will focus on 'Organising Professional Information on Alcohol and Drug Abuse in Europe' and will provide participants with the opportunity to share knowledge and ideas on specific projects.

ELISAD's mandate is to facilitate the exchange of experience between professionals working in the alcohol and drug documentation field in Europe. The EMCDDA is one of the association's 40 members.

The final agenda of the seminar will be available on the ELISAD web site from 20 September at www.geocities.com/hotsprings/villa/8980.

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Adelaide Seita Duarte



EMCDDA STATUTORY BODIES

Management Board re-elects Director

MCDDA Director, Georges Estievenart (France), was reelected by the Centre's Management Board on 1 July for a second five-year term. Mr Estievenart, who has headed the Lisbon agency since it began operations in 1995, will begin his new term of office on 23 December.

Following the election, Mr Estievenart presented his medium-term plans for the agency over the period 2000–2004. These included consolidating and expanding the Centre's achievements since its conception, particularly in the areas of: epidemiology; demand reduction; networking with the REITOX National Focal Points; new synthetic drugs; external co-operation; dissemination of information; and internal administration. The Director also outlined a number of new issues to be addressed over this period, including



Georges Estievenart, EMCDDA Director.

the geographical expansion of the agency's activities to include Norway and the Central and Eastern European Countries (CEECs).

Reacting to the vote, Mr Estievenart thanked the Management Board and EMCDDA staff members for their 'invaluable contribution to making the EMCDDA what it is today: a recognised European centre of expertise on drugs at the service of the EU Member States, the host-country Portugal, the Community institutions and the citizens of Europe'. He also looked forward to the Centre's continued progress in fulfilling its key objective: to provide decision-makers and drug practitioners with high-quality 'objective, reliable and comparable information' on drugs.

At the meeting, the Management Board also approved the launch of an EMCDDA legal information system on drugs. The key objective of the system will be to provide reliable and regularly updated information on national drug laws and regulations via a legal database. Other agenda items at the meeting included: EMCDDA relations with international organisations; implementation of the Centre's five epidemiological indicators; the ongoing external evaluation of the EMCDDA; and the Centre's Annual Report. The next meeting of the Management Board will take place from 28-29 October.

Kathleen Hernalsteen

General Assembly of the Ibero-American Network of NGOs

he EMCDDA participated in the 1st General Assembly of the Ibero-American Network of NGOs* from 17–21 May in Madrid. The official meeting was preceded by a seminar on international co-operation on drug-related issues organised by the Spanish authorities. This session was opened by Spanish Minister for Home Affairs, Mr Jaime Mayor Oreja and government delegate to the Plan Nacional sobre Drogas, Mr Gonzalo Robles Orozco. The EMCDDA participated in the expert panel on 'Drug Abuse Analysis in Latin America', together with the CICAD Secretariat and the Plan Nacional sobre Drogas. Over 100 NGOs participated in the meeting.

Ignacio Vázquez Moliní

* Red Iberoamericano de ONGs sobre Drogas (RIOD).

Rio Summit
approves
co-operation
mechanism on
drugs

'Co-ordination and Cooperation Mechanism between the European Union, Latin America and the Caribbean - Comprehensive Action Plan on Drugs'* was adopted by Heads of State and Government of the three regions at their Summit in Rio de Janeiro from 28-29 June. In general terms, the mechanism - proposed during the British Presidency of the Council of the European Union in 1998 - is designed to deepen political will and technical dialogue between the regions and to enhance and develop existing collaboration on drugs.

In particular, the mechanism intends to improve information systems on drug consumption and production and to promote co-operation between relevant institutions and agencies. It also presents a number of short-term measures including: promoting co-operation between civil organisations in the field of demand reduction (in conjunction with the EMCDDA and other organisations in the regions); taking forward negotiations on precursor agreements between the EU and MERCOSUR countries; and exploring possibilities for the development of a drug observatory in the Andean region.

Ignacio Vázquez Moliní

* See *DrugNet Europe* No. 13.

In preparation for the Rio Summit, the EMCDDApublished conference proceedings of the 'Euro-Ibero American Seminar: Co-operation on Drugs and Drug Addition Policies' held in Porto, October 1998. The seminar was organised by the President of the Portuguese Republic, in co-operation with the Portuguese Government and with the support of the European Commission and the EMCDDA. Copies of the report in English, Portuguese and Spanish are available, free of charge, from the EMCDDA.

6

1

DRUGS-LEX

NEW STRATEGIES, NEW INGREDIENTS



ew anti-drug strategies presented over the last year by France, Germany, Portugal and the United Kingdom have unveiled a number of fresh ingredients which complement the more traditional policy components of prevention, treatment and repression.

Concepts such as research and evaluation, assessment and co-ordination, and targets and milestones are increasingly underlined, pointing to a new direction in drug policy in Europe. Behind this trend lie the objectives of tackling drugs as effectively and comprehensively as possible, optimising governmental initiatives in the field and improving information on the phenomenon in general.

The new French strategy, adopted in June 1999, aims to broaden research and monitoring in the drugs field and to promote information, communication and education on drugs (e.g. via objective and reliable prevention messages). The strategy encompasses concepts such as knowing more to take better decisions and creating a culture of reliable data on drugs.

The current German drug strategy, adopted by the new government in 1998, highlights the health and social aspects of the drug problem. In particular, it stresses the importance of assistance,

Book review strategy

solidarity and social reintegration as well as prevention and research.

Portugal's strategy, released in May 1999, upholds the human dignity of the drug user as its basic principle. Among the initiatives included in the strategy is a programme to support the social and medical rehabilitation of drug addicts during and after prison.

Assessing instruments and evaluating results form a central pillar of the UK drug strategy adopted in April 1998. For the first time, targets and milestones have been established to help gauge the impact of actions in drug policy (e.g. the target for reducing the level of repeated offences among drug users is 25% by 2005). The UK strategy also focuses on promoting drug prevention among young people; protecting the community; enabling those with drug problems to overcome them and live healthy drug-free lives; and reducing the availability of drugs on the street.

In order to implement these new strategies, national drug representatives in the respective countries have been appointed to ensure co-ordination at national and international level.

Danilo Ballotta

Further information on the national co-ordinators and strategies is available from the EMCDDA (Danilo.Ballotta@emcdda.org).

EMCDDA web site changes its image

he EMCDDA is currently looking to increase the scope of its information dissemination among academics, specialists and practitioners in the drugs field. One of its strategies for doing so is to offer review copies of its new publications to the book-review editors of specialised journals. The response so far has been positive and the Centre looks forward to increasing its contacts with these journals in the future.

he EMCDDA's public web site (http://www.emcdda.org) is a key component of the Centre's strategy to disseminate reliable, comparable data on the European drugs phenomenon as broadly as possible.

The site complements the EMCDDA's printed publications programme by providing fast, easily accessible and comprehensive information



New Publications:

- Euro-Ibero American Seminar: Co-operation on Drugs and Drug Addiction Policies – Conference Proceedings (English, Portuguese, Spanish).
- Guidelines for the Risk Assessment of New Synthetic Drugs (English).

Coming soon:

- Report on the Risk Assessment of 4-MTA in the Framework of the Joint Action on New Synthetic Drugs (English).
- Reviewing Current Practice in Drug Substitution Treatment in Europe, Insights series No.3 (English).
- Methods to Integrate Epidemiological Indicators to Address Policy-related Questions on Drug Use, Scientific Monograph series No.4 (English).
- Understanding and Responding to Drug Use: the Role of Qualitative Research, Scientific Monograph series No.5 (English).

on all aspects of the Centre's history, structure, activities, products and partners.

In May 1999, a project was launched with an external contractor to redesign the architecture, navigational structure and graphic design of the site in order to enhance its accessibility and appeal. The redesigned site will be launched at the Online Information 99 exhibition in London this December.*

Rachel Neaman

* For further details on Online Information 99, see next edition of *DrugNet Europe*.

A new Focal Point for Italy



n 22 July, the EMCDDA visited the new Italian National Observatory on Drugs* which will host the country's new Focal Point. The change follows a decision by the Italian authorities to shift responsibility for the Focal Point from the Ministry of the Interior to the Ministry of Social Affairs.

Italian legislation requires the Observatory to: oversee the collection and compilation of data; provide technical/scientific support for policy development; respond to the needs of national and local administrations and service providers; and maintain links with European institutions in the field with a view to a systematic exchange of information and documentation.

The Observatory will have three main components: a statistical/epidemiological unit; a demand-reduction section; and the National Focal Point. NFP responsibilities are written into the ministerial decree and include: reporting on national activity; the dissemination of publications and findings; the collection and compilation of epidemiological data; submission of an Italian National Report to the EMCDDA; and full participation in the REITOX network.

The Observatory is expected to be fully functional by the end of September. Those participating in the meeting agreed that existing tools and expertise should be utilised to the maximum and that tasks be devolved where necessary. The input of epidemiology and demand-reduction experts and advisors into the work of the Italian Observatory and the NFP will be of particular importance to all partners.

Roger Lewis

* The exact denomination of the new Italian National Observatory on Drugs is the 'Prevention and Rehabilitation Activities Co-ordination Unit, Social Af fairs Department, Presidency of the Council of Ministers (Ufficio per il Coordinamento delle attività di prevenzione e recupero delle tossicodipendenenze – Dipartimento per gli affari sociali, Presidenza del Consiglio dei Ministri).

EMCDDA Calendar

3 September — EMCDDA/UNDCP/WHO co-ordination group meeting on the workbooks for the evaluation of treatment, Lisbon.

9-10 September - Visit to the EMCDDA

by the Swedish parliamentary committee for legal affairs.

16—17 September — Visit to the EMCDDA by a Norwegian and Islandic delegation of NGOs, political and trade union organisations, police and student and teacher groups.

16—17 September — Meeting of the

European Network to Develop Policy Relevant Models and Socio-Economic Analyses of Drug Use, Consequences and Interventions, EMCDDA, Lisbon. 27 September — Visit to the EMCDDA by CICAD and the Canadian mission to the EU.

27—28 September — Meeting on the EMCDDA Project on Cohort Studies of Drug Abusers, Rome.

30 September — Visit to the EMCDDA by Mr Pino Arlacchi, Director of UNDCP. 7—9 October — Seminar on Qualitative Research in Drug Demand Reduction, EMCDDA Lisbon.

18—19 October — Meeting of the Group of Experts on Treatment Demand Information, EMCDDA, Lisbon. 28 October — Meeting of the EMCDDA Bureau, Lisbon.

28 October — Visit to the EMCDDA by General Barry McCaffrey, Director of the US White House Office of National Drug Control Policy (ONDCP).

28—29 October — Meeting of the EMCDDA Management Board, Lisbon.

Other Meetings

29 August — I September — 1999 National HIV Prevention Conference, Atlanta, USA.

6–8 September — Seminar on riskanalysis in terms of the trans-border flow of drugs, Oisin programme, Rome. 8 September — Meeting of the Directors of the European Agencies, Brussels. 15–17 September — Conference on 'New Ways in European Drug Policy and Addiction Research',

Hamburg.

23–24 September – Meeting on evaluation and EDDRA training, Magdeburg and Frankfurt.
27–29 September – European Conference on Safety, Health and

Employability, Bilbao.

11–13 October — International Workshop on Mental Health, Drugs and Telematics, European Conference on the Promotion of Mental Health and Social inclusion, Finnish Presidency, Tampere, Finland.

14–16 October — Final regional seminar of the Phare project on technical assistance to drug demand reduction, Portoroz, Slovenia.

Selected EU Meetings

7 September — Horizontal Drugs Group, Brussels. 22 September — Horizontal Drugs Group, Brussels. 20 October — Horizontal Drugs Group, Brussels.

The REITOX

network

ver the last three years, DrugNet Europe has published a series entitled 'A Glimpse of a National Focal Point', designed to acquaint readers with the bodies comprising the European Information Network on Drugs and Drug Addiction (REITOX). This series, which recently ended, described how the Focal Points provide regular information on the state of the drug phenomenon in their country and form the backbone of the Centre's work. The network is comprised of a National Focal Point in each EU Member State plus a Focal Point at the European Commission. Norway participates in the network as an observer. A full contact list of the national centres is available on the Centre's web site at: http://www.emcdda.org.

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