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## MESSAGE

### **Wolfgang Götz, Director European Monitoring Centre for Drugs and Drug Addiction**

On the occasion of the launch of the  
*2006 Annual report on the state of the drugs problem in Europe*  
Embargo: 11H00 CET – 23.11.2006

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The launch of the new EU drugs strategy (2005–2012) marks an important step forward in the way Europe responds to the drug problem. The strategy, and its current action plan (2005–2008), are concrete examples of the growing consensus existing between Member States and underscore their shared commitment to cooperation and concerted efforts. But this consensus does not end there. Although national policy remains the prerogative of individual countries and policy differences are still evident – enlivening the European debate – differences in fundamentals are far harder to find. Overall we see countries today increasingly moving in the same direction.

Nearly all European countries now frame their policy initiatives within an overall national drugs strategy or action plan. In an in-depth analysis of drug policy out today, we report strong signs of a broadening of the scope of these strategies to encompass licit addictive substances, such as alcohol, tobacco and medicines, as well as illicit drugs <sup>(1)</sup>. Over two-thirds of the countries surveyed now either cite both types of substance explicitly in their drug policy documents or include links to licit substances in the context of prevention and treatment. This is clearly a timely development when the multiple use of licit and/or illicit substances ('polydrug use') is becoming ever more visible within the European drug culture.

The EMCDDA currently faces the challenge of monitoring a much broader spectrum of substances than a decade ago. Treatment services are dealing with a greater variety of stimulant and polydrug problems than ever before and report a considerable overlap of drug and alcohol problems. A common thread running through this year's report is the pressing need to develop policies and initiatives that respond adequately to the complex and multifaceted nature of today's drug problem. Polydrug use in particular presents big challenges to drug monitoring systems that traditionally have focused on the use of individual substances. Developing new methodologies to understand this pattern of drug use must be high on our future agenda if we are to meet the needs of the growing number of people whose problems stem from using a range of drugs.

As well as monitoring today's situation, our central tasks include keeping a watch out for new drugs and anticipating future threats to public health. It is likely that new forms of drug use will be adopted at first by a few individuals, among small groups or in particular regions or social settings. Our aim is quickly to pick up on new substances and emerging trends, detecting them before they have had time to become major problems.

In 2005, a total of 14 new psychoactive substances were officially notified for the first time to the EMCDDA and Europol through our early-warning system <sup>(2)</sup>. A significant development here was the appearance and rapid spread of the new substance mCPP – 1-(3-chlorophenyl)piperazine – which has been more widely identified by Member States than any other new psychoactive substance since the system began monitoring in 1997.

In the space of a year, mCPP had appeared in 20 EU Member States, Romania and Norway, often marketed as a 'new type of ecstasy'. This is an example of how those involved in the production of illicit drugs are ever looking for innovation in the form of new chemicals that can be offered to potential users. The early-warning system is an important mechanism to intervene in a process in which the health of young Europeans is put at risk by those in pursuit of profit.

In 2005, the EMCDDA also launched the E-POD pilot project (European Perspectives on Drugs) aimed at helping detect, track and understand emerging drug trends in Europe <sup>(3)</sup>. The first report <sup>(4)</sup> resulting from this project pointed to the apparent increase in availability and use of hallucinogenic ('magic') mushrooms since the 1990s. By focusing on specific substances in this way, E-POD will act as a pan-European radar on newly fashionable drugs and help countries respond quickly and effectively to their use and associated health risks.

Finally to methamphetamine, a drug associated with severe public health problems around the world. In Europe problems related to this drug are still limited to a few countries but, in the last year, more EU countries have reported seizures, clearly underscoring the need for more intensive monitoring of populations most at risk.

This brings me to the 2005 proposal from the European Commission to recast the EMCDDA's founding mission to help it rise to these new challenges. For example, the revised regulation states that the agency must take account of new methods of drug use, especially polydrug use, including the combined use of licit and illicit psychoactive substances.

The global debate on the drug problem is not short on rhetoric regarding the need for a balanced and evidence-based approach to drugs. In Europe, perhaps more than anywhere else, this rhetoric is becoming reality. The new EU drug strategy and its first action plan are underpinned by consensus between countries on reducing both supply and demand. There is also clear agreement on the importance of collecting and sharing information, disseminating good practice, and the need to be guided by scientific evidence when making hard choices about what actions are in the best interests of citizens. The European Commission, supported by the EMCDDA, will evaluate the current action plan using just this type of evidence.

EU drug strategies and action plans over the years have helped galvanise national authorities, add value to domestic policies and have resulted in a stronger and more unified European voice on drugs. The EMCDDA strives to facilitate informed policy-making by providing an objective and scientifically rigorous analysis of the information available on the drug phenomenon in Europe.

It is easy to be depressed when considering the problems that drug use brings to individual Europeans, to their families and to the communities in which they live. Where we can be more optimistic is that today in Europe we have, not only better understanding of the situation, but also a more rational, open and informed dialogue on drugs than has ever been the case before.

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<sup>(1)</sup> Selected issue: 'European drug policies: extended beyond illicit drugs?' <http://issues06.emcdda.europa.eu>

<sup>(2)</sup> Operating under Council Decision 2005/387/JHA of 10 May 2005 on the information exchange, risk assessment and control of new psychoactive substances (*Official Journal*, L 127, 20.5.2005). See also <http://www.emcdda.europa.eu/?nnodeID=17869>

<sup>(3)</sup> Set up in the context of the EU drugs action plan (2005–2008) which calls for the development of 'clear information on emerging trends and patterns of drug use and drug markets'.

<sup>(4)</sup> 'Hallucinogenic mushrooms: an emerging trend case study' <http://www.emcdda.europa.eu/?nnodeid=7079>