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Evaluation of 'national drug strategies' in Europe

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Approaches to measuring national drugs strategies

Many countries have recently adopted a 'national drugs strategy' ⁽¹⁴⁶⁾. This section focuses on plans for the evaluation of these strategies, which for the first time has been enabled on a European scale by work undertaken this year by the national focal points. This work has helped to clarify references to evaluation in 'national drugs strategies', which are not always self-explanatory or clear-cut.

Measures to evaluate European 'national drugs strategies' can be divided into three main activities: (1) monitoring, meaning the routine collection of data regarding the drug phenomenon as well as responses and interventions; (2) evaluation of implementation, i.e. assessment of the value added by the implementation of initiatives and by the allocation of resources envisaged in the drugs strategy; and (3) evaluation of impact (generally called assessment of effectiveness), a judgment on the outcomes (short-term effects) and the impacts ⁽¹⁴⁷⁾ (long-term effects) on the drugs phenomenon brought about (at least in part) as a result of the national drugs strategy (Figure 23) ⁽¹⁴⁸⁾.

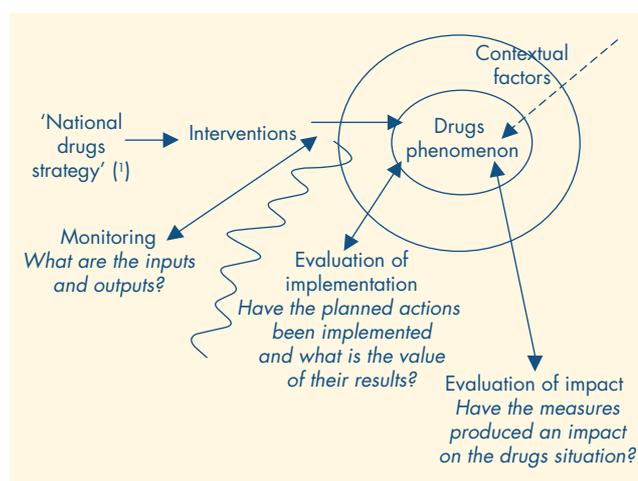
The main distinction between countries in terms of the approach taken to evaluate national drugs strategies is between countries that monitor the drugs strategy and those that envisage an evaluation of the implementation and/or impact.

The concepts of monitoring and evaluation are not always clearly distinguished in national drugs strategies, so it is important to be aware of the difference. Monitoring is a continuous and systematic process that generates routine quantitative and qualitative data on the drug phenomenon and the interventions put in place to tackle it. It can provide regular feedback on the implementation of activities (i.e. on inputs: what resources have been spent; and on outputs: what measures have been implemented, over what time period and by whom). However, monitoring does not

usually provide information about the impacts of a strategy or provide answers as to why an activity does or does not achieve its objectives. Although a monitoring system is often able to provide information on the evolution of the different aspects of the drug phenomenon and on the measures implemented to combat it, it is generally unable to determine whether or not those changes are the direct consequences of the implemented measures (causality imputation).

The issue of causality and other complex scientific questions are addressed through evaluation (Table 5), which means a 'judgment on the value of a public intervention' (in this case a national drugs strategy) 'with references to criteria' (relevance, efficiency, impact) 'and explicit standards' (quality, quantity) (definition extracted from European Commission, 1999), and which, generally, requires in-depth studies to be carried out. The constitutive element of evaluation is therefore twofold: (1) proof, based on good-quality data, i.e. collected through scientific methodologies (monitoring and in-depth studies), of the existence of

Figure 23: Levels of evaluation in 'national drugs strategies'



(1) The term 'drugs strategy' also includes any equivalent action plans arising from the strategy.

⁽¹⁴⁶⁾ Defined in Chapter 1, p. 17.

⁽¹⁴⁷⁾ For simplicity, here we will use the expression 'evaluation of the impact' to mean evaluations of both outcomes and impacts, two quite different scientific exercises that are generally distinguished in the relevant literature.

⁽¹⁴⁸⁾ A comprehensive evaluation would include also the assessment of efficiency, which broadly measures the cost at which the outcomes and impacts were achieved. However, data on this aspect were available only for Spain (see below).

**Table 5: Evaluation terms commonly used
(evaluation methods for action of a structural nature)**

Overall evaluation	Evaluation of an intervention in its totality
Coherence	The extent to which the intervention logic is non-contradictory/the intervention does not contradict other interventions with similar objectives
Relevance	The extent to which an intervention's objectives are pertinent to the needs, problems and issues to be addressed
Consistency	The extent to which positive/negative spillovers onto other economic, social or environmental policy areas are being maximised/minimised
Utility	The extent to which effects correspond with the needs, problems and issues to be addressed
Effectiveness	The extent to which objectives set are achieved
Efficiency	The extent to which the desired effects are achieved at a reasonable cost
Cost-effectiveness analysis	Evaluation tool for making a judgment in terms of efficiency
Cost-benefit analysis	Evaluation tool for judging the advantages of the intervention from the point of view of all the group concerned, and on the basis of a monetary value attributed to all consequences of the intervention
Output	That which is financed and accomplished (or concretised) with the money allocated to an intervention
Impact	A consequence affecting direct addressees following the end of their participation in an intervention, or after completion of a public facility, or else an indirect consequence affecting other addressees who may be winners or losers

Source: European Commission, 1999.

causality between the implementation of a policy and a change in the phenomenon under study; and (2) a value judgment of the impact achieved, which eventually has to be linked to decision-making.

In practice, the concept of 'evaluation' is inextricably linked with 'monitoring', but, although some documents treat the two terms as synonymous, it should be borne in mind that monitoring is not the same as evaluation (although monitoring is certainly part of it).

In the United Kingdom, the updated national drugs strategy was published in 2002 following a wide-ranging review that took account of the evidence base, including evaluations of its supply and demand components. The national drugs strategy is 'monitored', 'tracked' and 'performance managed' but not 'evaluated' (United Kingdom national report, p. 106). In Norway, an aim of the new drugs and alcohol action plan is to develop a system for measuring the extent to which the plan's goals and sub-goals are achieved (Norwegian national report, p. 65). In the Czech Republic, the 2001–04 national drug policy strategy defines goals, objectives, aims, targets, indicators of success and tools for efficiency evaluation for each pillar of the strategy. The fulfilment of tasks is regularly monitored; however, the strategy has not yet been systematically evaluated according to the determined indicators of success and defined evaluation tools. One reason for this may be the considerable cost of external evaluations (Czech Republic national report, p. 114). The new Danish action plan envisages that a number of specific activities will be 'evaluated' on an ongoing basis (Danish

national report, p. 67). In Hungary and Poland, the national drugs strategies suggest a system for following up on the fulfilment of tasks (Reitox national reports), while in Slovenia, although the new national strategy 'envisages the regular evaluation of implementation', no evaluation has so far been carried out (Slovenian national report, p. 61). In Lithuania, the implementation of the national drugs strategy (2004–08) will be carried out 'according to the financial possibilities of the country' (Lithuanian national report, p. 35). And in Estonia, the new national drugs strategy 'includes monitoring and evaluation components and defines the performance indicators' (Estonian national report, p. 86).

In Finland and Sweden (Finnish national report, p. 113; Swedish national report, pp. 75–76), the national drugs strategies place greater emphasis on monitoring the implementation of the strategy than on the evaluation of its impact. In Sweden, the drugs coordinator, appointed in 2002, has the responsibility of ensuring that the national action plan is followed up (in annual reports). In Finland, too, research is planned to lay down some benchmarks by which the drug administration will monitor and evaluate its activities. Luxembourg's national focal point reports that the output of the 2000–04 plan will be evaluated in 2005 in order to elaborate further and future strategies (Luxembourg national report, p. 94). In Germany, the 2002 drug and addiction action plan for the first time includes an attempt to set operational targets and criteria that can be used to determine the success or failure of interventions (German national report, p. 101), while in Italy, the three-

year programme 2002–04 promotes evaluation in the field of prevention and social reintegration.

Among the countries that present an evaluation either of the implementation of the national drugs strategy or of its effectiveness are Greece, Spain, France, Ireland and Portugal (Table 6). The Spanish and Greek strategies refer to the 'evaluation of effectiveness'. In Spain, the nine-year national strategy calls for the evaluation of its overall and sectorial implementation at mid-term, in 2003, and in 2008. The aim is 'to improve the effectiveness and efficiency of the public policies' (Spanish national report, p. 85), measuring the quantity and the quality of the service provided. Similarly, in Greece, the new action plan on drugs 2002 refers to external evaluation of the overall effectiveness of the policies implemented, which might take place in the future, having as its basis EU and international indicators (Greek national report, p. 110).

In France, Ireland and Portugal the national drugs strategies call for an overall ⁽¹⁴⁹⁾ and sectorial evaluation, in some cases of effectiveness (Irish national report). However, data received show that, in fact, evaluations conducted so far have been a judgment more of the level of implementation than of the effectiveness of the strategy. In France, the evaluation of the three-year action plan 1999–2002 (carried out by the Observatoire Français des Drogues et des Toxicomanies (OFDT) from 2000 to 2003) included both an 'overall evaluation' and the evaluation of five priority programmes ⁽¹⁵⁰⁾. The evaluation stopped short of judging the impact of measures taken on the overall drug situation. It was, therefore, essentially an assessment of progress, against which the achievement of operational objectives has been assessed. In Ireland, the national drugs strategy calls for 'an independent evaluation on the effectiveness of the overall framework by end of 2004'

(national drugs strategy 2001–08: 'Building on experience', p. 111). However, it seems that the evaluation will comprise an examination of the extent to which the drugs strategy has been implemented and whether it has met its strategic aims, rather than a complete assessment of the impact of the strategy on drug use. In Portugal, the drugs strategy foresees 'an external independent evaluation of its global and sectorial implementation' (Portuguese national report, p. 65). An internal process of evaluation is also reported.

In those Member States that do not have, *sensu stricto*, a 'national drugs strategy', overall evaluation has attracted little interest in recent years, even in countries with a culture of evaluation of specific drugs projects. For example, in the Netherlands, where research, monitoring and evaluation are traditionally part of drug policy, a new (2002) 'governmental steering strategy' aims to provide guidance on performance for public administrative bodies (including those involved with healthcare and drugs) (Dutch national report, pp. 83–84). And in Austria, although drug-related monitoring has improved substantially in recent years, neither provincial plans (other than preliminary evaluations in Vorarlberg) nor the overall drug policy have been the subject of evaluation (Austrian national report, p. 63). In the remaining countries (Cyprus, Latvia, Malta and Slovakia, as well as Bulgaria, Romania and Turkey), there is insufficient information to report on evaluation of national drugs strategies (where they exist at all).

Evaluations: 'ex ante', 'mid-term' and 'ex post'

The guide to the evaluation of EU activities (European Commission, 2003) identifies four main reasons for carrying out evaluations: (1) to contribute to the design of

Table 6: Characteristics of some national strategies' evaluations

	'National drugs strategy'	Scope of the evaluation	Aim of the evaluation	Evaluation terms
Greece	Action plan, 2002–06	Overall and specific	Effectiveness	None
Spain	National drugs strategy, 2000–08	Overall and specific	Effectiveness and efficiency	2003–08
France	Three-year plan against drugs and for the prevention of dependencies, 1999–2001	Overall and specific	Implementation	2002
Ireland	National drugs strategy, 2001–08: 'Building on experience'	Overall and specific	Implementation	2004–08
Portugal	The national strategy for the fight against drugs 1999; action plan, 2000–04	Overall and specific	Implementation	2004

⁽¹⁴⁹⁾ Overall evaluation: evaluation of an intervention in its totality (Table 5).

⁽¹⁵⁰⁾ (1) The regional agreements on objectives in health and justice, (2) the interministerial policy on professional training, (3) the regional policy programmes for the prevention of addiction, (4) outreach experiments by specialised facilities to provide general care for people exhibiting addictive behaviour and (5) risk reduction programmes in the 18th district of Paris.

interventions; (2) to improve the quality of the intervention; (3) to aid the efficient allocation of resources (i.e. efficiency); and (4) to report on the achievements of the intervention (i.e. accountability). The same guide describes three stages of evaluation: *ex ante*, mid-term and *ex post*.

Ex ante evaluation is carried out before the implementation, supposedly to assess the need for action or to establish a baseline. *Ex ante* evaluation is reported in national drugs strategies as revision processes, conducted by parliamentary commissions, government commissions or by government departments, which are stated to be the basis of several national drugs strategies (Belgium, Germany, Spain, Ireland, Portugal, Sweden).

Mid-term evaluation is reported in the Spanish, Irish and Portuguese 'national drugs strategies' as a tool to adjust interventions and objectives 'along the way'. The approach of adjusting 'along the way' is not confined to countries that are engaged in a proper evaluation process. Its use is also reported in those countries that set up monitoring systems, where it is used to contribute reliable information to help adjust and reshape future actions. This would imply an assessment of value more typical of evaluative activities. Again, monitoring and evaluation are used interchangeably.

Ex post evaluation embraces the entire intervention period, usually with particular focus on the final results of the intervention, with the aim of providing input for future ones. Such activity is reported in France, where the final evaluation of the French action plan had the aim of revising interventions and objectives for a new drugs plan, and is proposed for 2008 in Spain, Ireland and Portugal.

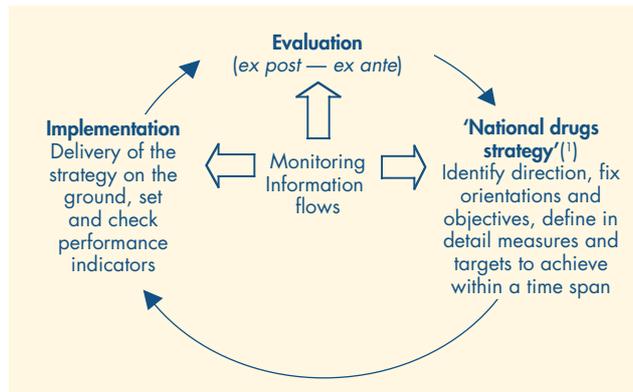
In the field of drugs, the aim of the evaluation process is always to improve the quality of existing interventions and the design of new ones. However, it may be assumed that when one drugs strategy succeeds another the *ex ante* and *ex post* evaluations merge, resulting in a cyclical process in which the final results of the past strategy provide input for the future strategy (Figure 24).

Actors in the evaluation

Another key issue covered in 'national drugs strategies' is whether those in charge of evaluation should be 'internal' to the organisation or 'external'. Examples of both kinds can be found, and each type has advantages and disadvantages.

Internal evaluators can offer a broader knowledge of the structures and the communication mechanisms, are familiar with the organisation and with the subject under review and

Figure 24: Evaluation as a cyclical process



(1) The term 'drugs strategy' also includes any equivalent action plans arising from the strategy.

have ready access to data sources. However, they might tend to justify failures to meet objectives and are less willing to make observations or suggest changes that could be seen as a threat to the organisation. External evaluators, in contrast, should provide a more objective and reliable view as they are not involved with the organisation, but they might have more difficulties in accessing information sources, and they run the risk of trying to satisfy the client by providing results as good as can be expected. Moreover, external evaluators are usually costly. There is, then, a choice to make between, on the one hand, a better understanding of the situation and the ability to obtain information objectively and, on the other hand, greater objectivity and expertise in evaluation.

Most Member States seem to favour a mixed approach: in Ireland, the mid-term evaluation of the national drugs strategy will be carried out in 2005 by external consultants under the guidance of a cross-sectorial steering group; in Portugal, internal staff and external consultants will run the evaluation of the 2000–04 action plan; and in France, external evaluators and internal staff of the OFDT have carried out different aspects of the evaluation on the three-year action plan. In Spain, the mid-term evaluation (2004) is currently being undertaken by the staff of the national plan on drugs (PNSD), whereas the Greek plan demands an external evaluation. In Sweden, the National Institute of Public Health will evaluate public health policy through measurement of several lifestyle variables. One objective of the policy (No 11) aims to reduce tobacco and alcohol use, achieve a society free from illicit drugs and doping and reduce the harmful effects of excessive gambling.

In all countries in which an evaluation process is carried out, the national coordination agency appears to be the authority responsible for organising and delivering the

evaluation process: the Inter-ministerial Mission (MILDT) in France, the PNSD in Spain, the Institute for Drugs and Drug Addiction (IDT) in Portugal, the Drugs Directorate in Ireland, the Drug Coordinator Office in Sweden and, as announced in the 2001 Belgian 'strategy', the General Drug Cell in Belgium, when it comes into operation. Within these agencies, the drugs monitoring centres, which are usually the same as the Reitox national focal points, are responsible for providing the information and data necessary for the evaluation, and sometimes are also technically responsible for the evaluation.

Targets and indicators

The question of the extent to which the effects of actions implemented as the result of a 'national drugs strategy' can be measured is often raised. Indeed, both 'international' and 'national' drugs strategies refer to very 'general objectives', such as 'reducing the risks for drug users' or 'aim of a drug-free society', as well as to 'operational objectives', such as 'increasing the number of treatment slots' or 'establishing a drug coordination agency'. Both 'general' and 'operational' objectives could benefit from the setting out of specific aims. The former are important as a basis of national drugs policy, identifying a direction but are difficult to measure; the latter indicate the delivery of qualitative and quantitative initiatives, implying that they should be easier to measure.

Experts and professionals warn that, in order to evaluate a strategy scientifically, the objectives must be spelled out in a clear, unambiguous, measurable way, distinguishing, but linking, 'general' and 'operational objectives'. Indeed, 'operational objectives' must be seen as a way of firming up 'general objectives'. Performance indicators should then be set to measure the achievement of the objectives. Currently, only a few national drugs strategies can be included in this category.

Efficiency

Few national strategies make much mention of cost-benefit or cost-effectiveness analysis, with the exception of the Spanish strategy, which states that the evaluation of the national strategy will also try to measure the efficiency of the public policy. Although budgets and costs are a concern for public administrations, in the field of drugs (as identified in the last annual report, EMCDDA, 2003b) there is a general lack of knowledge of the global cost of public interventions in this area. This kind of analysis is regarded generally as marginal and is included in only a few research activities.

Constraints on evaluation

Within the scientific community it is acknowledged that it is very difficult to determine whether or not a drug policy is effective. Experts and professionals warn of the difficulties posed by impact evaluation of a public policy: 'layers of complexity' and a 'multitude of cause and effect linkages' must be considered. Indeed, it can be difficult to detect a causal link between a drugs policy and its outcome and impact because of the variety of interventions and effects to be measured and the possible external factors (confounding factors) influencing the reality (for example socioeconomic conditions, subcultures). Some research suggests that drugs phenomena might depend more on behavioural and societal factors than on policy interventions.

Moreover, the illicit nature of drug use can be a serious obstacle to data collection, which is an essential tool to any evaluation process, leaving many important aspects of the drug phenomenon unidentified. Thus, evaluation in the field of drug intervention must be carefully thought out and its results must be interpreted with caution.

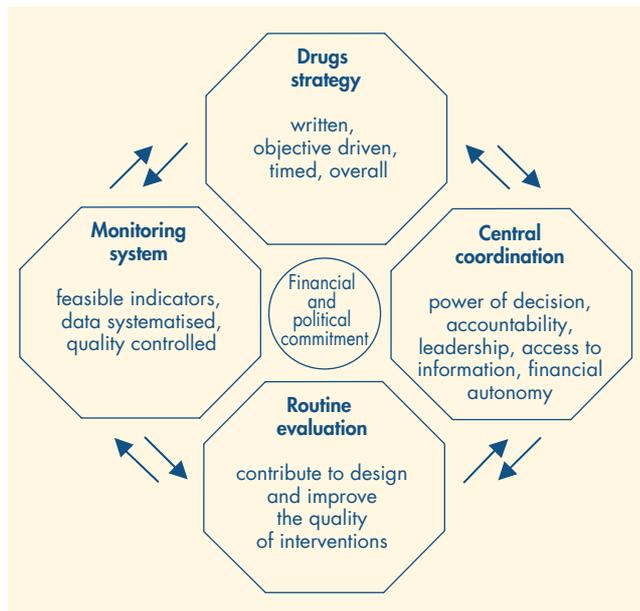
Conclusion

From the data reviewed, it appears that 'national drugs strategies' generally take evaluation to mean measuring implementation — progress, achievements, even failures — and eventually making some judgment of it, rather than evaluating the impact on the overall drug situation. This is an important conclusion. Most countries that have faced the drug problem for many decades are now able (or willing) to put in place, through monitoring systems, a basis for measuring the drugs phenomenon and the effects of their efforts. Thus, drugs policies can be considered to be more accountable than ever before, which itself is an important achievement.

A few countries have gone further, announcing that, in addition to the development of monitoring systems, they will conduct an evaluation of the implementation of the 'national drugs strategy', by which they mean a scientific study to assess the worthiness or otherwise of all or part of the strategy. However, so far no signs of scientific evaluation of impact associated with overall national drugs strategies are apparent.

Generally, countries that take a more structured approach to drug policy, i.e. which have a written, objective-driven, overall 'national drugs strategy', a central coordination mechanism with, ultimately, a national coordinator and a solid monitoring system, report the existence of a more sophisticated evaluation process (Figure 25). It seems that

Figure 25: Main characteristics of a structured drug policy approach



the existence of a more structured approach, in itself a sign of a financial and political commitment, is a prerequisite for a more developed evaluation approach to a national drugs strategy. This hypothesis should, of course, be confirmed by further research.

The spread of a culture of monitoring and assessment has added to the knowledge of the drugs problem in the EU, and consequently the scene is set for more informed decisions. Evaluation is now firmly recognised in current drugs strategies as a critical element of accountability, performance and financial prudence. Many projects and specific interventions in the field of drugs already contain an element of evaluation and, if extended to all major drug policy interventions, this will gradually contribute to the measurement of the effectiveness of European national drugs strategies.