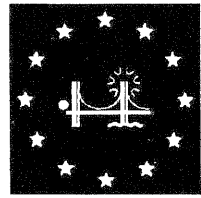


EUROPEAN COMMISSION
Secretariat General - C.5

*Coordination of the Fight against
Drugs and Emergency Disaster
Relief for Member States*

Joint Seminar



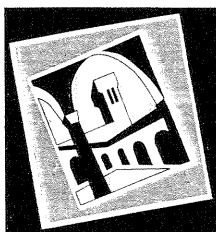
EMCDDA

*European Monitoring
Center for Drugs
and Drug Addiction*

Drugs

Research Related Initiatives
in the European Union

SYNTHESIS REPORT



THE ROBERT SCHUMAN CENTRE

EUROPEAN UNIVERSITY INSTITUTE
Florence, 13 and 14 December 1996

TABLE OF CONTENTS

GENERAL INTRODUCTION	2
PREFACE	7
I. Introduction: Objective of Report and Methods Used	8
I.1 Objective of the Report.....	8
I.2 Study Methods Used and Some Methodological Remarks on the Country Reports.....	9
Table 1: Sources and Methods Used for Data-Gathering	10
Table 2: A Research-Question-Based Classification of Drug-Related Research.....	13
Table 3: Principal Research Questions on Drugs and their Corresponding Research Disciplines	14
II. Summary of the Research Situation in the Member States	16
II.1 Developments in Drug Research	16
Table 4: General Developments in Drug Research	16
II.2 State of Research.....	20
Table 5: Types of Drug Research Carried Out, National and Cross- National Research Needs	22
Table 6: Incidence of Research Areas Carried Out	31
II.3 Funding Mechanisms for Drug Research.....	33
Table 7: Funding Mechanisms for Drug Research	33
II.4 Structures for Information Exchange between Policy-Makers and Researchers and among Researchers	38
Table 8: Information Exchange Mechanisms and National Research Information Sources in Drug Research.....	38
II.5 Cross-Border Drug Research.....	42
Table 9: Networks of Cross-Border Drug Research.....	43
III. Summary of Research Needs	45
III.1 National and Cross-National Needs for Research	45
Table 10: Drug Research Needs	47
III.2 Needs for Research Support Mechanisms	51
Table 11: Needs for Research Support Mechanisms.....	51
IV. Summary of the Findings from a European Perspective	55
ANNEX 1: List of Authors and Titles of Reports	59
ANNEX 2: Copy of the Questionnaire for Information-Gathering	61
GENERAL CONCLUSIONS.....	63

GENERAL INTRODUCTION

FOREWORD

by Mr Francesco Milner

EC Head of Drugs Coordination Unit, Brussels

It was with great pleasure that this Academic Seminar on "Drug research related initiatives in the European Union" of 13 and 14 December 1996, could be prepared with a view to seeing it conducted under the aegis of the Robert Schuman Centre of the European University Institute. Throughout the years, the latter has built up a high-standing reputation as an academic think-tank for a large variety of European policy matters. With the help of the template of the European Community's history, which we are reminded of by the heritage of Robert Schuman's declaration, its input and guidance have been of major value in bringing nurture and light to some prospective thinking throughout the tentacular area of the global phenomenon of drugs, in connection with the almost infinite universe of Research & Development.

The substance for the debate has been prepared with the direct implication of the "Reitox Focal Points", i.e. through the inspiration drawn as well from the "nodal assett" that the Reitox living network constitutes for the operation of the recently-created Lisbon-based European Community agency, the European Monitoring Center on Drugs and Drugs Addiction (EMCDDA). Given their pivotal role in the support that the EMCDDA is called upon to provide for the EU policies to combat drugs, the Reitox Focal Points are set at the crux of the rising organisational outfit which is now at hand in the EU context. The Expert papers which were received by the Commission and the EMCDDA as a preparation to this Seminar, have demonstrated the Reitox vocation to be considered as an invaluable source of inspiration. Thanks to the outstandingly well conceived working summary of those reports prepared by Dr. Kenis, the material thus provided, collected and analysed served as a most fruitful basis for discussion in the course of this Seminar's investigation into the future of R & D in the sphere of drugs. What a challenge for tomorrow's history of "Western reason"! What a far-reaching scope for reflexion and what a provocative ground for "choice", at a time when global challenges and global responses arise more and more in threatening and composing the "problems" to be faced by our societies, in Europe and beyond!

The European Community Research Council adopted, in early December 1996 (for the first time in history!), conclusions on the role of research in the fight against drugs. The European Council, which met on 13 and 14 December in Dublin, confirmed the priority which this field of action should be given with regard to the overall implementation of the EU plan 95-99 to fight against drugs. We can therefore count on the prospect of concrete action being fostered speedily in the search for a better future. "Inventing tomorrow" can indeed be found at the heart of the whole of the human venture; and it is precisely under the aegis of this fascinating, longlasting battle between past and future that the European Commission has decided to ignite, earlier this year, the preparation for the new EC 5th R & D framework programme, which will carry Europe into the 3rd millenium.

It is notably with regard to this hopefully far brighter dawn for our children that I feel confident that the output of this Seminar will contribute to creating synergies and to maximizing the potential benefits from drug-related research for the life of the European citizen.

May Europe's pugnacious "daimon" help the readers through the wisdom of the Poet : ***"Tout est drogue à celui qui choisit pour y vivre de l'autre côté"***.

FOREWORD

by Mr. Georges Estievenart

Director of the European Observatory on Drugs and Drug Addiction

It is with pleasure that I present the work and conclusions of the academic seminar on the Research Initiatives Regarding Drugs in the European Union, which was jointly organised by the Drugs co-ordination unit of the European Commission and the European Observatory on Drugs and Drug Addiction (OEDT), with the participation of Directorate General XII of the Commission. I would like to again extend my warmest thanks to Mr. Fahy and to Dr. Vloemans, representing the Irish Presidency and the Netherlands Presidency of the Council, respectively, for their invaluable contributions, and to express my gratitude to Professor Uchtenhagen and Dr. Derks, the President and Vice-President of COST A6, for bringing to this seminar their rich experience in evaluating the politics of the war against drugs.

I also would like to express my thanks in particular, to the director of the Robert Schuman Centre of the European University Institute in Florence, Professor Yves Mény, who willingly accepted to host this seminar at the Institute. His warm hospitality and his constant support for the work of the European Observatory on Drugs and Drug Addiction confirmed the potential of a growing contribution of the Robert Schuman Centre to the promotion and appraisal of research in the social sciences in the field of drugs. And it is at the Institute, I should remind you, that was launched in 1993 the OEDT and of the Global Action Plan of the European Union in matters concerning the war against drugs.¹

I wish to remark upon my satisfaction with the work accomplished by the 15 national centres of REITOX, which have each supplied a report describing the state, in their respective country, of the research in drug-related issues, as well as an estimate of the needs in this area, the specific Community level which takes care of the interface with the OEDT, under the auspices of the Commission, being considered through the Drug Co-ordination Unit of the Secretary General. On this occasion, REITOX plainly demonstrated the efficiency of the functioning of this network, whose partnership structure is particularly suited to respond in a rapid and co-ordinated

¹ G. Estievenart (ed.), *Policies and Strategies to Combat Drugs in Europe*. European University Institute, Dordrecht/London, Martinus Nijhoff Publishers/Kluwer Academic Publishers (1995).

fashion - under the aegis of the Lisbon Centre - to a high-level urgent request, of a European institution, or emanating from one or more Member States of the Union. It is precisely this capacity to work in co-operation and partnership, which makes REITOX a veritable network, at both the European and Member-state level, which the national Centres have undertaken to structure and develop in the framework of the OEDT.

The reports submitted by the REITOX Centres forcefully underline the necessity of true logistic support, coherent and durable, for research in issues regarding drugs and drug addiction, at the level of the European Union. This need relates to not only the financial methods and the structure of the co-ordination of the research, but also to the accessibility and the transparency of information regarding the implementation and the financing of projects, as well as the appraisal and diffusion of the results, all accompanying tasks for which the OEDT, because of its mission, is called to play a major role.

I would lastly thank Dr. Kenis, whose work on the synthesis merits high praise. He has notably succeeded, with remarkable efficacy and constant attention to quality, to bring clarity and legibility to a complex (and occasionally opaque) group of scattered programmes and research activities. Accordingly, he is hereby greatly thanked for his contribution.

In the way of provisory conclusions, I wish that this exemplary work, the result of a great number of efforts, find its way to the needed applications, both in issues of orientation of research as well as in the consolidation of structures which are operating therein. The OEDT, for its part, will take well into account the conclusions and the points raised by the Academic Seminar in Florence and from today, in the preparatory proposals for the adoption of its triennial Second Work Programme (1998-2000) in synergy, each time it is necessary and possible, with the research framework programmes of the European Community.

**Summary Report of the Papers
"National Drug Research Situation and
Identification of Research Needs"**

Working Document

presented at the Joint EC-EMCDDA Academic Seminar on

Drug Research Related Initiatives in the European Union

at the

Robert Schuman Centre, European University Institute, Florence

13-14 December 1996

Report for the

Drugs Coordination Unit of the Secretariat-General (SG/C/5) & EMCDDA

Patrick Kenis

University of Constance, Germany

January 1997

PREFACE

The current document presents an analytic summary of the 16 reports which have been produced in the context of the joint EU-EMCDDA initiative "National Drug Research Situation and Identification of Research Needs". The document has a purely academic character in that it intends to analytically summarise the information provided in the different reports. It intentionally abstains from making any judgements or recommendations on research situations or research needs.

I would like to thank the authors of the reports for their co-operation and for providing the most valuable information on which this report is based.

I. Introduction: Objective of Report and Methods Used

I.1 Objective of the Report

The present report is a complement to the report "Analytic Inventory of Community Research Programmes into Illicit Drugs" (June 1996)². As a result of a meeting (19 July 1996) organised by SG/C/5 in collaboration with DGXII and EMCDDA, it was decided to complement this report with an overview of the drug research situation in the Member States and to examine scientific priorities and specific needs. It was understood that only on such a broad basis could the objectives set out above be properly discussed.

Consequently, the REITOX focal points have been asked by the EC Drugs Coordination Unit and the EMCDDA to contribute national reports on the "National Drug Research Situation and Identification of Research Needs". In addition, the Chair of COST A6 was asked to contribute a report on the European (i.e. cross-national) research situation and its needs³. The present report provides an analytic summary of these 16 reports.

These different reports as well as the present summary report are envisaged to be a valuable source of information and will serve as strategic background information throughout the process of contributing to, in cooperation with DG XII, the strategic developments of the Fifth Framework Programme in the right direction.

The present report was presented at the academic seminar on "Drug Research Related Initiatives in the European Union" (at the Robert Schuman Centre, European University Institute, Florence, 13-14 December 1996). Numerous comments and modifications from the authors of the different reports were received during and after the seminar. These have been considered in this final version.

² The objective of this report was to analyse the existing Community research programmes regarding the possibility of funding research into illicit drugs, to identify the research areas which have not been covered by the existing programmes until now, and to formulate suggestions as to the possible establishment of an integrated research action on drugs.

³ COST A6 ("Evaluation of Action against Drug Abuse in Europe") can be considered as one of the main drug research networks organised at the European level. It focuses on evaluation in various drug-related areas (prevention, treatment, crime, instrument development and policy). COST A6 is considered to have a good overview and knowledge of the different types of drug-related research carried out in the various EU countries at cross-border level and is in a position to disclose the existing research needs in the field of drugs.

I.2 Study Methods Used and Some Methodological Remarks on the Country Reports

This report is a studious summary of the 15 Reports on the "National Drug Research Situation and Identification of Research Needs" of all Member States of the European Union as well as of a report by the Chair of COST A6. Some methodological background on the development of the national reports as well as on the development of this summary report is outlined below.

a). Methodological background of the development of the national reports

- The national reports as well as the COST A6 report were produced at the request of the SG/C/5 in collaboration with EMCDDA. A questionnaire was developed addressing specific questions to be addressed in the reports (see ANNEX 2 for a copy of the questionnaire). The national experts were identified by the REITOX Focal Points (see ANNEX 1 for a list of the experts). Appointed experts have a good overview and sound knowledge of the different types of drug-related research (sociological, criminological, economic, epidemiological, policy, etc.) which have been carried out in their countries in recent years.
- The time allotted to produce the reports was rather limited⁴. Experts nevertheless generally provided a good synopsis of the research situation and research needs.
- It should also be mentioned that the different experts have chosen different strategies to collect the data and information for their reports. Since this can be expected to influence their findings to some degree, Table 1 specifies the sources and methods used. Important methodological remarks made in the country reports are also mentioned here. The last column indicates whether the reports mention the titles of single research projects (in these cases there is a more accurate classification in Table 5, which gives an overview of the types of research carried out).

⁴ A letter was sent out on 25 July 1996 to the Heads of REITOX Focal Points in the 15 Member States as well as to the Chair of COST A6 in order to ask them for the name of an expert who would be in a position to write a report on the research situation and research needs. Response was requested by 26 August 1996. A letter was addressed to the experts with instructions on the issues to be dealt with in the report on 9 September 1996. Reports had to be ready by 24 October 1996.

Table 1: Sources and Methods Used for Data-gathering

	Sources of Information for Review	Methodological Remarks	List of Research Projects
A	No information.		X
B	Postal enquête and communication with experts and governmental departments. Existing bibliographic inventories.	Research policy has been distributed among the Communities, the Regions and the Federal Government since 1988.	
D	Existing reviews and literature review.	Report mainly based on activities at the national level. It is sometimes considered difficult to distinguish between research on illicit and licit drugs.	X
DK	Postal enquête.	Research on the technical and biological aspects of drugs are not covered by the report.	X
E	Bibliometric indicators. Literature review. Data base of national research agencies.	Information is given on the institutional context of drug research rather than on the actual research carried out. A comprehensive inventory of the research carried out in the last years is available on request.	
F	No information. The recent Call for Research Proposals (MILDT/INSERM) is included, which specifies research needs.	No specific information on the drug research situation (comprehensive inventories are available on request).	
GB	Postal enquête to experts and Governmental Departments.		X
GR	Annotated bibliographic database (REITOX) and communication with different experts.		
I	No information.	Needs at the European level are considered to be similar to those on the national level.	
IRL	No information.		X
L	Interviews with representatives from 24 different organisations.		X

Summary Report "National Drug Research Situation and Research Needs"

NL	Interviews with researchers, existing inventories of drug research and a recent report (as a source for research needs).	Research is also classified by analytical categories ("Understanding", "Demand Reduction" and "Policy"). No distinction has been made between the needs of researchers and those of policy-makers since they are the same due to mechanisms of joint priority setting.	X
P	Postal enquête to and interviews with researchers (8) and policy-makers (8).		X
SF	Systematic analysis of information sources and lists of references.		X
SV	Systematic analysis of information sources (e.g. "Survey in Alcohol Research" which was commissioned by the Government).		
European (contributed by COSTA6)	Input from the COST A6 network (experts from 15 European countries).	Report covers research on a European (cross-national) level exclusively.	X

b). Methodological remarks on the development of the summary report

- Structure of the Report

The structure of the present summary report will follow the same structure as the different country reports, which were based on the structure set out in the questionnaire (see above). The next part (Part II) will deal with the state of drug research and its developments, the funding mechanisms, the coordination mechanism and participation in cross-border networks. Part III will discuss and summarise the general research needs. Part IV will look at the findings from a European point of view.

- Classification of the Research

One of the main problems in summarising and comparing the 16 different reports has been that every single report uses a different way and different categories in classifying drug-related research. Rather than using one of these classification systems and re-arranging the information of the other countries in such a given system, it has been decided to develop a new classification system which allows every type of information provided in all the different reports to be included without having to simplify the research topics by classifying them in broad categories.

In contrast to most common classification systems on drug research which are based on a classification by research disciplines, the choice was made to develop a classification system which is based on research questions. The development of this classification is the result of a bottom-up approach grouping the more than 230 different research questions mentioned throughout the different reports in eleven principal categories. Table 5 in Part II lists the specific research topics which come under these principal research questions. Table 2 presents the main categories of the proposed classification system.

Table 2: A Research-Question-Based Classification of Drug-Related Research⁵

	Principal Research Problem
1	Prevalence, incidence and patterns of drug use
2	Risk factors and effects of the use of drugs and dependency
3	Aetiology of drugs (Why do people take drugs?)
4	Primary prevention of drug use
5	Treatment and treatment services for drug users
6	Health and social care services for drug users (other than treatment)
7	Drug policies and drug control strategies
8	Social, economic and other consequences of drug use(rs)
9	Supply of drugs (production, trafficking)
10	Detection of drugs and drug profiling
11	Knowledge, attitudes towards and opinions on drugs (other than the evaluation of primary prevention programmes)

The use of such a problem-oriented instead of a discipline-oriented classification system has several advantages in the framework of the present study:

In most cases the research in the reports—although often using discipline-oriented principal categories—was presented by specifying the research question and the dependent and/or independent variables central to the research respectively. Apart from this more pragmatic reason, there are a number of conceptual advantages in using such a classification system. First, to a certain extent, it can avoid mixing-up research problems and research questions, research disciplines and policy options. Secondly, such a classification system clearly illustrates that the drug problem is a problem which has many different dimensions and, consequently, cannot be completely solved by one best approach, solution or discipline. Thirdly, such a classification system gives clear and concrete indications as to the possibilities and needs for interdisciplinary research (a request to be found in many reports) and might in fact stimulate such research. In Table 3 the principal research questions are listed

⁵ In this table (as in Table 3 and Table 5), categories should always be read with the preamble "Research on ...". For reasons of style this preamble has been omitted in the written formulation.

with respect to the contribution different disciplines can make to its investigation. In this table it becomes clear which disciplines should collaborate to solve which type of problem.

Table 3: Principal Research Questions on Drugs and their Corresponding Research Disciplines

	Principal Research Problem	Main Research Disciplines
1	Prevalence, incidence and patterns of drug use	<ul style="list-style-type: none"> - Epidemiology - Sociology (ethnography) - History - Ethics
2	Risk factors and effects of the use of drugs and dependency	<ul style="list-style-type: none"> - Epidemiology - Biomedical Research - Psychology - Clinical Research - Toxicological Research - Sociology - Socio-Economic Research
3	Aetiology of drugs (Why do people take drugs?)	<ul style="list-style-type: none"> - Clinical Research - Biomedical Research - Psychology - Pharmacological Research - Sociology - Socio-Economic Research - Ethics
4	Primary prevention of drug use	<ul style="list-style-type: none"> - Epidemiology - Sociology - Psychology - Organisational Research
5	Treatment and treatment services for drug users	<ul style="list-style-type: none"> - Clinical Research - Biomedical Research - Psychology - Pharmacological Research - Socio-economic Research - Organisational Research - Epidemiology
6	Health and social care service for drug users (other than treatment)	<ul style="list-style-type: none"> - Public-Health Research - Socio-Economic Research - Clinical Research - Psychology - Organisational Research

Summary Report "National Drug Research Situation and Research Needs"

7	Drug policies and drug control strategies	<ul style="list-style-type: none"> - Policy Science - Epidemiology - Socio-Economic research - Legal Studies - History - Ethics
8	Social, economic and other consequences of drug use(rs)	<ul style="list-style-type: none"> - Socio-Economic Research - Criminology - Sociology - Legal Studies - Economics
9	Supply of drugs (production, trafficking)	<ul style="list-style-type: none"> - Epidemiology - Legal Studies - Criminology - Sociology - Economics - History
10	Detection of drugs and drug profiling	<ul style="list-style-type: none"> - Physics - Chemistry - Engineering - Biology
11	Knowledge, attitudes towards and opinions on drugs (other than the evaluation of primary prevention programmes)	<ul style="list-style-type: none"> - Social Research - History - Sociology

II. Summary of the Research Situation in the Member States

I will begin with an overview of the traditions and trends in types of drug research. Secondly, an outline of the type of research into illicit drugs which has been reported in the 16 reports will be provided and discussed. An overview of the funding into research on illicit drugs will then follow. Various coordination mechanisms in the field of drug research will then be presented, with participation in cross-national research networks as the final topic of discussion in this section.

II.1 Developments in Drug Research

Table 4 shows the more general trends in drug research since the 1970s and some more specific trends in the last years.

Table 4: General Developments in Drug Research

	Research in the 1970s	Research in the 1980s	General trends in research in the 1990s	Specific trends in research in the 1990s
A	No information.	Epidemiological research and development of instruments for epidemiological research.	Narrowing the focus on clinical psychology, research into prevention and harm-reduction.	See Table 5.
B	No information.	No information.	<ul style="list-style-type: none"> - An increase and broadening of the research ("why do people take drugs") - Research not limited to illicit drugs - Applying a public health point of view. 	<ul style="list-style-type: none"> - Broad and local epidemiological and sociological surveys - New (sub)-populations considered using new methodologies - Development of an integrated client registration system.
D	No information.	Therapy research and research on treatment service systems.	<ul style="list-style-type: none"> - Increase in basic research (especially neurobiological) - Epidemiology - Research on primary prevention and early intervention - A large research funding programme was implemented by the Federal Ministry for Education and Research in 1994/1995 (19 MECU). 	It is expected that research supply reduction and drug policy will become increasingly important in the future.

Summary Report "National Drug Research Situation and Research Needs"

Continued ...	Research in the 1970s	Research in the 1980s	General trends in research in the 1990s	Specific trends in research in the 1990s
DK	Studies on the treatment of drug addicts.	<ul style="list-style-type: none"> - Studies on methadone maintenance and its influence on crime - Studying addicts and patterns of use. 	<ul style="list-style-type: none"> - Research into treatment outcome and treatment processes - Evaluation of policies - Drug-related deaths - Pharmacological-epidemiological research - Drug use prevalence. 	<ul style="list-style-type: none"> - Drug-markets - Treatment evaluation - Law enforcement strategies - Methods of prevention (campaigns) - Drug policies.
E		Little research on drug addiction: mainly pharmacological aspects and opiate and alcohol consumption.	Substantial (qualitative and quantitative) increase in drug addiction research: mainly on heroin addiction and alcoholism. Mainly clinical-epidemiological research.	See Table 5.
F	No information.	No information.	The recent Call for Proposals requests interdisciplinary and practice oriented research.	No information.
G B	<ul style="list-style-type: none"> - From a clinical/psychological focus to including ethnographic and social research - Combining qualitative and quantitative research - Use of indicators. 	<ul style="list-style-type: none"> - Drug networks - Epidemiology - Local studies - Drug education - Family response - Drug-related crime - Law enforcement - Medical and allied research. 	General broadening of research: "Tackling Drugs Together".	<ul style="list-style-type: none"> - Drug users in a health perspective - Health service research - National population surveys - Prevention in a multi-sectorial perspective - Evaluation (or "Value for Money").
G R	Drug research is extremely scarce.	Take-off period: <ul style="list-style-type: none"> - Treatment - Surveys - The effects of marijuana use. 	Mainly epidemiological research.	See Table 5.
I		Important take-off of research because of the AIDS crisis (mainly epidemiological and clinical research).	<ul style="list-style-type: none"> - Psychological research (especially as a result of the use of "new drugs" by young people. - Supply reduction and organised crime. 	See Table 5.

Summary Report "National Drug Research Situation and Research Needs"

Continued ...	Research in the 1970s	Research in the 1980s	General trends in research in the 1990s	Specific trends in research in the 1990s
IRL	1960s: Examination of the extent and type of drug abuse. 1970s: illicit drugs were a social problem - Abstinence approaches.	- Drug abuse and the transmission of HIV. - Harm reduction approaches developed (demand reduction, treatment and rehabilitation).	- Long term opiate users. - Supply reduction (in the context of the Irish Presidency of the European Union a Science and Technology Against Drugs Programme has been set up).	- Analytical chemistry and detection - Pharmacology and biochemistry - Social science research - Socio-economic disadvantage and drug use
L	No information.		- Demand reduction - Epidemiology and prevention - Research methodology.	A National Centre for the Prevention of Drugs was created in 1995, which also has a research mandate.
NL	Nationally-oriented epidemiology studies.	Local and regional epidemiological studies.	Re-emergence of nationally-oriented studies in addition to local and regional studies in epidemiology.	- Developing methodologies in the area of comparative epidemiology - Effectiveness studies (on the basis of clinical trials).
P	No information.	No information.	No information.	Mainly research in treatment settings, in clinical populations and in specific substances (mainly heroin).
SF	Surveys on adolescent drug use.	Surveys on adolescent drug use, criminological and aetiological studies.	Scope of subject matters has recently widened.	See Table 5.
SV	1960s: - Epidemiological studies - Explaining the mechanisms underlying drug abuse (mainly sociological factors).	Inclusion of personality and biological/genetic factors underlying drug abuse.	- Treatment - Basic biomedical research - Integration of different factors (sociological, personality and biological/genetic) underlying drug abuse.	Effectiveness (or "Value for Money" research) and a trend towards research on how to make preventive measures effective is expected in the future.
European (contributed by COSTA6)	No information.	No information.	No information.	See Table 5.

Although there are considerable differences in the quantitative and qualitative development of drug research across the different countries, generally speaking it can be said that in most countries drug research started to take off in the 1970s or at the beginning of the 1980s. By now, it is considered by all Member States—by researchers as well as policy-makers—a very important and relevant topic. It has been particularly in recent years when drug research has experienced a rather dynamic development.

As far as the developments in the type of research are concerned, the trend, again speaking in most general terms, can be described in various periods (taking into account the fact that the different Member States find themselves on different positions on this developmental axis). The first period is that in which drug dependency is seen as a new phenomenon, which has to be measured and which is addressed by rather specific and particularistic answers (epidemiology, treatment and aetiology research). In a second period, research is broadened and drug dependency is revealed as being a complex phenomenon, i.e. on the level of the individual as well as on the level of society in general. In this period—contingent on the type and number of researchers who become interested in the topic—research covers preventive, treatment, ethnographic, medical, biological, social, psychological, law enforcement, etc. aspects of the phenomenon. The third phase can be best described as a consolidation period in which one returns to concentrating on the main questions and puzzles, e.g. Why do people take drugs? What types of drugs are taken, when, and by whom? This time, however, efforts are made to integrate the different and partly independently developed approaches from the second period. Moreover, some universal or common themes and agendas also develop, e.g. the importance of reliable descriptive data, the importance of reliable research methodologies, the importance of specifying standards for performance (effectiveness, efficiency, quality, conformity to human rights, etc.), the importance of taking the realities of policy-making and implementation, the importance of international collaboration, cross-national research, etc. into consideration. It is difficult to judge, on the basis of the information available in the different reports, which Member States are at which position on such a developmental scale. Although most Member States as well as the drug research field on a European level are clearly moving towards a consolidated research structure, most still seem to be rather distant from it.

A great number of factors for the increasing interest in drugs research have been named. The most important, and those which seem to be generally relevant for most

Member States are: first, the HIV/Aids crisis. Not only did HIV have a dreadful effect on the (intravenous) drug-using population but with it, other problems concerning all drug users became apparent (other health problems, social problems, etc.). Moreover, the extreme fluctuation in HIV and Aids rates among drug-injecting populations clearly illustrates that programmes and policies do make a difference, and should therefore be more closely studied. A second topic of interest relevant to all Member States is the fact that the use of drugs is generally considered as being on the increase, and the use of "new drugs" (amphetamines, ecstasy, LSD)—among young people in particular—has induced more research. A third point behind the trend would be that efficiency and effectiveness considerations ("value for money") also play an increasing role in the area of health and welfare; this has encouraged (evaluation) research into programmes preventing the use of drugs or programmes dealing with the personal or social consequences of the use of drugs. A fourth factor is that the EMCDDA has been named as an important facilitator not only for collecting data but also for building, structuring and facilitating collaboration in the national drug research field—especially in those countries which are generally speaking the less developed in the area of drug research.

II.2 State of Research

Table 5 gives a detailed overview of the research carried out in the different Member States as well as at the European level in the last ten years. The research is classified by principal research questions (see above) and specific research topics which result from an analysis of the reported research situation and research needs. Consequently, this table does not give a comprehensive classification of possible drug research but merely reflects the research carried out in the Member States of the European Union in the last ten years. The items mentioned in the footnotes following the specific research topics are a further specification of the research reported. These should not be regarded as a complete numeration of the research items theoretically possible, however.⁶

The authors of the papers were also asked to report on the types of research which are not focused upon. Since this information is in general almost identical to the

⁶ The reason why this type of presentation was chosen was that it allows one on the one hand to present the information of the reports as specifically as possible, while on the other hand, and at the same time, to point to some broader areas.

information given on the research needs⁷, it will not be considered in this report. Table 5 also indicates the research needs as reported by the different authors. These needs are indicated by "n" for national research needs and "l" for cross-border research needs. This part will concentrate on the presentation, summary and analysis of the research which has been carried out in the last ten years. The reported research needs will be described and analysed in Part III of the report.

⁷ As put by one of the experts: "... it seems difficult to conceptualise an absence, or partial absence, except in relation to a desire".

Table 5: Types of Drug Research Carried Out (X), National (■) and Cross-national (●) Research Needs

	Principal Research ▼ Questions and Topics	A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
1	Prevalence, incidence and patterns of drug-use	X	■	X	X ●			X				●	●	X ■	X ●	X ■	
(a)	Drug use survey in the general population (national or local)		■	X ■	■	X		X	X		X ■	■	X	X ■	X ●	X	
(b)	Regular drug use survey in the general population	■	■	X					X				X			X	
(c)	Drug use survey in the school population	X	X		X	X			X	X ■	X	X	X	X	X	X	X
(d)	Regular drug use survey in the school population	■	■			X			■		■		X	X	■	X	
(e)	Drug use survey/studies in other specific populations ⁸	X ■	X ■	■	X ■	X		X ●	X ■	X	X ■	X ■	X	X ■	X ■	X ■	X
(f)	Study of users in contact with services		X ■	X		X			X	X			X		X	X	
(g)	Study of the use of specific drugs and their relationships ⁹		■	X	■	X ■			■		X ●	X	X	■			
(h)	Study of the use of drugs in specific settings ¹⁰		■					■					X				
(i)	Characteristics/typologies of drug users ¹¹	X ■	X ■	X ■		X	■	X ■	X ■		X ●		X	X ■	X	X ■	
(j)	Development of methodological instruments ¹²	■	■ ●	X ■	■					■			■	X ■ ●	■	X	X ●

⁸ Adolescents, university or college students, conscripts, migrants, prisoners, pregnant women, persons with an additional psychiatric diagnosis, hidden populations, ...

⁹ Ecstasy, heroin, cannabis, ...

¹⁰ At school, at home, clubs, raves, ...

¹¹ Socio-economic, life style, drug-using careers, gender, as members of drug scenes and drug cultures, sexual behaviour, analysis of case histories, ...

¹² Scenario building, monitoring systems for early detection, indicators of drug related mortality, rapid assessment, "EuropASI", techniques for prevalence estimation, sentinental systems, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
2	Risk factors and effects of the use of drugs and dependency		■	X		X	■						X	X	■	■	X
(a)	Health risks ¹³	X	■	X	X	■	■	X	X	X	X	X	X	X	X	X	
(b)	Social risks ¹⁴	X	■	■	X			X					X	■	X		X
(c)	Psychological risks ¹⁵		■	X			■			X	X		X	X			
(d)	Psychiatric comorbidity ¹⁶	X	■	X	X			X	X	X			X	X		X	
(e)	Drug-related death	X	■	X	X	X		■				■	X	X	■	X	X
(f)	General risk factors of specific drugs ¹⁷		■	■	●	■			X								

¹³ HIV, AIDS, Hepatitis, intoxication, effect on the immune system, development of medicines, ...

¹⁴ Social exclusion, unemployment, imprisonment, income-generating behaviour, follow-up of drug-misusing offenders, analysis of criminal careers, ...

¹⁵ Neuro-psychological, (experimental) psychopathology, ...

¹⁶ Neuro-physiological, effect on the central nervous system, ...

¹⁷ Ecstasy, cannabis, "new drugs", cocaine, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
3	Aetiology of drugs (Why do people take drugs?)	●	■	X	■		■		■		X				X	X	
(a)	Psychological factors ¹⁸					X	■						X		X		
(b)	Environmental factors ¹⁹	X		X	X		■		■				X		X		
(c)	Biological factors ²⁰			X		X	■		X	X			X		X	X	
(d)	Genetic factors			X			■						X				
(e)	Social factors ²¹	●		X	■		■						X		X		

¹⁸ Including personality development, stress, ...

¹⁹ Mass media, prescribing practices, youth culture, alcohol use, ...

²⁰ Neuro-biological, physiological, effect on the single neuronal level, ...

²¹ Family, lack of social support, socio-economic factors, ...

Summary Report "National Drug Research Situation and Research Needs"

	A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
4 Primary prevention of drug use	■	■	X ■	■						■			X ■		●	
(a) General prevention programmes		■	X ■	■												
(b) Group-specific prevention ²²	●	■	X ■	■				X	■			X ■	■		X	X ●
(c) Prevention in specific settings ²³	●	■	X ■				X	X	■		X	X		X		X ●
(d) Methods of prevention ²⁴	X ■	■	X ■				X	X	■			X				●
(e) Evaluation of prevention programmes ²⁵	X ●	X ■	X ■	■ ●	■	■	X ■			■ ●	■	X ■	■	X ■	■	X ●
(f) Ethical aspects of prevention	●			■		■						X				●
(g) Development of methodological instruments	X ■ ●	X ■	■	■ ●				●		●	X	■ ●	■	■	■	X ●

²² Women, young people, risk groups, ...

²³ Schools, prisons, clubs, raves, by the police, ...

²⁴ Mass media campaigns, life skill training, early detection, peer-group prevention, community development approaches, youth work, prevention through professionals, mobile prevention, compared to health education, ...

²⁵ Needs assessment, process- and outcome evaluation, effectiveness, efficiency, contribution of communication research, barriers and obstacles, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
5	Treatment and treatment services for drug users	■	■	X ■ ●	■											●	
(a)	Treatment needs ²⁶		■	X ■	■					■	X		X	X ■		X	X ●
(b)	Group-specific treatment ²⁷		■	X							X		X		X		
(c)	Treatment in specific settings ²⁸			X	X	X		X					X				
(d)	Treatment utilisation ²⁹			X ■		X						■	X ■			■	●
(e)	Treatment methods ³⁰		■	X ■	X		■			■			X ■		X	X	X ●
(f)	Organisational aspects of treatment ³¹	■		X ■	X ■			X		■		X	X	■	X	X	X ●
(g)	Evaluation of treatment ³²	X ■	X ■	X ■	X ■	■	■	X	■ ●	■	●		X ■ ●	X ■	X ■	X	X ●
(h)	Development of methodological instruments ³³	X			●								X ■	X ■			X ●

- 26 Identification, individual needs, indication and prognosis, systems of allocation of clients to types of intervention, indication-setting by professionals, future scenarios, ...
- 27 Women, pregnant drug users, cocaine abusers, benzodiazepine abusers, ecstasy abusers, ...
- 28 Criminal justice, in the context of community penalties, in rural areas, in accident and emergency departments, ...
- 29 Accessibility, general, GP services, role of comorbid psychiatric symptoms, monitoring systems to detect early trends, ...
- 30 Drug free treatment, long term rehabilitation, low threshold, simple, individualised, outpatient care, non-professional approaches, psychotherapeutic, in-patient crisis intervention, relapse prevention, acute withdrawal, camp approach, pharmacological, combined approaches, free heroin, substitution, courses for young people to stop probenec use, detoxification, ...
- 31 Role of social workers, role of police, routines for treatment documentation, treatment network, organisational analysis, operational problems, waiting lists, use of software, implementation of substitution programmes, ...
- 32 Effectiveness, efficiency, quality [clients' or professionals' point of view], drop-out and relapse, acute withdrawal, monitoring of treated persons, clinical trials, comprehensive studies of clients in treatment, effect on crime, ...
- 33 General, validity and usefulness of the DSM-IV and ICD-10 diagnostic categories "abuse" and "dependence", description of services, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
6	Health and social care service for drug users (other than treatment)			■ ●				■	■								
(a)	Care needs ³⁴					X							X ■				
(b)	Care utilisation ³⁵					X					X ●	■	X ■				●
(c)	Care services ³⁶		■	X ■ ●	■	■			■		X	X	X ■				X
(d)	Organisational aspects of care services ³⁷			■ ●	■										X		●
(e)	Evaluation of care services ³⁸	●	■	■ ●	■	■	X	■	■		●		X	X			●

³⁴ Health and social, regional differences, differences among persons and groups, ...

³⁵ Accessibility, GP service, accident and emergency departments, ...

³⁶ HIV-prevention for drug-users, services for dual diagnosis addicts, self-help groups, job- and general rehabilitation, needle-exchange, drug-injecting services, street junkie projects, after-care services, medication, ...

³⁷ General, operational problems, barriers and obstacles hindering implementation, financing, co-operation between different organisations, ...

³⁸ Process- and outcome evaluation, effectiveness, efficiency, adverse effects, quality, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SE	SV	CO ST A6
7	Drug policies and drug control strategies																
(a)	European, national and local drug policies ³⁹		●	■	×		●	●	■	×	×		×		×	×	×
(b)	Specific drug policies ⁴⁰		■		×			×			×		×	■			×
(c)	History of drug policies	×	■		×								×			×	
(d)	Evaluation of drug policies ⁴¹	■	■		×	■	■	●			■		×	■	×		×
(e)	Drug control strategies ⁴²		■		×			×	■				×				×
(f)	Evaluation of control strategies ⁴³	×	■		×			×					×		■		●
(g)	Jurisdiction ⁴⁴		■	×	×								×		×	×	×

³⁹ Patterns of co-operation, use of epidemiological data, international influence, rhetoric versus practice, ...

⁴⁰ Legislation, school policies, drug control policy, decriminalisation, liberalisation of drug laws, narcotic law amendments, role of social services, (cross-border) law enforcement, prohibition, legalisation/normalisation, prevention, treatment, ...

⁴¹ Economic consequences, consequences for crime, consequences on drug-use, cost-effectiveness, consequences for human rights, ...

⁴² In open drug scenes, drug squads, police discretion, street level activities for disrupting drug dealing, ...

⁴³ Police performance, preventive effects, ethical aspects, ...

⁴⁴ Detention, alternative sanctions, penal practices, treatment as an alternative to imprisonment, ...

Summary Report "National Drug Research Situation and Research Needs"

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
8	Social, economic and other consequences of drug use(rs)																
(a)	Social consequences ⁴⁵		■	■ ●		■	■				X		X ●	■			
(b)	Economic consequences ⁴⁶			■ ●		■	■	●			●		X ●	■		X ■	
(c)	Institutional consequences ⁴⁷		■	■ ●	■						■		X			■	
(d)	Drug-related crime	X	X ●	X ■ ●	X	■		X		X	X ●		X	X	X ●	X	X
(e)	Drug-related traffic accidents		X ■	■ ●	■				X	■				■	■		

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
9	Supply of drugs (production, trafficking)																
(a)	Production of drugs ⁴⁸							■					X				X
(b)	Drug trafficking ⁴⁹	●	■		●	■		●		X			X ●		X ■		
(c)	Drug markets and their development	■		■	X ■			■ ●	■				X		X		X
(d)	Prescription drug leakage							X									
(e)	Drug tourism				■ ●								X				X ●

⁴⁵ On the family members, problem behaviour of drug users, nuisance in neighbourhoods, ...

⁴⁶ On the health care system, on the macro-economy, ...

⁴⁷ On the criminal justice system, on the health and welfare system, ...

⁴⁸ Geopolitics, space remote sensing, ...

⁴⁹ Smuggling, (cross-border) crime, criminal organisations, border control, investigation techniques, money laundering, ...

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
10	Detection of drugs and drug profiling																
(a)	Detection of drugs in individuals ⁵⁰			■ ●				X							X	X	
(b)	Physical detection ⁵¹			■ ●													
(c)	Drug profiling ⁵²			■ ●	X ■	X		X ■					X				
(d)	Development of methods for the analysis and detection of drugs ⁵³			■ ●	X											X	

		A	B	D	DK	E	F	GB	GR	I	IRL	L	NL	P	SF	SV	CO ST A6
11	Knowledge, attitudes towards and opinions on drugs⁵⁴																
(a)	Social attitudes/opinion survey on drugs ⁵⁵	X	X ■	X ■	X ●	X		X	X				X	X	X ●	X	
(b)	Presentation of drugs in the media		■		X ●									X	X		
(c)	Drugs discourses		■		X ●												

Four main conclusions can be drawn from Table 5.

- i) A *horizontal* reading of Table 5 reveals important differences in the type of research carried out. Table 6 summarises the research areas carried out as presented in Table 5.

⁵⁰ Hair, urine, ...

⁵¹ e.g. in vehicles, luggage

⁵² Purity, lot identities, therapeutic monitoring, synthetic pathways, ...

⁵³ Gas and liquid chromatography, mass spectography, x-ray radiography, nuclear techniques, space remote sensing, ...

⁵⁴ Other than evaluation of primary prevention programmes.

⁵⁵ And related issues, e.g. drug-related crime, ...

Table 6: Incidence of Research Areas Carried Out

High Incidence	Medium Incidence	Low Incidence
Prevalence, incidence and patterns of drug use		
Risk factors and effects of the use of drugs and dependency		
Biological factors HIV/Aids-related services Drug-related crime	Primary prevention of drug use	
	Treatment and treatment services for drug users	
	Drug policies and drug control strategies	
	<-----	Aetiology of drugs (Why do people take drugs?)
	<-----	Health and social care services for drug users
	<-----	Social, economic and other consequences of drug use(rs)
		Supply of drugs (production, trafficking)
		Detection of drugs and drug profiling
		Knowledge, attitudes towards and opinions on drugs

The above table also gives clear indications as to the most prominent research disciplines in existing drug research: epidemiology, medical and psychological research and, to a lesser extent, criminology.

- ii) A *vertical* reading of Table 5 shows, however, that significant differences exist between countries in the types of principal research questions and number of research topics they cover. None of the countries seem to deal extensively with all the research questions, although the degree to which countries cover only a few or almost all research questions varies a lot. Countries seem to only really concentrate on a selection of the eleven different research questions. There is also a variation in the coverage of research themes at the level of the research topics between the countries. Of those ten countries which provided a detailed description of the research carried out (see the last column in Table 1), three cover 20 or more research topics in Table 5 (D, GB and NL). It is interesting to see that European cross-national research is present in more than 20 research topics. Given the fact that this research is still much less frequent from a quantitative point of view than is research on a national level, this finding is an indication that European research transcends national traditions in that it is not particularly concentrated in specific areas.
- iii) In contrast to national research, cross-national research (as presented in the COST A6 column in Table 5) is not clustered around specific research areas but is rather widely distributed across the different research areas. This means that cross-national research seems not to follow a specific national pattern but has its own (probably European) logic.
- iv) Another indication for the extra dimension of cross-national research is the fact that in those areas where many countries engage in the same type of research, cross-national research does not automatically develop. This point, as well as the previous one, indicates that cross-national research is not only characterised by added value but also by additional necessary input or structures.

II.3 Funding Mechanisms for Drug Research

Table 7 reports on the funding mechanisms concerning drug research. The main funders, other relevant sources of funding, co-ordination of research funding and mechanisms for arriving at funding priorities are shown. The amount of annual spending on research has not been included since figures were missing or incomplete for most countries.

Table 7: Funding Mechanisms for Drug Research

	Main Sources of Funding	Other Sources of Funding	Co-ordination of Research Funding	Mechanisms for Arriving at Funding Priorities
A	Public government bodies; Ludwig-Boltzmann Gesellschaft; Local and regional public bodies.	General scientific research councils.	Control system avoiding double financing.	No information.
B	None for Belgium (drug research has a low priority on the political agenda) For the French part of Belgium: the "National Fund for Scientific Research".	On the national level: - Different (National and regional) Ministries (which are members of the Interministerial Conference on Drugs). - the Inter-departmental Working Group for Drug Research Different structures for the Flemish and French Community and the Region of Brussels (in general very limited funding) University funds have funded some epidemiological research.	Could be possible through the interministerial Conference on Drugs (17 national and regional Ministries including those responsible for research policy).	On the national level: - By each minister or by the Council of Ministers (advised by the Federal Council for Scientific Research) Different ways of arriving at funding priorities in the two Communities and the Region of Brussels.

Summary Report "National Drug Research Situation and Research Needs"

Continued ...	Main Sources of Funding	Other Sources of Funding	Co-ordination of Research Funding	Mechanisms for Arriving at Funding Priorities
D	<ul style="list-style-type: none"> - Federal Ministry for Education and Research (a large research funding programme was implemented, 1995: 3,8 MECU); - Federal Ministry of Health (1995: 8,9 MECU). 	<ul style="list-style-type: none"> - DFG (research council) - Federal Centre for Health Education - Federal Institute for Drugs and Medical Devices - Own budgets of research institutes (universities) - Third party funding. 	<ul style="list-style-type: none"> - Through working groups with members of the relevant governmental organisations. - Through a database (DAKORD), which was implemented for this purpose. 	Varying from purely scientific considerations (DFG) to purely political considerations (Federal Ministry of Health) or a mixture of both (federal Ministry for Education and Research).
DK	<ul style="list-style-type: none"> - 1988-92: A special research initiative on drugs existed, financed by the different research councils and the Ministry of Social Affairs and Ministry of Health - Today: no permanent funding, but single project funding by Research Councils and Ministries. 	<ul style="list-style-type: none"> - Funding by universities (mainly staff) - Insurance companies - Ministry of Social Affairs. 	<ul style="list-style-type: none"> - 1988-92: Through the Alcohol and Drug Research Initiative - Today: to some extent through the National Committee on Narcotics (including the Ministries of Health, Justice and Social Affairs). 	A combination of researchers' interests and the policies of funding agencies.
E	<i>Plan Nacional de Investigación Científica y Técnica.</i>	<ul style="list-style-type: none"> - Government Delegation for the National Drugs Plan - Offices of the <i>Planes Autonómicos sobre Drogas</i> - No continuous university research. 	<i>Comisión Inter-ministerial de Ciencia y Tecnología (CICYT)</i> for the projects funded for the <i>Plan Nacional de Investigación Científica y Técnica</i>	Mainly decided by public authorities.
F	Through INSERM and CNRS (publicly funded).		By MILDT in collaboration with the Ministry for Research and the large research organisations.	Specific working-groups are constituted to formulate and implement Calls for Proposals.
G B	Government Departments: <ul style="list-style-type: none"> - Home Office (broad issues, criminal justice, prevention) - Dept. of Health (drug use and demand reduction) - Scottish Office. 	<ul style="list-style-type: none"> - Research Councils - Independent national bodies (ISDD, SCODA, etc.) - Clinical/medical schools. - Drug research generally has no priority for universities. 	<ul style="list-style-type: none"> - Some inter-departmental coordination - Some informal coordination between charities, departments and research councils. 	At Secretary of State level in each department.

Summary Report "National Drug Research Situation and Research Needs"

Continued ...	Main Sources of Funding	Other Sources of Funding	Co-ordination of Research Funding	Mechanisms for Arriving at Funding Priorities
GR	Governmental Agencies (Ministry of Health and Social Care, Ministry of Civilisation, General Secretariat of Youth, Ministry of Education, Ministry of Research and Technology, and the Ministry of Labour).	European Union (DGXII, DGV and EMCDDA).	Non-existent.	No information.
I	- Public funding - <i>Fondo Nazionale di intervento per la Lotta alla Droga</i> - National Research Council.	- Private organisations (mainly clinical research).	Informal co- ordination.	Contingent on the specific funding agencies. No co-ordination.
IRL	Government funding: - Department of Health - Science and Technology against Drugs-Programme (co-funded by the Irish Government and the European Regional Development Fund).		Informal co- ordination in order to avoid duplication.	On an ad-hoc basis. Research mainly instigated and investigated by individual researchers.
L	Governmental funding.	European Commission (DG V and EMCCDA).	By the Focal Point of the EMCDA and the <i>Centre de Prévention des Toxicomanies</i> and in the future also by P.R.E.E.D.S.	Decided by the <i>Groupe Interministérielle Drogues</i> and implemented and co-ordinated by the Focal Point of EMCDDA, CPT and P.R.E.E.D.S.
NL	Governmental funding: - Ministry of Justice - Ministry of Health, Welfare and Sports - Ministry of Education, Culture and Sciences. ZON (<i>ZorgOnderzoek Nederland</i> , semi- public organisation) Preventiefonds.	Funding by local and regional authorities. NWO (Research Council) NFGV (National Fund for Mental Health) Drug research generally has no high priority for universities.	- An extensive coordination network exists in which all funding organisations are represented. - There exist many forms of coordination between the different funding agencies. The principal is the joint formulation of research needs by researchers and policy-makers.	- Based on the "Disciplineplan Geneeskunde" (a report published every four years by the Royal Academy of Science). - Based on evaluations by the Council for Health Research (on request of the Ministry of Education, Culture and Sciences and the Ministry of Health, Welfare and Sports.

Continued ...	Main Sources of Funding	Other Sources of Funding	Co-ordination of Research Funding	Mechanisms for Arriving at Funding Priorities
P	- National Drug Abuse Prevention Programme; - Ministry of Health - Ministry of Justice - Ministry of Education.	- National Board of Scientific and Technological Research (mainly MA and PhD grants for researchers) - University drug research mainly for receiving degrees.	- No formal co-ordination mechanism existent. - The Observatório VIDA is specified by law as the main organisation responsible for implementing research.	No information.
SF	No established funds or posts have been allocated to drug research.	- Ministry of Social Affairs and Health - Finnish Foundation for Alcohol Studies - Academy of Finland - Nordic Council. - University researchers (none of them, however, exclusively working on drugs.	No coordination.	Assessment of scientific standards.
SV	National research councils: - Council for Social Research - Council for Medical Research - Council for Research in the Humanities and Social Sciences.	- Fund of the Bank of Sweden, Tercentenary, Foundation and Research Council of the Swedish Parliament - National Board of Institutional Care - National Institute of Public Health - National Board of Health and Welfare.	- Joint Committee of the National Research Councils (including the Bank of Sweden) - Many informal consultations between the funding agencies.	Two principles: - Formulation of priorities by the state every third year ("research proposition"). - Research councils and universities have the freedom to decide on research priorities.
European (contributed by COSTA6)	National organisations: Ministries, institutional funds and research councils.	International organisations: EU (DG XII, DG V, EMCDDA), Council of Europe, UNDCP.	None for European research in general.	None for European research in general.

The main conclusion to be drawn from Table 6 is that all Member States fund research on drugs but great differences exist between the different Member States regarding the type of funding agencies involved and the type of co-ordination of funding available. Other important conclusions are the following:

- i) The main funders of drug research are, throughout all countries, public agencies (Ministries, research councils, public programmes), except for those countries where "main funding" is non-existent. Important differences (which probably have a significant influence on the degree of funding) are, however, the degree of

institutionalisation or the earmarking of such funds. It makes a difference whether one can apply for public funding under general headings (e.g. health, social affairs, justice, etc.) or whether a general research fund or research fund exists within specific public institutions, which provide earmarked funds for drug research.

- ii) Other funders of drug research are again, in general, public institutions, this time, however, mainly at the regional or local levels and, again, general research councils. Drug research seems not be a priority of universities throughout Europe. In those cases where research is done at universities, it is mainly based on staff and institutional funding or is carried out in the context of receiving degrees (e.g. PhDs). It was also interesting to note that it was only in two cases that the European Union was mentioned as a relevant funding agency for drug research. Even in the case of European cross-national research, the main funders are in almost all cases national organisations (especially from those countries which generally fund a lot of drug research).
- iii) As far as the co-ordination of research funding is concerned, it is remarkable that a sophisticated system of co-ordination only exists in a couple of countries. In most other countries co-ordination is not treated as an important objective in itself but is incidentally done by structures with other main objectives or where co-ordination mainly takes place in an informal way. Finally, in some countries, as well as on the European level, there is no overall co-ordination of drug research whatsoever.
- iv) As a consequence of the above, overall mechanisms for arriving at funding priorities are extremely rare. Funding priorities are generally formulated at the level of the specific funding agency (be it the Ministry, the research council, the university researcher, etc.). Mechanisms generally vary from purely scientific considerations to purely political considerations or a mixture of the two.

This is not the place to evaluate the different countries according to their funding. The above information is important, however, in the light of discussing possible strategies at the European level which could ensure that research in the field of drugs would be financially supported more frequently.

II.4 Structures for Information Exchange between Policy-Makers and Researchers and among Researchers

An important prerequisite for the development, unfolding and maturing of a research field is the existence of structures for information-exchange. Important channels are those between researchers and policy-makers, and amongst researchers (in the form of conferences, networks, associations, publications and databases). Table 8 summarises the existence of such information-exchange structures in the various countries studied.

Table 8: Information Exchange Mechanisms and National Research Information Sources in Drug Research

	Information Exchange between Policy-Makers and Researchers	Networks and Regular Conferences for Exchanging Research Information	Regular Sources for Published Research Results	Research Inventories and Databases on Drug Research
A	<ul style="list-style-type: none"> - Possible through the system of regional "Drogen-kordinatoren" - Possible through regional advisory boards - Through the REITOX focal point. 	<p>Conferences:</p> <p>Local and regional conferences on drugs issues.</p>	<p>Journal:</p> <p>"<i>Wiener Zeitschrift für Suchtforschung</i>".</p>	<p>Not available.</p>
B	<ul style="list-style-type: none"> - No structured coordination mechanisms available. - Politicians, policy-makers and researchers meet in the annual National Drugs Congress ("Drug Policy 2000"). 	<p>Conference:</p> <p>An annual national Drug Conference ("Drug Policy 2000") has been held since 1993.</p>	<p>None.</p>	<ul style="list-style-type: none"> - A comprehensive inventory was recently produced - 13 specific inventories.
D	<ul style="list-style-type: none"> - No systematic mechanism available. - Through regular conferences of the German Council on Addiction Problems (DHS). 	<p>Conferences:</p> <ul style="list-style-type: none"> - By the DHS and DGSS (German Association for Substance Abuse Research and Treatment). 	<p>Journal:</p> <p>"<i>Sucht</i>".</p>	<ul style="list-style-type: none"> - Not complete but some specific surveys available.

Summary Report "National Drug Research Situation and Research Needs"

Continued ...	Information Exchange between Policy-Makers and Researchers	Networks and Regular Conferences for Exchanging Research Information	Regular Sources for Published Research Results	Research Inventories and Databases on Drug Research
DK	<ul style="list-style-type: none"> - Through the National Committee on Drugs - In the future also through NAD (Nordic Association on Alcohol and Drug Research). 	<p>Through activities in the framework of NAD (Nordic Association on Alcohol and Drug Research)</p> <p>Conferences: Annual seminar for alcohol and drug researchers organised by CRF.</p>	<p>Newsletter: - Centre for Alcohol and Drug Research</p> <p>Journal: - "Nordisk Alkohol Tidsskrift."</p>	<ul style="list-style-type: none"> - National Board on Alcohol and Drugs (1980-85) - CRF (1985-92) - Karen Elmeland (1995-96).
E	Not well-established. Policy-makers do not usually take research into consideration.	Conferences: Organised by the <i>Sociedad Española de Toxicomanías</i> and <i>Socidrogalcohol</i> .	Journals: "Revista Española de Drogo-dependencias and Adicciones".	No comprehensive inventories available. Individual inventories by funding agencies are available.
F	<ul style="list-style-type: none"> - Through the joint formulation of Calls for Proposals - Through participating in meetings (in practice, policy-makers have limited time resources to get really involved). 	- Through conferences and workshops.	<p>Journal: - "Psychotropes"</p> <p>Databank - "Toxibase".</p>	An inventory of research teams and individual researchers does exist.
G B	<ul style="list-style-type: none"> - Through informal meetings - Advisory Council on the Misuse of Drugs (ACMD). 	<ul style="list-style-type: none"> - Through informal Drug Action Teams and Drug Prevention Initiative Teams <p>Conferences: - Local specialist drug conference.</p>	Journal: "British Journal on Drugs".	Regular Publications: - ISDD - Drug questions - European Drug Questions (only prototype).
G R	No systematic mechanism available.	No information.	Up-dated annotated bibliographic database.	Annotated bibliographic database (developed in the context of REITOX).

Summary Report "National Drug Research Situation and Research Needs"

Continued
...

	Information Exchange between Policy-Makers and Researchers	Networks and Regular Conferences for Exchanging Research Information	Regular Sources for Published Research Results	Research Inventories and Databases on Drug Research
I	<ul style="list-style-type: none"> - Research carried out by public institutions has an immediate impact (especially in the area of epidemiology) - To a limited extent in the context of the National Fund to Combat Drugs - Different forms of informal co-ordination. 	<ul style="list-style-type: none"> - Through professional associations (conferences, newsletters) - Through ISFOS (Journal publishing research results for other countries). 		A database on grey literature.
IRL	National Drugs Strategy Team.	Informal communication.		Annotated bibliography by the Health Research Board.
L	No information.	No information.	No information.	No research inventory exists at the moment (planned for the future).
NL	A great number of co-ordination mechanisms exist between researchers, politicians and civil servants; mainly through mutual representation on committees of the different organisations.	<ul style="list-style-type: none"> - Through FADO (<i>Forum Alcohol- en DrugsOnderzoek</i>): a national platform for addiction research. Group meeting once a year. 	Journal: <i>"Tijdschrift voor Alcohol en Drugs"</i>	Different inventories of research do exist.
P	Research is rarely recognised by policy-makers, financially or otherwise.	<p>Conferences: Biannual national congresses organised by the Ministry of Health.</p> <p>Through ANIT (a national network of professionals in the area of demand reduction, promoting workshops, seminars and training).</p>	Journal: <i>"Toxicodependencias"</i> (tri-annual, since 1995 and published by the Ministry of Health).	None available but under consideration by the national REITOX focal point.
SF	Policy-makers generally make use of research data and expertise.	Non-existent.	Journals: <ul style="list-style-type: none"> - <i>Alkoholipolitiikka</i> - <i>Nordisk Alcohol Tidsskrift</i>. 	No comprehensive inventories available.

Summary Report "National Drug Research Situation and Research Needs"

Continued
...

	Information Exchange Between Policy-makers and Researchers	Networks and Regular Conferences for Exchanging Research Information	Regular Sources for Published Research Results	Research Inventories and Databases on Drug Research
SV	<ul style="list-style-type: none"> - Through the Swedish Council for Information on Alcohol and Other Drugs (CAN) - Through SAD (Swedish Society of Alcohol and Drug Researchers) - Through the Consultation Group at the local level of the National Institute of Public Health - Through the Hassela Nordic Network. 	Conferences: <ul style="list-style-type: none"> - Organised by SAD - Organised by CAN ("Meet Current Research"). 	Journal: "Alkohol och narkotika" (bimonthly published by CAN). Drug Abuse Research Inventories (Abstracts).	<ul style="list-style-type: none"> - No comprehensive inventory - Individual inventories by funding agencies.
European (contributed by COSTA6)	No information.	See Table 8.	Journal: "European Addiction Research".	None.

As far as the information-exchange between policy-makers and researchers is concerned, one can conclude that structured or regular exchange of information is very seldom. The degree to which information is exchanged seems in most countries to be very much contingent on the existence of occasions (which most of the time have another objective) on which policy-makers and researchers meet (Boards of research councils, committees, national conferences, etc.). Research exchange seems very unlikely outside such structures. Generally speaking, two national cultures of policy-making can be distinguished in this field: a) where research evidence is taken into consideration in the process of policy-making; and b) where research evidence plays a very marginal role.

It was interesting to note that the REITOX focal point was mentioned several times as a new occasion on which policy-makers and researchers can meet to discuss research findings. This is an indication of the fact that the REITOX structure has productive spill-over effects which have gone well beyond their immediate objectives.

There are a number of mechanisms for exchanging research results between researchers in all countries. Regular conferences and workshops take place in almost

Table 9: Networks of Cross-Border Drug Research

Governmental Cross-Border Networks

COST A6

Evaluation of Action Against Drug Abuse in Europe (15 European countries)

EMCDDA

European Monitoring Centre for Drugs and Drug Addiction (EU)

Groupe de Mondorf

NAD

Nordic Association on Alcohol and Drug Research

Pompidou Group and its Working Groups

UNAIDS

UNDCP

WHO

Non-governmental Cross-Border Networks

EASAR

European Association of Substance Abuse Research (institutes from 13 countries)

EATI

European Addiction Training Institute

ECCAS

European Collaborating Centres in Addiction Studies (18 institutes in 16 European countries)

ECDP

European Cities on Drug Policies

(22 local and regional authorities from EU Member States)

ELISAD

European Association of Documentation Centres on Drugs

ENSDUP

European Network of Services for Drug Users in Prison

(300 participants from EU Member States)

ERGCC

European Research Group on Cross-Border Crime

ERIT

Federation of European Professionals Working in the Field of Drug Abuse

ESPAD

European School Survey Project on Alcohol and Drugs

EUMA

European Methadone Associations

(participants from 18 European countries)

EUROMETHWORK

European Social Science Research Group on Drug Issues

FESAT

European Foundation of Drug Helplines

FESU

Forum Européen pour la Sécurité Urbaine

(150 participants from 4 Member States)

GEERMM

Groupe Européen d'Echange Rhin-Meuse-Moselle

Summary Report "National Drug Research Situation and Research Needs"

ICA

International Council of Addiction

Iceberg

(Uniformization of registration systems)

IPTRP

Improving Psychiatric Treatment in Residential Programs

ITACA

The European Group of Prevention Practitioners

Ketill Bruun Society

RIPUD

Réseau International Parentalité Usage de Drogues

T3E

Toxicomanies Europe Etude Echanges

(60 institutes from 9 Member States)

TIMC

Toxicomanies et Interventions en Milieu Carcéral

(17 participants from 5 Member States)

III. Summary of Research Needs

The research needs reported by the different experts will be presented and discussed here. In the first section, the research needs will be analysed from a topical point of view. Here, research needs for specific areas and topics will be presented as they were formulated by policy-makers and researchers for the national and cross-national levels. The second part will present and discuss the reported needs for research support mechanisms.

III.1 National and Cross-National Needs for Research

The questionnaire on which the different reports are based asked one to differentiate both between the national and cross-national as well as between the research needs formulated by researchers and policy-makers. It was stated in a number of reports that it was difficult to make a sharp division between the research needs of researchers and those of policy-makers, especially given the research funding structures in the different countries (see Part II.3). Where a need has been explicitly mentioned by one of the groups in particular, this will be mentioned.

Since one of the main aims of this report is to identify the specificity and added value of drug research on the European level, the following analysis will concentrate on the national versus the cross-national research needs.

A tabulated summary of the reported research needs can be found in Table 5. National research needs are indicated by "■" and cross-national research needs are indicated by "●"⁵⁶. The reported research needs will be analysed along four dimensions. First, a vertical reading of Table 5 will indicate the distribution of national and cross-national research needs across countries. Secondly, a horizontal reading of the Table 5 will tell us something of which topics are reported to be more in need of further research, compared to others. Thirdly, the information from the previous point will be translated in terms of the disciplines which would need to be strengthened in the area of drug abuse. And finally, a number of issues will be mentioned which have been reported to be important for the future and which are relevant to any single research area or research topic.

⁵⁶ The fact that research carried out ("■") often appears under the same research topic in combination with a research need can have one of the following explanations: a "■" does not mean that the research topic is completely covered by existing research, and that research into other aspects might be asked for; it could also mean that research on the topic should be strengthened, continued or complemented with cross-national research.

(1) Research needs by countries

Three main conclusions can be drawn from the presentation of the countries' research needs:

- i) A first observation to be made is that a large number of research needs in the different Member States do indeed exist. Table 5 shows that in general the number of research needs outnumbers the number of research areas or topics already covered. This finding clearly supports the importance and relevance of the "National Drug Research Situation and Identification of Research Needs" initiative undertaken by SG/C/5 and EMCDDA, as well as the necessity for further action to be taken.
- ii) It is interesting to observe that Member States—in contrast to what is to a larger extent the case for the research carried out—hardly focus on one or several specific research areas when it comes to the specification of research needs. It is rather the needs across all research topics which are important. This is an indication for the earlier observation (see II.1) that a comprehensive research approach towards the drug problem is considered vital nowadays. This seems difficult to accomplish in any one country and therefore makes a European approach essential.
- iii) An interesting fact is also that, in principle, and from a researcher's point of view, every research area or topic could profit from a cross-national approach⁵⁷. The fact, however, that most reports distinguish between needs for national and needs for cross-national research reflects the fact that in some specific areas the EU is expected to take the lead.

(2) Research needs by research areas and topics

National as well as cross-national research needs are reported in all research areas. There are, however, some research areas where needs are more manifest than in others.

Table 10 summarizes the research needs as presented in Table 5.

⁵⁷ This is obviously particularly the case for drugs research. Here, cultural, nation-specific institutional, political and other factors play an important role. Moreover, situations such as programmes, methods, etc. might exist only in small numbers in any one country which makes comparative analysis necessary (see also Part IV).

Table 10: Drug Research Needs

Important Research Needs	Relatively Important Research Needs	Less Important Research Needs
Prevalence, incidence and patterns of drug use		
Primary prevention of drug use		
		Detection of drugs and drug profiling
		Knowledge, attitudes towards and opinions on drugs

i) Important Research Needs

Prevalence, incidence and patterns of drug use

A large number of national as well as cross-national research needs seem to be apparent here. Many of these are formulated by policy-makers who want to know what the situation is, and by researchers who need reliable data on the basis of which they can do detailed analysis.

On the level of the research topics, there seems to be a need for general drug use surveys as well as a need for studies on specific groups and characteristics of drug users. The development and improvement of methodological instruments has also been formulated as an important need.

Although there are a large number of research needs in this area, the discrepancy between research needs and research carried out is rather small (except for the *development of methodological instruments*). This is an indication for the fact that these research needs could be taken on by existing institutions or researchers.

Research on the primary prevention of drug use

A large number of national and cross-national research needs can be found in this area. Needs are on the one hand formulated by policy-makers who are interested in avoiding the problem in the first place and who want to know *what* works. Researchers want in addition to know *why* something works, on the other hand. This combination might explain the large interest in research on the evaluation of preventive programmes.

In this area the discrepancy between research *needs* and research *carried out* is, however, somewhat larger than in the previous case.

ii) Relatively Important Research Needs

As can be seen in Table 10, a substantial number of relatively important research needs have been indicated. It is worth mentioning, however, that it is in these areas—in contrast to the two previously mentioned areas (i.e. those in the first column of Table 10)—where the discrepancy between the research being carried out and the research needs is much larger. This implies that in these areas not only a lot of research has to be carried out but probably also that the research structures must be developed and/or the specific interests of the researcher be attracted.

Within these broader research categories a number of more specific research topics stand out as being particular needs for research:

(cross-) national research on *drug policies*, *the evaluation of drug policies*, research into *treatment needs*, *treatment utilisation or access* and *treatment methods*, (cross-) national research *treatment evaluation*, research on *drug-related death*, research on *drug-related traffic accidents*, research on the *economic consequences of drug use*, *evaluation of (non-treatment) care services* (especially in a cross-national perspective), (cross-)national research on *drug trafficking*, and research on *drug markets and their development*.

iii) Less Important Research Needs

One research area was mentioned much less often as being in need of research than the others, i.e. detection of drugs and drug profiling. It should be mentioned, however, that this could partially result from a bias on the part of the authors of the national reports as well as from the type of persons and organisations they have contacted in collecting the information for their reports.

(3) Research needs by research disciplines

Translating the above information in terms of research disciplines means that it is especially those disciplines which could do research in those areas which should be strengthened or motivated to move into drug research (these areas being on the one hand filled with a great number of needs, and on the other, being those in which little research is actually being carried out). These are above all: *policy science, sociology, economics, clinical research, public health research, psychology, organisational research and criminology*.

(4) Generally applicable research-specific needs

There are a number of concrete research questions and topics which will have to be addressed in the future in order to promote the reduction of drug use as well as that of the personal and social impact of drugs through research. However, there are also a number of issues which came up again and again in the different reports, and which apply to all research questions and topics simultaneously:

- (1) The different research questions and topics are generally formulated in such a way that they are equally applicable to all types of drugs or to all types of drug use(rs). It was rather uncommon that specifications were made regarding preferred research topics on certain types of drugs or types of drug use(rs) in the different reports, with one main exception. Research into the increasing use of "new" synthetic drugs such as ecstasy and amphetamines among young people was often formulated as an important field of enquiry across all research questions.
- (2) Drug research should mainly be *applied research* in that it should link theory, method and practice.

- (3) Drug research should produce *reliable outcomes* and should have minimal quality standards (which is unfortunately often not the case in the field of drug research). Methodological instruments and research methods should therefore be developed and refined. Not only evaluation research should be strengthened but also the way in which research itself is evaluated.
- (4) Drug research should be *interdisciplinary* in character since no one best solution exists.
- (5) There is a need for more *longitudinal* research in all different drug research areas, and one should pay greater attention to *causality*.
- (6) One should make better use of existing research through *meta- and secondary analysis*.

III.2 Needs for Research Support Mechanisms

Conducting research does not only depend on the craving for knowledge but is also contingent on the availability of support mechanisms to implement such research ideas. Some of the needs for such support mechanisms which have been reported by the experts will now be specified: needs for funding, co-ordination structures and other (country-)specific needs will be addressed.

Table 11: Needs for Research Support Mechanisms

	Funding Needs	Needs for Co-ordination Structures	Other
A	More funding of national research is needed in order to be able to participate in European research networks.	Co-ordinating mechanisms for researchers (both national and international).	
B	Additional funding is necessary. A long-term earmarked budget line for specific drug related research should be foreseen.	A need for a "Drug Research Plan".	The high turn-over among young researchers is a problem.
D	Additional funds for university research are necessary; project-funding should be complemented with institutional-oriented funding.	Many more researchers should be involved in co-ordination processes.	
DK	<ul style="list-style-type: none"> - A need for permanent and long-term funding - A need for flexible and unbureaucratic cross-national research funding. 	<ul style="list-style-type: none"> - A need for a co-ordinating body for drug research (avoiding too far-reaching centralisation however) - A need for a forum of policy-makers and researchers. 	
E	In order to attract researchers from other fields, the funding agencies should assign a certain percentage of their research resources to the drug field beforehand.	It is necessary to develop procedures to co-ordinate researchers and policy-makers.	There is a need to improve training in research methods for professionals.
F	No information.	A need for a multi-disciplinary working group of experts from different countries.	<p>A permanent mobilisation of young researchers is essential.</p> <p>There should be more mobility of researchers across borders.</p>
G B	No information.	No information.	

Summary Report "National Drug Research Situation and Research Needs"

<i>Continued</i> ...	Funding Needs	Needs for Co-ordination Structures	Other
G R	Existing and future international networks should be provided with sufficient funding and support. Funding mechanisms should be further developed and made more visible and accessible to researchers.	No information.	Not only research applications should be evaluated but also research outcomes.
I	No information.	No information.	There is a necessity to develop structures through which professionals in drug service organisations could be trained to carry out research.
IRL	There is a need for more financial resources.	Co-ordination structures are necessary between researchers and policy-makers.	- A national documentation centre could facilitate the dissemination of information. - There is a need for training and research programmes at postgraduate level.
L	No information.	No information.	
NL	ZON-Programme (Table 6)	Research is considered too fragmented to reach and maintain high quality research with a long-lasting impact (there are too many small research entities).	
P	Policy-makers should allow clinical professionals to allow some of their time to participate in research networks.	- A need for a well-defined research policy with clear priorities based on clear criteria based on the assessment of needs - A need for regular meetings between policy-makers and researchers as well as between researchers. - There is concern among policy-makers and researchers about the formal co-ordination structures attached to political power as it may limit research autonomy and independence.	Training of researchers.
SF	A need for permanent and long-term funding.	No information.	

Continued ...	Funding needs	Needs for co-ordination structures	Other
SV	There is an increasing need for funding.		<ul style="list-style-type: none"> - A Centre for Social Scientific Research on Alcohol and Other Drugs should be set up. - Substantially more class time should be devoted to the topic of drugs in the basic training of physicians and social workers - More academic positions are needed for drug researchers, especially at the intermediate level - A survey on drug research should be carried out.
European (contributed by COST A6)	No information.	There is a need for comprehensive planning of European research funding schemes and a need for concerted action between the EU, WHO, ESF (European Science Foundation), European Council, and UNDCP.	

A number of conclusions can be drawn from Table 11:

- i) Drug research is not felt to have enough adequate funding in a number of countries. Regular and institutional types of funding are often absent, which results in a lack of continuity in research and thus little accumulation of knowledge. One should point out that this lack of national research funds often prevents researchers from taking part in international research projects. The situation does seem to have improved in some countries, however—especially in recent years.
As far as European funding in drug research is concerned, the lack of transparency and visibility of funding possibilities as well as the types of priorities set are occasionally mentioned as a problem by some countries.
- ii) Even more important than the necessity for additional funding, seems to be the need for co-ordination structures between policy-makers and researchers as well as among researchers in most countries (see also Table 7). Co-ordination is generally seen as the principal prerequisite for any substantial, comprehensive and high quality research as well as a condition for spending research funds effectively. As far as the type and form of useful co-ordination structures is

concerned, Member States differ substantially, probably mainly reflecting the national traditions with respect to institutional forms of co-ordination.

The increase in co-ordination at the European level in the field of drug research is also seen as an important need. No concrete suggestions were formulated by the countries, but this should certainly be an issue for further investigation.

- iii) Finally, a number of other needs for research support mechanisms were pointed out in different reports. Most of them address the issue of the mobilisation, stabilisation and training of researchers. These issues also need to be looked into in somewhat more detail in the future.

IV. Summary of the Findings from a European Perspective

In the final part of this report the findings of the previous parts will be put into a European context. The main question to be addressed is: What does the summary of the national drug research situations and identification of research needs tell us about the necessity, feasibility, support structures, co-ordination, etc. of European drug research?

The research presently being carried out and the research needs at the European level will be addressed in the first part. Issues regarding research support structures at the European level will be addressed in the second part of this section.

(1) Research needs at the European level

There are various possibilities concerning how to identify the research needs at the European level. One is to evaluate the existing research programme of the EU (4th Framework Programme) on its degree of funding research on drugs in those areas where such research could potentially be funded (the discrepancy between both could be defined as needs for future research). Another possibility could be to consider the needs for research as they are formulated in the *European Union Action Plan to Combat Drugs* (COM(94) 234)⁵⁸. Another interesting possibility can be—as proposed in the UK report—to choose a so-called "legally-based, policy-led template for research". Here, research needs are deduced by identifying those policy areas within the Treaty of the European Union within which drugs policy, co-operation on drug-related issues and consequent research might arise (ten such policy areas were identified). Another possibility to arrive at research needs is by consulting CREST (an exercise which has recently taken place⁵⁹). SG/C/5 and EMCDDA have chosen a complementary approach. Here, comprehensive reports by national experts as well as a report by a European research network (COST A6) form the basis for the formulation of national and European research needs.

It is believed that a combination of the findings of the different approaches as well as confronting the question as to how subsidiarity applies to drug research (i.e. is there a need for EU intervention?) yields the best basis for a strong and feasible formulation of European research needs.

⁵⁸ These two approaches have been selected for my report "Analytic Inventory of Community Research Programmes into Illicit Drugs" (June 1996). An analysis was provided on the degree to which European drugs research is funded in comparison to the European research needs as they are defined in the 4th Framework Programme and the Action Plan to Combat Drugs.

⁵⁹ Joint Irish Presidency/DG XII Workshop "Research on the Medical, Socio-Economic and Detection Aspects of Drug Abuse" (Brussels, 12/11/96).

As a result of the present exercise a number of specific research needs at the European level have been formulated as well as a number of reasons why research on a European level is in many cases an important counterpart to research on the national level.

As far as the areas for research are concerned, it can be said that they are more or less the same as those formulated for the national level (see Table 10). Differences exist, however, in the needs formulated across the different countries as well as when it comes to more specific research issues.

A number of reasons why European research (compared to national research) is particularly important, which were mentioned in the reports, are:

- in order to avoid the duplication of efforts on a European level;
- in order to create synergy in areas where only one or a few researchers are specialised in a research topic in any one particular country (such as in the area of the evaluation of prevention, treatment, etc.);
- in order to share crucial information and expertise;
- in order to increase the comparability of data and research instruments;
- in order to have the possibility to conduct meta-analyses (for which a large number of research projects on a single issue are necessary, which is often not the case in single countries);
- in order to have more than one case to analyse (as in the case of the analysis of a national drug policy or national systems of prevention or treatment);
- in order to be able to use a larger number of independent variables (e.g. the role of "national" variables in the organisation of systems of treatment);
- in order to increase a variation in the dependent variable (i.e. to include cases where certain problems do not arise, and to find out why this is the case; e.g. a study on open drugs scenes might want to include the UK because here drug scenes have not yet developed into large scale problems);
- in order to draw up fresh perspectives, sharing research traditions, and adding value by sharing existing research findings which might generally apply to a whole range of local situations.

In conclusion, the different national, as well as the COST A6, reports clearly indicate a substantial number of research areas in which collaboration is necessary. It also gives

one an indication of the large number of reasons why such collaboration is particularly fruitful at the European level, or in other words, why one can expect added value.

(2) Research support structures at the European level

One should make a distinction between the two groups of research before comparing the research needs at the European level as specified above, to the availability of support structures to satisfy these needs. One group of research needs seems to be relatively well-covered by existing or developing structures and another group of needs seems to be badly covered or not covered at all.

- i) Areas in which a large number of research needs exist and in which support structures are being developed are, particularly: research on the *prevalence, incidence and patterns of drug use* and research on *risk factors and effects of the use of drugs and dependency*, and to some extent, research on *primary prevention of drug use* (concerning evaluation and biomedical aspects) and research on *treatment* (also here concerning evaluation and biomedical aspects), research into the *risk factors and effects of the use of drugs and dependency* (as far as the epidemiological, biomedical and social exclusion dimensions are concerned) and research on the *aetiology of drugs* (as far as the biomedical and social exclusion dimensions are concerned).

The EMCDDA and the 4th Framework Programme (in particular the BIOMED and the TSER programmes) can, in principle, cover and satisfy the formulated research needs in these areas. The COST A6 Project does also in fact address a number of topics which are often mentioned as research needs, i.e. the evaluation of prevention, treatment and drug policy, as well as the development of instruments for evaluation research. In contrast to the EMCDDA and the Framework Programmes, the problem with the COST A6 is, however, that it will be discontinued at the end of 1997, and in general, receives only very little European funding.

- ii) There is a second group of research needs which, in contrast to the first group, does not yet have a European institutional pendant. This concerns mainly research on *drug policies and drug control strategies*, research on *treatment and treatment services for drug users*, research into the *risk factors and effects of the use of drugs and dependency*, research on the *aetiology of drugs*, research on the *social, economic and other consequences of drug use(rs)*, research on *health*

ANNEX 1: List of Authors and Titles of Reports

AUSTRIA (A)

The Drugs Situation in Austria
Alfred Springer

BELGIUM (B)

Information Concerning Belgium
J.-P. Wydoodt, L. Van Daele, J. Casselman, M. Etienne, L. Bils

GERMANY (D)

Drug Research Situation at National and European Level and Identification of the Needs: Germany
Gerhard Bühringer

DENMARK (DK)

National Drug Research Situation and Identification of Needs - Denmark
Jørgen Jepsen, Svend Sabroe

SPAIN (E)

Drug Research Situation in Spain and Identification of Research Needs
Gregorio Barrio, Luis de la Fuente, Jordi Camí

FRANCE (F)

Situation de la recherche en France
Patrick Sansoy

UNITED KINGDOM (UK)

Working Paper on the National Drug Research Situation and Identification of Research Needs
Nicholas Dorn

GREECE (GR)

Drug Research Situation at National and European Level and Identification of Needs
Anna Kokkevi

ITALY (I)

National Situation Regarding Research on Drugs and Identification of Research Needs
Luigi Cancrini, Flavio D'Achille

IRELAND (IRL)

Research in the Area of Illicit Drugs - National Situation and Identification of Needs
Mary O'Brien

LUXEMBOURG (L)

Situation de la recherche dans les domaines des drogues illicites et de la toxicomanie au niveau national et international - Identification des besoins
Alain Origer

THE NETHERLANDS (NL)

Drug Research Situation at National and European Level and Identification of Needs

Henk Rigter

PORTUGAL (P)

National Drug Research Situation and Identification of Research Needs

Nuno Felix da Costa, Maria Moreira

FINLAND (SF)

The Drug Research Situation at the National and European Levels and Identification of the Needs – A Country Report from Finland

Osmo Kontula

SWEDEN (SV)

Drug Research Situation in Sweden

Ola Arvidsson

COST A-6

Scientific Research on Illicit Drugs at European Level: State of the Art and Future Needs

A. Uchtenhagen, J. Derks

ANNEX 2: Copy of the Questionnaire for Information-Gathering in the Different Member States

Questions addressed to Reitox experts for country reports to be presented at the Joint Seminar, *Drugs research situation at National and European Level and Identification of the Needs*, RSC; 13-14 December 1996

1. Description of the Research Situation in the Member States

1.1 State and developments

1.1.1 What type of research into illicit drugs has been carried out in your country during the last ten years? e.g. epidemiological, sociological, economic, criminological, policy, medical research, etc., and in which areas: drug demand reduction/ law enforcement?

1.1.2 Are there certain types of research which are not focused upon? Which ones?

1.1.3 Do you notice a development in the type of research which has been carried out in your country throughout the last ten years? If so, which factors would you consider responsible for the developments?

1.1.4 Are there any inventories on drug research in your country and what is the scope?

1.2 Funding Mechanisms

1.2.1 Who are the main funders of drug research in your country? Please specify whether these are public, private or non-profit making organizations. How is the division of national/regional funding organized?

1.2.2 Is there any form of co-ordination between the main funders of research?

1.2.3 How are the priorities in research funding defined?

1.3 Co-ordination mechanisms among Researchers and between Researchers and Policy-makers

1.3.1 Are there mechanisms available within your country which facilitate communication between policy-makers and researchers? Please describe and evaluate?

1.3.2 Are there mechanisms available in your country by which research and information can be exchanged? e.g. fora, conferences, journals, etc.

1.4 Participation in cross-border research networks

1.4.1 Does your country participate in formal drug research cross-border networks? (e.g. COST A6, Pompidou Group, etc.). Taking into consideration the research budgets of those networks, how would you evaluate their output?

1.4.2 Do other informal cross-border networks exist? Which ones?

2. Description of research needs in the field of illicit drugs

2.1 Research needs at the Member State level

2.1.1 On the basis of information given in part one, what are the research needs of researchers within your country, focusing on: type of research; support mechanisms (co-ordination structures, funding etc.).

2.1.2 Could you also describe the research needs of policy-makers with regard to the type of research and funding?

2.2 Research needs at cross-border level?

2.2.1 On the basis of the information given under item 1.4, could you please describe the researchers needs with regard to research carried out at cross-border level, focusing on: research areas, coordination mechanisms; funding mechanisms

2.2.2 Could you please describe the research needs of policy-makers with regard to cross-border research (type of research, etc.).

GENERAL CONCLUSIONS

1. The participants of the Seminar welcome the initiative taken by the Commission's Drugs Coordination Unit in collaboration with the EMCDDA, with the participation of the Research Directorate-General of the Commission, within the context of the Conclusions of the European Council in Madrid which undertook concrete steps with the purpose of implementing the EU Action Plan on Drugs (1995-1999). The objective of the Seminar was to collect information on the state of the art of drug related research carried out within the Member States and at European level, and to identify prospects and needs in the field of drug research. The Seminar was a follow-up to Dr. Kenis' Report analyzing the Community Research Programmes on the possibility of funding drug related research.
2. The participants of the Seminar take note with great interest of the Research Council Conclusions of 5/12/1996 on the "Role of Research in the Fight Against Drug Abuse" which, as a result of the high level workshop on "Research on the medical, socio-economic and detection aspects of drug abuse" organized jointly by DGXII and the Irish Presidency on 12 November 1996, identifies four important areas for drug research in which the Commission should enhance coordination and complement activities. Since the Council conclusions indicate the importance of drug research at national and community level, participants perceived this as a relevant step towards the establishment of an integrated drug research programme.

The four research areas mentioned in the Council Conclusions are the following:

- (a) research on the health and socio-economic, involving psychological aspects of drug use and drug addiction;
- (b) research on biomedical approaches to drug demand reduction and treatment;
- (c) research on physical detection, drug profiling and biological monitoring of drugs;
- (d) pooling and sharing information at Community level between Member States.

3. The initiative to produce an overview of the drug research situation in the Member States as well as to examine the specific research needs, constitutes a contribution which may prove useful in the context of the preparation of the 5th Framework Programme and the 2nd tri-annual Work Programme of the EMCDDA.
4. On the basis of the presentation and discussion, by all participants at the Seminar, of the research overview, it was concluded that there is a considerable need for international research in the following areas:
 - drug policies and strategies;
 - treatment;
 - risk factors;
 - aetiology;
 - socio-economic aspects;
 - supply of drugs;
 - prevalence, incidence and patterns of drug use;
 - prevention.
5. In addition, a number of needs which cut across the above areas have been mentioned as important:
 - the interest to define research priorities in terms of **research questions** rather than in terms of research disciplines;
 - the value of **cross-national** and comparative studies;
 - the use of research on the **comparability** of research methods and research instruments;
 - the priority of **qualitative** research;
 - the relevance of outcome and **cost-effectiveness studies**;
 - the role of **multi-factorial** and therefore **multi-disciplinary** and **inter-disciplinary** studies.
6. In the context of the above conclusions on research needs, a number of support structures and mechanisms have been mentioned as most likely to be crucial for a much needed contribution to their effective implementation:

- The Research Council Conclusions of 5/12/1996 on the "Role of Research in the Fight Against Drug Abuse".

It has been recognised that principally the above mentioned research needs fall within the scope of the four areas specified in the Council Conclusions. The Commission in collaboration with the incoming Dutch Presidency has been called upon to take the research needs, as identified in the high level workshop of 12 November and reiterated by the Seminar in Florence, into consideration when elaborating a detailed Work Programme implementing the Council Conclusions of 5/12/1996, as well as in the context of preparing priorities for the 5th Framework Programme.

- In the context of the current 4th Framework Programme, a number of Community research programmes contribute or could contribute to the specified research needs: BIOMED, TSER, COST A6, SMT (in particular through its "dedicated calls for proposals") and JRC (in particular with regard to physical detection and drug profiling research).

In addition, the Council of Europe's Pompidou Group (in particular its sub-group on epidemiology) was mentioned.

- The EMCDDA with its REITOX-network covers already a part of the above mentioned research areas and can play an important role also in the context of the other specified research needs, especially in the formulation and implementation of research in its competent fields. The EMCDDA also has a mandate to update the overview of existing research and research needs.
- The Drugs Coordination Unit of the European Commission contributes, with its REITOX Focal Point in particular, in increasing the accessibility of information on Community research programmes functions as a liaison between DG XII, JRC and the EMCDDA and helps to ensure that the needs of the different Commission drug services will be reflected in the 5th Framework Programme.
- The Robert Schuman Centre at the European University Institute in Florence contributes and can increasingly contribute in the future to the coordination and implementation of social science research on drugs.

7. In the light of the above-mentioned needs and mechanisms, the Seminar concluded that the following requirements would be instrumental for the success of an integrated research approach :
- The necessity for adequate funding at national as well as at Community level. The funding should not only cover coordination costs for research, but also the research itself. Projects should preferably be funded for a number of years (4 to 5 years).
 - The necessity for an effective coordination structure which assures the development and sustainability of high quality research with long lasting impact. The research needs mentioned above require an active "top-down" type of coordination structure to arrive at a sustainable research field.
 - The necessity for training and exchange programmes for drug researchers.
 - The necessity to increase the accessibility, transparency, distribution and co-ordination of information on research funding possibilities. In this respect the REITOX-network can play a crucial role.
 - The necessity to increase the validation, accessibility and visibility of research results. Also here the EMCDDA and the REITOX-network, and especially the EC Drugs Coordination Unit can play an important role.
 - The necessity to increase the dialogue between policy makers and researchers on policy needs for research, as well as on research results for policy making. Also here the EMCDDA and REITOX-network can play an important role in facilitating this dialogue.
8. Finally, the Commission's Drugs Coordination Unit and the EMCDDA invited the Robert Schuman Centre of the European University Institute in Florence to circulate as soon as possible the presentations and conclusions of the Seminar to all partners concerned.



Finito di Stampare
presso il Centro Stampa 2P
Pontassieve (Fi)
nel mese di Marzo 1997