The European Convention and drugs

The Convention on the Future of Europe was created by the Laeken European Council in February 2002 to prepare for the forthcoming enlargement of the EU. Its ultimate goal is to draw up a new Constitutional Treaty that would simplify and improve the functioning of an enlarged Union.

The Convention is composed of: the Chairman and two Vice-Chairmen; representatives of Heads of State and Government; national parliaments; the European Parliament; and the European Commission. Also participating as observers are: the Economic and Social Committee; the Committee of the Regions; the European Ombudsman; and the social partners. Civil society and the general public are also given a voice via the Convention website or through direct access to debates. The Convention operates through a series of working groups and monthly plenary sessions.

In October 2002, a skeleton draft Constitutional Treaty was drawn up, based on the results of 10 working groups. These groups operated in the second half of 2002 and examined issues such as: the division of competence between the EU and its Member States; the strengthening of the EU’s democratic legitimacy; and the definition of the EU institutions’ respective tasks. The draft treaty is divided into two parts: the first outlining the key principles, values, objectives and competences of the enlarged Union; and the second detailing specific policies and their implementation.

This Spring, members of the Convention analysed a series of draft written articles consolidating the draft treaty structure. They are now in the process of reacting to these proposals via written amendments which are discussed in plenary. Although the drug phenomenon was not mentioned in these draft articles, some amendments have been submitted by members favouring the insertion of this issue into the future treaty. Three proposals have been made to date. Two call for the insertion of the fight against drugs into Article 12 on ‘Shared competences’ between the EU and the Member States (in the same way as

Drugs in an enlarged EU

Public fears about drugs in an enlarged European Union of up to 28 countries often focus on the role of the Central and East European Countries (CEECs) in drug trafficking. But a new development is that candidate countries have become ‘a clear target for drug consumption’, states the latest edition in the EMCDDA’s Drugs in focus series (March–April).

In most candidate countries, ‘recreational drug use and experimentation are increasingly becoming an integral part of youth culture’, says the briefing. ‘There has been a rise in experimental drug use in the general population in all CEECs in the last 10 years. But the trend is particularly visible in schools, where the number of pupils aged 15 to 16 who have tried any illicit drug at least once, doubled between 1995 and 1999’.

EMCDDA Management Board Chairman Marcel Reimen urges continuing support by the EU to enable candidate countries to ‘align their actions in the drugs field with those of the EU and its current Member States’. He states that it is essential for candidate countries to strengthen their drug coordination and information mechanisms and ‘allocate, where appropriate, adequate resources to them’. The policy briefing is available in 12 languages at: http://www.emcdda.eu.int/infopoint/publications/focus.shtml A news release is available at: http://www.emcdda.eu.int/infopoint/news_media/newsrelease.cfm

Continued on page 8
Drug situation

Can HIV epidemics among IDUs ‘trigger’ a generalised epidemic?


The first article (1) predicts large generalised HIV epidemics in Eastern Europe, reaching up to 80% prevalence in the general population. However, such an outcome is associated only to a very slight extent with early and large epidemics among injecting drug users (IDUs).

The second study (2), using Asian data, predicts ‘only’ 3% HIV prevalence in the general population infected after 20 years. However this would, to a very large extent, be caused by HIV transmission from IDUs and sex workers.

Although these models differ greatly in their prevalence outcomes, they both suggest that the contribution of IDUs to heterosexual transmission can be very large so long as prevalence remains relatively low. Whether or not vast uncontrolled heterosexual epidemics subsequently occur will probably depend on factors in the general population unrelated to IDU (mean rate of partner change, sexually transmitted infections (STIs), etc.) (1). Such factors may be estimated from behavioural surveys and STI surveillance and their effect on the HIV epidemic may be investigated through mathematical modelling.

The implications for HIV prevention are evident: existing cost-effective measures for HIV prevention among IDUs can avert very large numbers of infections in the general population. In addition, prevention work needs to address sexual risk in the general population.

Lucas Wiessing and Mirjam Kretzschmar


Drug data and the criminal justice system

In recent years, the EMCDDA has developed an ‘Information map’ on law-enforcement sources, designed to improve the reliability and comparability of drug-related data from the criminal justice system. National focal points in 13 EU Member States submitted their reports in 2000–2001. The aim was to gain an insight into the nature and availability of data on drug laws, drug use among criminal populations in the EU.

A three-volume report, concluding a comparative analysis of material submitted, is now available online. The analysis allowed a better understanding of: routine information systems; data reporting and recording; and data availability and accessibility. It also threw light on primary data sources, such as law-enforcement agencies and on the types of data available at each stage of the judicial process.

Similarities and differences detected between countries show that comparability in this field is hard to achieve. Nevertheless, contextual and methodological knowledge of the data are still crucial to avoid inappropriate and misleading comparisons. It is hoped that this study will contribute to this knowledge.

Chloé Carpentier

For more, see http://www.emcdda.eu.int/situation/themes/crime_information_map.shtml

The number of new HIV diagnoses in Eastern Europe has increased dramatically, up from 234 cases in 1994 to 99,499 in 2001

Eastern Europe’s HIV time bomb

A recent review published in The Lancet describes the explosive expansion of HIV among injecting drug users (IDUs) in Eastern Europe (1). The number of new HIV diagnoses has increased dramatically, up from 234 cases in 1994 to 99,499 in 2001.

Around 54% of these cases are reported to be IDUs. It is also suspected that most of the cases reported with unknown transmission mode (39%) are IDUs, given the gender distribution of 75% male.

The increases in HIV rates are geographically very diverse. Two regions that experienced early IDU epidemics (the Ukraine and Belarus) are currently showing a shift towards heterosexual transmission. HIV prevalence in the general adult population is currently over 1% in the Ukraine, meeting the definition of a generalised epidemic.

By contrast, in Central Europe, there are no explosive rises in HIV among IDUs at the moment, although, in Poland, prevalence among IDUs is again on the rise. It is noteworthy that Central European countries tend to favour harm-reduction interventions rather than abstinence-oriented approaches, although such services are now also expanding in Eastern Europe. The authors conclude that Eastern Europe will soon be confronted with a major AIDS epidemic.

Lucas Wiessing


See also http://news.bbc.co.uk/2/hi/health/2869689.stm
EMCDDA releases new study on social reintegration

The EMCDDA published an online study in March on social reintegration in the EU and Norway. The report examines approaches to social reintegration in the 16 countries and presents an overview of the state of the art. Also assessed are the accessibility and availability of social integration services in each of the countries.

Despite considerable differences between countries, some common features were identified. For example, in all countries, three major areas of intervention in social reintegration could be identified: housing; employment; and education/training. Curiously, while terms for these three areas were widely applied, the concept of social reintegration was almost never explicitly defined.

Three types of service provision were also identified. The first involved providing social reintegration for all excluded groups, including: the homeless; sex workers; alcoholics; and problem drug users. This practice appeared predominant in Spain, France, the Netherlands and the UK.

The second type involved offering social reintegration to addicts in general, including problem drug users. This practice was seemingly predominant in Belgium, Germany, Ireland, Finland, Sweden and Norway.

The third involved the provision of services exclusively for problem drug users. This was the case in Denmark, Greece, Italy, Austria and Portugal.

The study underlines the difficulty in obtaining a reliable quantitative overview of the accessibility and availability of social reintegration for problem drug users in the EU Member States and Norway that would allow a full cross-country comparison. The reasons for this are twofold: data on social reintegration interventions are often hidden within overall treatment data, and many interventions are not destined exclusively for problem drug users.

Ulrik Solberg

On-site pill testing

A European Commission-funded evaluation study of on-site pill-testing interventions in Amsterdam, Hanover and Vienna has recently been added to the EDDRA database.

The study, involving 750 people, tested several hypotheses and drew the following conclusions.

In the area of primary prevention, the study concluded that pill-testing services:

- will most likely not extend the circle of ecstasy users;
- deter potential ecstasy users from first use of the drug; and
- demystify synthetic drugs.

In the area of secondary prevention, the study concluded that pill-testing services:

- enable drug workers to contact and communicate with drug users who were previously out of reach;
- result in better-informed drug users and increasingly health-conscious behaviour; and
- provide a context where health warnings about dangerous substances are received with more credibility and acceptance.

Gregor Burkhart

This study is available at http://eddra.emcdda.eu.int:8008/eddra/plsql/showQuest?Prog_ID=2828

This article does not constitute any formal recommendation from the EMCDDA in favour or against pill-testing measures.

Quality assurance in treatment and social reintegration

The EMCDDA will publish an online study in May outlining measures taken in the EU Member States and Norway to assure quality in treatment and social reintegration services. The information presented is based on 2002 Reitox national reports.

The publication opens with an introductory chapter defining quality assurance. This is followed by a brief overview of the state of the art of quality assurance in each country, also examined in the context of the EU action plan on drugs (2000–2004).

As this field is highly complex and every country has its own way of approaching such measures, no conclusive opinion on the adequacy or existence of quality assurance measures could be drawn at European level. This was confounded by difficulties in translating key national terms into a harmonised English terminology. However, the publication does illustrate the diversity of quality assurance measures and how their coverage can vary.

Finally, the study addresses the issue of EU initiatives on quality assurance in treatment and social reintegration services. It highlights in particular the Methadone guidelines compiled by Methwork (http://www.q4q.nl/methwork/home2.htm) with financial support from the European Commission.

Ulrik Solberg
The Video Project: First aid in drug emergencies

The German NGO, Fixpunkt, has been running an innovative combined scheme of first-aid training and naloxone distribution for opiate users in Berlin since 1999. Training drug users to identify risks, recognise overdose signs and apply first-aid measures correctly increases their competence to help others when witnessing an overdose.

Motivating clients to attend a first-aid training course was the first hurdle the organisation had to overcome. It did so by means of an educational video which involved drug users in on-screen performances as well as in all stages of production.

A recent study has now evaluated the effectiveness of the video film in terms of viewer acceptance, knowledge improvement and motivation enhancement. The evaluation was carried out on a total of 180 viewers (45 (ex-) users and 135 professionals working in the field of assistance to drug users).

The two sub-groups were required to complete a standardised questionnaire, once before and once after the video showing. Both versions of the questionnaire assessed first-aid knowledge, in particular adequate immediate life-saving measures; effective cardiopulmonary resuscitation (CPR); and correct use of the recovery position. The post-viewing version of the questionnaire included additional rating scales to assess viewers’ satisfaction with the form, content, and clarity of the video. It also included ratings of the perceived usefulness of the film for didactic purposes.

The video was very well accepted by both the drug-user and professional sub-group, resulting in positive evaluations across all aspects of the video in 85% to 100% of viewers.

Comparisons of first-aid knowledge before and after the viewing revealed the video’s strong impact (eta squared= .42) on both subgroups in terms of increased expertise and the other areas under study.

After viewing the video, 84% of the professional subgroup were confident that the video could enhance drug users’ training motivation. In the drug-using sub-sample, motivation to attend a first-aid training course increased by 20%.

The evaluation of the video and its effectiveness strongly corroborates the usefulness of this educational method as a supportive tool within a broader harm-reduction/prevention programme to prevent fatal overdoses in drug users.

Kerstin Dettmer and Anand Pant
E-mail: k.dettmer@fixpunkt.org or pant@ipg-berlin.de • http://www.fixpunkt.org

For an English summary of the project see:

Bookshelf
Women and opiate addiction: a European perspective

Until the late 1980s, female drug addiction was considered a simple extension of male addiction and little attention was paid to female epidemiological profiles or welfare needs. Such disregard for gender differences in the field of drug research is addressed in this recent study by the European network, Irefrea, as part of an ongoing series of works on female drug addiction, funded by the European Commission.

The book explores drug addiction from a female point of view and underscores the complex situation of women ‘at risk’ or in states of ‘psychological discomfort’ caused by drug use. Chapter 1 presents an epidemiological study carried out by Irefrea on the living conditions of drug-addicted women in Europe. It looks at: psychological reasons for first consumption; the need for psychological support; overdose; job instability; and pregnancy. Other themes covered by the book are: treatment and therapy; substitution treatment; and drug-related crime.

Authors: Various
Published by: Irefrea
Language: English
Date: October 2002
ISBN: 84-931947-2-7
Price: Free and downloadable from the Irefrea website
E-mail: irefrea@irefrea.org
Ordering information:
http://www.irefrea.org

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

Candidate countries urged to invest in drugs problem

National Members of Parliament from the 13 EU candidate countries met on 5 March in Athens at the initiative of the EMCDDA and the Greek Presidency (1). The meeting aimed to increase awareness among decision-makers in these countries of the EU action plan on drugs, and how the EMCDDA and national focal points in the region are monitoring the plan’s implementation.

Current chair of the Council’s Horizontal working party on drugs, Anna Kokkevi, expressed her hope that authorities in the candidate countries would allocate sufficient resources to the fight against drugs, matching the commitment of the EU and its Member States.

EMCDDA Chairman Marcel Reimen urged authorities in these countries to boost efforts to develop national drug strategies and coordination mechanisms and to set up Reitox national focal points. He recalled that in February 2002 candidate country Ministers had expressed ‘their will to continue to consolidate the process of institutional, regulatory and administrative reinforcement that will ensure that these instruments are developed’ (2).

Finally Mr Reimen reported a decision of the EMCDDA Management Board to invite all 10 acceding countries to its next meeting in July as observers. He also stated that Bulgaria, Romania and Turkey would also be invited, if official negotiations for membership of the EMCDDA initiated in March 2002 were concluded in the meantime.

Alexis Goosdeel

(1) Joint declaration on drugs of the EU Justice and Home Affairs Ministers and Ministers of the candidate countries, 28 February 2002.

Drugs-Lex

Belgium to modify law on cannabis possession

On 27 March, the Belgian Parliament approved a law which, among others, will remove criminal penalties for cannabis possession in certain circumstances. The law is part of a legislative package that will include an inter-ministerial decree and a binding directive for prosecutors to interpret the aspects of the new law regarding cannabis use and possession.

The issue has been the subject of fierce debate in Belgium over the last two years. The full legislative package places less emphasis on controlling cannabis use in private, provided users do not disturb the peace. Its sale however will remain a criminal offence and penalties for unauthorised possession of other controlled substances, for any reason, remain unaltered (three months to five years in prison).

Misleadingly described by some media as ‘legalising’, the change in practice means that any adult found in possession of up to five grammes of dried cannabis plant or resin for personal use, with no aggravating circumstances, will not be subject to criminal action but will receive a simple warning and a police fine of €15–25. A fine of €26–50 will apply for repeat offending within one year. A third offence within a year of the second may result in imprisonment for eight days to one month. In cases involving an element of public nuisance, such as smoking in the presence of minors, the penalty will be three months to one year in prison and/or a fine of €1000–€100 000. Where problem use is detected, the offender will be assigned a case manager by the prosecutor in order to receive appropriate therapeutic counselling.

The new law also modifies the main Belgian drug law of 1921, and its decree of 1930, to include psychotropic substances and precursors. The offence of using drugs in a group has been removed, but provisions protecting minors have been strengthened. The accompanying decree and directive, required to effect the change of controls on cannabis, had not been published at the time this article went to press.

Danilo Ballotta and Brendan Hughes

Partners

Commission on Narcotic Drugs

The Commission on Narcotic Drugs (CND), the central UN policy-making body dealing with drug-related issues, held its 46th session in Vienna from 8–17 April. The final two days of the meeting were reserved for ministerial-level discussions on the progress made towards meeting the goals of the 10-year action plan against illicit drugs, approved in 1998 by the United Nations General Assembly Special Session on Drugs (UNGASS).

In a formal statement, the ministers and governmental representatives expressed, among others, their ‘grave concern’, regarding policies and activities favouring legalisation of illicit drugs and psychotropic substances ‘not in accordance with the international drug control treaties and that might jeopardise the international drug control regime’.

They reiterated the importance of State parties’ fully implementing the UN Conventions (1961, 1971, 1988) and urged them to ‘take all measures to safeguard the integrity of the regime’.

The statement comes in the wake of a strong movement in recent months on the part of NGOs and other groups to revise the current UN Conventions. On 11 April, the European Parliament rejected a report (K.M. Buitenweg, NL) which called for an evaluation of the UN Conventions and their classification of drugs.

In a report submitted to the CND, Antonio Maria Costa, Executive Director of the UN Office on Drugs and Crime, stated that: ‘in recent years, efforts to reduce abuse of illicit drugs have shown signs of progress’. He encouraged further ‘progress towards still distant goals’. 
**Czech-Austrian twinning project**

A Phare twinning project (1) between the Czech Republic and Austria, aiming to strengthen the Czech drug policy, came to a close in January 2003.

Czech and Austrian partners collaborated closely on the project’s key objectives:

- improving drug policy coordination structures;
- drafting curricula and manuals for drug assistance work;
- training drug experts and decision-makers;
- developing a Czech drug monitoring system;
- institution-building (Czech national focal point).

This collaboration resulted in a fully established and operational national focal point in the Czech Republic which now acts as the national drug monitoring centre. This new body, based at the Secretariat of the National Drug Commission, will collate all available national data and information on drug issues and, in turn, inform Czech drug policy via evidence-based responses to requests from policymakers and drug professionals.

Also set up were central databases serving as key drug-monitoring instruments and a website offering easy public access to drug-related data and information.

_Sabine Haas and Victor Mravcik_

For further information, please contact: Sabine Haas, ÖBIG, Stubenring 6, A-1010 Vienna. Tel: ++43 1 51 56 11 60. Fax: ++43 1 513 84 72. E-mail: haas@oebig.at • [http://www.oebig.at](http://www.oebig.at)


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(1) Drug twinning projects are financed by the Phare national programmes and implemented in the beneficiary candidate country in cooperation with one or more EU Member States.

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**Greek and Dutch drug strategies in a European perspective**

‘Greek and Dutch drug strategies in a European perspective’ was the title of a seminar organised under the Hellenic Presidency of the EU from 20–21 March in Athens. On the initiative of the Embassy of the Netherlands in Greece, the Ministries of Health of the two countries entrusted the Greek focal point and the Trimbos Instituut (hosting the Dutch focal point) with the organisation of the event. The aim was for the two Member States to exchange experience on drug policy issues.

The agenda focused largely on the presentation of the two national drug strategies, and the evaluation thereof, as well as the focal points’ contribution to them. Other subjects addressed were new approaches in demand and supply reduction and efforts to find common ground in these two fields.

The Greek Minister of Health and Welfare, Prof Costas Stefanis, and the Ambassador of the Netherlands to Greece, Paul. R. Brouwer opened the event. Melpomeni-Minerva Malliori, Member of the European Parliament, presented the main conclusions of the mid-term evaluation of the EU action plan on drugs (2000–2004). Finally, Alexis Goosdeel, EMCDDA enlargement manager, presented the drug situation in the EU candidate countries and the role of the agency in assisting them technically.

The seminar successfully fulfilled its goal of bringing Greek and Dutch professionals closer together through the exchange of experience, ideas and concerns. The two parties agreed that the Greek focal point and Trimbos Instituut should continue to co-operate bilaterally in the future (see [http://www.ektepn.gr](http://www.ektepn.gr) [news]).

_Franz Trautmann and Manina Terzidou_

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**Spotlight**

*Tendances*: new editions

The French national focal point, the Observatoire français des drogues et des toxicomanies (OFDT), has recently launched in its Tendances (Trends) series the following titles:


This records the results of OFDT’s recent survey on representations, opinions and perceptions on psychotropic substances. The survey shows that 60% of the French population are well-informed on drugs (see Drugnet Europe No 40).

- _Les consommations de produits psychoactifs dans les milieux festifs de la culture rock (Psychoactive substance use in the dance and rock culture scene)_ (No 27, December 2002).

This briefing presents the findings of an OFDT study on drugs in the nightlife scene, in particular the dance/rave and heavy rock scene. Tobacco, alcohol and cannabis appear to be the most frequently used drugs. Consumption differs according to the style of music and festival.

- _Intérêt, limites et méthodes de recherche sur Internet dans le domaine des drogues et des addictions (Interest, limits and research methods on the Internet in the area of drugs and drug addiction)_ (No 26, December 2002).

*Continued on page 7*
Products and services

New publications

Overview

The EMCDDA has recently published a promotional flyer.

Coming soon

‘Coordination of national and international strategies in the field of drugs’, Drugs in focus, EMCDDA policy briefings, No 9, May-June 2003.

Further information on all EMCDDA publications and details of how to order titles are available on the EMCDDA website at http://www.emcdda.eu.int/infopoint/publications.shtml.

News and media services

EMCDDA relations with key media in the EU candidate countries will be facilitated in 2003 thanks to recent collaboration between the agency and the 13 candidate country focal points. During the month of March, the new focal points assisted the Centre in compiling exhaustive national press lists. The result is a comprehensive candidate countries section in the EMCDDA press database.

Journalists from all world regions may also register on the EMCDDA website and sign up to receive news releases, newsletters, reports, etc. (http://www.emcdda.eu.int/infopoint/register.cfm). A Director’s ‘Quotebank’ has also recently been added to the News and media services section of the website to provide journalists with useful background comment (http://www.emcdda.eu.int/infopoint/news_media/quote_bank.shtml).

Tendances: new editions

Continued from page 6

This edition looks at how the Internet has transformed the field of scientific information and drug prevention in the last 10 years. It is a methodological and research-oriented document that explores categories and characteristics of key drug sites (EMCDDA, INCB, Pompidou Group, etc.); research methods via the Internet; and the evaluation of sites.

Tendances is a four-page publication issued six times a year. Its goal is to provide managers, professionals and researchers with a regular and complete view of prospective and retrospective trends in psychoactive substance use.

The publications are available in French (http://www.ofdt.fr/ofdt/tend.htm) and in English (under professional knowledge/specific themes) (http://www.drogues.gov.uk/uk/index.html).

For further information, please contact: Observatoire français des drogues et des toxicomanies (OFDT), 105 rue Lafayette, F-75110 Paris, France.

Tel: ++ 33 1 53 20 16 16.
Fax: ++ 33 1 53 20 16 00.

Resources

Useful materials and events on the drugs issue

Methadone briefing online

A new online version of the booklet Methadone briefing was released in March. This provides comprehensive background on the history, research, pharmacology and legal aspects of methadone prescribing and focuses on issues such as treatment, dosage and detoxification.

http://www.saferinjecting.org/publications/methadone_briefing/intro.html

Drug prevention and the family

Intervención familiar en la prevención de las drogodependencias (Family intervention in drug prevention) is a recently published work resulting from research by Spanish experts into risk factors and family prevention programmes.

Downloadable free of charge from:


Drug education pack

‘Live life to the full’ is the title of a new drug resource pack released by the drug education charity, Hope UK.

The pack, targeted at church leaders, includes sections on dealing with drug use and on drug awareness and prevention activities.

E-mail: g.ruston@hopeuk.org

http://www.hopeuk.org

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources or events are invited to contact Kathryn.Robertson@emcdda.eu.int
EMCDDA meetings
5–6 May: 4th Reitox national reporting working group, Lisbon.
8 May: EMCDDA working group on the analysis of treatment demand data relating to cannabis, Munich.
12 May: 19th EMCDDA Scientific Committee meeting, Lisbon.
19–20 May: Final Reitox national reporting working group, Athens.
21–23 May: 27th Reitox focal point meeting, Athens.
22–23 May: EMCDDA working group on incidence and prevalence estimation, Lisbon.
6 June: EMCDDA Bureau meeting, Lisbon.
16–17 June: 4th meeting of legal correspondents, Lisbon.
23–24 June: EMCDDA expert meeting on treatment demand indicator, Lisbon.
25 June: Meeting with international organisations on treatment demand indicator, Lisbon.
26–28 June: EMCDDA expert meeting on selective and indicated prevention, family-based prevention and community-based prevention, Lisbon.

External meetings
16–17 May: Expert meeting on European drug abuse prevention trial, Bilbao.
12–13 June: Seminar on early interventions, Athens.
12–13 June: Mainliners 7th International Hepatitis C Conference, Edinburgh.
26 June: International day against drug abuse and illicit drug trafficking.

EU meetings
12 May: European Commission steering group on EU action plan on drugs, Brussels.
13–14 May: Horizontal working party on drugs, Brussels.
3 June: Horizontal working party on drugs, Brussels.

Statutory bodies
Enlarged Scientific Committee draws up new risk-assessment reports

Four risk-assessment reports on the new synthetic drugs 2CI; 2CT2; 2CT-7 and TMA-2 were submitted by the EMCDDA to the European Council and Commission on 4 April. The reports were drawn up at a meeting in Lisbon from 31 March to 1 April under the auspices of an enlarged EMCDDA Scientific Committee (1). The drugs were singled out by the Council of the EU for risk assessment on 12 December 2002 under the 1997 joint action on new synthetic drugs (see Drugnet Europe No 39).

The reports conclude that, due to their structural features, the four drugs are potent hallucinogens/stimulants, similar to substances already classified under Schedules I and II of the 1971 UN Convention on Psychotropic Substances. They also note that the substances have no current medical or industrial use.

The reports recommend that, due to a potential serious health risk, the four drugs should be controlled substances, although some experts consider that insufficient scientific evidence exists to support such a decision. Experts agreed however that whatever the control measures chosen, they should contribute to collecting and disseminating accurate information on the substances to users and to relevant professionals for preventive and harm-reduction purposes.

Alain Wallon and Roumen Sedefov

(1) Composed of Scientific Committee members; experts nominated by the EU Member States; representatives of the European Commission, Europol and the London-based EMEA.

The European Convention and drugs

Continued from page 1

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The European Convention and drugs

Continued from page 1

public health, the environment, security and justice. The third proposes that it fall under Article 15 on ‘Articles for supporting action’, in which the EU may take coordinating or supporting action in fields such as employment, education, culture and sport.

A single framework on drugs under the Convention could smooth the progress of European action on drugs. Despite the political will for a global and balanced approach to the drug phenomenon in the EU as expressed by the EU drug strategy (2000–2004), the legal context remains extremely complex and fragmented between the 15 countries.

A revised draft treaty will be presented following the Convention’s next plenary session in mid May. The Convention should conclude its work in the coming months and submit its results to the European Council. These results will then serve as a working base for the intergovernmental conference convoked by the Treaty of Nice to take place in 2004.

Cécile Martel

For more, see http://www.european-convention.eu.int