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for Drugs and Drug Addiction

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On 27 February, the UK Presidency, of the European Union acting on behalf of the 15

Member States, formally referred a new synthetic drug, N-Methyl-1-(1,3-benzodioxol 5-yl)-2-butanamine (MBDB) to the EMCDDA for risk assessment under Article 4 of the Joint Action on New Synthetic Drugs adopted on 16 June 1997.* The Presidency asked the Member States to assist the assessment process by reporting any recent incidences of, or other relevant information on, MBDB to the EMCDDA and the Europol Drugs Unit (EDU) by means of the exchange mechanism described in Article 3.

Although MBDB is not listed in Schedules 1 or 2 of the 1971 UN Convention on Psychotropic Substances, it is not a totally new synthetic drug. Over recent years, cases involving the drug have been reported in almost all Member States, making information collection easier than in situations involving a totally new substance.

In the context of Article 3 of the Joint Action, the EMCDDA and the EDU have agreed to submit a joint report,

MBDB: FIRST TEST OF JOINT ACTION IN PRACTICE

largely focusing on MBDB, to the Horizontal Drugs Group of the Council of the European Union on 20 May. The Presidency will then report the progress made to the European Council meeting in Cardiff, UK, from 15–16 June. The



EDU will cover production and trafficking of MBDB and the EMCDDA its use and possible risks (both health and social). To this end, the EMCDDA has circulated a questionnaire to the National Focal Points requesting information on MBDB and is examining other sources including the

Internet, data from relevant organisations and current scientific literature.

At the same time, steps have been taken in preparation for the risk-assessment procedure (Article 4). The EMCDDA's Scientific Committee, under whose auspices the assessment will be undertaken, has established a Steering Group to develop criteria, guidelines and procedures. The EMCDDA has also created an internal Task Force to prepare the special risk-assessment meeting of the Scientific Committee, to be held later in 1998, which will be attended by experts from the Member States, the Commission, the European Agency for the Evaluation of Medicinal Products and the EDU. MBDB presents a challenging first test of the Joint Action in practice.

Richard Hartnoll

* Concerning the information exchange, risk assessment and control of new synthetic drugs. Article 3 calls on Member States to provide information on the production, traffic and use of new synthetic drugs to the Europol Drugs Unit and the EMCDDA, taking into account their respective mandates. Article 4 gives the EMCDDA responsibility under the auspices of its Scientific Committee to assess the possible risks, caused by the use of, and traffic in, new synthetic drugs and the possible consequences of prohibition.

UN SPECIAL

SESSION: TIME TO

TAKE STOCK

The Special Session of the UN General Assembly to consider the fight against the illicit production, sale, demand, traffic and distribution of narcotic drugs and psychotropic substances will take place in New York from 8–10 June.

Among the issues on the agenda will be: controlling precursors; stemming the flow of amphetamine-type stimulants; judicial co-operation; countering money laundering; and co-operation on crop eradication and alternative development. Demand-reduction efforts will be highlighted via a 'Declaration on the Guiding Principles of Drug Demand Reduction' which is scheduled for adoption at the meeting.

The Special Session will give the international community the chance to assess the existing global drug

situation, review the current control regime and forge a forward-looking strategy for the 21st century in the framework of a comprehensive and balanced approach to all aspects of the problem. Of utmost significance will be the political declaration Member States are expected to adopt reasserting their strong commitment to drug control as a priority at both national and international levels.

See next issue of *DrugNet Europe* for more details.

Further information may be found on the Internet at:
<http://www.undcp.org/undcp/ga/bkground.htm>

**WORKSHOP
ON OUTREACH
WORK**

Outreach work is 'like an octopus', observed a participant at an expert workshop on the topic organised by the EMCDDA in Amsterdam from 29-31 March. Outreach workers are the 'tentacles' of the drug services, assisting those whom the services cannot or have not reached.

The workshop on 'Concepts, Practice and Terminology in the Field of Outreach Work', attended by 20 experts and practitioners, examined these issues and identified the need for further studies. Evaluation was deemed a key issue with which the EMCDDA could assist.

Although there are notable differences in the outreach work undertaken in the various EU Member States, many similarities exist. The workshop reached consensus on four models:

- Outreach work emanating from youth work aims to help marginalised young people use social networks and to promote social integration.



Photo: Diálogo de Noticias

Outreach workers are the tentacles of the drug services, assisting those whom the services cannot or have not reached.

- 'Catching clients' is the most traditional outreach model. Workers based at treatment centres inform drug users on the street about treatment and motivate them to begin.
- Outreach work boomed in the 1980s due to the HIV/AIDS epidemic. The 'public-health' model (where workers provide information about safer drug use and safer sex, distributing needles, syringes and condoms) is still very important.
- Users' groups are also engaged in outreach work, organising community-based activities and facilities, both in relation to traditional drugs, such as heroin, and to new synthetic drugs on the dance scene.

The full report of this EMCDDA workshop will be available in June.

Margareta Nilson

**DRUGS
BEHIND
BARS**

Drugs, AIDS and Prisons' was the topic of a conference organised by the European Network of Drug and HIV/AIDS Services in Prison from 12-14 April at the University of Oldenburg, Germany. The aim of the conference, attended by some 130 participants, including delegates from non-governmental organisations and prison staff, was to assess a set of guidelines for working with drug addicted prisoners to be presented to the Ministers of Justice of the 15 European Union Member States in March 1999.

Five working groups met to discuss the guidelines in relation to the following areas: drug-free programmes; syringe exchange; substitution programmes; harm-reduction programmes; and peer support. The participants were also informed of trials in the region of Lower Saxony, Germany, for syringe-exchange projects in prisons as a result of close collaboration between the University of Oldenburg, the Lower Saxony Ministry of Justice and the prisons themselves.

Petra Paula Merino

For a full report please contact:
The European Network of Drug and HIV/AIDS
Services in Prison, 4th Floor Broadway House,
112-134 The Broadway, Wimbledon,
London SW19 1RL, UK.
Tel.: ++ 44 181 543 8333.
Fax: ++ 44 181 543 4348.
e-mail: prs@easynet.co.uk

EDDRA opens new channels for networking

The Exchange on Drug Demand Reduction Action (EDDRA), the EMCDDA's electronic information system on drug demand-reduction activities, is now nearing the end of a ten-month feasibility phase involving the National Focal Points of the REITOX network.

Since November 1997, 'hands-on' training sessions have been held at the Focal Points to instruct staff on how to use the EDDRA system and its applications. As a result, all Focal Points have now entered at least one demand-reduction programme into the system and feedback both from the national centres and their networks has been positive. EDDRA is intended to cater to the information needs of practitioners and decision-makers involved in planning and implementing demand-reduction activities in the EU. As the database begins to expand, so too do the possibilities for networking and exchanging examples of good practice.

Gregor Burkhardt

* EDDRA is accessible on the Internet at: <http://www.sema.be/eddra/>.

Deaths related to drug use are of grave social and political concern. The number of such deaths is often taken as an indicator of the seriousness of 'the drug problem' and sometimes even as a reflection of the adequacy of drug policies. Although information on drug-related deaths can be useful for monitoring trends in problem drug use, and provides an important measure of the health impact of more severe forms of drug use, there are serious problems, both conceptual and practical, in using existing drug-related death data to make cross-national comparisons of the drug problem.

Conceptually, 'drug-related death' is not a simple term. In general, national statistics refer to the acute deaths directly caused by drug use. In most countries these are recorded as 'overdoses', usually of opiates, although

The EMCDDA has identified drug-related deaths as a key drug indicator and is actively working to improve the quality and comparability of information on the subject at EU level. Under its REITOX Programme, the Centre launched a project in 1995 to show routine statistics

on drug-related deaths. A group of experts examined existing information systems and conducted a pilot test analysing data from general-population death registers, using common International Classification of Diseases (ICD) codes across several Member States. The work of organisations such as the World Health Organisation and the United Nations International Drug Control Programme was taken into account and information was exchanged with EUROSTAT.

In 1998, the EMCDDA aims to build on the recommendations of the above-

DRUG-RELATED DEATHS

Improving a key indicator



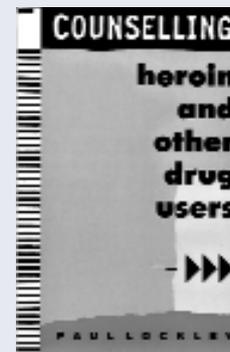
Generally national statistics refer to acute deaths directly caused by drug use, such as overdoses of opiates.

since combinations of different drugs, including alcohol or benzodiazepines, are often involved, it is not always clear what the figures really cover. Furthermore, deaths indirectly related to drug use, for example from AIDS in drug-injectors, should also be considered when assessing the risks and social costs of different forms of drug use. In practical terms, such differences in definitions and data-collection methods concerning drug-related deaths in the EU Member States make country comparisons dubious or even misleading.

mentioned project, propose concrete steps to improve understanding and comparability of existing data, and establish standards for the future. A major challenge for implementing these standards will be that national systems for recording drug-related deaths are part of much wider structures that record causes of death based on national legal regulations and administrative procedures.

**Julian Vicente and
Richard Hartnoll**

BOOKSHELF



Counselling Heroin and Other Drug Users

In 1994, there were nearly 100 deaths from drug overdoses, mostly involving heroin, in the Scottish city of Glasgow alone. This statistic represents just the tip of a growing iceberg: the huge increase in drug use among young people both nationally and internationally. While education about the dangers of drug abuse may prevent some young people from becoming users, the problem remains of how to help those who do use drugs.

Counselling Heroin and Other Drug Users is a comprehensive step-by-step guide for all those working with or counselling injecting heroin and other drug users. Linking theory to practice, it focuses on the reality of drug abuse, never losing sight of the fact that it is the drug user him or herself who must decide when and how to come off drugs. The book is comprehensive in its coverage of drugs, their effects, methods of use, the drug subculture and personal and social attitudes to drugs. Specific attention is given to injecting drug use; drug use, pregnancy and childcare; HIV infection; safer drug use; and death and overdosing.

Published by: Free Association Books Ltd, London, UK

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ISBN: 1-85343-304-7

For further information, please contact: Free Association Books, 39-41 North Road, London N7 9DP, UK.

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

THE EMCDDA AND ITS PARTNERS

The EMCDDA and the UNDCP unite in the fight against drugs

A Memorandum of Understanding between the EMCDDA and the United Nations International Drug Control Programme (UNDCP) was signed on 13 March in Vienna by EMCDDA Director, Georges Estievenart, and UNDCP Executive Director, Pino Arlacchi.

mote the incorporation of data on drugs and drug addiction gathered in the Member States or emanating from the Community into international monitoring and drug-control programmes, particularly those established by the United Nations and its specialised agencies, above all the UNDCP.

The Memorandum formally establishes co-operation between the two bodies in accordance with the principles of the United Nations Charter and as foreseen by Article 12 of the Council Regulation setting up the EMCDDA.*

At the signing ceremony, Pino Arlacchi said: 'We welcome this chance to intensify the working relationship with the EMCDDA. Our roles make us natural partners: the EMCDDA as the repository of information on drug abuse in the



EMCDDA and UNDCP: 'Natural partners'.

The partnership symbolised by the Memorandum will be a major step forward in national, European and international efforts to monitor this global issue. Co-operation between the two agencies will be founded on the principles of appropriateness, reciprocity and work-sharing based on complementarity.

The Memorandum actively unites the EMCDDA and the UNDCP in their efforts to: improve data collection and analysis; develop and promote data-comparison methods; and enhance the dissemination of information. It also promotes optimal use of available information and resources, regular consultation and exchange of technical experience. For its part, the EMCDDA will pro-

European Union, and the UNDCP as the centre of expertise on the global drug problem.'

Georges Estievenart noted that while the Centre was young, it hoped to improve the overall picture of the drug problems that different countries are actively seeking to tackle.

The terms of the Memorandum of Understanding will be reviewed in the year 2000.

* Council Regulation (EEC) No. 302/93, 8 February 1993, on the establishment of a European Monitoring Centre for Drugs and Drug Addiction. The EMCDDA became fully operational in 1995.

PARLIAMENTARY

COMMITTEE

MAKES FACT-

FINDING VISIT

TO CENTRE

A dozen representatives of the European Parliament's Committee on Civil Liberties and Internal Affairs, headed by Chairperson Hedy d'Ancona (the Netherlands), visited the EMCDDA on 3 March for a fact-finding session on the agency's activities.

The meeting was opened by EMCDDA Director, Georges Estievenart, who presented the main priorities of the Centre's second Three-year Work Programme (1998-2000). This was complemented by presentations of the work of the EMCDDA's departments: Epidemiology; Demand Reduction; REITOX; Information Strategies and Communication Resources; and Administration, Finance and Logistics. During the session, the Committee members visited the EMCDDA's Documentation Centre, were given working demonstrations of the agency's EDDRA system* and web site and heard a presentation of a feasibility study to set up a legal database of drug legislation in the EU Member States.

In her concluding remarks, the Chairperson of the Committee underlined the utility of the visit and the exchange of views held, and complimented the Centre on its publications. Mrs d'Ancona also expressed the wish that the Committee - which is currently drafting a number of reports on drugs -** follow the activities of the Centre closely and that it hold an indepth annual discussion on the Centre's Work Programme and *General Report of Activities*.

* See page 2.

** For further information, please contact the secretariat of the Committee on Civil Liberties and Internal Affairs. Tel: ++ 32 2 284 2111.

**SÃO PAULO
CONFERENCE:**

*Reducing
Drug-related harm*

The 9th International Conference on the Reduction of Drug-related Harm took place in São Paulo, Brazil, from 15–19 March, organised by the International Harm Reduction Association (IHRA). Among the 800 delegates attending the conference were doctors, lawyers, psychologists, researchers and judges, as well as representatives of governmental and international agencies, the police and political and social groups. The Conference was supported, among others, by the WHO, the UNDCP and the European Union.

In his address to the International Conference, Director of the EMCDDA, Georges Estievenart, gave an overview of harm-reduction interventions in the European Union. He informed participants that rates of HIV infection among drug injectors had been falling

in Europe (with the exception of Belgium and Portugal), suggesting that harm-reduction activities appear to be meeting some of their objectives.

The Director also referred to the rise of substitution treatment* in the EU Member States as a form of intervention for heroin and other opiate users. In addition, he outlined growing responses to new trends in synthetic drugs, many of which adopt non-judgmental harm-reduction approaches, rejecting traditional educational strategies.

‘Harm reduction is an integral part of responses to drug use in Europe’ concluded Estievenart. ‘Drug users benefit from harm-reduction interventions by improved health, a more stable social situation and less criminality... However, a sound balance between harm reduction and other demand-reduction interventions has to be maintained in order to assure an effective drug



Many projects tackling new synthetic drugs pursue a harm-reduction approach. The materials used maintain a non-judgmental position rejecting traditional educational strategies and focusing on information for users. Rather than 'just say no', the approach has become 'just say know'.

policy. Research and evaluation are necessary in order to know what works, how and why’.

* The hypothesis behind substitution treatment is that drug users will be less marginalised, less delinquent and better able to stabilise socially before eventually and possibly maturing into a drug-free life-style. Oral methadone is the most widely prescribed drug in addiction treatment in Europe. Between 1993 and 1996, the number of persons in methadone treatment nearly tripled, reaching over 200,000. Other heroin substitutes are codeine, buprenorphine and LAAM.

The EMCDDA has recently launched a comprehensive study on substitution treatment in the EU.

EMCDDA STATUTORY BODIES

- The Steering Group set up at the 8th meeting of the EMCDDA Scientific Committee in November 1997 to draw up risk-assessment guidelines in the context of the Joint Action on New Synthetic Drugs held its first meeting in Lisbon on 16 April 1998.
- The EMCDDA Scientific Committee held its 9th meeting in Lisbon on 17 April. (For full reports of these meetings, see next issue of *DrugNet Europe*).
- The working group set up at the 12th meeting of the EMCDDA Management Board in January 1998 to discuss the role and responsibilities of the National Focal Points will hold its third meeting on 7 May. The working group, composed of the EMCDDA Bureau members and the Management Board representatives of Denmark, France, Greece, the Netherlands, Spain and the United Kingdom, will draw up a working paper for discussion and adoption at the next Board meeting.
- The Management Board will meet next on 2–3 July in Lisbon.

**INFORMATION
EXCHANGE
WITH BRAZIL**

Following the above-mentioned International Conference, the Director of the EMCDDA travelled to Brasilia to the European Commission delegation where he met with representatives of the Brazilian National Co-ordination Unit on Drugs. Areas of mutual interest were identified and possibilities for a bilateral exchange of information and experience between the EMCDDA and Brazil were discussed. Also broached was the subject of inter-regional co-operation on drugs in Latin America, in particular the Mercosur Group of countries.

EMCDDA MEETS PORTUGAL'S MINISTER FOR DRUGS

The EMCDDA held its first meeting on 9 March with the new Portuguese Minister for Drugs, José Sócrates.

In the name of the President of the EMCDDA Management Board and in his capacity as Director of the Centre, Georges Estievenart gave a brief overview of the agency's second Three-year Work Programme and highlighted the links between the EMCDDA and the Portuguese authorities.

In turn, the Minister expressed the goodwill of the Portuguese government in maintaining and strengthening the support given to the Centre to date. He also revealed his personal commitment to reinforcing and modernising the Portuguese drug data-collection system to help the EMCDDA fulfil

its goal of providing reliable and comparable information on the drug situation in the EU Member States to political decision-makers. In response to a previous invitation from the Centre, the Minister made a working visit to the EMCDDA on 17 April which was considered very fruitful.

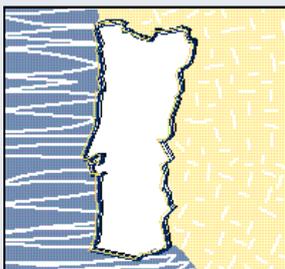
Gonçalo Felgueiras



Minister José Sócrates

PORTUGAL PREPARES NEW ANTI-DRUG STRATEGIES

The fight against drugs in Portugal took a step forward in February 1998 with the creation of an *ad hoc* committee of qualified specialists charged with drawing up proposals for the adoption of a new national drugs strategy. The results of its work will be presented in June 1998.



Changes were also made to Portugal's governmental structures in this field. The first of these was the creation of an Inter-ministerial Committee headed by Alexandre Rosa, who replaces Vítor Feytor Pinto as Portugal's representative on the EMCDDA Management Board. The second was the establishment of a Portuguese Drug Addiction Institute (Instituto da Toxicoddependência) which replaces Observatório VIDA as the REITOX Focal Point for Portugal. To ensure greater efficiency and co-ordination of political anti-drug action, Minister Sócrates will directly supervise the above-mentioned bodies.

Gonçalo Felgueiras

Phare Drugs Programme: New Direction

The European Commission and the Co-ordination Unit of the Phare Multi-Country Programme for the Fight against Drugs hosted the 7th Liaison Group meeting in Riga, Latvia, from 26–27 February. The meeting examined the results of the Programme to date, plotted its future orientations and analysed its impact. It also helped strengthen links between programme co-ordinators, project managers and representatives of the EC and other international organisations. The EMCDDA joined over 50 participants attending the event.

As far as the future direction of the Programme is concerned, more Phare assistance will be given to the Central and Eastern European Countries (CEECs) that are candidates for membership of the EU.



Priorities include: information collection; institution-building; harmonising legislation; co-operation between the EU and the CEECs on demand and supply reduction; creating integrated policies in co-operation with the EMCDDA; preventing the illicit production and abuse of synthetic drugs; and preventing drug trafficking in the Balkan region.

The CEECs in the pre-accession phase asked the EMCDDA to indicate the minimum requirements and guidelines for operating a National Focal Point in their country. They also asked the Centre to clarify the standards required to arrive at reliable and useful indicators of drug use.

Finally, the overall impact of the Programme was assessed following a survey among participants. This revealed that the Programme had made a difference in three areas: policy development; precursor controls and anti-money-laundering measures; and demand reduction.

For further information and a full report of the meeting please contact: Phare Programme Co-ordination Unit, 25 Baznīcas iela, Rīga 1010, Latvia.
Tel: ++ 371 7310074 / ++ 371 7312559 Fax: ++ 371 731 0109.
e-mail: drugspcu@pcu.fad.phare.org

DRUGS-LEX



CHANGES IN MEMBER STATES' DRUGS LAWS

Austria: New Narcotic Drug Act

The first major Austrian drug law of 1951 was amended first in 1980 and then in 1985 to make a clear distinction between persons involved in criminal activities and persons with drug-related health problems. This distinction was based on the principle of 'therapy not punishment', with drug dependence seen as a psycho-social disease and the addict, even if an offender, viewed as a sick person. On 1 January 1998, a new Narcotic Drug Act came into force.

With this new Act, Austria joins its European Union partners in adopting those parts of the current UN Drugs Conventions concerning the control of psychotropic substances (Tables III and IV of the 1971 UN Convention) and precursors (Tables I and II of the 1988 UN Convention). Another important innovation concerns more lenient legal measures to deal with possession of cannabis by 'first consumers'.

This new law will strengthen Austria's social and medical approaches to the drug phenomenon and reinforce its repressive attitude towards drug trafficking, related criminal organisations and money laundering.

Danilo Ballotta

EMCDDA PUBLICATIONS



1998 Annual Report

In January 1998, the EMCDDA's Management Board adopted the Centre's 1998 Work Programme along with the structure and timetable for producing the 1998 Annual Report on the State of the Drugs Problem in the European Union.

This year, in addition to the traditional chapters (prevalence and patterns of use, demand reduction, national strategies and action at European Union level) the Report will include two new chapters. The first of these will cover the state of the drugs problem in the Central and Eastern European Countries (CEECs). The second, devoted to the funding of anti-drug activities, will give as much detailed information as possible concerning anti-drug spending at national, regional and local level as well as an overview of the social cost of drugs.

The official launch of the 1998 Annual Report is foreseen for mid-September.

New EMCDDA Publications

- *General Report of Activities 1997* (English version)
- EMCDDA Scientific Monograph No 2 – *Evaluating Drug Prevention in the European Union*.

Coming soon...

- 10 language versions of the 1997 Annual Report.
- *General Report of Activities 1997* (French, German, Portuguese and Spanish versions foreseen for June 1998).
- First *Report on European Union Drug Information Structures and Sources*.
- EMCDDA Manuals Series No 1 *Guidelines on the Evaluation of Drug Prevention*.

Regular updates on the EMCDDA's publications may be consulted on the Internet at:

<http://www.emcdda.org>

Italy prepares to modify its drug law

A new draft drawn up by an inter-ministerial committee to revise some important points in Italy's drug law was presented to the Italian government in April. Under this amended law, possession of drugs in a group, if judged to be for personal use only (presently covered by penal sanctions) would be subject to adminis-

trative sanctions.* If adopted, the new law would also entail: the strengthening of alternative measures to prison; the introduction of a clear distinction between occasional small-scale sale of drugs and organised trafficking; and the promotion of comprehensive measures for prisoners affected by the HIV virus.

The draft is expected to be discussed before the summer.

Danilo Ballotta

* For example, confiscation of driving licence or passport.

A Glimpse at a National Focal Point

SPAIN

In December 1997, in the context of its National Action Plan against Drugs (Plan de Medidas de Lucha contra las Drogas) adopted in January 1997, the Spanish government established a National Drug Monitoring Centre (Observatorio Español sobre Drogas). The aim of the Centre – the Spanish National Focal Point in the REITOX network – is to become a permanent barometer of the drugs problem in Spain, to gather information on the subject and to develop instruments for collecting, analysing and transmitting information on drugs and drug addiction.

The Drug Monitoring Centre is Spain's permanent body for collecting information from different sources, both national and international, and placing this at the disposal of institutions, professionals working in the field of drugs, and society as a whole. It also aims to be an effective decision-making instrument advising the Government Delegation for the National Plan on Drugs (Delegación del Gobierno para el Plan Nacional sobre Drogas) on action in this area.

The tasks of the Spanish Drug Monitoring Centre are as follows:

- to collect and analyse information from national and international sources;
- to create a new information system to allow the state of the drugs problem at any given moment to be evaluated and for future trends to be assessed;
- to disseminate information by publishing periodical reports;
- to collaborate and co-ordinate joint activities with the EMCDDA to improve the comparability of information with other EU Member States;
- to disseminate in Spain, in its capacity as National Focal Point, information on the drug situation in the European Union;
- to promote research and studies on relevant issues related to the consumption of drugs and its effects;
- to expand the work of its Documentation Centre on Drugs; and
- to advise the various national political and institutional bodies on different priorities in the field of drugs and possible measures for adoption.

The Observatory is governed by three specialised committees: an advisory committee, composed of members of social

E · M · C · D · D · A NOTICEBOARD



Centre calls for Expressions of Interest

On 7 March 1998, the EMCDDA published two calls for the expression of interest in the *Official Journal of the European Communities*, S series (OJ S 47 – 07.03 1998) to identify potential contractors to assist the Centre in: consolidating information technology and data-communications infrastructure (EMCDDA/CEI/INF 98–2000 – OJ document 27570–98); and implementing its 1998–2000 Work Programme (EMCDDA/CEI/98–2000 WP – OJ document 27572–98). Individuals as well as private and public organisations wishing to be considered for inclusion on the list(s) are invited to submit an application and send it with supporting documents to the address given in the *Official Journal*. The required application form may be obtained as follows:

- by a request addressed to the EMCDDA as indicated in the notices, specifying which language version(s) of the form is required;
- as a download document from the EMCDDA web site at: <http://www.emcdda.org>

groups, professionals and scientists working in the field of drugs; a technical committee, responsible for links with the Focal Points' information sources and technical matters; and a scientific committee, responsible for research, study and training on the social, health and economic aspects of the drugs problem.

The Focal Point also hosts three types of information system: a permanent state information system on drug addicts; telephone services providing and col-

lecting information on drug addiction to and from citizens for immediate evaluation; and an early-warning system, composed of health and treatment centres, providing rapid data on new trends in drug use.

For further information, please contact: Camilo Vázquez, Head of the Spanish National Focal Point, Observatorio Español sobre Drogas, Ministerio del Interior, Delegación del Gobierno para el Plan Nacional sobre Drogas, C/ Recoletos, 22, E-28001 Madrid, Spain. Tel: ++ 34 1 537 27 24/25 Fax: ++ 34 1 537 27 08. E-mail cvazquez@pnd.mir.es

EMCDDA Calendar

5–7 May – Pompidou Group, meeting of Permanent Correspondents, Strasbourg.
7 May – Management Board Working Group on National Focal Points, Strasbourg.
7–9 May – Scientific Seminar on 'Drug Research, Policy and Dynamic Modelling', Lisbon.
11 May – EDU–EMCDDA meeting on Joint Action on New Synthetic Drugs, Lisbon.
11–12 May – Pompidou Group working group to revise guidelines for multi-city reports and ensure compatibility with the EMCDDA, Paris.
14–15 May – Seminar on the EDDRA Feasibility Phase with REITOX Focal Points, EMCDDA, Lisbon.
15–16 June – Project meeting on identifying, tracking and understanding emerging trends in drug use, Munich.
17 June – Meeting with the EDU on co-operation

on indicators and annual reports, Lisbon.
19–20 June – Seminar on 'Alternative Measures to Prison', Bilbao.
22–23 June – Meeting of Heads of the REITOX National Focal Points, Lisbon.
26 June – International Day Against Drug Abuse and Illicit Drug Trafficking.
28 June–3 July – 12th International AIDS Conference, Geneva.
2–3 July – EMCDDA Management Board meeting, Lisbon.
21–23 July – International Epidemiology Working Group meetings, Lisbon.

Selected EU Meetings

20 May – Horizontal Drugs Group, Brussels.
29 May – Justice and Home Affairs Council, Brussels.
3–5 June – European Harm-Reduction Conference, Utrecht.
15–16 June – European Council, Cardiff.

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