



Summer thoughts & strategy highlights



Photo Marcus Haggström



Photo ECAD



Photo unvienna.org

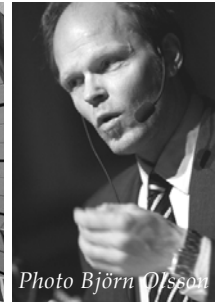


Photo Björn Olsson

Antonio Maria Costa, UNODC Director at the 16th ECAD Mayors' Conference; The 1st WFAD ended with a Declaration in support for UN Conventions on Drugs which was presented to the UN; The 52 Session of the CND took place in Vienna in March; Jörgen Svidén, ECAD Director

★ ECAD DIRECTOR

I have now been in charge of the organisation for one year. How to evaluate this year? Is it at all possible? The restless part of me thinks it is, the more reflective part says no; growth and strengthening take time, especially when the whole world faces a financial crisis. To take one example, I strongly believe that ECAD has to, with the maintenance of a restrictive goal, be an organisation which is built on knowledge. An important support for this is the creation of a Scientific Committee. Yet we do not have such a Committee today, although we have started to create a more knowledge-based organisation and we have more activities than before, with conferences in various places. It is going to take some time but it is definitely worth the struggle to create an even better ECAD.

It has been an eventful and encouraging year for ECAD. Let me name some of the highpoints: The First World Forum Against Drugs, The Second World Mayors' Conference on Drugs (16th ECAD Mayors' Conference), 52nd Session of the UN Commission on Narcotic Drugs in Vienna which we have actively participated in the preparations for.

Our common objective will only gain if we could keep the drug issue high up on the political agenda as we have seen it in 2009,

and if we would inspire cities to actively engage in both our activities and in the issue of drug prevention, treatment and rehabilitation on an everyday basis.

The priority of knowledge is already seen in the outline of ECAD's autumn seminars and conferences. It saddens me though that we have not seen an increase in city-to-city activities as we constantly urge our members to do.

This type of study visits and joined actions does not imply increased spending.

On the contrary, it could improve both efficiency of anti-drug fieldwork and its cost-effectiveness. We will lift up examples of such cooperation more on our web site and in this Newsletter to inspire ECAD members to search for each other's experiences.

Last but not least, we have to affiliate more cities, especially from regions in Europe where we are too few today. With arguments based on facts we can attract new cities and with more cities our standpoint and our network will grow stronger.

” Our task – creating a future without drugs for the citizens of our cities - is one of the most important ones for democracy and well-being of our societies”.

Jörgen Svidén

Thus, even though things have not been going as fast as I had wanted to, ECAD is moving in the right direction. We are today to some extent more than earlier considered to be a pragmatic organisation and our work will continue, with spread and exchange of knowledge, creating of networks for experts and practitioners etc. Our task – creating a future without drugs for the citizens of our cities - is one of the most important ones for democracy and well-being of our societies. Together we can make a huge difference. Let us never forget this!

Sweden's first baseline study on Blood borne Infections among Injecting Drug Users

This Baseline study included 1145 persons who were tested for the blood-borne infections HIV, hepatitis B (HBV) and hepatitis C (HCV) between July 1, 2007 and August 31, 2008. Almost all participants were interviewed about their drug and sexual habits.

Of the 1145 study participants, 720 fulfilled the inclusion criteria, i.e., they reported to have injected a narcotic substance at least once during the last 12 months (Active Injecting Drug Users). The primary focus of the study is on this group.

The study has used active case-finding in order to contact drug users. *Se page 2*

Hard debate on needle-exchange in the US

A 21-year-old ban on federal funding of needle exchange programmes could be ended by the Congress. But the debate is hard on whether extensive restrictions would be added or not. Several needle-exchange programmes have been run in the country since 20 years back though none of them was allowed to seek for federal funding. The debate is open whether these programmes have had an effect on the spread of blood-borne infections, at least HIV, among their clients.

Recently The House voted - by a small majority - to end a 21-year-old ban and allow federal funding of needle-exchange programmes. The observers noted that the proposal to lift the ban could go through owing to the broad restrictions which would limit the applicability of the legislation. The programmes cannot be located "within 1,000 feet of a public or private day care center, elementary school, vocational

school, secondary school, college, junior college, or university, or any public swimming pool, park, playground, video arcade, or youth center, or an event sponsored by any such entity." This addition makes it practically impossible to have a needle-exchange within whole sections of cities.

★ ECAD NEWS

However, the proposal needs to pass The Senate as well whose version of the bill doesn't have such heavy restrictions. When the House and Senate meet in conference committee to hash out the final legislation, an extensive debate is to expect.

Legislation on funding of needle-exchange programmes is just a small part of a large health care programme the Obama administration is so keen to enforce.

NIDA ventures into a large scale marijuana growth

Forbes comments on NIDA's solicitation for marijuana growth for research and "other government programs":

Two hundred days into the Obama administration, and 16 years after Soros began his advocacy for drug legalization and promoting "medical marijuana," the National Institute on Drug Abuse (NIDA) is venturing into the distribution and production of marijuana cigarettes. According to the Aug. 5 solicitation for proposals, the selected organizations will be controlled by the Drug Enforcement Administration (DEA), and will have to comply with FDA regulations. For the first time, the government is soliciting organizations that can grow marijuana on a "large scale," with the capability to "prepare marijuana cigarettes and related products ... distribute marijuana, marijuana cigarettes and cannabinoids, and other related products" not only for research, but also for "other government programs."

Sweden's first baseline study...

From page 1



Kristina Hillgren project manager & prof. Sven Britton head of research

The average age for starting drug use was 15. This applied to boys as well as girls.

The debut drug was often cannabis/hashish/marijuana. The injection drug use started, in general, four years later; three quarters of the injection drug users reported amphetamine as the debut drug and one fourth reported heroin. Poly drug use was frequent.

Risk behaviour was common in conjunction with injections (sharing of needles, pumps, solution, filters and wads) as well as with sexual activities (unprotected sex and several partners).

In the Active IDU group, 171 (23%), i.e. the majority of the participants with a dominant heroin injection use, answered that they participated in a Methadone/Subutex/Suboxone program, the medication-assisted maintenance therapy for opiate dependency. A substantial number stated that they had injected drugs after entering the program.

Fifty-one of 720 (7.1%) Active IDUs and sixty-three (5.5%) of all tested persons were HIV positive. Somewhat less than one third, 17 persons, of the 63 HIV positive were newly diagnosed, i.e. their infection was revealed through the study.

The age of the IDUs, the time for their drug debut and how long they had been injecting drugs correlated significantly to the degree of the infections with HIV, HBV and HCV. Surprisingly, there was no significant correlation between the extent of risk behaviour relating to injection habits (sharing needles and pumps) and infection with HIV, HBV or HCV. IDUs who knew of their HIV infection shared needles and pumps less and used condoms more often than other IDUs. Thus, awareness of being infected seemed to result in a more careful lifestyle.

Since the narcotic debut generally starts at lower teen-age, preventive measures are needed very early in life. Generally, it took four years before the young drug user started injecting drugs. This interval needs to be used intensively by the community to prevent the conversion to injection drug use. Regular testing of IDUs and preventive information together with notification of test results ought to have an effect on the spread of blood-borne infections, at least of HIV. The more laborious notification process is just as important as the testing process in this regard.

The full report in English will soon be published on www.ecad.net. At this point, a summary is available, please write to ecad@ecad.net

Summer meetings of ECOSOC: latest developments in regard to illicit drugs and HIV

ECOSOC was established under the United Nations Charter in 1945 as the principal organ to coordinate economic, social, and related work of a number specialized UN agencies, functional commissions and programmes – among them, UNAIDS (UN joint programme on HIV/AIDS), INCB (International Narcotic

Control Board) and CND (Commission on Narcotic Drugs). The Economic and Social Council (ECOSOC) serves as the central forum for discussing international economic and social issues, and for formulating policy recommendations addressed to Member States and the United Nations system.

ECOSOC resolution on HIV/AIDS uses the term “harm reduction”

On July 24th, ECOSOC adopted a resolution related to the work of the Joint United Nations Programme on AIDS (UNAIDS). The resolution was agreed at an ECOSOC meeting in Geneva focusing on the social determinants of health. It contains a supportive reference to harm reduction – the first official mention of harm reduction by this senior UN body.

The resolution, in the paragraph 19 “Recognizes the need for UNAIDS to significantly expand and strengthen its work with national governments and to work with all groups of civil society to address the gap in access to services for injecting drug users in all settings, including prisons; to develop comprehensive models of appropriate service delivery for injecting drug users; to

tackle the issues of stigmatization and discrimination; and to support increased capacity and resources for the provision of a comprehensive package of services for injecting drug users including harm reduction programmes in relation to HIV as elaborated in the WHO/UNODC/UNAIDS: “Technical Guide for countries to set targets for Universal Access to HIV prevention, treatment and care for injecting drug users”, in accordance with relevant national circumstances;”.

The resolution was supported by 31 Member States (and was not opposed during the meeting).

Just a few months earlier, at the High Level segment of the 52nd Session of the CND, a consensus was reached do not include wording “harm reduction” in the final Declaration.

Negotiations on the HIV/AIDS resolution at ECOSOC were led by the delegation of the

Netherlands, according to the UNAIDS website, in its capacity as vice-chair of the UNAIDS programme co-ordinating board and ECOSOC member.

Bolivia wants coca chewing out of the Single convention

On July 30th, the Bolivian proposal to amend the 1961 Single Convention on Narcotic Drugs by deleting the obligation to abolish the chewing of coca leaf was on the ECOSOC agenda. After informal negotiations, the 54 members of ECOSOC decided unanimously to pass the amendment proposal on to the Parties of the Convention for their consideration. They now have 18 months to express any objections or comments on the Bolivian request.

Mexico decriminalizes small-scale drug possession

Mexico enacted a controversial law decriminalizing possession of small amounts of marijuana, cocaine, heroin and other drugs while encouraging free government treatment for drug dependency. The maximum amount of marijuana considered to be for “personal use” under the new law is 5 grams - the equivalent of about four joints. The limit is a half gram for cocaine, the equivalent of about 4 “lines”. For other drugs, the limits are 50 milligrams of heroin, 40 milligrams for methamphetamine and 0.015 milligrams for LSD.

Asked about the new law, U.S. drug czar Gil Kerlikowske said he would adopt a “wait-and-see attitude”, reports Washington Post.

Dutch government pays cannabis trials

The Government of the Netherlands will contribute 150,000 Euro for an attempt to introduce membership cards for those who wish buy cannabis products in coffee shops in Maastricht.

The authorities hope that the introduction of membership cards would reduce the problems with tourists who come to Maastricht with a solely purpose to buy drugs. In addition to these 150,000 Euro, Government contributes a further 6 million to various local experiments such as attempts to reduce the number of major coffee shops, and work to reduce involvement of organized crime in the coffee shop business.

Argentina: About the Supreme Court Decision

Argentina's Supreme Court recently stated that it is inconsistent with the Constitution to punish an adult for the possession and use of marijuana if it does not pose a danger to others. Verdict was unanimous. Opponents say the ruling could backfire, since Argentine treatment centres already have long waiting lists. “It doesn't seem bad to me that an addict won't be sent to prison, but you also have to acknowledge the reality in Argentina. The level of addiction and social conflict connected to drugs is growing in this country. The consumption of drugs always involves damage to others,” said Juan Jose Estevez, president of Remar Argentina, a network of centres that treat more than 1,200 addicts, speaking to The Associated Press. “This ruling will not only generate more consumption, but also more trafficking, because the traffickers will move smaller quantities of drugs to avoid the law,” warned Juan Jose Estevez.

Time for drug testing for motorists in the Netherlands

Dutch Transport Minister Camiel Eurlings to introduce random drug testing on the roads in the Netherlands. The country's police chiefs have already demanded a total ban to drive under the influence of drugs. It is estimated that people driving under the influence of drugs, mainly cannabis, are involved in ten per cent of traffic accidents, reports Parool.

/Actnow.nu

Norway: Trebling of cocaine use by young adults ...

In a new report, SIRUS (The Norwegian Institute for Alcohol and Drug Research) gives a review over the use of central stimulants in Norway.

There has been a trebling of **young adults** who used cocaine at some time - from 3% in 1998 to 9% in 2006. The proportion of those who have used amphetamines at some time has increased from 5 to 10% over the same period. The proportion of young adults who have used amphetamines or cocaine in the last six months remains stable at around 2%.

Among **15-20-year-olds**, there has been a decline over the last ten years among those who say that they have ever used amphetamines and ecstasy. The use of cocaine is stable at just above 2%. The same tendency can be found in the use over the past six months: a decline to 1.5 % for amphetamines and 1.5 % for cocaine.

There is a clear **link** between use of cannabis and central stimulants among both age groups. Of those who used cannabis more than 51 times, most also tried amphetamines or cocaine. The vast majority who said they used central stimulants had previously used cannabis.

Deaths related to drug poisoning in England and Wales, 2008

The number of deaths related to drug poisoning, which includes deaths involving both legal and illegal drugs, for males was 2,075 in 2008, an increase of 8% compared to 2007 and the highest number since 2001. The number of female deaths rose to 853 in 2008, an increase of 17% compared with 2007, after falling for the previous three years.

There were 897 deaths involving heroin or morphine in 2008, an 8% rise compared to 2007, and the highest number since 2001.

There were 235 deaths involving cocaine in 2008, an increase of 20% compared with 2007 and a continuation of the upward trend.

In 2008, the total number of drug misuse deaths rose to 1,738, the highest level recorded since 2001.



On Science

He said: *It has been scientifically proven!*

She said: *Science is just one of the more precise portions of human misbeliefs...*

*Our European societies have experimented and evaluated both tolerance and intolerance to illicit drug use and drug abuse. It is our reflection upon this which guides us towards non-use. This in regard to **our communities'** well-being.*

... But use of cannabis halved among young people

According to a report from SIRUS, the Norwegian young people seem to decrease their use of alcohol and drugs.

At the turn of the century, 20% of respondents on the national level and 30% in Oslo reported that they have used cannabis at some time. Since then, there has been a clear decrease, and in 2006-2008 the use of cannabis reported 10% of the national sample and 20% in Oslo.

Likewise the proportion of those who has used cannabis during the last 6 months decreased from 10 to 6% from the national data and from 17 to 10% in Oslo. There is no or a little difference in cannabis use between boys and girls.

The proportion of young people who say that they have been offered cannabis or could have found it if they wanted has also decreased during the last 10 years. At the same time, there are less young people who wish cannabis to be legalised in Norway.

Scottish drug deaths reach record level

The Registrar General for Scotland reports: There were 574 drug-related deaths in 2008, 119 (26%) more than in 2007 and 325 (131%) more than in 1998. The number of drug-related deaths rose in 8 of the past 10 years: the long-term trend seems steadily upwards. The average of 428 drug-related deaths per year represented about 0.08 per 1,000 population for Scotland as a whole. The main trends can be seen by comparing the annual average for 2003-2007 with that for 1996-2000. This shows: marked rises in deaths for which heroin and/or morphine, cocaine and alcohol were reported; not much change in the numbers of deaths for which methadone, diazepam and ecstasy were reported.

The figures, **comments Guardian.co.uk**, suggest an emerging trend that addicts who began using drugs in the 1980s and 90s, when heroin abuse gripped Glasgow and Edinburgh, are now dying. Long-term figures reveal that the greatest increases in deaths has been among users in the 35-44 age group and those over 45. The rate of deaths among addicts under the age of 25 is falling. Most addicts are "poly drug users" who abuse a number of substances and often die from other illnesses or chronic drug-related problems rather than overdoses.



ECAD is Europe's leading organization promoting a drug free Europe and representing millions of European citizens. ECAD member cities work to develop initiatives against drug abuse supporting the United Nations Conventions.
Has your city joined ECAD?

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