EU drug markets: a strategic analysis

Europe is entering an important new era in the supply and demand for illicit drugs — a development which is challenging current policies and responses. This is according to the first joint EMCDDA–Europol EU drug markets report launched in Brussels on 31 January by EU Commissioner for Home Affairs Cecilia Malmström. The Commissioner was joined at the press conference by Europol Director Rob Wainwright and EMCDDA Director Wolfgang Götz.

Following a request from the Commissioner in 2011, the two agencies joined forces to provide the first strategic analysis of the European illicit drug market in its entirety. In the report, they describe a market which is increasingly dynamic, innovative and quick to react to challenges and one which requires an equally dynamic, innovative and agile response across Europe. Among others, the report unveils the ‘changing face of organised crime in Europe’.

While, historically, the EU drug market focused on specific drugs trafficked by specialised operators along well-defined routes, the contemporary market is more ‘fluid’, with new routes and multi-substance consignments becoming more common.

‘This timely report shows the increasingly joined-up nature of the modern European drug market, one of the most complex and invasive criminal phenomena of our times’, said Commissioner Malmström, presenting the findings. ‘Organised crime groups are now more likely to deal in many substances at once and are more likely to join forces. Drug trafficking is also diversifying, both in terms of the complexity of the routes chosen and the drug types moved along them. This all calls for increased cooperation at EU level. National measures are simply insufficient, no matter how robust they are. By combining insights from the EMCDDA’s monitoring of Europe’s drug phenomenon with Europol’s operational understanding of trends in organised crime, the analysis offered by this report is unique’.

Europol Director Rob Wainwright added: ‘International drug trafficking remains the principal activity of most organised crime groups. They are adapting to new criminal opportunities and changing smuggling methods and routes to evade law enforcement, and we have noticed an increase in the exploitation of legitimate commercial transportation options, such as containers, aircraft, couriers and...’

Call for EU-wide ban on 4-MA

The European Commission proposed on 31 January an EU-wide ban on the stimulant drug 4-methylamphetamine (4-MA), a synthetic phenethylamine closely related to amphetamine (1). The call from the Commission to the Council of the EU comes in the wake of a formal risk assessment on 4-MA carried out by an extended EMCDDA Scientific Committee on 16 November 2012 (2). The risk assessment report detailed 21 fatalities in four EU Member States (Belgium, Denmark, the Netherlands and the UK), where 4-MA was detected in post-mortem samples, either alone or in combination with other substances, in particular amphetamine. The report also describes how 4-MA can have serious adverse effects, such as hyperthermia, hypertension, anorexia, nausea, headache, insomnia, paranoia and anxiety. Fourteen European countries provided data on seizures of the drug where it had been sold as amphetamine and frequently mixed with it. 4-MA has no established medical value or other known legitimate purpose.

The report was submitted to the Commission and Council in November 2012. In line with the three-step legal procedure through which Europe monitors and acts on new drugs, the Commission must recommend to the Council whether or not the drug should be submitted to control measures in the EU Member States. Following the Commission’s proposal to subject 4-MA to criminal sanctions across Europe, EU governments must now decide on whether to put these measures into force, voting by a qualified majority in the Council.

2 www.emcdda.europa.eu/activities/action-on-new-drugs
Drug trafficking is a highly profitable commercial activity and a core business for organised crime groups across Europe today. Understanding the reality of the European drug market requires a holistic approach, following the economic chain from production, via trafficking, to consumption. The EMCDDA–Europol EU drug markets report, launched on 31 January, provides the first state-of-the-art overview on this topic and unveils new trends in smuggling and consumption. Commenting on evolving drug markets, European Commissioner Cecilia Malmström said: ‘Our future success will depend on ensuring that our policies are based on sound analysis, that our law enforcement is grounded in intelligence, and that Europe’s efforts are united and coordinated’.

Chapters on specific drugs begin with key statistics ‘at a glance’ and end with EU policy responses and operational and international initiatives. Under the headings ‘Drivers of change’, ‘Drugs in perspective’ and ‘Information needs’, Chapter 10 identifies key action points to inform future policies. This edition of Drugnet Europe presents highlights from the report (see also pp. 1, 7 and 8).

For the report, case studies, press and audiovisual materials, see www.emcdda.europa.eu/events/2013/drug-markets

Drivers of change

Globalisation and technology

Globalisation and technology have transformed the modern European drug market into one which is quick to identify opportunities, exploit weaknesses and respond to countermeasures. Multicommodity trafficking, diversified routes and use of commercial transportation options all contribute to the ‘changing face of organised crime’ portrayed in the report (see also p. 8). Here, partnerships are encouraged with industry to address the misuse of commercial channels for trafficking, as well as with credit card and online payment providers to tackle the Internet drug market by creating barriers to sales. Other action points proposed are that law-enforcement actors prioritise, to a larger extent, intelligence gathering on high-profile individuals and criminal groups.

It is impossible to understand the European drug market without locating it within a global context. The report explores the changing global marketplace (demand for drugs in the developing world) and calls for positive engagement with a larger number of producer and transit countries.

Information needs

Need for integrated information

‘Understanding a complex phenomenon such as the drug market requires sound analysis informed by data on both supply and demand’, states the report. In order to improve the measurement of drug markets and the effectiveness of supply reduction responses, data must be based on common definitions and standards. Here, the report underlines the importance of key indicators to provide the building blocks for robust time-series analysis. Also underlined is the strategic and operational importance of scaling up and developing forensic information (‘capacity at EU level is currently insufficient’) and the value of operational intelligence to enrich statistical analysis.

Drugs in perspective

European drugs problem moves into new phase

The European drugs problem is moving into a new phase: substances and patterns of use that have characterised the drug market for the last 30 years now share the stage with a wide range of newer substances and behaviours. The report describes a European heroin market, for example, which is less important today in global terms, with non-EU heroin markets now larger and easier to penetrate. New cocaine trafficking routes are also emerging. Cocaine concealed in container shipments is becoming more common, and recent major seizures have been made in the Black Sea and Eastern Baltic Sea areas. Here, multagency working partnerships, placing container traffic in the spotlight, are recommended between customs, port authorities and commercial transport bodies.

Domestic production of herbal cannabis in Europe is underlined in the report as a major challenge for law enforcement. Countries are encouraged to share know-how and to improve monitoring of yields and potency. Recent developments in the synthetic drug market outlined in the report include a bounce-back of ecstasy (MDMA) and increased availability of methamphetamine. Rapid developments in the area of new and synthetic drugs means that Europe needs to scale up its early-warning capacity for new substances. Keeping up-to-speed with Internet trends; employing fast-track EU-wide alerts; and boosting forensic capacity to improve detection are among the measures promoted in the conclusions.
New developments

New EU drug strategy endorsed

A new EU drug strategy (2013–20) was endorsed by the Justice and Home Affairs Council on 7 December 2012. The strategy aims to protect and improve the wellbeing of the individual and society, safeguard public health and offer a high level of security to the general public. Through an integrated, balanced and evidence-based approach, it will contribute to reducing drug demand and drug supply as well as drug-related health and social risks.

The approach set out in the document supports and complements national drug policies and provides the overarching political framework and priorities for EU drug policy identified by Member States and EU institutions for the period 2013–20. It also forms the basis for EU external cooperation in this field. The strategy is structured around two main policy areas (reducing supply and demand) and three cross-cutting themes (coordination; international cooperation; and research, information, monitoring and evaluation).

Two consecutive four-year action plans, to be drafted by corresponding EU Presidencies in 2013 and 2017, will translate the strategic priorities into a list of specific actions. The Irish Presidency of the EU is currently working within the Horizontal working party on drugs of the Council of the EU on drafting the first of these action plans (2013–16). Expected to be adopted in June 2013, this plan is structured around the abovementioned policy areas and cross-cutting themes.

All targeted actions identified will be evidence-based, scientifically sound and cost-effective and aim for realistic and measurable results that can be evaluated. They will also be time-bound, have associated benchmarks and performance indicators and identify responsible parties for their implementation, reporting and evaluation.

The strategy builds on lessons learned from the implementation of previous EU drug strategies and associated action plans, including the findings and recommendations from the external evaluation of the previous strategy (2005–12). But it will also take on board fresh approaches and address new challenges identified. The document states: ‘The strategy builds upon the achievements made by the EU in the field of illicit drugs and is informed by an ongoing, comprehensive assessment of the current drug situation, in particular that provided by the EMCDDA, while recognising the need to proactively respond to developments and challenges’.

Danilo Ballotta

Measuring daily cannabis use

A recent EMCDDA Thematic paper entitled Prevalence of daily cannabis use in the European Union and Norway presents a new overview of this issue in Europe. Daily cannabis consumption is defined in the study as use on 20 days or more in the month preceding interview.

Self-reported data regarding the frequency of cannabis use from large, probabilistic, nationally representative samples of general population surveys were collected from 20 countries. This was achieved via two ad hoc data-collection rounds in 2004 and 2007 and one standard data-collection round in 2010. The EMCDDA initiative to understand the prevalence of intensive cannabis use — which is more likely to be associated with harms, including dependence — complements more traditional indicators which measure lifetime, last-year or last-month use.

The analysis offered by the report enhances our understanding of the marked increases in the demand for treatment associated with cannabis problems over the last 15 years. The study found that, on average, 25 % of last-month cannabis users consume the substance daily. This pattern of use is more prevalent among young adults (15–34 years), who represent around 70 % of daily users, and among males (almost 3.5 male cases to one female case).

The EMCDDA estimates that there are around 3 million daily cannabis users in the EU and Norway. Relatively large country variations in prevalence exist.

Danica Thanki
For more, see www.emcdda.europa.eu/publications/thematic-papers/daily-cannabis-use

Multidimensional family-therapy and cannabis use

The EMCDDA has recently conducted a meta-analysis of a multi-site European study and US studies on multidimensional family-therapy (MDFT). This integrative, family-based treatment is specifically targeted at adolescent drug use and related behavioural problems. Encouraging results have been noted in particular with MDFT and young cannabis users. Users enrolled in this type of treatment were seen to attend all scheduled sessions and, as a result, to reduce their cannabis consumption and to experience fewer symptoms of dependence. These results are of particular importance considering the rising demand for the treatment of cannabis use in Europe (see opposite).

MDFT will be one of the issues examined later this year in a new EMCDDA Insights publication on the Treatment of cannabis-related disorders and will be the subject of an upcoming EMCDDA Thematic paper.

Marica Ferri
See the EMCDDA Best practice portal www.emcdda.europa.eu/best-practice/treatment/cannabis-users
2013: the year ahead

EMCDDA embarks on new annual and three-year work programmes

The EMCDDA’s 2013 work programme — adopted by the Management Board on 6 December with a budget of EUR 16.06 million — sets out the objectives for the first year of the agency’s 2013–15 strategy. Three core principles drive the three-year work programme and also shape and focus activities in 2013. These are: a commitment to providing a relevant, timely and responsive analysis of the drug situation; achieving efficiency and ensuring that maximum value is delivered from activities and investments; and enhancing communication and a customer-oriented approach.

The 2013 work programme is structured around a number of core business areas: data collection and analysis; key epidemiological indicators; demand reduction responses; supply and supply reduction interventions; new trends and developments; drug policies and scientific coordination and research. These are all complemented by transversal and support areas.

This year will see an important shift of emphasis in how the agency monitors the drug situation, including a move towards more analytical tasks to be carried out by the EMCDDA’s scientific teams. An exciting new and extended Scientific Committee will again be co-morbidities and hepatitis C.

The year kicked off with the first strategic analysis of EU drug markets from the EMCDDA and Europol (see pp. 1–2). Other products planned for release in 2013 include: a review of the treatment of cannabis-related disorders; and an overview on therapeutic communities.

At its December meeting, the Board held elections for Chairman and Vice-Chairman (see p. 8). Also discussed were procedures for the selection and appointment of the new Scientific Committee (see below) and cooperation between the EMCDDA and Israel.

Monika Blum and Narcisa Murgea
EMCDDA work programmes available at www.emcdda.europa.eu/publications/work-programmes

Scientific Committee — expressions of interest

The 15 members of the EMCDDA Scientific Committee (plus one observer) will complete their current mandate in December 2013, having acted as guardians and advocates of the scientific integrity of the agency over two consecutive terms since 2008. A new call for expressions of interest addressed to scientists wishing to be considered for membership of the Committee for the period 2014–16 was published in the Official Journal of the EU on 22 February (deadline: 15 April).

At its last meeting in Lisbon from 15–16 November 2012, the Committee drew up a formal opinion on the agency’s 2013 work programme and undertook the risk assessment of new drug 4-MA (see p. 1). An extended Scientific Committee will again meet in Lisbon on 11 April to assess the risks of 5-IT (see p. 6).

Maria Moreira
For more, see www.emcdda.europa.eu/about/sc
Partners

EMCDDA signs accord with Charles University, Prague

The EMCDDA and the First Faculty of Medicine of Charles University, Prague, will be cooperating in training and research activities in the field of drugs in the future, thanks to a Memorandum of Understanding (MoU) signed between the two parties in the Czech capital on 22 January (1). The signatories were ProfessorAleksi Šedo, Dean of the Faculty, and Wolfgang Götz, EMCDDA Director.

Signed for an initial period of five years, this agreement establishes structured cooperation between the EMCDDA and the Faculty, promising to enhance the exchange of experts and promote the organisation of joint training activities on broad aspects of drug monitoring. A Reitox Academy training course, ‘Contemporary approaches in drug monitoring’, to take place from 15–20 April, will be the first common activity implemented under the agreement.

Designed for professionals working in the field of drug monitoring, this course aims to boost knowledge and skills on drug-related data collection, analysis and interpretation. It will present the latest developments in drug monitoring, combining long-term and routine data collection with new complementary tools and methods. The programme will also offer the participants a unique opportunity to reflect further on the role of national drug observatories in producing drug-related information that makes a difference to stakeholders.

The course will be open to participants from acceding, candidate and potential candidate countries to the EU and will be financed under the EMCDDA–IPA project preparing IPA beneficiaries to participate in the work of the agency (2,3). The Department of Addictology of Charles University (4), operating under the above Faculty, will be the EMCDDA’s main partner in implementing the course.

Ilze Jekabsone

(1) For the MoU, see www.emcdda.europa.eu/news/2013/02
(2) For more on the EMCDDA’s international cooperation activities, see www.emcdda.europa.eu/about/partners/cc
(3) For more on IPA, see http://ec.europa.eu/enlargement/policy/glossary/ermi/ipa_en.htm
(4) For more on the Department of Addictology of Charles University in Prague, see www.adiktologie.cz/

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Drugs-Lex

New report reveals risks of substance use behind the wheel

The use of illicit drugs and psychoactive medicines amongst drivers, particularly when combined with alcohol, is described in a recent EMCDDA report launched on 14 December (1). The state-of-the-art review presents the results of the largest research project ever carried out in the EU on ‘Driving under the influence of drugs, alcohol and medicines’ (the ‘DRUID’ project), which ran between 2006 and 2011 (2). Funded by the European Commission, the project was undertaken by a consortium of 38 partners led by the German Federal Highway Research Institute (BASf).

Around 30 000 people die in traffic accidents in the EU every year, with alcohol still the number one substance endangering lives on Europe’s roads (around one quarter of road deaths). The DRUID project assessed the scale of Europe’s drink- and drug-driving problem and contributed key evidence to road safety policy. It culminated in 50 project reports, running to several thousand pages. The 50-page EMCDDA review summarises the findings of these reports.

For the first time using comparable data, the project drew a map of the drink- and drug-driving problem across 13 European countries. Over 50 000 car and van drivers were tested in random roadside surveys for traces of 25 substances, including illicit drugs, alcohol and medicines. Alcohol was detected in 3.5 % of drivers, illicit drugs in 1.9 % and medicines in 1.4 %. Mixtures of drugs or medicines were found in 0.39 % of those stopped and combinations of alcohol with drugs or medicines in 0.37 %. A series of project recommendations are made to counter driving impaired by substance use.

The roadside surveys revealed cannabis (THC) to be the most frequently detected illicit drug in drivers, followed by cocaine and amphetamines. Benzodiazepines were the most frequently found medicine, with medicinal opioids less common. Across Europe, the prevalence of alcohol, cocaine, cannabis and combined substance use was found to be higher in southern and western regions. Medicinal opioids were detected more in northern Europe, while substance use was relatively low in most of the eastern region. Alcohol and drugs were found more often in male drivers, while medicines were identified mainly in middle-aged and older female drivers.

Commenting, Wolfgang Götz, EMCDDA Director, said: ‘The DRUID project has given policymakers the best available scientific evidence on levels of drug and alcohol use in drivers and the responses available today to improve road safety in Europe. The EMCDDA is proud to be associated with this project, which has set the standard for assessing drug driving in European countries in order to design more effective solutions in future’.

Brendan Hughes

(2) For more, see www.druid-project.eu
New psychoactive substances

Upcoming risk assessment on 5-IT

Another new psychoactive substance — 5-(2-aminopropyl)indole — commonly known by the abbreviation ‘5-IT’ or ‘5-API’ has caused sufficient concern at EU level to merit the preparation of an EMCDDA–Europol joint report on the substance and a request for a formal risk assessment ( ). The developments are in line with Steps 1 and 2 of the three-step legal procedure through which Europe monitors and acts on new drugs ( ).

The joint report on 5-IT follows an examination of the available information on the substance by the two agencies in September 2012 (Step 1). This phase considered: the amount of material seized; comparison by analogy with better-studied compounds; evidence of the involvement of organised crime and international trafficking; the potential for the further rapid spread, and, cases of fatal and non-fatal intoxication.

In a letter of 22 January, the Council of the EU requested the EMCDDA to carry out a formal risk assessment on the substance (Step 2). This will be carried out by an extended EMCDDA Scientific Committee in Lisbon on 11 April. The substance, first detected in Norway in April 2012, has been linked to 21 deaths in three EU Member States (Hungary, Sweden, UK) and has been detected in seven countries.

Andrew Cunningham and Michael Evans-Brown

(1) See Drugnet Europe 80. Please note that the venue and funding partners have changed. Submit abstracts via www.emcdda.europa.eu/wastewater-analysis
(2) http://sewprof-itn.eu/
(3) See Drugnet Europe 77 and www.emcdda.europa.eu/news/2012/wastewater

Third international forum on new drugs

Leading European and international experts will meet in Lisbon from 27–28 June for the Third international forum on new drugs, organised by the EMCDDA. The event follows the Second international forum co-hosted by the EMCDDA and NIDA in Palm Springs in June 2012, which focused on the global nature of the phenomenon and the importance of international cooperation in this area (1). It will also build on the results of the First international multidisciplinary forum on new drugs held in Lisbon in May 2011.

Significant developments in this domain since the 2011 forum have seen it evolve into a complex challenge for scientists, law enforcement and policymakers. This year, experts from a wide range of disciplines will be invited to discuss global developments in the new drugs field including emerging trends and pioneering legislative approaches.

The EU early warning system (EWS) operated by the EMCDDA and Europol now monitors over 250 new psychoactive substances. In 2012, 73 new substances were officially notified for the first time in the EU through the early warning system will focus on methods and mechanisms to monitor new substances and emerging trends. Given the current economic climate, the event will explore, among others, how coordinated efforts can provide added value at national level. The forum will be held in conjunction with the 13th annual meeting of the Reitox early warning system.

Andrew Cunningham and Michael Evans-Brown

(1) See Drugnet Europe 79.
(2) See Chapter 8 EU drug markets report and Case study 3 at www.emcdda.europa.eu/events/2013/drug-markets
products and services

EU drug markets report: a strategic analysis

The European drug market is a complex phenomenon, with new realities now emerging to challenge long-held certainties. The EU drug markets report from the EMCDDA and Europol published in January (see pp. 1–2) is the first comprehensive overview of illicit drug markets in the European Union to date. Individual chapters describe today’s markets for heroin, cocaine, cannabis, amphetamine, methamphetamine, ecstasy and new psychoactive substances. Each of these opens with key statistics ‘at a glance’, proceeding to address issues as broad as production, consumer markets, trafficking and organised crime. Adopting an approach which is both pragmatic and applied, the agencies identify key conclusions to inform future policies and actions. The report is an essential reference tool for law enforcement professionals, policymakers, the academic community and the general public.


Drug policy profile — Ireland

The national drug policy of Ireland comes under the spotlight in the latest volume in the EMCDDA series of Drug policy profiles published in February. Examining the evolution of Irish drug policy through four periods of historic development, the report explores: the country’s national strategies; the legal context within which they operate; the public funds spent, or committed, to implement them; and the political bodies and mechanisms set up to coordinate the response to the problem. The profile sets this information in context by outlining the size, wealth and economic situation of the country as a whole, as well as the historical development of the current policy. Also described is the manner in which events in Ireland bear similarities with, and differences from, developments in other European countries. This EMCDDA series aims to describe some of the main characteristics of national drug policies in Europe and elsewhere in the world. The profiles do not attempt to assess national policies, but instead outline their development and main features.


Thematic paper — drugs and driving

The use of illicit drugs and psychoactive medicines amongst drivers, particularly when combined with alcohol, is described in the latest Thematic paper from the EMCDDA. The state-of-the-art review presents the results of the largest research project ever carried out in the EU on ‘Driving under the influence of drugs, alcohol and medicines’ (the ‘DRUID’ project), which ran between 2006 and 2011. DRUID culminated in 50 project reports, running to several thousand pages. The 50-page EMCDDA review summarises the findings of these reports (see p. 5).


academia

European summer school on illicit drugs

The Lisbon-based Instituto Superior das Ciências do Trabalho e da Empresa (ISCTE-IUL) and the EMCDDA are currently collaborating on their second summer school project entitled: ‘Illicit drugs in Europe: supply, demand and public policies’. Registration opened on 15 January for the course which will take place in the Portuguese capital from 1–12 July 2013.

Over two weeks, EMCDDA scientific experts, along with leading academics and policymakers, will prepare participants to meet the complex policy challenges in this field, by providing a multi-disciplinary and inclusive approach to the study of the drugs problem, both in Europe and beyond.

Week 1 of the summer school will focus on ‘Defining the problems’, with lectures on: the production and geopolitics of drugs; detecting new drugs and new trends in drug use; drug use and problem drug use in Europe; and drug-related mortality and infectious diseases.

Week 2 will explore ‘Understanding drug policies and interventions’, with lectures on: the study of health and public policies; international drug policies; and national policies and public expenditure on drugs. Sessions will also be dedicated to: demand reduction; best practice; drug prevention; treatment and social reintegration; harm reduction and prison health. The course will end with a debate on the future of national and European drug policies.

The target audiences for the summer school are university students (undergraduate and graduate), researchers, professionals and administrators interested or working in the drugs field. ECTS credits will be given for the courses and students can transfer credits to other European universities using the ECTS-system. In addition, scholarships may be awarded by ISCTE to eligible students.

Registration: Phase 1 — 15 January–15 March (discount for registration in this phase), Phase 2 — 15 March–15 June.

www.drugsummerschool.cies.iscte-iul.pt

drugsummerschool.cies@iscte.pt
Management Board elections

João Goulão, Portuguese national drug coordinator and Head of the General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD), was re-elected Chairman of the EMCDDA Management Board on 6 December for a second three-year term. Claude Gillard (Belgium), a founding member of the agency, was also re-elected to the position of Vice-Chairman.

Dr Goulão was first elected Chairman of the Board in December 2009 and has been the Portuguese representative on the Board since 2005. Claude Gillard, Legal counsellor at the Belgian Ministry of Justice, has chaired the EMCDDA Budget Committee since 2003 and has greatly facilitated the Board’s decisions on budgetary and financial matters.

For more, see www.emcdda.europa.eu/news/2012/12

Calendar 2013

EMCDDA meetings

12–14 February: ‘The European Union, EU drugs policy and the enlargement process under the Lisbon Treaty’, Reitox Academy professional training course for IPA4 beneficiaries, Bruges and Brussels.

20 February: Presentation of the EU drug markets report to the European Parliament LIBE Committee, Brussels.

7 March: Workshop on general population surveys, UK national focal point, London.

11–12 April: Risk assessment 5-(2-aminopropyl)indole and 38th EMCDDA Scientific Committee meeting, Lisbon.

15–20 April: ‘Contemporary approaches in drug monitoring’, Reitox Academy training course, Prague.

External meetings


11–15 March: 56th session of the UN Committee on Narcotic Drugs (CND), Vienna.

14 March: SMART advisory group meeting, UNODC, Vienna.

EU meetings

8–9 April: National drug co-ordinators’ meeting, Irish presidency, Dublin.

11 April: CADAP 5 final conference, Bishkek, Kyrgyzstan.

17 April: EU–CELAC technical meeting, Irish presidency, Brussels.

18 April: Horizontal working party on drugs, Brussels.

Continued from page 1

postal services. This allows drugs to be moved through multiple transit points making them harder to intercept’.

Also detailed in the report is Europe’s role as a key global source of the precursor chemical used to manufacture heroin (acetic anhydride) and as an important player in the packaging, marketing and promotion of products containing new psychoactive substances.

‘For synthetic drugs, and increasingly cannabis, the EU remains an important drug-producing region’, said EMCDDA Director Wolfgang Götz. ‘The trend for producing illicit drugs close to their intended consumer markets, where they are less likely to be intercepted, is a growing one. We are now paying an increasing cost for this development in terms of community safety, public health and the burden placed on already stretched police resources’.

According to the report, globalisation is an important driver of developments, with more countries now used as transit, storage or production points. Furthermore, the Internet is having a profound impact, both as communication tool and online marketplace. But innovation is also seen in the area of production: the EU is cited as a key ‘source of expertise and know how’ regarding intensive cannabis cultivation, synthetic drug production and cocaine concealment. Other findings of the report include the connections between cocaine and cannabis resin trafficking networks, the increasing importance of Africa as a transit and storage area, and how crime gangs based in North-West Europe play a pivotal role in the distribution of virtually all types of drug across the EU. The report highlights how coordinated actions at EU level can make a difference.

The agencies presented the report to the Civil Liberties, Justice and Home Affairs Committee of the European Parliament on 20 February.

For more, see www.emcdda.europa.eu/events/2013/drug-markets