

July–September 2014

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Eurobarometer survey results: young people and drugs

Spreading information on the effects and risks of drug use is a major European challenge. This is according to the European Commission following its fifth opinion poll on 'Young people and drugs', released on 21 August ⁽¹⁾. This 'Flash Eurobarometer' survey is based on telephone interviews conducted in June 2014 with a sample of over 13 000 young people (aged 15–24) in all 28 EU Member States.

The survey builds on Eurobarometer polls carried out in 2002, 2004, 2008 and 2011 ⁽²⁾. Among the issues explored are: perceptions about the health risks of drug use; views on the availability of drugs; attitudes to banning or regulating substances; and opinions on the effectiveness of drug policies. As in the 2011 survey, additional focus was placed on new psychoactive substances ('new drugs' and 'legal highs').

Over a quarter of respondents (29 %) in the new survey stated that they had not been informed about the effects and risks of new drugs over the past year. This comes at a time when more young people claim to be using these substances — the average EU figure for reported lifetime use of new drugs was up from 5 % in 2011 to 8 % in 2014. The countries with the highest perceived consumption were Ireland (22 %, up from 16 % in 2011), Spain (13 %, up from 5 %) and Slovenia (13 %, up from 7 %) ⁽³⁾. More young people stated that they obtain new drugs from friends (68 % compared to 54 % in 2011), while fewer



Young people's attitudes to drugs remain substance-specific.

purchase them from specialised shops (10 % compared to 33 %) and via the Internet (3 % down from 7%).

Over half of the young people questioned (59 %) said that they would use the Internet as a source of information on drugs (64 % in 2011), while 36 % would talk to friends (37 % in 2011) and 25 % to family (28 % in 2011). Young people in 2014 report receiving less information than in 2011 from the seven sources specified in the survey. In particular, information received from media campaigns (- 12 percentage points) and school prevention programmes (- 9 percentage points) on the effects and risks of illicit drug use was seen to have decreased substantially since the last survey.

Regarding the perceived health risks of drug use, almost all respondents

considered that regular use of cocaine (96 %) or ecstasy (93 %) may pose a 'high risk' to a person's health (96 % and 92 % in 2011). A large majority (87 %) considered that regular use of new psychoactive substances may carry a high health risk, while over half of the respondents (57 %) considered that using these 'once or twice' may pose a 'high risk' to a person's health (no figures for 2011).

Close to two-thirds of those surveyed (63 %) felt that using cannabis regularly may pose a 'high risk' (67 % in 2011), while around one-fifth (21 %) felt that using it 'once or twice' would do so (23 % in 2011).

Concerning the ease with which young people can obtain drugs within 24 hours, the figures remain largely unchanged since the last survey. Over a quarter (29 %) of respondents thought it would be 'very easy' to obtain cannabis; against 8 % for cocaine; 7 % for ecstasy and for new drugs and 4 % for heroin.

There remains a strong consensus among young people that heroin, cocaine

Continued on page 8

⁽¹⁾ Flash Eurobarometer 401. Respondents were called on fixed and mobile phones using a multistage, random digital dialling sample technique, developed by the TNS Political & Social consortium. Around 500 interviews were carried out in all Member States (200 for Cyprus and Malta). http://ec.europa.eu/public_opinion/flash/fl_401_en.pdf

⁽²⁾ See *Drugnet Europe* 75.

⁽³⁾ Caution is required when interpreting these figures as the wording of the question about use of new drugs could be interpreted in different ways, depending on what each respondent considers a new drug to be. This interpretation may also change from country to country and over time.

DRUG SITUATION

ROAD SAFETY

New review on drugs and driving

An estimated 28 000 lives are lost on Europe's roads every year and a further 1.34 million people are injured⁽¹⁾. Many of these accidents and deaths are caused by drivers whose performance is impaired by a psychoactive substance. Alcohol remains the number one substance endangering lives on European roads, but use of drugs and medicines behind the wheel, particularly when combined with alcohol, is a major challenge for policymakers. A new EMCDDA report — *Drug use, impaired driving and traffic accidents* — reviews the latest research in this field (see also p. 7)⁽²⁾.

Released to mark International day against drug abuse and illicit trafficking (26 June), the report updates an EMCDDA literature review released in 2008. The new edition includes the results of the European Commission-funded DRUID project (2006–11), which contributed key evidence to road safety policy by mapping Europe's drink- and drug-driving problem across 13 countries⁽³⁾. Also examined are over 500 studies, published in Europe and internationally up to 2013, with a greater emphasis placed on meta-analyses and systematic reviews, which combine and summarise the latest findings.

The report explores methodology, prevalence and the effects of substances on performance. It concludes: 'The chronic use of all illicit drugs is associated with some cognitive and/or psychomotor impairment and can lead to a decrease in driving performance, even when the subject is no longer intoxicated'. Among concerns raised in the report is the variety of drugs available today: 'The range of psychoactive substances available for illicit use is increasing, and recent studies are finding evidence of their use among drivers'.

⁽¹⁾ EC Road Safety Statistics http://ec.europa.eu/transport/road_safety/specialist/statistics/index_en.htm

⁽²⁾ www.emcdda.europa.eu/publications/insights

⁽³⁾ For more on the DRUID project, see www.druid-project.eu

PRISON HEALTHCARE

WHO–Europe launches new guide on prisons and health

On 27 May, the World Health Organization's Regional Office for Europe (WHO–Europe) launched its latest guide for professionals working in the area of prison healthcare⁽¹⁾. The manual, entitled *Prisons and health*, was presented in Strasbourg at an expert meeting, co-organised by the Council of Europe's Pompidou Group and the WHO's Health in Prisons Programme, on the theme: 'Prison health in Europe: missions, roles and responsibilities of international organisations'.

The manual is based on contributions from a large number of experts and international partners, including the EMCDDA. The guide outlines important proposals to improve the health of those in prison and to reduce the risks posed by imprisonment to health and society. In particular, it aims to facilitate better

SCIENTIFIC WRITING

Scientific paper award 2014



Over 60 eligible articles were assessed by the award committee.

Scientific papers judged to enhance understanding of the European drugs problem will be acknowledged in the autumn in the fourth annual EMCDDA paper award ceremony celebrating scientific writing⁽¹⁾. This year's ceremony will take place in the margins of the third 'Reitox week' initiative, taking place from 24–28 November in Lisbon.

The award ceremony will distinguish high-quality research in the field of illicit

drugs, by acknowledging articles in a variety of drug-related fields which have been authored by European scientists and published in peer-reviewed journals in 2013.

This year, a record number of papers was nominated by members of the EMCDDA Scientific Committee, the Reitox national focal points, scientific journals and by EMCDDA staff. Over 60 eligible articles were assessed by an award committee and up to five may be acknowledged.

The EMCDDA 'Reitox week' is an extended version of the regular Reitox Heads of focal points (HFP) meeting. The event gathers representatives from around 40 national drug monitoring centres from: the 28 EU Member States, Norway and Turkey; candidate and potential candidate countries to the EU; and the European Neighbourhood Policy (ENP) countries.

Maria Moreira and Renate Hochwieser

⁽¹⁾ For more, see www.emcdda.europa.eu/activities/scientific-paper-award

prison health practices in the fields of: human rights and medical ethics; communicable diseases; non-communicable diseases; oral health; risk factors, vulnerable groups; and prison health management.

Based on the principles of prison health being a key factor of public health, the meeting also adopted the 'Strasbourg conclusions'⁽²⁾. These highlight, among others: the right for prisoners to enjoy the same level of healthcare as others in society and the effectiveness of placing prison health services under the jurisdiction of health (rather than justice) ministries. In the text, international organisations pledge their support for prison health reform by strengthening and coordinating their efforts to ensure implementation of these conclusions.

Linda Montanari, Lars Møller and Stefan Enggist

⁽¹⁾ www.euro.who.int/en/publications/abstracts/prisons-and-health

⁽²⁾ www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2014/strasbourg-conclusions-on-prisons-and-health

RESPONSES

TREATMENT

New report examines residential treatment for drug use in Europe

In most European countries today, residential treatment programmes are an important element in the range of treatment and rehabilitation options available to drug users. A new EMCDDA Paper, released in July, provides the latest Europe-wide overview of the history and availability of this type of treatment within wider national drug treatment systems ⁽¹⁾.

Residential treatment programmes are defined in the paper as those ‘involving therapeutic interventions aimed at long-term change in drug use, usually alongside other rehabilitative activities, within a residential setting’. The study describes how countries differ in the level of residential treatment provision — over two-thirds of the 2 500 reported facilities in Europe are concentrated in just six countries.

Highlighted in the paper are the various treatment approaches currently used to treat drug-using clients in these settings. The main types of residential treatment used are the 12-step/Minnesota model; the therapeutic community approach and psychotherapy-based models. The review shows how residential treatment programmes today often provide a mix of services reflecting the philosophy of one or more approaches. Although, historically, these programmes have been drug-free, current data point to the growing importance of providing opioid substitution medications to help drug-dependent individuals.

This publication does not examine the effectiveness of residential programmes. An assessment of the evidence base, with a focus on therapeutic communities, is reviewed in a new EMCDDA Insights publication dedicated to this issue (see p. 4).

⁽¹⁾ www.emcdda.europa.eu/publications/emcdda-papers/residential-treatment

OVERDOSE PREVENTION

The role of take-home naloxone in reducing overdose deaths

The role of take-home naloxone (THN) in reducing opioid-related fatalities will be the focus of an EMCDDA meeting held in Lisbon on 14 October. Leading experts on the issue will come together at the event to focus on the scaling up of interventions using this medication across Europe.

Naloxone is an opioid antagonist used worldwide in emergency medicine to reverse respiratory depression caused by opioid overdose. The drug, listed by the World Health Organization (WHO) as an essential medicine, is currently available in injectable form, while a new device for nasal application is under development ⁽¹⁾. When used in peer programmes, naloxone distribution is accompanied by training for drug users, their peers and family in First Aid and in how to administer the medicine in order to reverse the effects of opioid overdose.

WORLD HEPATITIS DAY

New study on HCV infection

‘Hepatitis: Think again’ was the theme of this year’s World Hepatitis Day commemorated on 28 July. To mark the occasion, the open-access online journal *PLoS ONE* published a new EMCDDA systematic review of data for scaling up treatment and prevention among injecting drug users infected with hepatitis C in the EU ⁽¹⁾.

People who inject drugs (PWID) are a key population affected by the hepatitis C virus (HCV). Treatment options are improving and may enhance prevention; however access for PWID may be poor. The new study, one of the largest conducted on this topic and involving over 80 collaborators, concludes that data on HCV epidemiology, care and disease burden among PWID in Europe, while sparse, suggest many undiagnosed infections and poor treatment uptake. The burden of disease, where assessed, was high and is expected to rise in the next decade.

The authors reviewed the published literature from 2000, as well as data provided by the EMCDDA’s drug-related infectious diseases (DRID) expert network. Data availability was found to be highly variable across countries and topic areas, while important limitations exist both in comparability and representativeness. The study concludes that stronger efforts are needed to improve data availability to guide the scale-up of HCV treatment among PWID.

Lucas Wiessing

⁽¹⁾ Wiessing, L., Ferri, M., Grady, B., Kantzanou, M., Sperle, I., Cullen, K.J., EMCDDA DRID group, Hatzakis, A., Prins, M., Vickerman, P., Lazarus, J.V., Hope, V., Mathei, C. (2014) ‘Hepatitis C virus infection epidemiology among people who inject drugs in Europe – A systematic review of data for scaling up treatment and prevention’, *PLoS ONE*, Jul 28, 9(7); e103345. doi:10.1371/journal.pone.0103345.

For more, see www.emcdda.europa.eu/news/2014/hepatitis-day



Naloxone is used to reverse respiratory depression caused by opioid overdose.

The upcoming meeting will explore the rationale for THN as part of a comprehensive response to reducing overdose deaths. The WHO will present at the meeting its new *Guidelines on the management of suspected opioid overdose* while the EMCDDA will review its upcoming paper on the *Effectiveness of take-home emergency naloxone to prevent heroin overdose*. The meeting is a

satellite event of the EMCDDA annual expert meetings on drug-related deaths and drug-related infectious diseases ⁽²⁾.

Dagmar Hedrich, Isabelle Giraudon, Marica Ferri

⁽¹⁾ www.emcdda.europa.eu/topics/pods/preventing-overdose-deaths

⁽²⁾ www.emcdda.europa.eu/activities/expert-meetings

BOOKSHELF

World Drug Report 2014



Around 243 million individuals aged 15–64 (5 % of the world's population) used an illicit drug in 2012, while problem drug users numbered around 27 million adults. This is according to the *2014 World Drug Report*, released by the United Nations Office on Drugs and Crime (UNODC) on International day against drug abuse and illicit trafficking (26 June). Launching the report in Vienna, UNODC Executive Director Yury Fedotov appealed for a stronger focus on the health and human rights of all drug users, particularly those who inject drugs and are living with HIV.

The UNODC chief added that sustainable success in drug control required firm international commitment and that a balanced and comprehensive approach addressing both supply and demand should be backed up by evidence-based responses focusing on prevention, treatment, social rehabilitation and integration. 'This is particularly important as we move towards the Special Session of the General Assembly on the world drug problem in 2016', Mr Fedotov stated.

Publisher: UNODC

Languages: English; summary in Arabic, Chinese, English, French, Russian and Spanish.

Date: 26 June 2014

ISBN: ISBN: 978-92-1-148277-5
www.unodc.org/wdr2014

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

Exploring therapeutic communities for treating addictions in Europe



In recent years, therapeutic communities have moved into specific niche areas.

Therapeutic communities (TCs) first appeared in Europe in the 1960s, largely in response to an emerging heroin problem, and have continuing relevance in the world of drug treatment today. In the latest edition in its Insights series, the EMCDDA presents how these communities have developed since that time and offers an overview of research into their effectiveness as a treatment option and their impact on society ⁽¹⁾.

In the 50 years since TCs appeared, the situation of drug use and drug treatment has changed considerably. A wide variety of treatment interventions is now on offer and the choice of substances available to drug users continues to evolve. Against this backdrop, the EMCDDA set out to investigate the experience gained so far with these communities, which constitute one of the longest standing modalities for the treatment of drug addiction.

The term therapeutic community has been linked to a range of treatment traditions and approaches. All share the idea of using relationships and activities of a 'purposefully designed social environment or residential treatment setting to promote social and psychological change'. Traditionally, TCs offered a drug-free environment in which people with addictive problems lived together in a structured way in order to achieve abstinence. In recent years, TCs have adopted more integrative systems.

The report shows that TC programmes for the treatment of addictions exist in most European countries, but that the use of this approach is unequally distributed. Overall, around 1 200 facilities using TC-type interventions were identified across Europe. While the number of programmes applying the TC approach was low (around five) in around a third of European countries, the TC appeared to be a prevalent treatment modality in most south, and some east, European countries. Typically, the capacity of facilities offering a TC programme in Europe was between 15 and 25 residents, while the planned length of treatment in TCs ranged between 6 and 12 months.

To determine the effectiveness of TCs, the EMCDDA undertook a literature review for this report. This drew on 28 scientific articles reporting 16 randomised controlled studies or quasi-experiments (conducted in North America) and 21 articles reporting 14 observational studies (conducted in Europe). The publication reveals some evidence for the effectiveness of TCs in reducing substance use and criminal activity, at least in the USA. A small number of studies also showed positive effects on employment, social functioning and general mental health.

While the clinical- and cost-effectiveness of other treatment options, such as opioid substitution treatment (OST), has been repeatedly confirmed, the evidence base behind TCs still needs to be strengthened. In recent years, TCs have been seen to have moved into specific niche areas, such as treatment of drug users with dual diagnoses, mothers with children and prison inmates. The future of TCs, states the report, will depend on how well these programmes continue to target areas where they can make the most impact and achieve the most good at adequate cost.

⁽¹⁾ www.emcdda.europa.eu/publications/insights/therapeutic-communities

Collaboration with the EFTC

To produce this publication, the EMCDDA collaborated with the European Federation for Therapeutic Communities (EFTC). Founded in 1981, the EFTC supports psychosocial and pedagogical approaches which help drug addicts recover to a drug-free lifestyle (www.eftc-europe.com).

STRATEGY

Consultation on EMCDDA work priorities for 2016–18

In the coming years, the EMCDDA and its partners in the EU Member States need to be prepared to face an increasing strain on resources. As a result, one of the main challenges for the agency will be to continue its work on prioritising investments. This will enable it to fulfil its legal obligations and safeguard the achievements accrued, while remaining responsive to emerging trends and developments in the drug situation in Europe.

To help draw up its next three-year strategy and work programme (2016–18), the EMCDDA is sounding out its audiences on future priorities. In this light, the agency launched an extensive consultation exercise before the summer calling for thoughts and ideas on the possible focus of its work for the next strategic programming period. Among those consulted were: key stakeholders and partners from the EU Member States; the EMCDDA Scientific Committee; EU institutions; international organisations; ‘third countries’ and the general public. The consultation was effected via an online survey and via letter (deadline 31 July).



The EMCDDA is sounding out its audiences on future priorities.

Narcisa Murgea

The valuable contributions received in the process will play an important role in defining the EMCDDA's medium- to long-term direction. This will be reflected in the 2016–18 strategy and work programme, scheduled to be adopted by the EMCDDA Management Board in July 2015.

PARTNERS

Eurojust and EMCDDA pledge to boost cooperation

Exchanging strategic and technical information in the areas of drug legislation and supply was among the pledges made in a Memorandum of Understanding (MoU) signed on 15 July by the EMCDDA and Eurojust⁽¹⁾. At an official ceremony in The Hague, EMCDDA Director Wolfgang Götz and President of Eurojust Michèle Coninx reaffirmed their agencies' commitment to strengthening action against illicit drugs and related crime in the EU.

The MoU focuses on drug-related matters relevant to judicial cooperation — including drug supply, drug supply reduction and legislation — and will be implemented through joint activities, decided on the basis of the partners' respective work programmes.

The MoU will enhance the organisations' already productive cooperation

The MoU will enhance the organisations' already productive cooperation, helping them work together to collect, analyse and disseminate relevant data; pool technical expertise; establish joint projects; and ensure the optimal use of resources and information. The EMCDDA and Eurojust have worked closely together since 2007 and share a common interest in the enforcement and implementation of drug trafficking laws across Europe.

⁽¹⁾ For more, see news release No 7/2014 at www.emcdda.europa.eu/news/2014/7

For more on the EU's Justice and Home Affairs agencies, see: <http://bookshop.europa.eu/en/the-eu-justice-and-home-affairs-agencies-pbBZ0414283/>

ADDICTION CONFERENCE 2015

First European conference on addictive behaviours and dependencies

Four prominent entities from the field of addictions are joining forces to put on the First European conference on addictive behaviours and dependencies. The pioneering event, to be held in Lisbon from 23–25 September 2015, will be organised by the Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies⁽¹⁾, in collaboration with the scientific journal *Addiction*; the International Society of Addiction Journal Editors (ISAJE); and the EMCDDA.

Through plenary sessions, multidisciplinary workshops and discussion fora, the conference will showcase the latest developments in European addiction science and explore the topics of illicit drugs, alcohol, tobacco, gambling and other addictive behaviours. The event will draw on expertise from a variety of disciplines including: epidemiology, policy research,

clinical research, social sciences, behavioural science and human psychopharmacology.

Leading international and European addiction experts will deliver keynote speeches and explore issues of topical interest. The conference is designed to be a major networking event and facilities will be available to foster interaction and specialist meetings in its margins. A call for abstracts will be published in the autumn⁽²⁾.

Maria Moreira

⁽¹⁾ Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências (SICAD) www.sicad.pt

⁽²⁾ www.emcdda.europa.eu/events/2015/addiction-conference

SPOTLIGHT



European drugs summer school

The University Institute of Lisbon (ISCTE–IUL) and the EMCDDA joined forces from 30 June to 11 July to hold the third European drugs summer school (EDSS): ‘Illicit drugs in Europe: demand, supply and public policies’. The summer school brought to Lisbon 28 academics and professionals from Europe, Latin America, the US and Asia, four of whom received scholarships from ISCTE–IUL and the International Programme of the US National Institute on Drug Abuse.

A new line-up of keynote speakers addressed the students, including: Professor Robert West and Professor Susan Michie (University College London); Professor Henrique Barros (University of Porto); Frank Francis (MAOC-N) and Björn Hibell (ESPAD).

New this year were video lectures with civil society representatives from Greece and the Netherlands. In addition, two study visits were arranged, offering students the opportunity to learn more about Portuguese drug policy. The first brought them to one of Portugal’s Commissions for the Dissuasion of Drug Addiction, where students were addressed by Portuguese national drug coordinator, João Goulão. The second was to Lisbon’s central prison where students were invited to visit the drug-free wing. The course ended with a debate on drug policies after the economic recession under the direction of Professor Meni Malliori (University of Athens). Via evaluation questionnaires, the students expressed their high satisfaction with the course, particularly its comprehensive and interactive approach.

Renate Hochwieser and Maria Moreira

REITOX

Serbia launches first GPS survey with EMCDDA support

In June 2014, the Institute of Public Health of Serbia released the results of the country’s first general population survey (GPS) on psychoactive substance use in line with EMCDDA methodology ⁽¹⁾. The *National survey on lifestyles of citizens in Serbia 2014 — Key findings on substance use and gambling* provides representative data on the prevalence and patterns of substance use among the adult population (18–64 years) at national and regional level. The survey was conducted according to EMCDDA criteria, where possible, with additional questions on gambling, mental health and alcohol ⁽²⁾. It was carried out between January and March via over 5 000 face-to-face interviews.

According to the survey findings, the lifetime prevalence of illicit drug use among all adults (18–64 years) in Serbia was much lower than the European average: 8.0 % compared with 23.9 % ⁽³⁾. The survey found cannabis to be the most frequently used illegal drug in the population, with lifetime use reported by 7.7 % of the respondents (European average: 21.7 %). Among young adults (18–34 years), last-year cannabis use

was reported by 3.4 % of respondents (European average: 11.2 %). Almost three-quarters of the respondents (72.2 %) reported to have consumed alcohol in the last year, and over a third (36.4 %) said they were daily tobacco smokers. Almost one-quarter (22.4 %) reported to have used sedatives or hypnotics in the last year; 14.6 % in the last month.

A crucial first step to monitoring substance use in Serbia

The survey represents a crucial first step to monitoring substance use among adults in Serbia and to providing comparable national data in the European context.

Biljana Kilibarda, IPA 4 correspondent, Serbia

⁽¹⁾ The survey was financed by the EMCDDA through the IPA 4 project: www.emcdda.europa.eu/about/partners/cc

⁽²⁾ See Chapter 2 for survey methodology.

⁽³⁾ Weighted European averages from the EMCDDA, based on adults 15–64 years.

NEW PSYCHOACTIVE SUBSTANCES

Upcoming risk assessment

An extended EMCDDA Scientific Committee will meet in Lisbon on 16 September and undertake the risk assessment of a new psychoactive substance currently raising health concerns in Europe. The substance in question, the stimulant drug 4,4’-DMAR, is the fifth drug to be risk assessed this year. Also under scrutiny will be the synthetic opioid MT-45 ⁽¹⁾.

In April 2014, the Committee risk-assessed four potent and harmful new substances: 25I-NBOMe, AH-7921, MDPV and methoxetamine ⁽²⁾.

Ana Gallegos and Rachel Christie

⁽¹⁾ www.emcdda.europa.eu/publications/joint-reports

⁽²⁾ www.emcdda.europa.eu/publications/risk-assessments

Latest EMCDDA–Europol report on NPS

The EMCDDA released in July the *EMCDDA–Europol 2013 Annual report on the implementation of Council Decision 2005/387/JHA*, in which it outlines the achievements of Europe’s three-step legal mechanism to monitor new drugs in the EU ⁽¹⁾.

The year 2013 saw the sustained growth of the market in NPS within the EU, with a total of 81 substances reported for the first time through the EWS (up from 74 in 2012 and 49 in 2011). Of particular concern from a public health perspective are the new synthetic opioids that have been identified on the drug market in the past two years.

⁽¹⁾ For more, see www.emcdda.europa.eu/publications/implementation-reports/2013

PRODUCTS AND SERVICES

EVENTS



General Report of Activities 2013

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 2013 edition 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 and is a useful resource for all those seeking comprehensive information on the EMCDDA’s work.

Available in English at: www.emcdda.europa.eu/publications/gra/2013



Second EMDAS graduation ceremony at EMCDDA

The second group of 25 students graduating from the European Masters in Drug and Alcohol Studies (EMDAS), will receive their diplomas at a ceremony at the EMCDDA on 30 September. EMDAS, a project initially funded through the EC-Lifelong Learning Programme, involves three European universities: Århus (Denmark); Universidad Miguel Hernández de Elche (Spain); and Piemonte Orientale ‘A. Avogardo’ (Italy).

The first graduation ceremony took place in 2012 at the EMCDDA which, together with the European Centre for Social Welfare Policy and Research, was involved in shaping the multidisciplinary programme. The graduation will be held at the end of a two-day meeting during which students will discuss the course and their projects. The call for applications for the third EMDAS (2014–16) is open.

For more, see <http://emdas.org> and http://emdas.it/informazioni_en.html

First European conference on hepatitis C and drug use

The first European conference on this topic, being held from 23–24 October in Berlin, will bring together key actors on HCV, to develop pathways for effective health responses and to open treatment for those who need it. One of the highlights at the conference will be the presentation of the ‘Berlin Declaration’, a call to national and European policymakers to ensure better access and quality of hepatitis treatment for the most marginalised groups and individuals. The EMCDDA sits on the steering committee of this event.

For more, see <http://conference.hepatitis-c-initiative.eu/index.html>



A year in review 2013

A year in review 2013 conveys the essence of the latest *General Report of Activities*. This four-page publication is designed to provide interested audiences with highlights 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/gra/2013-highlights



Drugs and driving

This latest edition in the agency’s Insights series updates an earlier EMCDDA literature review from 2008. The report, released on 25 June, describes methodological issues; presents the results of prevalence surveys among drivers; provides an overview of findings from major epidemiological surveys; and gathers evidence from experimental and field studies on the relationship between drug use, driving impairment and traffic accidents (see also p. 2).

Available in English at: www.emcdda.europa.eu/publications/insights/2014/drugs-and-driving



Residential treatment for drug use in Europe

In most European countries today, residential treatment programmes are an essential element in the range of treatment and rehabilitation options available to drug users. A new EMCDDA Paper on the topic, released in July, provides the latest Europe-wide overview of the history and availability of this type of treatment within wider national drug treatment systems (see also p. 3).

Available in English at: www.emcdda.europa.eu/publications/emcdda-papers/residential-treatment

EMCDDA meetings

8–12 September:	Reitox Academy training course for European Neighbourhood Policy (ENP) beneficiary countries on 'Contemporary approaches in drug monitoring', Prague.
16–18 September:	EMCDDA Scientific Committee and risk assessment meeting, Lisbon.
23–26 September:	EMCDDA expert meetings on the Treatment demand indicator (TDI) and Problem drug use indicator (PDU), Lisbon.
29–30 September:	EMDAS graduation ceremony, Lisbon.
14–17 October:	EMCDDA expert meetings on the Drug-related deaths indicator (DRD) and the Drug-related infectious diseases indicator (DRID), Lisbon.

External meetings

29–30 September:	Eurojust strategic meeting on drug trafficking, The Hague.
29–30 September:	11 th policy consultative group meeting, Paris Pact, UNODC, Vienna.
29 September–1 October:	International seminar on drug policy and public health, WHO, Istanbul.
30 September–2 October:	Sucht 2014 (http://www.deutschersuchtkongress.de), Berlin.
2–3 October:	WHO/Health in Prison Programme (HIPP) conference, Portlaoise.

EU meetings

10–11 September:	Horizontal working party on drugs, Council of the EU, Brussels.
25 September:	Horizontal working party on drugs, Council of the EU, Brussels.
8–9 October:	Horizontal working party on drugs and EU–CELAC meeting, Brussels.
4–6 November:	Horizontal working party on drugs, EU–US meeting, Dublin Group, Brussels.
13–14 November:	National drug coordinators' meeting, Rome.

Management Board gives seal of approval on cooperation with Armenia

The EMCDDA Management Board, meeting in Lisbon from 3–4 July, gave its seal of approval on a Memorandum of Understanding to be signed between the agency and the National Security Council of the Republic of Armenia later this year. The Board approved the draft agreement and mandated the Director to proceed with its signature.

The Management Board also gave a favourable opinion on the EMCDDA's 2013 final accounts, congratulating the Director and his staff on last year's excellent budget execution. Additionally, the Board welcomed an update given on the impact of reducing the 2014 financing of the Reitox national focal points and the adaptation of the Reitox national reporting package. Also discussed were challenges faced by the EMCDDA in issuing rapid alerts and risk assessments on new psychoactive substances.

Finally, an exchange of views was held on the preliminary media coverage on the *2014 European Drug Report: Trends and developments* and the agency's cooperation with the European School Survey Project on Alcohol and other Drugs (ESPAD).

The Board also reconfirmed its rules of procedure for appointing EMCDDA Directors, ahead of the election of a new Director at its next meeting in December.

Monika Blum

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and ecstasy should remain banned, with the results stable since the last survey (96 %, 93 % and 91 % saying so, respectively). Opinions about cannabis appear more divided. Over half (53 %) of the respondents (59 % in 2011) still support cannabis prohibition, while 45 % think it should be regulated (34 % in 2011). Just over one-third (35 %) of those surveyed felt that new substances should be banned 'under any circumstances' (34 % in 2011), while the portion of those considering they should be banned 'only if they pose a risk to health' remained stable at 47 %.

Released alongside the survey results is a report on *New psychoactive substances: projects, studies and research funded by the European Commission* ⁽⁴⁾.

⁽⁴⁾ http://ec.europa.eu/justice/anti-drugs/files/nps_report_2014_en.pdf

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EMCDDA, Praça Europa 1, Cais do Sodré, 1249-289 Lisbon, Portugal
 Tel. (351) 211 21 02 00 | Fax (351) 211 21 03 80
info@emcdda.europa.eu | emcdda.europa.eu
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