

Speech

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May I start by saying that it is a great honour to be invited here today.

I will be speaking from the perspective of a technical agency whose main task is to collect and analyse information on the drug situation within the European Union.

But I think that we all recognise here that both the challenges we face in the drugs field, and the solutions we seek in this area, are increasingly global in their nature.

I would like to make three points in this presentation.

The first of these is the fact that the drug market — and the problems we see emerging from it — are inextricably linked with, and exacerbate, many of the other big issues facing our societies today. We see this at community level with respect to the impact on employment, public safety and marginalisation.

And we see this at international level with respect to an impact on social development, security and the fight against corruption.

And this means I think that, not only do we need to recognise the importance of the bigger context when we think about supply reduction, but it also means that, when our activities are successful, the benefits are likely to spill over into other areas. I will give you an example of what I mean here later.

The second point I want to make is that, from a European perspective, I think it is fair to say now that we have a far better understanding of what works and what does not work when it comes to supply reduction. And here I think we can show some evidence of success. Where this success is most apparent is when supply reduction activities are located within a comprehensive approach that gives equal weight to measures to address drug demand.

Let me give you an example of this. I can tell you now with confidence that heroin — the substance that has been central to Europe's drugs problem for the last 30 years — now appears to be in decline.

We see this in the seizure data, with the lowest volumes reported in over a decade. We see this in an ageing treatment population, with some European countries now reporting virtually no new young heroin users requiring help. We also see this in a decline in infections associated with this drug and decreasing levels of injection.

What is the backdrop to these changes?

Well, I think that robust, joined-up and intelligence-led policing along the trafficking routes into Europe has played an important role.

I think that engagement with producer and transit countries has also been important.

But so too has the massive investment that European governments have made in effective drug treatment. We estimate that nearly three-quarters of a million individuals now receive substitution care for heroin problems across the EU. This has simply removed a significant proportion of the demand from the market.

And what is startling is not just the impact this has had on public health and on levels of heroin use — this is to be expected — but perhaps less expected is the strong and direct correlation we can see in falls in levels of acquisitive crime.

This is a positive message but, as ever in the drugs field, new challenges are never far from us.

This brings me to my last point.

Technological, globalisation and social and economic developments are impacting on all aspects of modern life and also now, not surprisingly, they are having an impact on the drug market and the kind of drug problems we face today.

In Europe, for example, stimulant problems are far more apparent than they used to be. Producers have become more innovative both in terms of production techniques, and the sourcing of the chemicals necessary for production. We see this in the ecstasy market where MDMA is now making a comeback. It appears that successful efforts to restrict precursor availability have now been countered by new production approaches.

More generally, trafficking routes appear to be diversifying, with drugs moving through multiple channels and greater use of opportunities provided by commercial transportation. At the same time, organised crime groups are more internationally joined-up and take a more multi-commodity perspective.

So, overall, we now appear to face a more dynamic, interlinked and complex situation.

And this brings me on to one of the most important developments we are now seeing in the drugs area, a development that I think poses a considerable challenge to existing drug control models — the emergence of mass markets for new psychoactive substances.

Last year, the EU Early Warning System received reports of 101 new substances adding to the total of 450 substances that are now being tracked by the system. Recent years have been dominated by the appearance of new synthetic cannabinoids, of which 30 new ones were reported in 2014. We are now monitoring 134 different cannabinoids receptor agonists from 13 different drug classes.

A new development is that an increasing proportion of substances reported are from less-known and more obscure chemical groups. Of particular concern, from a public health point of view, is that we had five new opioid drugs reported in 2014.

Last year, we formally risk assessed six substances in the EU. These included: a powerful hallucinogenic drug; two potent opioids; a stimulant with similar action to cocaine; and a drug sold as a legal replacement for the dissociative anaesthetic, ketamine. In every case, these substances had aspects of their pharmacology that made them, in some respects, more worrying from public health point of view than similar more established controlled drugs.

I can conclude by saying that, when we stand back and look at the drug situation today, we can observe some grounds for optimism. However, we are also facing, in many respects, a more complex and challenging drugs problem which will have important implications for future supply and demand reduction approaches.

I think, more speculatively, that we are also now seeing, in Europe at least, some signs of a change in the overall market logic, a change which is moving away from plant-based drugs that have to be transported over large distances, towards local production and synthetic substances.