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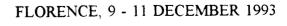
for Drugs and

Drug Addiction

(EMCDDA)



PRESENTATION AND CONCLUSIONS OF THE EUROPEAN SCIENTIFIC SEMINAR ON STRATEGIES AND POLICIES TO COMBAT DRUGS





Brussels, 10.9.93
Final

EUROPEAN SCIENTIFIC SEMINAR

ON STRATEGIES AND POLICIES TO COMBAT DRUGS

Florence, 9-11 December 1993

Presentation by topic

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Head of Unit, Drugs

The proposed seminar is part of the increasingly open and expanding debate in Europe on the global drugs phenomenon, its economic, legal, political and social consequences and the question of strategies to combat drugs. The aim is first to present these topics for examination and consideration by academic and research experts with a view to determining the state of the art in these matters, which is a prerequisite for European action in this field.

The seminar starts from the premise that, however important it may be, the debate on legalization/ liberalization/ decriminalization/ prohibition does not by any means cover every aspect of a conceivable strategy. Such a strategy should go beyond the question of legislation and encompass law enforcement, the definition of political objectives adopted and pursued, the organization and coordination of public authorities at various levels, and the mobilization of the necessary financial and human resources to achieve these objectives.

It seeks to adopt a resolutely comparative approach. In the light of reflection and the results of action in Europe and America, such an approach is inescapable, particularly now that the internal borders of the Community are being removed and more coordinated action by the Twelve is the order of the day, provided the individual culture and traditions of the Member States are respected.

FIRST SESSION: INTERNATIONAL STRATEGY TO COMBAT DRUGS

1. Global phenomenon of drugs and the main facets

The drugs phenomenon is now regarded as a worldwide problem and the three main facets are production, trafficking and demand. The worldwide estimated annual turnover is USD 800 billion, about 10% of the GDP of the United States, or the equivalent of the GDP of the United Kingdom or four times the EEC budget. In

other words it weighs heavily, directly and indirectly by its very nature on international political and economic relations. This raises the question of how the international community, in particular Europe, has reacted in recent years to the globalization of the drugs phenomenon and how it will react in future.

2. United Nations strategy: Comprehensive Multidisciplinary Outline, Global Programme of Action and international conventions

Illicit (UN International Conference on Drugs and Since Trafficking, Vienna, June 1987) the United Nations has developed a more integrated and balanced strategy with respect to the three main aspects of the phenomenon. From this point of view a look at the Comprehensive Multidisciplinary Outline, adopted in Vienna in June 1987, and the April 1990, in adopted Global Action Programme, implementation should throw light on the international approach to the problem. Governments will inevitably have drawn on these instruments to establish and direct their own strategy in subsequent years. A study should also be made into how far States have gone and how successful they have been in emulating the United Nations approach and what obstacles they may have encountered.

The principal, and indeed mandatory, United Nations instrument consists of three international conventions currently in force, adopted in 1961, 1971 and 1988. Although these instruments and their basic concepts are relatively well known, a study of how they complement each other would be worthwhile in order to draw up a comprehensive summary of their objectives and impact on the drugs phenomenon, and establish the extent to which they coincide with the global strategy referred to above. It is likely that the United Nations regulatory machinery, which is aimed at banning the illegal production and sale of drugs, covers only a part rather than the whole of the problem. To date a reduction

in demand has not been the subject of an international legal instrument.

3. Debate on legalization, liberalization, decriminalization and prohibition

Given that the legislative approach of the United Nations was developed and disseminated not long ago and a wider approach adopted only very recently, it is not surprising that there is an ongoing discussion between those in favour of the legalization or decriminalization of drugs (use and trafficking of soft and even hard drugs) and partisans of prohibition. The latter continue to constitute the great majority in all countries, but account should be taken of the growing feeling that decriminalization of the use of soft drugs should not be taboo (see recent events in Italy and France, and in several cities in Europe). This debate should therefore be considered in a wider context and not treated in isolation. The above references to strategies for action and law enforcement are likely to be pertinent to placing the fundamental debate about legislation in a wider context.

4. The approach of the Community and its Member States and Community legislation

The attitude adopted by the Community is of great interest in the context. Since the essential lawmaking competence lies with the Member States (incorporation of United Nations conventions into national law), it is natural that since the end of the 1980s the Community's initial efforts in this area favoured a comprehensive strategic approach which was reflected in the two European plans - very much intergovernmental in nature - to combat drugs adopted by the Council in 1990 and 1992. We need to see firstly

how and to what extent the Community's essentially non-legislative approach reflects and transposes the overall view of the problem emerging from the 1987 world drug conference, and secondly how far it goes in acting on the strategic proposals set out in the United Nations Comprehensive Multidisciplinary Outline (1987) and the Global Programme of Action (1990). Useful comparisons may be drawn with the work and proposals of the European Parliament since the mid-1980s.

At this juncture, a first detailed review of Community legislation is called for. Although the Community at present has very limited jurisdiction in matters relating to drugs (mainly those aspects connected with development aid, trade and the free movement of goods and capital, precursors, money laundering, etc.), it does establish an additional legislative level between the national and the international. It is therefore particularly interesting to identify common aspects of international conventions and Community instruments.

5. Summary: the fundamentals of the international strategy

The first part of the seminar should produce an overview of the international strategy to combat drugs that has been developed in recent years, starting in 1985-86, when the Community effectively entered the international drugs arena. This overview should group together and order the various basic elements of the international drugs strategy and facilitate a systematic and detailed comparison of national anti-drugs strategies in Europe.

SECOND SESSION: NATIONAL STRATEGIES TO COMBAT DRUGS

1. Facets of national strategies

Some empirical studies have been or are being conducted with a view to comparing national strategies and their various facets, in particular the work by P. Reuter (comparison between the United States and Europe) and H. J. Albrecht and A. Van Kalmthout (anti-drugs policies in Europe). They are only partial or need to be updated in certain important respects. It should, however, be possible to use this work as a basis for preparing an initial table or model of the main facets of national strategies and possible combinations or variants. The general aim of the second session is to consider a system which could be used to compare and identify similarities in the key facets of national strategies.

2. National laws: a comparative analysis

Several studies have been made of laws to combat drugs in Europe (Leroy, Cesoni, Albrecht, etc.), which are a vital aspect of national strategies. A review of these studies would help understand differences and similarities: comparisons of two sets of legislation, for example, Dutch and French, German and Spanish, American and British, would be most instructive.

This topic should primarily provide an opportunity to begin a serious examination of what existing national laws in Europe have in common, irrespective of their differences. This approach is fully justified by the fact that the national laws of the Twelve conform to the United Nations conventions and the principle of

banning illegal drugs which they lay down. On the other hand, it is clear that not one of them, even the "toughest", constitutes a genuine instrument for a war on drugs as conceived and implemented by the United States legislation, which also conforms to the United Nations conventions. In this context the identification or examination of the "snake" of anti-drugs laws offers an original and promising avenue of research.

3. Enforcement of national laws

In terms of strategy, an analysis of the enforcement of anti-drugs laws is as interesting as an analysis of the laws themselves. In practice, strict enforcement of the laws suggests that they are in tune with the strategy governing them, that the means of enforcement are adapted to the objectives of the legislation in question and that the body politic endorses the general principle.

Weak or more disputed law enforcement suggests the reverse situation and malfunctions in the body politic (for example, reservations on the part of the police or judiciary, over-extended prison system, etc.). In regard to drugs, the judiciary is a key parameter. There is a question of whether there is a link between the "toughness" of a law and the intensity with which it is enforced (for example, are tougher laws enforced more efficiently, less well or in the same way as laws regarded as more liberal, and are there any conclusions to be drawn?).

By analogy with the "snake" of the European Monetary System, which has a ceiling and a floor between which exchange rates, in this case national laws, can move without crossing the limits (except when leaving the snake altogether).

4. Comparative analysis of national strategies

(a) The preparation, negotiation and implementation of a national plan to combat drugs corresponds in principle to the will, at central government level, to define priorities for action, organize them in time and space, and assign appropriate resources for implementation.

Given that the drugs phenomenon is a global, multisectoral phenomenon cutting across society, some States have developed an overall plan under which priority is given to an attack on three fronts: supply (production), demand and their interaction in the form of illicit trafficking. This implies the use of a wide range of measures under corresponding sectoral policies and the organization of a system of interrelations between them (cooperation with non-member ccuntries, of the internal market, prosecution of national international drug trafficking, prevention of drug addiction. treatment, risk reduction, rehabilitation, etc.). This session of the seminar, working on the basis of these elements of sectoral policies and their interaction, should therefore seek to identify various categories of national plans, by nature and content, and to envisage possible theoretical and practical variants.

(b) The administrative organization of the public services responsible for the fight against drugs is also a key factor in assessing the strategy adopted and implemented. The 1987 United Nations Drugs Conference was the first occasion on which the role of national anti-drugs coordination units was highlighted as an instrument of a coherent policy and as mediator between the various operations of the public departments concerned (public health and social affairs, justice and home affairs, customs, finance, police, foreign affairs, etc.). A comparative and qualitative examination of the drugs coordination units is a key

to understanding the strategy they are supposed to be carrying out. To be useful and complete, such a comparison should concern itself not only with the role and composition of these units, but also with their location in the administration (for example, in the Ministry of Health, the Ministry of the Interior or immediately attached to the Head of Government, or Head of State) and their prerogatives as regards determination of strategy and resource allocation.

(c) It is impossible to assess a policy of any type without identifying the financial and human resources allocated and how they are distributed between the various priorities. In the context of drugs this is particularly difficult since anti-drugs policy is not a policy in itself (like agriculture or foreign trade) but more of an array of sectoral subpolicies varying in the degree of consistency and coordination. Available resources at national level are not always clearly or exclusively earmarked for these subpolicies: for instance, there are not always police units specially assigned to combat drugs or specific budgets (public health) and there may be spatial distortions (e.g. an organization may be centralized as regards the treatment of drug addicts, but responsibility for the prevention of drug addiction may be decentralized or exercised at local level. While a study of these questions would be conclusive it has not yet been systematically attempted and could be an important area of future research.

Moreover, following the increase in drug addiction in cities, some municipal authorities have devised and implemented their own action strategies to combat the consumption and trafficking of drugs and the crime and insecurity which ensue. This is especially the case where city authorities enjoy substantial power and resources, i.e. in countries which have a strong tradition of decentralization such as Germany, the Netherlands and Spain.

By looking at a sample of these cities we shall see more clearly the emergence of grassroots strategies which are sometimes an alternative to national policy, and understand the real problems which cities have to face. This is fundamentally important, as drug addiction and trafficking remain very much an urban problem which cannot be resolved by purely national strategies.

Inter-city research networks

In the United States, a highly decentralized country facing drug addiction on a much larger scale than Europe, inter-city information and cooperation networks on combating drugs were set up as early as the 1970s. The seminar might be a good opportunity to take stock of these experiments now that a certain time has elapsed since their launch.

In fact the subject was already discussed at a special seminar on "Health-related data and epidemiology in the EC" held by the Commission in September 1992. The conclusions reached there might be developed further at the Florence seminar.

¹ Document No 5 of the preparatory studies for the European Drugs Monitoring Centre (1992).

Inspired by the American experience, the Pompidou Multicity Study Group was launched ten years ago. It concluded its first study in 1987 and has just published a second - on thirteen European cities - which is the largest ever undertaken in Europe on the epidemiology of drugs. The Pompidou Group researchers established five common indicators for measuring the phenomenon of drug addiction and its growth in the thirteen cities concerned. These indicators must now be tested to see how far they can be extended and applied at national level and to determine the practical feasibility of using them in European cities. This is a vital precondition if we are to introduce a harmonized European system for collecting data, which is presently lacking. Such a system might possibly be established jointly by the Pompidou Group and the European Community through the European Drugs Monitoring Centre and in association with the network of cities concerned. It would require a strong commitment by local authorities and politicians to act on the results of long-term research.

3. European cities' action network

Apart from the initiatives discussed above, European cities faced with the problem of drugs and urban crime have recently been forging new links in the form of action and cooperation networks. These networks were quick to establish contact and working relations with the European Community. They form part of a general trend whereby Europe-wide action and cooperation is being extended to city level (cf. the "Eurocities" initiative).

The establishment of these networks poses two new challenges: first, although these cities face common problems, their situations differ depending on the structure of government in their country (centralization or decentralization); these differences are bound to affect the kind of cooperation which cities can establish with counterparts working under a different or even opposing national system; second, there is the problem of the direct relation of cities with the Community level (including the question of funding) and the role of the central authorities in this new kind of relation, which appears to be a response to very strong grassroots pressure and points the way towards a more democratic Europe that is closer to the people (for whom drug addiction and the related problem of urban crime are top priorities).

4. Networks of non-governmental organizations and their influence on strategies

The same problem of "the relationship with Europe" and the same desire to take part in the process of European integration, in particular in the social field, has prompted many non-governmental organizations to join forces to form European networks. In the drugs field this grassroots movement is of particular importance for prevention. impact of the First European Drug Prevention Week and the establishment of the European Drugs Monitoring Centre already seem to have had a considerable "crystallizing" effect, which needs to be studied more closely and given due consideration. The same is true for the international and geopolitical aspects of the drugs problem, for which a European body is in the process of being established. These two kinds of network (the first relating to prevention schemes and the second to alternative development and cooperation with the Third World) - both very close to the grass roots - have become essential partners in any European strategy for combating drugs. We now have to spell out more clearly their role and "strategic" contribution in the future.

5. Summary: classification of urban and local strategies for combating drugs

The Florence seminar should produce two important results concerning the role of cities in tackling the drugs problem: a classification of various situations and strategies and an outline of a possible code of conduct between the Community and networks of cities and NGOs directly involved in combating drugs both inside and outside the Community.

FOURTH SESSION: THE TREATY ON EUROPEAN UNION AND THE POTENTIAL BASIS FOR A EUROPEAN ANTI-DRUGS STRATEGY

1. Drugs and the legal structure of the Treaty on European Union

The fourth session will focus on the need for a European dimension in the fight against drugs, as felt by the scientific community, and the scope for practical measures afforded by the Maastricht Treaty. One of the aims of the exercise is to help the Commission, the Member States and Parliament to see more clearly what joint initiatives will have to be taken once the Maastricht Treaty is ratified. With this in mind, the seminar will include contributions from civil servants familiar with the legal and practical aspects of the exercise of Community powers and outside experts who are specialists on the main topics to be discussed.

The Maastricht Treaty is quite remarkable in its treatment of drugs: whereas the subject does not appear anywhere in the Treaty of Rome and the Single Act, it has been given high priority in the new Treaty, where it is referred to in the first pillar (under "Public Health"), the second pillar (Common Foreign and Security Policy) and the third pillar (Cooperation in Justice and Home Affairs).

This situation will have two conflicting effects which merit closer examination:

- on the one hand, the inclusion of drugs as a priority in all three pillars will allow the European Union to draw up a comprehensive strategy covering demand, supply and trafficking;
- on the other hand, since the power to initiate legislation and adopt decisions varies from pillar to pillar, there is a question mark over the coherence of the procedures, instruments and structures needed to formulate a comprehensive anti-drugs plan to replace the two previous plans which were mainly intergovernmental in nature with the Commission sharing the right of initiative with the Member States and the European Parliament.

2. Drugs as a public health priority

Under Article 129 of the Treaty, action on drugs has been made a public health priority. One of the tasks here will be to determine the possible form and content of the "incentive measures" and "recommendations" provided for in the Treaty, bearing in mind that Community action will focus mainly on preventing addiction. The seminar should also consider the measures to be taken on the basis of Council decisions,

resolutions and recommendations before the Maastricht Treaty enters into force, with due regard to the establishment of the European Drugs Monitoring Centre, whose main task during its first three years will be to supply information on the demand for drugs in Europe and measures to reduce this demand. The general approach to this examination of possible measures will exclude any harmonization of national legislation in accordance with Article 129 of the new Treaty.

3. Drugs as a priority of the Common Foreign and Security Policy (CFSP)

On the same principles and following the same procedure, we should also look at the kind of measures which could be introduced under the CFSP, bearing in mind those already implemented under the Community's present powers (e.g. development cooperation under the first "pillar"). One task will be to define the possible substance and form of the "joint action" provided for in Article J.3 of the Treaty, taking into account the guidelines already adopted by the Lisbon European Council in June 1992, giving priority to the Middle East and the Maghreb countries even before the Treaty comes into effect. In this context, it might be particularly useful to combine the Community's present and future powers on the foreign policy aspects of drugs, and consider the form and content of a possible code of conduct between the Community and the Member States on cooperation with non-member countries, in particular countries which produce or export drugs. This could be done by building on the progress already achieved by the Council Decision of 26 January 1987, the only wide-ranging decision ever adopted by the Community in this field (which takes in the problem of alternatives to drug production and coherent use of the Community's commercial instruments and development aid).

4. Drugs as a priority under Cooperation in Justice and Home Affairs

The third field of action opened up by the new Treaty is the most sensitive, as it covers areas in which the Community has no traditional role or experience. We should therefore give further consideration to the possible substance of the "joint positions", "joint action" and "conventions" provided for in Article K.3 of the Treaty, while carefully drawing a distinction between measures against drug addiction under Article K.1(4) (except of course for matters coming under Article 129) and those under Article K.1(7), (8) and (9) (judicial cooperation in criminal matters, customs cooperation and police cooperation on the prevention of illicit traffic in drugs). The distinction is all the more important as the Commission has been conferred a right of initiative for Article K.1(4) which it does not have for other aspects, and Article K.1(4) itself may be transferred from the third to the first pillar of the Treaty under Article K.9.

5. A common core of national strategies and legislation - potential nucleus for a European strategy?

The main question here is whether it would be politically advisable and legally feasible to establish a European plan to combat drugs, by strengthening coherence between the three pillars of the Treaty on European Union and paving the way for a comprehensive Commission initiative, drawn up after consultation with the European Parliament and the Member States.

Any proposal of this kind would have to avoid the harmonization of national legislation and observe the principle of subsidiarity, hence the idea of trying to define a "common core" of the Member States' national strategies and legislation which could serve as the nucleus for a future European plan to combat

drugs. We therefore need to find the right balance between the "common core", the measures to be taken on the three aspects of the drugs question and the legal possibilities opened up by the Treaty on European Union.

6. Cross-border information, research and training - instruments of a European strategy

By bringing together scientists and administrators, the Florence seminar, will be an ideal opportunity to review the progress which has been made at European level - and identify the work still to be done - in the vital fields of cross-border information, research and training on drugs. The establishment of the European Drugs Monitoring Centre and the Europol Drugs Unit, the introduction of various Europe-wide information networks, the launch of research programmes on anti-drug policies (e.g. the COST programme) and European training programmes are all items which are high on the agenda, but which lack a framework for coordination and action. A future European plan to combat drugs might set up such a framework. We need to investigate the form it might take, using as a basis the initiatives and experiences documented in the preparatory studies for the European Drugs Monitoring Centre.

7. Summary: possible content of a comprehensive European Union plan to combat drugs

The fourth and final part of the seminar will try to bring together and organize in a multiannual framework the possible measures which have been identified and defined during the seminar. The next step might be for the Commission to draw on the results of the seminar as a further

source of ideas for a possible communication to the Parliament and Council to take account of the new institutional situation which will be introduced by the entry into force of the Treaty on European Union.

Meanwhile, the scientific work of the seminar will be a most valuable technical and methodological contribution to the preparations for establishing the European Drugs Monitoring Centre, whose second priority will be to analyse anti-drugs policies and strategies.

G. ESTIEVENART

PROGRAMME

EUROPEAN SCIENTIFIC SEMINAR ON STRATEGIES AND POLICIES TO COMBAT DRUGS

Programme

European University Institute Florence, 9 - 11 December 1993

THURSDAY 9 DECEMBER 1993

MORNING SESSION

10.00 am : INA

INAUGURAL SESSION

Mr E. Noël, President of the European University Institute

I. INTERNATIONAL STRATEGIES TO COMBAT DRUGS

Chair:

Mrs M. Van den Brink (Member of the European Parliament)

10.20 am:

Components of the global drugs phenomenon

Mr P. Stares

10.40 am:

The U.N. strategy: the International Conventions,

the Comprehensive Multidisciplinary Outline, and the Global

Programme of Action

Mr B. Juppin de Fondaumière

11.00-11.10 : Coffee break

11.10 am:

The international debate on legalisation,

liberalisation, depenalisation and prohibition

Prof. Reuter

11.30 am: The European Community and Member States'

approach to drugs and Community legislation

Mr G. Estievenart

11.50 am: Discussion followed by synthesis

The core elements for international drug

strategies

Mrs M. Van den Brink

13.000 pm: LUNCH

II. NATIONAL ANTI DRUG STRATEGIES

Chair:

Mr D. Santiago de Torres (Spanish Under-Secretary of State)

3.00 pm:

The components of national strategies

Prof A. van Kalmthout, Dr J. Derks

3.20 pm:

A comparative analysis of national legislations

Mr B. Leroy, Ms M.-L. Cesoni

4.00-4.10:

Coffee break

4.10 pm:

The implementation of national legislations

Mr J. Hamaide, Mr N. Dorn, Prof J. Jepsen

5.10 pm:

Comparative analysis of national strategies: the national

plans against drugs, the national anti-drug coordination,

information, research, human and financial resources

Dr R. MacCoun

6.10 pm:

Discussion followed by synthesis

Tentative typology of national strategies to combat drugs

Mr D. Santiago de Torres

III. DECENTRALISED STRATEGIES AND NETWORKS

WORKSHOPS

9.30 am:

Seminar Room II: Workshop 1

Recent national developments; the Treaty on European

Union, as a framework for a new European strategy to

combat drugs

Chair: Mr A. Lourenço Martins

11.00 am:

Emeroteca: Workshop 2

Crossborder information, research and training:

instruments of the anti-drug strategy

Chair: Mr J. Woodcock

PLENARY

Theatre

Chair:

Prof Y. Mény (Director of the Robert Schuman Centre, EUI,

Florence)

9.30 am:

Regional networks in the fight against drugs

Mr J.A. Pérez de Arrospide, Mr H. Nicolaus

10.10 am:

Multi-city studies on drugs

Dr R. Hartnoll, Dr F.R. Ingold

10.50-11.00:

Coffee break

11.00 am:

The European cities action networks

Mr P. Vasseur, Mr M. Marcus

11.40 am:

The associated NGO networks and their influence on

national strategies

Mr V. Funken, Mr C. Alvarez-Vara, Mr Wallon

12.00 am:

Discussion followed by synthesis

Role and typology of decentralised strategies to combat

drugs and crime

Prof Y. Mény

12.45 pm:

LUNCH

IV. THE TREATY ON EUROPEAN UNION, FRAMEWORK FOR A NEW EUROPEAN STRATEGY TO COMBAT DRUGS?

Chair: Mr E. Doherty (CELAD coordinator)

2.30 pm: The legal framework for action in the

European Union

Mr J.A. Fortescue

2.50 pm: Drugs, priority in 'Public Health'

Dr W.J. Hunter

3.10 pm: Drugs, priority in 'Common Foreign and Security Policy'

Mr L. Boselli, Mr R. Césaire

3.50 pm: Drugs, priority in 'Cooperation in the Fields of Justice and

Home Affairs'

Mr C. Elsen, Mr Marotta

4.30-4.40 : Coffee break

4.40 pm: Presentation of the results of Workshop 1

Mr A.G. Lourenço Martins

5.00 pm: Presentation of the results of Workshop 2

Mr J. Woodcock

5.20 pm:

The common core of national strategies and

legislation, nucleus of a future European

strategy

Mr P. Van Hecke, Mr F. Knaack

6.00 pm:

Discussion followed by synthesis

Possible guidelines for a European Union Global

Action Plan on Drugs

Mr E.Doherty

8.00 pm:

Dinner

SATURDAY 11 DECEMBER 1993

V. CLOSING SESSION

10.00 am: Presentation of the four seminar sessions by Mrs M. van den Brink, Mr

D. Santiago de Torres, Mr Y. Mény and Mr E. Doherty

10.40 am: Intervention by Commissioner Flynn

11.00 am: Round table discussion

11.50 am: Concluding remarks by Commissioner Flynn

12.00 am: Press Conference

13.00 am: Cocktail

CONCLUSIONS OF THE FOUR SESSIONS:

- 1. INTERNATIONAL STRATEGIES TO COMBAT DRUGS
 MR ESTIEVENART
- NATIONAL ANTI DRUG STRATEGIES
 MR SANTIAGO DE TORRES
- 3. DECENTRALIZED STRATEGIES AND NETWORKS MR MÉNY
- 4. THE TREATY ON EUROPEAN UNION, FRAMEWORK FOR A NEW EUROPEAN STRATEGY TO COMBAT DRUGS?

 MR DOHERTY

International strategies to combat drugs by Mr G. ESTIEVENART

The various speakers at this session felt that the time had come to place the drug problem in a broader social context and to view the basic statistics on drug addiction against the background of qualitative and contextual considerations. The role of laws and regulations should also be put into perspective and more attention should be paid to practical measures in the field (law enforcement) and to the environment of drug users. The fight against drugs involves examining and tackling the causes of addiction as well as trying to deal with its consequences. It is therefore vital to adopt a comprehensive approach to drug addiction. A reduction in demand should be one of the main objectives and care should be taken to avoid too many laws, regulations and administrative measures.

By the same token, research should be given a substantial boost, as it can help us to understand how the various interrelated aspects of the drugs phenomenon interact. Only by developing a global approach (bearing important achievements of American research in mind) can we in Europe ensure that our perceptions and political decisions are in tune with the problems and the realities and hence more effective. The Florence Seminar highlighted the international and multidisciplinary aspects of the drugs phenomenon and its relation to major social problems which affect drug users before and after they become addicted. It also examined the vital contribution of the private sector and independent organizations to the solutions to be adopted.

The strategy developed in the United States over the last decade provides an excellent framework for reference and analysis.

While the general approach has remained constant, priorities have been changed or rearranged over the years. The major target areas in recent years have included prevention, health information and education, closer cooperation with and between developing countries, encouragement for regional and sub-regional approaches and, of

course, the control of production (which has tended to replace the more ambitious goal of eradication). The result is a more balanced, more realistic (i.e. more modest) strategy than that adopted in the past.

The prohibition/legalization debate continues to polarize individual and collective approaches to the drug problem. The scientific contribution to this debate has failed so far at least - to provide a firm basis for any conclusive political decision. As with drug production, there are unanswered questions about the effects of the two approaches (prohibition/legalization) in shifting the problem from one drug to another or from one kind of addiction to another.

One approach which has now been tested fairly extensively both in Europe and in the United States is decriminalization of the use of soft drugs. What is needed now is a detailed, impartial study of the results of these experiments, since they may shed some light on the continuing political debate. In particular, we need scientific research into the possible links between the decriminalization of soft drugs and the abuse of hard drugs (links have been observed in some cases, but not fully analysed).

Action by the European Community in the fight against drugs is relatively recent and rather fragile. The first steps were taken in the mid-1980s in an extremely sensitive political context due to the complexity of the problem, its ramifications and the different cultural traditions of the twelve Member States. Nevertheless, the Community and its Member States lost no time in establishing a framework for reference and action based on a broad approach to the drug problem, in particular through the first two European Plans adopted by the European Council in 1990 and 1992. Considerable progress has been made at European level in recent years. The Community has adopted a number of instruments, including a Regulation on measures to discourage the diversion of certain substances to the illicit manufacture of narcotic drugs, a Directive to prevent the use of the financial system for money laundering and a Regulation establishing the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). Together these instruments form a solid basis for the implementation of a comprehensive strategy by the new European Union.

To sum up, the following key points should be borne in mind for the future:

- a comprehensive approach is essential, with particular emphasis on the connection between reducing demand and reducing supply;
- genuine priority must be given to public health and demand reduction in the context of the social conditions which generate and accompany drug addiction;
- there is a need for a detailed analysis of the causes and effects of drug addiction, based on research, and for a cost-benefit analysis of anti-drug policies;
- special attention must be paid to experiments and innovative practices in the field: these should be followed up and the findings publicized, so that a serious, responsible and ongoing public debate can be organized, without reference to the controversies which all too often overshadow drug addiction and drug addicts.

It was suggested that the European Monitoring Centre for Drugs and Drug Addiction and the European University Institute in Florence could provide an appropriate framework for a continuing analytical debate.

National anti-drug strategies by Mr SANTIAGO DE TORRES SANAHUJA

It is no easy task to summarize the conclusions of this session. First, it should be stressed that the discussions took place in a very positive, constructive atmosphere. Following contributions from the eight speakers, ten other participants took the floor to put forward ideas and make suggestions. There can be no doubt that the discussion was a very open one which should be pursued.

Most of the speakers attempted to analyse national strategies from a judicial or legal angle. Some preferred to leave a number of questions unanswered, as topics for future discussion.

Two basic points emerged from the comparison of the laws of the twelve Member States. The first is that the differences between national laws have gradually narrowed over the last few years, with the signature of the most recent United Nations Convention by all Member States. The second, even more fundamental, is that a comparison of law enforcement is just as important - if not more important - than a comparison of the laws themselves.

One speaker made the point that the laws of all the European states tend to have the following features in common:

- they allow the sale of essential medicines based on narcotic drugs or psychotropic substances;
- 2. they seek to combat drug trafficking by all possible means.
- they provide for prevention, assistance and rehabilitation programmes to tackle drug dependence.

The most striking differences between national laws are as follows:

- 1. There is no distinction between soft and hard drugs in some countries and where the distinction is made it is not always viewed in the same way.
- 2. The attitude towards the use of narcotic drugs varies from country to country; several Member States specifically penalize the user, while in others the user is punished by administrative sanctions.

Some speakers suggested there was a conflict between public health and public order policies. This was due to a misunderstanding, as public health managers believed that the prosecution of drug users was in the interests of public health protection.

One speaker compared the Dutch "normalization" model, involving a whole range of social and public health policies, with another model based on the prohibition of drug use, with the State assuming a protective role. He argued that laws on drug abuse could only be aligned and enforced if the legal and cultural context were taken into account. The application of rules concerning drug users tended to swing between recourse to criminal law and the provision of assistance and a perception of drug users as patients or delinquents. Similarly, within the model tending more towards assistance, the pendulum swung between the principle of abstinence and the principle of damage limitation.

Another speaker took the view that the Member States with tough laws took a liberal approach to enforcement and, conversely, that enforcement was stricter in countries with more liberal laws.

One speaker stressed the importance of evaluating existing policies. He argued that political leaders were unaware of the findings of evaluation exercises and simply concentrated on short-term policy. There was a big difference between formulating policies and implementing them.

Others stressed that all drug-related experiments should be conducted first at local level, then at regional level and finally at national and supranational level.

The final speaker commented on different policies in relation to drugs, identifying three categories: conservative, social-democratic and liberal. He went on to analyse some of the strategies adopted by European countries within these three categories.

To sum up, a comparison of laws highlights differences in the way the Member States see the drug problem and strategies for finding a solution. Any action at Community level must be able to rely on coherent financial support, cooperation between the Member States and tougher national measures. Harmonization of Members States' laws and regulations was not feasible.

The debate on the anti-drugs policies currently pursued by the Member States therefore remains very open. We must continue our discussions and even more importantly undertake a rigorous assessment of current experiments at local, regional and national level. It is to be hoped that the European Monitoring Centre will be able to coordinate these assessments and provide a forum for future debate.

Decentralized strategies and networks
 by Prof. MÉNY

This session saw the presentation of a wide variety of experimental projects on combating drug abuse. The participants analysed and discussed policies formulated and implemented by regional authorities (the Basque Country), cities (Amsterdam, Berlin, etc.) and city networks, as well as initiatives by NGOs.

- The first comment to be made on these case studies is that projects can be difficult to compare because of the variety of methods of analysis, reference indicators and geographical entities. However, as all the speakers emphasized, this should not discourage us from trying to draw comparisons and contrasts. On the contrary, comparison is vital in both scientific research and political action. On the scientific front, the seminar highlighted two additional requirements: first, we need to establish indicators which make comparisons easier and, second, analyses must be contextual, otherwise the originality and specific features of the problem under consideration will be lost. This tension between "hard" information (which is a priori easier to compare) and contextual information (which incorporates social, political and cultural elements and is thus harder to measure) is reflected in the policies pursued by governments, in the tension between "universal" measures (whether prosecution or prevention) and individual measures (which can only be conceived at local level as a rule).
- This brings us to the second observation shared by all speakers, i.e. the crucially important role to be played at local level, particularly in relation to treatment and prevention. Local authorities are generally less concerned with repression, over which they have little, if any, control, than with the need to find pragmatic solutions to problems arising in their area. Indeed, while most aspects of international trafficking escape the powers and skills available to the local authorities, it is at local level that its daily manifestations, in the shape of

insecurity, delinquency, health and social problems, etc. are most acutely felt. It could be said that the drug situation provides the clearest demonstration of the extent to which social policies have failed a whole section of society, whether it be in terms of education or social, emotional and economic integration. As a measure of psychological, economic and social distress, drug use raises questions about the way the public authorities normally act. Large administrative structures of all kinds tend to be slower to react or less capable of adapting to change. Nonetheless, municipal authorities and local organizations, public or otherwise, can boast considerable advantages of their own: greater capacity to listen and greater autonomy in reacting and adapting to situations.

However, action at local level is not a panacea. Assumption by the local authorities of responsibility for prevention does not necessarily guarantee success. As a number of speakers emphasized, what is needed in the first place is a genuine mobilization of society to support action by the public authorities or to press for a change of direction where such action proves to be ineffective or inappropriate. For the real strength and importance of the local level does not lie in its physical proximity to problems but in its ability to give a social dimension to public action which tends to be overlooked by large national bureaucracies. In this context, the networking role of NGOs was underlined by a number of speakers. These organizations can play a crucial role as interfaces between civil society at large and the public authorities.

It also emerged during the discussions that one of the key factors for success was the ability of local authorities to coordinate the various concurrent public policies for prevention and treatment. This is a key consideration (and often the stumbling block) in any public action. But it is even more true and more crucial in the case of drugs where repression/prevention policies, national/local authorities, private associations/international organizations, etc. are often inextricably linked. In other words, these are "noble" policies that presuppose the social mobilization needed for

action on this scale and a leadership that can pull everything together and overcome the inevitable bureaucratic and psychological obstacles.

This model for action also offers the advantages of flexibility, adaptation to problems in the field, experimentation and innovation. Of course, the richness of this diversity can create problems if solutions put to the test in different places are too divergent. The dangers of negative externalities increase and call in turn for a measure of harmonization, failing which there is a risk of tension between (local, national or even international) public authorities.

In the light of this initial diagnosis, the participants agreed on a number of proposals for improving and strengthening the role of local players. These set out to promote the local level as a pool of initiative and experimentation with the aim of improving prevention and treatment policies and ensuring more effective dissemination of local innovations. They focus on four main areas:

- 1. Intensification and systematization of comparative study programmes. A very urgent need was felt for comparison between the fragmentary experiments in progress. Greater understanding of field work on the one hand and evaluation on the other was seen as a precondition for the elimination of stereotypes and preconceived ideas and for the dissemination of the most fruitful experiments. All too often, disparate initiatives are analysed from a polemic standpoint which pays too much attention to sensational and emotive aspects and too little to a serious assessment of successes and failures.
- 2. Development of networks and "communities" of experts and those in positions of (administrative or political) authority. This proposal connects with and underpins the first in that it sets out to establish a pool of experience and knowhow to guide public decision-making.

- Public support for non-governmental organizations

 Public authorities are faced with a dilemma here. Support for under-funded organizations is indispensable since the battle against drugs cannot be limited to administrative action. But, at the same time, the temptation (for public authorities and NGOs alike) to transform social movements into semi-public structures which can become bureaucracies in turn and dependent on the public authorities must be resisted.
- 4. Lastly, several speakers stressed how important it was for any antidrugs policy to take account of and guarantee the fundamental rights of the individual.

In conclusion, the session devoted to networks and local action highlighted the wealth and multiplicity of initiatives, underlined the crucial importance of galvanizing the efforts of local players, and pinpointed the need for coordination, evaluation and dissemination of the most conclusive experiments.

 The Treaty on European Union, framework for a new European strategy to combat drugs
 by Mr DOHERTY

There was no doubt that a comprehensive, coordinated and cohesive policy is the best way forward for the European Union in approaching the drugs problem. The new Treaty on European Union provides a new range of competences under the three pillars to deal with the drugs problem.

A degree of confusion exists, due to lack of experience, as to how the three pillars will interact or indeed how the variety of competences under them can be motivated to act towards a common goal which will have bearing on all of the pillars.

Much reference was made to the role of Coreper and K4 in the field of coordination. To a certain degree it is probably fair to say that there exists a certain polarisation of positions in respect of whether Coreper or K4 should have the primary position in regard to the Community's fight against drugs.

There was an acceptance that much good work had been carried out by the European Community in the fight against drugs and an appeal not to start again from scratch.

Interventions ranged over actions to be taken under the third pillar of the Treaty of Union in relation to Europol, external borders, internal borders and money laundering to the idea of joint action in the field of drugs, which could require not only action under the three pillars of the Treaty but also action in the inter-governmental framework.

The drug problem had implications for the international relations of the Community and required action and cooperation beyond the boundaries of the Union.

Action was required on a world-wide basis and the European Union needed a global plan to deal with this. One speaker questioned whether, in the future, we would show the same resolve in dealing with drugs as was shown in CELAD.

Yet another intervention underlined the need to take account of the role of the European Parliament.

As I said in my summing up on the Treaty on European Union it is clear that we are sailing in somewhat unchartered waters. One thing however is clear and that is that to a greater or lesser degree the Commission has a role to play and a right of initiative under all three pillars.

Now is the time for wise council to prevail. We must ensure that we do not dilute but instead build on what has already been achieved. The Commission took the initiative and organised a useful and worthwhile seminar which provided the opportunity for a broad and wide ranging discussion on many aspects of the drug problem facing individual states, the European Union and the international community. I feel that we can and should now give the Commission the opportunity of forming the synthesis and I feel sure that we can depend on them to propose to the Council the appropriate guidelines and structures which will strengthen the position of the European Union in the fight against drugs both within the borders of the Union and externally.

CONCLUSIONS OF TWO WORKSHOPS:

- 1. RECENT NATIONAL DEVELOPMENTS AND THE TREATY ON EUROPEAN UNION AS A FRAMEWORK FOR A NEW EUROPEAN STRATEGY TO COMBAT DRUGS

 MR MARTINS
- 2. CROSSBORDER INFORMATION, RESEARCH AND TRAINING:
 INSTRUMENTS OF THE ANTI-DRUG STRATEGY
 MR WOODCOCK

 Recent national developments and the Treaty on European Union (TEU) as a framework for a new European strategy to combat drugs by Mr MARTINS

My introduction comprises three ideas:

- 1. assuming that areas covered by the first and second pillars are the province of COREPER and that those covered by the third pillar are a matter for the K.4 Committee, there is a need to ensure coordination and a consistent set of interfaces in the field of drugs that cuts across several sectors of the TEU;
- given the changes introduced by the TEU, it is more and more imperative to reformulate the European Plan to combat Drugs to integrate the drug use (demand reduction), production and trafficking aspects and to take account of the very important role played by the European Parliament;
- 3. the outline of a European Union Global Action Plan should be presented by the Community institution most capable of overseeing implementation of the principal measures to be included in the Global Action Plan.

There are a number of points that I personally would like to see covered by a new Global Action Plan:

♦ The importance of multidisciplinary scientific research into the causes of addiction and into the physical and psychological effects of each drug in liaison with the WHO and other scientific bodies. During the seminar, many highly-qualified people have stressed that research in this field is long overdue. Once we improve our understanding of drugs - causes and effects - we will be in a position to persuade policy-makers and legislators to take appropriate action.

- ♦ Where possible, the measures to be taken should be implemented with the assistance of the new Community agencies: the Monitoring Centre and Europol.
- ♦ The Global Action Plan will have to pay particular attention to all new experiments in the Member Stares in order to understand and assess them properly.
- ♦ The Global Action Plan will obviously include a timetable, but it must also define priorities.

During the discussion, participants expressed concern about the general coordination of measures to be implemented in the fight against drugs.

This is clearly a matter for COREPER but several speakers stressed the need to ensure diversified technical back-up from the "experts" of the Member States or from other institutions (notably national coordinators). It was established that partial plans based on the first and third pillars have already been or are about to be approved. The absence of general, integrated guidelines for the fight against drugs as a whole was also noted.

Attention was also drawn to the need for a precise identification of the Community's objectives in the fight against drugs if the countries which cooperate with the Community are to understand its strategy and hence the nature of activities and requirements in the field.

The discussion then focused on the need for a European Union Global Action Plan on Drugs. The need for such a plan was questioned given that partial plans already exist. A possibility might therefore be to allow existing groups to work for a certain time, after which renewed consideration could be given to a Global Action Plan in the light of experience gained at the level of the Member States.

Nonetheless, the majority of participants were in favour of drawing up or reformulating a Global Action Plan taking account of:

- the new legislation arising from the TEU;
- the extension of Community competence in relation to the fight against drugs;
- the coexistence and consistency of partial plans already in existence to avoid any clash or duplication of effort.

It was agreed that a European Union Global Action Plan would stimulate ideas and have a positive influence on public opinion.

The workshop also revealed the need to:

- back the proposals on scientific research made by the Chair and accepted by the workshop, on involvement of the new agencies - Monitoring Centre and Europol - on consideration and dissemination of new experiments and, lastly, on the definitions of priorities;
- stress the importance of awareness of the differences between the laws of the Member States and between judicial and health practice etc;
- ensure a strong link between the initiatives and activities of the private sector and civil society;
- lastly, evaluate action to date and action in the future.

2. Crossborder information, research and training: instruments of the anti-drug strategy

by Mr WOODCOCK

The workshop considered five presentations, including one where the author was absent. Two of the presentations were concerned with research, two with information, and one with training.

The workshop arrived at a number of recommendations for initiatives that the Commission or the EMCDDA were asked to consider.

Presentations

1. Research

- Messrs MacCoun and Reuter demonstrated a database they have developed at the RAND Corporation. By using a very widely available spreadsheet software programme (Microsoft exel) they can display an enormous amount of comparative data from different countries on a computer screen. The data currently covers 12 countries (mostly in Europe). The data has been obtained from a very wide range of sources and is of very variable quality, but the programme draws attention to problems in the data for the user. Besides demonstrating the potential value of such country comparisons, the programme also makes very clear the shortcoming and lacuna in the existing data, thus providing guidance to improvement.
- ♦ Ms Van Lindt presented the results of her survey of European researchers, using the Cost A6 and European Social Science Research Group network as sources. Her study is entitled " Drug Research in the

EC Member States and cross-border networks of researchers: instruments of an anti-drug strategy? (Document no IVE 411/93 - COL 80)" Responses were received from seven EC Member States. The survey revealed a general trend for the biomedical and clinical research of the 80s to be complemented recently by sociological and criminological approaches. There is still little economic or policy research. There is little communication between research councils and policy bodies. There is no coordination among funders of research.

2. Information

- Mr Schricks described the technical framework of the REITOX network. Its environment will be the EMCDDA, the human network that will support and draw on REITOX, and the Member States. The EMCDDA will have the task of ensuring compatibility and comparability of the data handled by REITOX, and of supporting the human network. The results of the several feasibility studies were very briefly summarised.
- ♠ Mr Woodcock described the several varieties of information, each with differing problems in transparency and translation between countries. It is important to keep in mind that it is the meaning of the information that needs to be conveyed, not just the data. A multilingual European Thesaurus for indexing the documents that would be accessed through the REITOX network would be essential.

3. Training

♦ Mr Goosdeel's paper entitled " Drug related training programmes in Europe: an overview (Document number IVE 414/93 - Col-83)" described a survey of trainers in seven countries and gave an overview

of drug-related training programmes. It also considered the feasibility of a network for trainers and training topics linked into the REITOX framework.

Recommendations

1. Research

- ♦ National focal points for research should be established in REITOX alongside those for epidemiology and documentation.
- ♦ The continued and expanded publication of a European register of research should be supported.
- ♦ The secondary analysis, or meta-analysis, of existing research findings should be undertaken.
- Researchers should be provided with information about sources of funding.
- ♦ The EMCDDA should work with the COST A-6 programme to establish an infrastructure for European evaluation research.

2. <u>Information</u>

- ♦ The EMCDDA should acquire the RAND database and develop and improve it.
- ♦ There should be a European archive or database of raw research data.
- ♦ A European journal of drug problems should be supported.
- ♦ A European multilingual Thesaurus should be produced

3. Training

- ♦ A network linked in to REITOX should be established for people responsible for training programmes.
- ♦ Trainers should be offered regular seminars and fora to exchange experiences.

GENERAL CONCLUSION