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January–March 2010

2010 priorities and budget

The EMCDDA's 2010 work programme is the first to fall under the agency's new three-year strategy and work plan for 2010–12. This three-year strategy seeks to consolidate and deepen the analysis of core data held at the EMCDDA and develops a number of new areas of strategic importance. It also reflects the obligations of the agency's mission statement and is sensitive to the needs of the EU drugs strategy and action plan (2009–12).

The purpose of the 2010 work programme, adopted by the Management Board in December 2009, is to map the activities to be undertaken this year and to establish the methods needed to attain goals set for 2012. It is organised around a number of core business areas, including monitoring the drug situation and responses, monitoring and evaluating policies, and tracking new drugs and trends.

Greater emphasis will be placed in 2010 on data quality, with quality-assurance measures and routines planned to guarantee accurate statistical and data analyses. And priority is given to the cross analysis of key indicator data to gain better insight into issues such as polydrug use and morbidity. Also emphasised is the need to lay groundwork for European level guidelines, frameworks and standards, as required by the EU drugs action plan.

In terms of methodological improvements, the EMCDDA aims with this programme to: further develop the five key epidemiological indicators; fine-tune data collection in the area of public expenditure; and increase its focus on instruments and procedures for monitoring responses. It is also endeavouring to become more sensitive to detecting and exchanging information on emerging trends and to improve the monitoring of drug supply and supply reduction activities. New products in the pipeline for 2010 include a scientific monograph on harm reduction practice and EMCDDA–Europol joint publications on cocaine and amphetamine (see p. 7).

The EMCDDA will continue to work in networks and to strengthen its collaboration with partners both in Europe and beyond. In line with its international cooperation strategy, it will provide technical assistance to candidate and potential candidate countries to the EU and to partner countries within

Continued on page 8

Photo: istockphoto

Greater emphasis will be placed in 2010 on data quality.

Management Board: changes at the helm

The EMCDDA Management Board met in Lisbon from 3–4 December and held elections for Chairman and Vice-Chairman of the Board. João Goulão, Portuguese national drug coordinator and Head of the Institute for Drugs and Drug Addiction was elected Chairman for the next three years. Dr Goulão has been member of the Board since 2005 and previously served on the agency's Scientific Committee (1997–2002).

João Goulão takes over the position from Marcel Reimen (Luxembourg) whose mandate ended on 31 December. A founding member of the Board since 1994, Mr Reimen served as Vice-Chairman (1998–2003), before being elected Chairman for a three-year mandate in 2003. He was re-elected for a second (non-renewable) term in 2006. During his first mandate (2003–06), Mr Reimen steered the agency through its enlargement to 10 new EU Member States in May 2004. His second mandate (2006–09) coincided with another EU enlargement (2007) and the recast of the EMCDDA regulation. The Management Board conferred on Mr Reimen the title of 'Honorary Chairman of the EMCDDA', while Director Wolfgang Götz paid tribute to him for his 'extraordinary contribution to the development of the agency since its very first steps'. Mr Reimen will now serve as Vice-Chairman of the Executive Committee of the Organisation for Economic Co-operation and Development (OECD) from 1 July 2010.

Claude Gillard (Belgium), another founding member of the agency, was elected to the position of Vice-Chairman. He replaced Ralf Löfstedt (Sweden) whose second (non-renewable) mandate came to an end.

Drug situation

EMCDDA and Europol step up information collection on mephedrone

Synthetic cathinones are increasingly being reported to the EMCDDA and Europol via the EU early-warning system (EWS) ([1]). These 'designer' compounds, structurally related to amphetamine, are derivatives of the parent compound cathinone, one of the psychoactive ingredients found in khat (*Catha edulis*). In 2008, six of the 13 psychoactive substances reported via the EWS were synthetic derivatives of cathinone.

Some 15 synthetic cathinones are currently being monitored through the EWS, among these mephedrone ([2]). Now apparently more popular among drug users as a 'legal high' — legal alternative to amphetamine, cocaine and ecstasy — the substance has recently attracted considerable media attention. To date, there has been one confirmed mephedrone-related death in Sweden and others suspected in the UK.

A rapid audit on the availability of mephedrone on the Internet at the end of 2009 showed that at least 31 websites were selling the substance, around three-quarters of them being dedicated mephedrone sites. Mephedrone may be advertised on the Internet as a 'research chemical', 'bath salts' or 'plant food' and 'not for human consumption'. Often no indication is given in the product information of the presence of psychoactive substances.

On 20 January, following an examination of the available information on mephedrone to date, the EMCDDA and Europol agreed to launch a formal procedure to collect further information on the substance ([3]). This will lead to the production of an EMCDDA–Europol Joint report to be presented to the Council of the EU, the European Commission and the European Medicines Agency. On the basis of this report, a decision can be taken on whether or not to launch a formal risk-assessment procedure on the substance ([4]).

Action on new drugs team
EWS@emcdda.europa.eu

([1]) http://www.emcdda.europa.eu/themes/new-drugs.
([2]) 4-methylmethcathinone.
([3]) Article 5, Council Decision 2005/387/JHA on the information exchange, risk assessment and control of new psychoactive substances, OJ L 127, 20.5.2005, p. 32.
([4]) Article 6.1 of the above Council Decision.

Guidelines for collecting data on retail drug prices

Photo: istockphoto

Drug prices: an important tool for understanding drug supply

Prices are an essential element of the illicit drug market, from both a supply and demand perspective. They are an indicator of drug availability and are an important tool for understanding the workings of drug supply mechanisms. They may also be used to help target law enforcement resources and assist criminal justice agencies with decisions related to prosecution and sentencing (e.g. assets recovery).

The EMCDDA has been collecting information on retail drug prices via its Reitox focal points for the last 15 years. Although considerable progress has been made in this area, there is still variation in data collection in Europe. To address this issue, the EMCDDA will release this spring in its Manuals series *Guidelines for collecting data on retail drug prices in Europe: issues and challenges.*

The Manual raises awareness on specific issues related to collecting data on retail drug prices and offers practical suggestions. It addresses difficulties in obtaining a definition of 'retail' prices, and discusses the challenge of obtaining a representative sample of illicit, and therefore hidden, transactions. Suggestions are made for a minimum set of variables to be recorded for each observation. Targeted at all those involved in data collection on drug prices in Europe, the Manual reviews the main data-collection methods, current national practices and data-management issues.

Chloé Carpentier

Hepatitis C prevalence as a possible indicator of injection-related HIV risk

A group of modellers and epidemiologists brought together by the EMCDDA has examined the potential for using information on the prevalence of the hepatitis C virus (HCV) among injecting drug users (IDUs) as an indicator of HIV transmission risk ([1]). HCV is transmitted via needle sharing in similar ways to HIV. As HCV is much more infectious, it might reveal the overall level of risk behaviour (e.g. needle sharing) in populations of IDUs where HIV has not yet spread. The findings are presented in a recent article published in *Addiction*.

As the article shows, data from different IDU populations ([2]) reveal a strong relationship between the prevalence of HIV and HCV, although the relationship is not always linear. At low HCV prevalence rates (< 30 %), for example, the HIV prevalence is likely to be near zero and unlikely to increase greatly, even if HCV prevalence is increasing. However, at higher HCV prevalence rates, the average HIV prevalence is greater, and the potential for an increase in HIV prevalence larger, especially with rises in HCV prevalence.

Despite variability in individual observations, these analyses suggest that the potential for an IDU HIV epidemic is greater in settings with high HCV prevalence. They also suggest that HCV prevalence can be viewed as a population-level marker of injection-related HIV risk, especially when HCV prevalence is rising. Given the above, keeping HCV prevalence among IDUs to under 30 % could be adopted as a target to minimise the risk of future increases in HIV prevalence or of HIV outbreaks.

([1]) Vickerman, P., Hickman, M., May, M., Kretzschmar, M., and Wiessing, L., (2010) 'Can hepatitis C virus prevalence be used as a measure of injection-related human immunodeficiency virus risk in populations of injecting drug users? An ecological analysis', *Addiction*, Volume 105, Issue 2, pp. 311–318.
([2]) Countries excluding Sub-Saharan Africa and South America.

Responses

Health and prisons in Europe

Prisoners are entitled to the same level of medical care as persons living in the community. Prison health services should therefore be able to provide treatment for drug problems in conditions comparable to those offered outside prison. This general principle of equivalence is recognised within the EU by a 2003 Council recommendation on the prevention and reduction of health-related harm associated with drug dependence. The current EU drugs action plan (2009–12) calls for its implementation.

The issue of health in prisons was the focus of two European conferences held in October and November in Madrid and Oslo.

The first, organised among others by the Spanish authorities, the World Health Organization, the EMCDDA and the UNODC, was the 'Prison Health Protection Conference'. The second, 'Good Prison Health — Better Public Health — Safer Society', was held under the auspices of the Northern Dimension Partnership on Health and Social Wellbeing.

Several issues regarding prison health and drug use were raised at these events, including the high proportion of drug users in prison, the spread of infectious diseases and the high risk of drug-related deaths after release from prison. The events resulted in specific recommendations covering topics such as the prevention of post-release mortality, notably via the continuation of substitution treatment in prison. Also stressed was the need to boost evidence-based treatment in prison and to strengthen the link between prison and public health services.

Linda Montanari, Dagmar Hedrich and Lucas Wiessing

Madrid conference: 'The Madrid recommendation: Health protection in prisons as an essential part of public health', http://www.prisonhealthconference2009.com.
Oslo conference: http://www.ndphs.org///documents/1874/PAC_6-3-1__NDPHS_Declaration_on_Prison_Health.pdf

Best practice portal: upcoming developments

In 2009, the EMCDDA launched in the 'Evidence of efficacy' section of its Best practice portal, two new areas dedicated to pharmacological and psychological treatments for drug use. These areas are now being restyled and reshaped in a process due for completion in June 2010.

Following the redesign, information will no longer be divided into pharmacological and psychological categories, but will be grouped under the general heading 'Treatment'.

In practice, this will result in a shift in focus away from the substance and towards the drug user. Rather than being organised around opiates, stimulants or cannabis, for example, treatment information will be presented according to the type of drug user and how they are treated in Europe today (pharmacologically and psychologically). In so doing, the evidence on treatment effectiveness in Europe is contextualised, thereby fulfilling one of the main goals of the portal.

Under this new format, treatments will also be ranked (i.e. as 'beneficial', 'likely to be beneficial', 'trade-off between beneficial and harm', and 'unproven effectiveness'). This ranking is based on documents provided by organisations such as the Cochrane Collaboration, and on cooperation with a qualified editorial committee, including representatives of the EMCDDA Scientific Committee.

Photo: istockphoto

Best practice portal: offering tools to improve the quality of interventions

Launched in May 2008, the Best practice portal is designed to help those working in the areas of prevention, treatment, harm reduction and social reintegration take evidence-based decisions when planning interventions. It offers professionals, policymakers and researchers, an array of tools and standards to improve the quality of interventions and provides examples of evaluated practice across Europe.

Marica Ferri

http://www.emcdda.europa.eu/best-practice

European drug prevention quality standards

The EMCDDA is currently collaborating in an EU-funded research project aimed at producing commonly agreed and evidence-based drug prevention standards for use in the EU. The project is led by the Centre for Public Health of the Liverpool John Moores University (UK), and operates in partnership with bodies in Spain, Italy, Hungary, Poland and Romania.

In the first stage of the project, available national and international drug prevention guidance was reviewed and synthesised into a list of draft standards. The relevance of these standards is currently being rated through Delphi rounds and expert focus groups in the six European countries. In the final stage, the standards will be assessed in terms of their practical usefulness via structured consultations with drug practitioners.

The project, which will run until the end of 2010, will result in the publication of finalised standards. Adoption of these standards in EU Member States will improve drug prevention practice and efficiency of funding, and reduce the likelihood of ineffective or iatrogenic interventions. Further funding will be required to provide training for policymakers and practitioners to put the standards into practice.

Harry Sumnall and Angelina Kurtev

http://www.cph.org.uk/drugprevention/

Bookshelf

Two worlds of drug consumption in late modern societies

This book reports on the findings of an empirical study on the situation of drug users, their consumption patterns and drug spending in relation to the five most common illegal drugs: amphetamines, cannabis, cocaine, ecstasy and heroin.

The research is based on a newly created detailed survey instrument developed for the United Nations Office on Drugs and Crime (UNODC). A state-of-the-art review from additional sources complements this comparison of the drug situation in six European cities. Representing a wide range of drug problems and public policies, these cities are: Amsterdam, London, Prague, Turin, Vienna and Warsaw.

The study reconceives the standard distinction between 'marginalised' and 'recreational' drug users. The authors argue that this distinction is closely related to consumption patterns rather than drug choice. They also argue that it reveals the existence of two relatively homogenous drug worlds within each of the study sites, which in turn leads to the development of diverging drug markets. The findings have significant implications for academics and professionals working in health, psychology and urban studies.

Authors: Irmgard Eisenbach-Stangl, Jacek Moskalewicz, Betsy Thom
Publisher: Ashgate Publishing Limited
Languages: English
Date: June 2009
ISBN: 978-0-7546-7775-8
Ordering information:
http://www.ashgate.com
http://www.ashgatepublishing.com/pdf/tis/9780754677758_US.pdf
Policy brief (January 2010):
http://www.euro.centre.org/detail.php?xml_id=1650

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.

Feature

Role of Community agencies in EU enlargement process reinforced

'Community agencies: partners in accession' was the focus of a conference hosted by the EMCDDA in Sintra from 25–27 November, at the initiative of the European Commission ([1]). The event brought together some 150 participants from the Community agencies, European Commission and EU Member States, as well as candidate and potential candidate countries to the EU ([2]).

In the context of EU enlargement, the conference set out to nurture partnerships between the European Community agencies and countries participating in the Commission's Instrument of Pre-accession Assistance (IPA) programme ([3]). It is through the IPA programme that would-be EU members receive funding and support to prepare for accession.

Photo: istockphoto

Long-lasting partnerships, crucial to a successful integration process

From Stockholm to Cologne and from Lisbon to Dublin, the EU agencies provide service, information and know-how to the EU Member States and their citizens. Since 1997, the Community agencies have been working with candidate countries on technical assistance projects in a variety of fields, in preparation for EU membership. Since 2003, possibilities for collaboration have been extended to the Western Balkans ([4]).

'Once countries join the EU, they are automatically required to participate in the work of the agencies', explained EMCDDA Director Wolfgang Götz. 'This is why aspiring EU members are encouraged to play an active role in the work of the agencies before entering the Union to ensure that they are fully operational in the specific field at the moment of accession. Partnerships between agencies and the candidate and potential candidate countries to the EU, such as those discussed at this conference, are vital for institution-building and the transfer of know-how and for nurturing valuable and durable relationships based on understanding and trust'.

Speakers from Poland, Turkey and Bosnia-Herzegovina presented the experiences of a former, current and potential EU candidate country in cooperating with the agencies. The Turkish delegate explained how the country's Ministry of Health had increased its level of preparedness regarding influenza, following its cooperation with the Stockholm-based EU agency, the European Centre for Disease Prevention and Control (ECDC).

Countries aspiring to EU membership must not only 'talk the talk', but must also 'walk the walk', putting theory into practice, said one of the opening speakers. Referring to EU membership as a mere 'moment' in the process of EU integration, he stressed the importance of long-lasting partnerships in ensuring that this process be a continued success.

Four working groups focused on the themes of: transport; health; environment and agriculture; and living and working conditions. These reflected on lessons learned from technical assistance projects to date and on future prospects. The full conference conclusions are available on the conference website at http://www.emcdda.europa.eu/events/ipa-conference

([1]) See Community agencies at http://europa.eu/agencies/community_agencies/index_en.htm
([2]) Candidate countries: Croatia, Turkey and the former Yugoslav Republic of Macedonia. Potential candidate countries: Albania, Bosnia and Herzegovina, Montenegro, Serbia and Kosovo under UNSC Resolution 1244/99.
([3]) See http://ec.europa.eu/enlargement/how-does-it-work/financial-assistance/instrument-pre-accession_en.htm
([4]) European Council, Luxembourg, December 1997; European Council, Thessaloniki, June 2003.

International

EMCDDA signs accord with Ukrainian Ministry of Health

The European Union and Ukraine will be sharing information on drugs more systematically in future thanks to a Memorandum of Understanding (MoU) signed in Kiev on 28 January between the EMCDDA and the Ukrainian Ministry of Health. The signatories were the Ukrainian Minister of Health Vasyl Mykhailovych Knyazevich and EMCDDA Director Wolfgang Götz. The Head of the EU's Delegation to Ukraine, Ambassador José Manuel Pinto Teixeira, also took part in the signing ceremony.

The accord is the fruit of bilateral talks initiated in Lisbon in 2006 between the EMCDDA and the Ukrainian authorities, and follows a series of working meetings and diplomatic visits. The EMCDDA Management Board adopted the MoU at its meeting in Lisbon in December 2009 on the eve of that year's EU–Ukraine Summit.

The Ukrainian Medical and Monitoring Centre on Drugs and Alcohol (UMMCDA) of the Ministry of Health has been appointed the national centre to collect and analyse data on the Ukrainian drug and alcohol situation. The new agreement establishes cooperation between the EMCDDA and the competent Ukrainian authorities (particularly the UMMCDA) in the collection, processing and dissemination of drug information.

The MoU, signed for an initial period of five years, will help the parties develop joint methods of monitoring illicit drug use. It also allows for a regular exchange of information on new drug types and psychotropic substances appearing on the illicit drug market, as well as the technologies used in their production. Under the agreement, the EMCDDA will facilitate training and the exchange of experts and scientific research results.

Cécile Martel

Partners

EMCDDA and Canadian partners outline areas for cooperation

Delegates from the Canadian Centre on Substance Abuse (CSSA) visited the EMCDDA on 11 December for discussions on potential areas of cooperation between the two bodies.

The CSSA is a national addiction organisation working to reduce alcohol- and drug-related harms in Canada. It has long experience in supporting the implementation and monitoring of national policies, facilitating research projects and fostering a knowledge-exchange environment.

To date, cooperation between the EMCDDA and CSSA has taken place on an ad hoc basis, mainly in the area of prevention. In May 2009, the CSSA also played an active role in the EMCDDA's conference, *Identifying Europe's information needs for effective drug policy*, presenting how civil society can contribute to drug policymaking.

The participants at the December meeting identified areas of common interest, such as exchanging information on standards for interventions (e.g. school-based, family and community prevention). They also agreed to focus on the issues of drugs and driving, polydrug use and monitoring drug supply and supply reduction. A follow-up meeting is scheduled for later this year to take this cooperation forward.

Klaudia Palczak

Drugs-Lex

New Czech penal code enters into force

A new Czech penal code entered into force on 1 January 2010, revising how the country defines drug law offences ([1]).

Like its predecessor, the new penal code criminalises the cultivation or possession of an illicit drug for personal use when the quantity is 'greater than small'. However, the new code now establishes quantity limits via a binding governmental decree (No 467/2009 Coll.) ([2]). For example, it stipulates that a crime is committed on possession of more than 5g of cannabis resin (previously 10g), 15g of herbal cannabis or 1g of cocaine, and on cultivation of more than five marijuana plants.

While all substances were considered equal under the old penal code, this is no longer the case. Personal possession of 'larger quantities' (i.e. 'greater than small') of cannabis/THC, for example, can attract up to one year in prison while, for other substances, the term can be two years. (And the sentence can rise to eight years if an offence is considered 'of a substantial scale'.)

Similarly, first-time offences for the personal cultivation of 'larger quantities' of drugs is penalised by up to six months in prison for cannabis or one year for other plants or mushrooms. (Again the sentence can be as long as five years if considered 'of a substantial scale'.)

As regards the possession and cultivation of small quantities of illicit drugs, these continue to be punished under the Misdemeanours Act (Act No 200/1990 Coll.), with a possible administrative fine of up to CZK 15 000 (approximately EUR 600). Penalties for trafficking remain largely unchanged, although the maximum penalty for a 'very serious offence' has risen from 15 to 18 years. Some circumstances for aggravated supply have also been amended.

Brendan Hughes

([1]) No 40/2009 Coll., including Amendatory Act No 306/2009 Coll. For more see, http://www.drogy-info.cz/index.php/english
([2]) In the past, quantity limits were communicated to the police and prosecutors via non-binding directives.

Spotlight

Strengthening the EU research capacity

Photo: istockphoto

Research is essential to achieving a better understanding of today's illicit drug problems and is a central plank of the EU drugs strategy and action plan (2009–12) (1). In 2009, under the Swedish presidency, the Council of the EU adopted 'Conclusions for strengthening EU research capacity on illicit drugs' (2). The text recalls that, while drug-related research in Europe has a strong national dimension, there is no forum at EU level for a systematic dialogue on the issue or for exploiting the potential for joint research.

Research priorities listed in the document include increasing coordination between policy, research and practice and improving access to research findings. Also underlined is the importance of boosting cooperation between national research programmes, for example through the European Research Area Networks (ERA-NET) scheme (3).

The EMCDDA, with its Reitox network, is requested in the text to provide and disseminate drug-related research information and findings via its thematic web area on research (see p. 7) and its Best practice portal. The European Commission is requested to raise awareness of EU funding opportunities.

Finally, the Council agrees in the text to establish an annual exchange on drug-related research within its Horizontal working party on drugs, in order to strengthen policy–research links and collaboration. The European Commission is invited to prepare this discussion, with the assistance of the EMCDDA and its Scientific Committee. The current Spanish presidency will now follow up on the conclusions and the first annual exchange is scheduled for June 2010.

Margareta Nilson

(1) Objective 21, Action 63 — http://www.emcdda.europa.eu/html.cfm/index66221EN.html
(2) http://www.emcdda.europa.eu/themes/research
(3) http://cordis.europa.eu/fp7/coordination/eranet_en.html

Reitox

Assessing the implementation of the EMCDDA's five key epidemiological indicators

The EMCDDA's five key epidemiological indicators are central to its goal of providing 'factual, objective, reliable and comparable information' on drugs and drug addiction at European level. Adopted by the EMCDDA Management Board in 2001, and endorsed by a Council resolution the same year, the indicators underpin the EMCDDA's reporting on trends and developments in the EU drug situation.

Assessing the progress made by countries in implementing the indicators has been ongoing since 2001. In 2009, in close cooperation with the national focal points, the EMCDDA took another step forward in its assessment methodology by developing a new approach. This included a description of the activities carried out at national level to implement the indicators, as well as a detailed examination of the quality of information existing in Member States and fed to the EMCDDA. The new method is designed to identify measures needed to implement the indicators fully at national level and to uncover the main obstacles to doing so.

The assessment was finalised in November 2009 and subsequently presented to the Reitox network and EMCDDA Management Board. The document shows that, in most countries, there has been considerable improvement, both in the implementation of the indicators and in the quality of data collected through them. However, in a few countries there are still structural problems preventing the implementation of some indicators, requiring a special effort by these countries to overcome such obstacles.

The assessment will now help evaluate the objective of the EU drugs action plan (2009–12) 'to further improve and fully implement the five EMCDDA key epidemiological indicators'.

Sandrine Sleiman, Linda Montanari and Julián Vicente

Reitox development strategy 2010–15

Photo: istockphoto

A strategy for the future development and consolidation of the Reitox network was endorsed at the latest Heads of focal point meeting from 18–20 November in Lisbon. Resulting from in-depth discussions between the EMCDDA and the national focal points since 2008, it offers a clear outline of the work of the network and paves the way for strategic decision-making. The strategy, which includes a detailed Reitox mission statement, has its roots in the external evaluation of the EMCDDA (2007–08), during which a reflection took place on the structure, role and added value of the network. The strategy will now provide the basis for a Reitox action plan with measurable objectives to be developed in 2010.

Alexis Goosdeel and Sandrine Sleiman

Products and services

Selected issue on injecting drug use

Trends in injecting drug use in Europe is the title of the latest EMCDDA Selected issue publication. This volume brings together data from a wide variety of sources as it describes Europe's current drug injecting problem and plots its trends in recent years.

Responses to drug injecting and measures to reduce the harm caused by this form of drug use are also reviewed. The report finds that the available data point to a stable or declining trend of injecting in most European countries, with effective treatment and harm-reduction measures now reaching many users. Despite this, there is still a large population of drug injectors in Europe, and there continue to be signs of recent recruitment in some countries.

Available in English at http://www.emcdda.europa.eu/publications/selected-issues/injecting

Joint EMCDDA–Europol publication on cocaine

The EMCDDA and Europol committed in 2009 to a number of collaborative activities for the period 2009–12 (see *Drugnet Europe* No 66). Among these is an EMCDDA–Europol joint publication series covering key aspects of European drug markets.

Bringing together EMCDDA information and statistics on prevalence, health and drug research, with Europol data and knowledge on production, trafficking, markets and drug-related crime, the publications offer an integrated analysis of the topics chosen.

The second title in the series, to be released in March, is entitled: *Cocaine: a European Union perspective in the global context*. This follows the first volume, released last year, dedicated to methamphetamine.

Coming soon in English and Spanish at: http://www.emcdda.europa.eu/publications/joint-publications

Drug-related research on EMCDDA website

The EMCDDA website now hosts a dedicated thematic area on drug-related research. Here users may find information on: EU research funding programmes; lists of recent and ongoing research projects; related EMCDDA publications and online resources; and publications released at national level. Also provided are a 'Latest news' section and links to relevant scientific journals, newsletters and research institutions.

Available in English at http://www.emcdda.europa.eu/themes/research

EMCDDA scientist awarded

EMCDDA scientific writer, V. Anna Gyarmathy, PhD, MPH, has been awarded a one-year adjunct assistant professor position at the Johns Hopkins Bloomberg School of Public Health (Department of Health, Behaviour and Society). This honorary faculty position will help foster links between the EMCDDA and scientists outside the EU and will contribute to scientific excellence at the EMCDDA.

Resources

Useful materials or events on the drugs issue

New ARTE series dedicated to science

On 22 January, the Franco-German television network ARTE launched a new series of documentaries dedicated to science. The third programme in the series, *'Les paradoxes du cannabis'/Die Paradoxien von Cannabis* (broadcast on 5 February), includes a series of interviews with the EMCDDA Director and staff.

For more, see http://www.artepro.com/fr_fichiers/presse/3137838.pdf

DVD: Drug prevention and information in Europe

The Italian NGO, Co.Ge.S., has produced this double-DVD package with financing from the European Commission's Drug Prevention and Information Programme. The first DVD offers a general overview of drug prevention in Europe today. Through a series of interviews with EMCDDA staff, it explores a variety of topics including: drugs and young people, drug trafficking, research, best practice and legislation. The second DVD contains information on a selection of initiatives in the prevention field from different parts of Europe.

The package is available free of charge from ajester@cogescoop.it
For more, see http://www.cogescoop.it/AGEuropa.asp

Connections conference

'Drugs, alcohol and criminal justice: ethics, effectiveness and economics of intervention', is the theme of the 2nd European conference to be held under the 'Connections' project. Organised by the University of Kent (23–25 June), the conference will look at a range of interventions and treatments, from harm reduction to drug-free 'recovery' in the criminal justice system. Also addressed will be data collection and monitoring in prisons.

For more, see http://www.connectionsproject.eu
E.mail: c.brentari@kent.ac.uk

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources are invited to contact Kathryn.Robertson@emcdda.europa.eu

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Calendar 2010

1 2 3 4 5 6 7 (8) 9 10 11 (12) 13 14 15
16 17 18 19 20 21 22 (23) 24 25 26 27 28 29 30 31

EMCDDA meetings

25–26 February: Reitox Academy on history, methods and implementation of national treatment guidelines, Lisbon.

19–20 April: EMCDDA Scientific Committee meeting, Lisbon.

20–21 April: EMCDDA expert meeting on wholesale drug prices in Europe, London.

External meetings

28 January: International symposium: Improving the health and wellbeing of migrants in Europe, Brussels (http://publicpolicyexchange.co.uk/events/AA28-PPE.php).

8–12 March: 53rd Commission on Narcotic Drugs, Vienna (http://www.unodc.org/unodc/en/commissions/CND/index.html).

15–16 March: 4th Annual conference of the International Society for the Study of Drug Policy (ISSDP), Santa Monica, USA (http://www.rand.org/multi/dprc/issdp2010).

25–29 April: 'Harm reduction: The next generation', International Harm Reduction Association's 21st International Conference, Liverpool (http://www.ihra.net/Liverpool/Home).

EU meetings

18 January: Horizontal working party on drugs, Brussels.

11 February: Informal dialogue on drugs between the EU and USA, Brussels.

12 February: Horizontal working party on drugs, Brussels.

1 March: Horizontal working party on drugs, Brussels.

2 March: EU-LAC mechanism, technical committee meeting, Brussels.

23–24 March: European Conference on an integrated approach to drug policies, Spanish Presidency, Madrid.

28 April: EU national drug coordinators' meeting, Madrid.

Scientific Committee underlines importance of scientific publishing

Boosting the quality and scientific rigour of the EMCDDA's work is among the aims of the agency's current three-year work programme (2010–12). Increasing the EMCDDA's scientific publishing activity and its engagement with the research community are among the activities listed in the programme to attain this objective.

With this in mind, promoting scientific publishing was high on the agenda at the latest EMCDDA Scientific Committee meeting held in Lisbon from 16–17 November. The Committee has taken particular interest in this issue over the last year, as noted in its formal opinion on the three-year work programme ([1]). The Committee welcomed the marked increase in the number of articles by EMCDDA staff in scientific peer-reviewed journals in the period 2008–09 and recommended that the agency plan strategically to target journals in future.

In a new formal opinion, the Committee welcomed the 2010 work programme as a positive development and as having the potential to further improve the quality and impact of the EMCDDA's scientific work. Also scrutinised at the meeting was the quality of the 2009 *Annual report*, following a review of chapters by four Committee members. Suggestions for improvements included the use of supplementary information sources and consideration of additional analyses (e.g. by groups of countries).

Matthew Hickman, an expert in epidemiology from Bristol University was welcomed as a new member, following the resignation of Jürgen Rehm. Finally, all current members expressed an interest in renewing their mandate at the end of 2010. In December, the Management Board reappointed the members of the Committee for another three-year term (2011–13).

Margareta Nilson

([1]) See formal opinions at: http://www.emcdda.europa.eu/html.cfm/index6821EN.html

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the European Neighbourhood Policy. The Management Board adopted a total budget of EUR 16 000 000 for 2010.

Monika Blum

Photo: Nuno Saraiva

Outgoing and Honorary Chairman Marcel Reimen (left), incoming Chairman João Goulão (right).

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