On 6 May the Minister of State at the Department of Community, Rural and Gaeltacht Affairs with responsibility for drugs strategy, Mr Noel Ahern TD, launched the findings of a new study to estimate the number of opiate users in Ireland. The research – the first national study of its type – was commissioned by the National Advisory Committee on Drugs (NACD) and conducted by a team from Trinity College Dublin lead by bio-statistician Dr. Alan Kelly.

The study found that in 2001 there were an estimated 14,452 people aged 15 to 64 years using opiates in Ireland. This represented a rate of 5.6 opiate users per 1000 population aged 15-64 years. As with any estimate there was an element of uncertainty attached to this figure which was reflected in the study’s findings that the number of users could be as low as 13,405 or as high as 15,819. Opiate use is still predominately a Dublin phenomenon which was reflected in the finding that the rate of opiate use in Dublin was 16 per 1000 population aged 15-64 years and outside Dublin the rate was just under 1 per 1000 population aged 15-64 years. The methods employed to estimate the number of users were based on European guidelines recommended by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA).

When the new findings for Dublin were compared with previous figures for Dublin in 1996 it was found that the number of people using opiates in the capital was estimated to have declined by approximately 1000.

To coincide with the release of the study’s findings the NACD hosted a Prevalence Workshop for people working in the drugs area and launched a resource document on the methods and data sources required to estimate drug prevalence in Ireland.

A summary of the key findings of the prevalence of opiate use in Ireland study and the NACD resource document entitled ‘Approaches to Estimating Drug Prevalence in Ireland: An Overview of the Methods and Data Sources’ are available electronically at the NACD’s website www.nacd.ie

European guidelines for estimating drug prevalence are available electronically at the EMCDDA’s website www.emcdda.eu.int
New drug awareness campaigns launched

A number of campaigns aimed at informing people on issues around the use of drugs have been launched recently. Each campaign uses a variety of media to transmit its message.

Department of Health and Children

The Minister for Health and Children, Mr Micheál Martin TD and Minister of State with responsibility for drugs strategy, Mr Noel Ahern TD launched the National Drugs Awareness Campaign on 15 May. The slogan ‘There are Answers’ underlines the emphasis the campaign places on sound information and its primary aim is to provide factual answers to questions relating to drugs of all types. The campaign is being coordinated by the department’s Health Promotion Unit and was developed in consultation with the Garda Síochána, other government departments and the health boards, and the voluntary sector. Initially information will be provided through television and radio advertising, a brochure and a special website. The campaign will be rolled out on a phased basis, with each phase targeting different audiences. This first phase is aimed the general population and aims to encourage discussion on approaches to drugs and their consequences for Irish society. The public’s response to the campaign will be closely monitored and the delivery of information will be adjusted when necessary.

The campaign comes under the prevention pillar of the National Drugs Strategy 2001-2008 whose overall strategic objective is ‘to significantly reduce the harm caused to individuals and society by the misuse of drugs’.

Further information is available at the National Drugs Awareness Campaign website www.drugsinfo.ie

Crosscare

The Drugs Awareness Programme (DAP) of Crosscare, the social care agency of the Dublin Diocese, launched a new website in May. The new website seeks to inform young people, families, parents and professionals about drug prevention. In addition, the website’s ‘Live Helper’ facility offers advice, support and referral. Speaking at the launch of the new site, DAP Project Team Manager, Chris Murphy, said, ‘We’ve tried to create a website that is user friendly and really useful to help people avoid drug problems and to support those who are impacted by drug problems’. The development of the site’s interactive facilities was informed by thorough research with young people from all over Dublin. According to Chris Murphy, DAP has moved beyond the approach which relied solely on informing people about the dangers of drugs and will use the website to keep visitors up-to-date on policy, strategy and research in this area. The Drugs Awareness Programme was initiated in 1984. Its main focus is prevention, rather than treatment, of drug misuse. The programme’s chosen method is to train and facilitate people with leadership skills to develop drug-related initiatives in their own areas.

Further information is available at the Crosscare Drugs Awareness Campaign website www.dap.ie

Merchants Quay Ireland

On 11 April Merchants Quay Ireland launched a two-week national campaign to raise awareness of issues around drug use in Ireland. The ‘Dealing with Drugs’ campaign used a multimedia approach, including billboards, posters, direct mail, radio, television, the MQI website and other media to provide accurate information on heroin use. The campaign aimed to highlight the damage and the dangers associated with problem drug use, to identify the various approaches which can be used to deal with the problem successfully, and to encourage business and the wider community to participate more fully in the effort to deal with the problem. The campaign focussed on a particular aspect of drug use each day during the two weeks. The ‘Key Issues’ included the extent of heroin use in Ireland, the connection between drugs and poverty, drug-related deaths, and solutions to the problem. Launching the campaign, MQI released figures showing that more than 10,000 heroin users had used the organisation’s services since 1997. Speaking at the launch, MQI Director, Tony Geoghegan, said ‘This is the first ever campaign of this type in Ireland and I am hopeful that it will create an awareness especially among young people of the realities and the great risks associated with heroin use. But this campaign also has a positive focus. Many people think this is a problem with no solution. That is not true. Our experience at Merchants Quay Ireland is that drug treatment works, and that investment in drug treatment will pay big dividends for all affected by this problem’.

Further information is available at the Merchants Quay Ireland website www.mqi.ie
British-Irish Council Seminar on Drug Awareness Campaigns

On 6 June the Irish Government hosted a British-Irish Council seminar in Dublin Castle on Drug Awareness Campaigns. The seminar was opened by Mr Noel Ahern TD, Minister of State with special responsibility for drugs strategy. Guest speakers included Margareta Nilson, Head of the Responses Analysis Programme in the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), Dr Mark Morgan, Head of Education Department at St Patrick’s College of Education, and Dr Thomas O’Toole, Head of the School of Business in Waterford Institute of Technology.

Margareta Nilson talked on drug awareness campaigns from the European perspective. She noted that all EU member states now have or have had awareness campaigns. Many of these campaigns used a multi-media approach (print media, TV, radio, internet) and included personal communication (help-lines or e-counselling). There was a notable lack of evaluation, however, and it was unclear if such campaigns actually resulted in a behaviour change. Mark Morgan presented on school-based approaches to drug prevention. Dr Morgan stressed that drugs should be treated as a health issue in schools rather than as a disciplinary issue and that an essential element of successful campaigns was the active participation by children. Thomas O’Toole spoke on marketing in the social context and in mass media campaigns. Dr O’Toole stressed that in order to get the message across to difficult to reach groups, marketing needed to go local and personal, using for example peer and social groups. There was also a need to target campaigns to single drugs to be more effective.

British-Irish Council members also made short presentations on their respective awareness campaigns.

The British-Irish Council was created under the Agreement reached in the Multi-Party Negotiations in Belfast in 1998 to promote positive, practical relationships among its members. Members included the British and Irish Governments, the devolved administrations of Northern Ireland, Scotland and Wales, and Jersey, Guernsey and the Isle of Man. Ireland is the lead Administration within the British-Irish Council on the area of the misuse of drugs. Further information is available at the Council’s website www.britishirishcouncil.org

Tackling drug misuse highlighted in new partnership agreement

by Brigid Pike

The drugs issue is specified in one of 10 ‘special initiatives’ identified in ‘Sustaining Progress: Social Partnership Agreement 2003–2005’, agreed in February–March by the government and the four pillars of the social partnership (with the exception of the Community Platform within the Community and Voluntary Pillar).

The Initiative ‘Improving the Health of the Nation – Tackling Alcohol and Drug Misuse’ states that the National Drugs Strategy must remain a high priority. ‘An Annual Report on the nature and extent of the drug problem and the progress being made in achieving the objectives set out in the National Drugs Strategy is due to be published in early 2003. The Critical Implementation Path for the 100 actions under the Strategy, which indicates how each action is to be implemented by the relevant Agency/Department, including timescales, will also be published in early 2003. The Strategy itself is due to be reviewed in 2004.’

The special initiatives are a new feature of the partnership process, complementing the ongoing work on the agreed frameworks, in what is regarded as ‘an interim period of particular difficulty and uncertainty’. They have been selected because it is believed ‘they are capable of making a major contribution to our quality of life’. It is envisaged that the social partners will engage at senior level on the special initiatives, taking stock of the key elements, clarifying desired outcomes, assessing policies and institutional arrangements already in place, and identifying issues needing further study and initiatives likely to contribute the desired results.

Final decision-making on the appropriate approach will rest with the newly-formed Steering Group for the Agreement, representing Government and four representatives from each of the social partners. This group will ‘take into account the reality of the multi-dimensional nature of the issues and the need to take an overall perspective on the use of resources’.

The full text of ‘Sustaining Progress’ is available at the Department of the Taoiseach website www.taoiseach.gov.ie/index.asp

The National Drugs Strategy must remain a high priority.
Government Progress Report: the drugs issue

by Brigid Pike

The drug-related priorities and targets that the new coalition government set itself in An Agreed Programme for Government in June 2002, are reported on in their first annual report, ‘Government Progress Report’, published in June 2003. Progress is reported in the following areas:

Drug-related information
• The Early Warning Sub-Committee of the National Advisory Committee on Drugs is examining how to put into place an early-warning system that will track the potential spread of heroin into new areas.
• An Annual Report, which will look at the nature and extent of the drug problem in Ireland and progress against the objectives set under the four pillars of the National Drugs Strategy will be published during the summer of 2003.

Supply reduction
• The Garda Specialist National Units, involved either directly or indirectly in tackling drug supply, now operate under the direct authority of an Assistant Commissioner, National Support Services.
• Each Garda Divisional Policing Plan has a Drug Policing element, which contains input from each Garda District and Sub-District.
• A Garda Working Group is examining drug prevalence levels and distribution networks. Based on its findings, this Working Group will submit proposals in September 2003 with regard to appropriate resource requirements.
• The Garda National Drug Strategy Implementation Team is examining a proposal to develop further the participation by the Gardaí in a co-ordinating framework within each Garda District, to liaise with the community on drug-related matters and to act as a source of information for parents and members of the public.
• A pilot Community Policing Forum initiative in Dublin’s North Inner City has been positively evaluated and will be mainstreamed during 2003. Other such fora are being supported on a pilot basis.
• A joint Garda National Drugs Unit/Criminal Asset Bureau initiative has been put in place in relation to targeting the assets of middle-ranking criminals involved in drug dealing and local dealers.
• The preparation of a Drug Offenders Bill is at a preliminary stage of examination. Measures being examined include the registration of convicted drug dealers with the Gardaí, and stiffer penalties for persons found to be involved in the supply of drugs to a prisoner.

Drugs in prisons
• A National Substance Misuse Treatment Policy for the Irish Prison Service is currently being studied prior to approval. This incorporates measures for supply prevention.
• Measures have been taken to reduce supply (e.g. introduction of new visitor procedures in Mountjoy).
• A pilot project is under way on alternative methods of drug testing prisoners.

Prevention
• The government intends to promote and pilot corporate social responsibility initiatives in local areas and communities affected by drugs or social or rural disadvantage. Under the heading ‘Building an Inclusive Society’, the progress report states, ‘Initiatives in relation to combating drug misuse are being considered in this context [corporate social responsibility initiatives] but the matter is still at early stages of development.’
• The National Crime Council is to set out its recommendations in relation to partnership approaches in tackling the underlying causes of crime.
• The ten regional drug task forces, tasked with ensuring prevention programmes are active in all areas of the country, are expected to hold their first meetings prior to summer 2003.
• A network of ten regional offices is currently being established, which will enable the Department of Education to be represented on City and County Development Boards, local and regional drug task forces and other bodies promoting social inclusion where an education input is required.
• The Social Personal and Health Education (SPHE) Programme, containing a module on drug education awareness, will be delivered in all secondary schools by September 2003.
• Guidelines on the development of a substance use policy for primary and post primary schools were issued to all schools at the beginning of the current school year.
• Training on these guidelines for primary and secondary school teachers in local drug task force areas has taken place.

Treatment
• While the National Drugs Strategy target to increase the number of drug treatment places to 6,500 by the end of 2002 has been exceeded, health boards are continuing to work on implementing Action 44, which calls for immediate access for drug misusers to professional assessment and counselling, followed by the start of appropriate treatment not later than one month after assessment.

Electronic versions of ‘An Agreed Programme for Government’ and the ‘Government Progress Report’ are available at the Department of the Taoiseach’s website www.taoiseach.gov.ie
UN drug policy comes under scrutiny

by Brigid Pike

In a press briefing at the 46th session of the UN Commission on Narcotic Drugs (CND), held in Vienna in mid April, the CND chairperson, Patricia Olamendi (Mexico), said that the session was to put ‘a new emphasis on seeking ways to resolve the situation whereby some countries possessed lenient laws regarding drug consumption, while others continued their efforts against drug production and drug trafficking. The issue was not one of punishing drug addicts, but of ensuring drugs were not available in countries.’

It was concern about the legal status of harm-reduction policies within the context of the UN conventions on drugs that occasioned widespread discussion and debate about UN drug policy within the EU in the weeks leading up to the Vienna meeting.

On 4 March, in Brussels, the non-governmental organisation, International Coalition for Just and Effective Drug Policies (ICN), held a conference in the European Parliament. The Coalition presented arguments for the reform of the UN conventions to parliamentarians, officials and other authorities. The Coalition’s position is that drug prohibition is causing more harm than the consumption of prohibited drugs themselves, and that UN Conventions need to be reviewed in order to allow countries to implement policies that manage the realities of drugs rather than simply eliminating them. On 10 April the European Parliament considered a report (Buitenweg, NL) proposing that the European Parliament recommend to the Council the need to reform the UN Conventions and their classification of drugs, particularly given the positive results achieved by drug policies based on damage and risk reduction and decriminalisation of aspects of illicit drug use. The proposal was lost by one vote.

On 6 and 7 March, in Athens, a high-level conference on drugs was organised by the EU Presidency, the European Commission and the European Monitoring Centre on Drugs and Drug Addiction (EMCDDA). Entitled ‘Towards an Effective Policy on Drugs: Scientific Evidence, Day-to-Day Practices and Policy Choices’, the aims of the conference were to overcome obstacles to evidence-based drug policies, and to make suggestions for an EU position at the Vienna meeting. In relation to the latter, differing views were expressed, ranging from the need for full implementation of the UN Conventions to the need for dialogue aimed at establishing bases for more effective drug policy.

A 2-day Ministerial Segment at the end of the 46th CND session in Vienna assessed progress towards the goals of the 10-year Action Plan against Illicit Drugs, set by the UN General Assembly Special Session on Drugs (UNGASS) in 1998. At the conclusion, the 70-plus Ministers and government representatives from 124 countries, without the need for a vote, reaffirmed their commitment to the outcome of UNGASS and adopted recommendations to enhance the implementation of drug control measures. Representatives also expressed ‘grave concern about policies and activities in favour of the legalisation of illicit narcotic drugs and psychotropic substances that were not in accordance with the international drug control treaties and that might jeopardise the international drug control regime.’

• For further information on the International Coalition for Just and Effective Drug Policies (ICN), see www.encod.org
• For the Buitenweg report to the European Parliament, see www.europarl.eu.int/plenary/default_en.htm
• For further information on the 46th session of the UN Commission on Narcotic Drugs (CND), including the Ministerial Segment, see www.unodc.org/unodc/en/cnd_session_46.html www.unodc.org/unodc/en/press_releases.html

New health surveys provide updated drug use figures

On 16 April the Minister for Health and Children, Mr Micheal Martin TD, launched the second ‘National Health and Lifestyle Surveys’ report. The report presents the results of two different surveys carried out in 2002: the SLÁN or ‘Survey of Lifestyle, Attitudes and Nutrition’ aimed at adults aged 18+ years, and the HBSC or ‘Health Behaviour in School-aged Children’ survey aimed at school-going children aged 10-17 years. In both surveys questions on drug use were asked allowing drug use patterns to be examined. In addition, comparisons with the earlier baseline SLÁN and HBSC surveys carried out in 1998 allowed an analysis of trends over time.
New health surveys provide updated drug use figures (continued)

For Irish adults (18+ years) there have been increases in the proportion of people claiming to have ever used cannabis (lifetime experience) or used the drug in the last year (recent use) or in the last month (current use) - see table below. The largest increase occurred in ‘lifetime’ use and may reflect a growing willingness to experiment with cannabis.

<table>
<thead>
<tr>
<th>Ever Used Cannabis</th>
<th>Adult Males 1998 %</th>
<th>Adult Males 2002 %</th>
<th>Adult Females 1998 %</th>
<th>Adult Females 2002 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>During lifetime</td>
<td>21.9</td>
<td>26.2</td>
<td>13.8</td>
<td>19.1</td>
</tr>
<tr>
<td>During last year</td>
<td>11.0</td>
<td>12.1</td>
<td>6.2</td>
<td>6.7</td>
</tr>
<tr>
<td>During last month</td>
<td>6.7</td>
<td>7.8</td>
<td>2.8</td>
<td>3.0</td>
</tr>
</tbody>
</table>

Source: The National Health & Lifestyle Surveys report (p 63)

In terms of other drugs there have been notable increases in the ‘recent’ use of cocaine and ecstasy and a drop in amphetamine use (see table below).

<table>
<thead>
<tr>
<th>Used in last year (recent use)</th>
<th>Adult Males 1998 %</th>
<th>Adult Males 2002 %</th>
<th>Adult Females 1998 %</th>
<th>Adult Females 2002 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamines</td>
<td>3.6</td>
<td>2.4</td>
<td>1.3</td>
<td>0.6</td>
</tr>
<tr>
<td>Cocaine</td>
<td>1.8</td>
<td>3.0</td>
<td>0.6</td>
<td>1.9</td>
</tr>
<tr>
<td>Ecstasy</td>
<td>2.9</td>
<td>3.9</td>
<td>1.5</td>
<td>2.4</td>
</tr>
<tr>
<td>Heroin</td>
<td>0.5</td>
<td>0.4</td>
<td>0.3</td>
<td>0.5</td>
</tr>
<tr>
<td>LSD</td>
<td>1.9</td>
<td>1.6</td>
<td>0.8</td>
<td>0.8</td>
</tr>
</tbody>
</table>

Source: The National Health & Lifestyle Surveys report (p 64)

Care should be taken when interpreting the SLÁN figures. The response rate in the 2002 survey was only 53 per cent compared to 62 per cent in the 1998 survey. In addition, the 2002 survey had fewer younger males than the earlier survey and in the general population as a whole.

For school-going children (10-17 years) there was an encouraging drop in both lifetime and last year use of cannabis for boys but not for girls (see table below).

<table>
<thead>
<tr>
<th>Ever Used Cannabis</th>
<th>School boys 1998 %</th>
<th>School boys 2002 %</th>
<th>School girls 1998 %</th>
<th>School girls 2002 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>During lifetime</td>
<td>16.2</td>
<td>14.2</td>
<td>8.6</td>
<td>11.7</td>
</tr>
<tr>
<td>During last year</td>
<td>14.0</td>
<td>13.4</td>
<td>6.7</td>
<td>9.5</td>
</tr>
</tbody>
</table>

Source: The National Health & Lifestyle Surveys report (p 65)

The work was commissioned by the Health Promotion Unit of the Department of Health and Children and carried out at the Centre for Health Promotion Studies, National University of Ireland, Galway.

A copy of the report is available at www.nuigalway.ie/faculties_departments/health_promotion

Public Order Offences in Ireland

A report commissioned from the Institute of Criminology, Faculty of Law, University College Dublin, by the National Crime Council

by Johnny Connolly

The main objective of the National Crime Council (NCC) in commissioning this report was to establish the level of public order offending in Ireland and also to identify the likely contributory factors, including (but not exclusively) alcohol consumption. The nature of public order incidents were examined by using data from the Garda PULSE recording system and the Annual Reports of the Garda Commissioner between 1988 and 2001. For reasons of confidentiality, the researchers were denied access to the descriptive component of the PULSE data, which provides further information on incidents. Data from the Courts Service, the Probation and Welfare Service and the Irish Prison Service and data obtained from 200 hours of direct observation of Garda patrols at two Dublin locations involving 177 public order incidents were supplemented by interviews with 50 members of the force.

Between 1996 and 2001 the number of offences proceeded with under the Criminal Justice (Public Order) Act, 1994 increased by 161 per cent. Approximately two thirds of these resulted in a conviction annually. Eighty per cent of proceedings taken involved intoxication in a public place (Section 4 Criminal Justice (Public Order) Act 1994) or the use of threatening, abusive or insulting words or behaviour (Section 6 Criminal Justice (Public Order) Act 1994). The number of public order related referrals to the Garda Juvenile Diversion programme for intoxication in a public place increased seven-fold during this period. Fifty-five per cent of public order offences were recorded between 20.00 hours...
Public Order Offences in Ireland (continued)

on Friday and 04.00 hours on Monday. Forty per cent of incidents in the city centre location chosen for the study took place on or outside licensed premises and they occurred within a small number of streets. Alcohol had been consumed by the offender in 97 per cent of cases and 98 per cent of the Garda members interviewed believed alcohol to be the primary causal factor in public order offending. The research analysis of the incidents revealed a lower causal figure, however, of just over 50 per cent.

Policing styles adopted in relation to less serious offences involving young people such as loitering or possession of alcohol, appeared to be more confrontational and verbally abusive than the more serious offences, often involving violence and older offenders and which occurred later at night around licensed premises. Observational data revealed that over half of the public order incidents were dealt with informally by members of the Garda Síochána. Of those offences dealt with by the Dublin District Court, the majority were struck out or dismissed while in one per cent of cases a sentence of imprisonment was imposed.

The research found that although the PULSE system had a facility for recording information on whether the Gardaí believed that the offender had consumed drugs or alcohol, in 66 per cent of cases, no such information was recorded. The authors conclude that the ‘paucity of recorded information on public order offences remains striking’ despite the introduction of PULSE (Report, p 59).

Among its recommendations, the NCC has called for better coordination between the Gardaí, the licensed trade, fast food outlets, the security industry and local communities, further development of community policing, further training for the Gardaí in dealing with public order offences and with young people. The NCC has supported calls for the introduction of a Garda Inspectorate to investigate complaints against the Gardaí. The NCC has also called for greater access for researchers to internal Garda research and data from the PULSE system. The establishment of a code of practice in relation to the operation of CCTV and the use of civilian personnel has also been recommended. The NCC recommends that the serving of alcohol to intoxicated persons should be considered as grounds for the extension of closure orders. It has called for research to ascertain how the courts deal with public order offences on a nationwide basis.

The NCC has also called for the development of a New Alcohol Strategy by government, an extension of youth services and the incorporation of such services and facilities into the planning and refurbishment of estates. An improvement in transport services has been urged so as to ensure the ‘safe and speedy dispersal of large numbers of people away from entertainment venues’ (Report, p 18). Finally, the NCC has highlighted the need for further research in relation to public order offending, including the incorporation into the proposed National Crime Victimisation Survey of questions related to public order and the inclusion of questions relating to young people’s attitudes towards crime and the Gardaí in the forthcoming National Longitudinal Study of Children.

The full text of the report is available at the NCC website: www.gov.ie/crimecouncil

Taoiseach launches Community Policing Forum

by Johnny Connolly

The North Dublin Inner City Community Policing Forum (CPF) was launched by the Taoiseach, Mr Bertie Ahern TD, in October 2002. Also speaking at the launch in Store Street Garda station were Garda Commissioner Pat Byrne, City Manager John Fitzgerald, Tony Gregory TD, Chairman of the Board of Management of the CPF, and criminologist Johnny Connolly, author of the report Community Policing and Drugs in Dublin, which details the progress and evaluation of the CPF and which was also launched by the Taoiseach.

The original proposal to establish a Community Policing Forum in the north inner city was made by the Inter-Agency Drugs Project (IADP) and the Inner City Organisation Network (ICON) to the North Inner City Drugs Task Force in 1997. A pilot scheme was set up in April 1999 with the establishment of a

Significant progress has been made in relation to a series of drug-related incidents.
Taoiseach launches Community Policing Forum (continued)

Board of Management to oversee the project. The current Board includes local TD Deputy Tony Gregory, Garda Inspector Jim Cannon, Dublin City Council representative Donal Barron, Tony Dunleavy, who represents the local community, and Fergus McCabe, former Chair of the Local Drugs Task Force. In May 1999 the CPF Coordinator, local resident Marie Metcalfe, was appointed by the Board to liaise between the local community, the Garda Síochána and Dublin City Council.

Since April 1999 there have been approximately 50 Board meetings, 200 Local community meetings and 8 Community Policing forum meetings. The Forum meets approximately every three months in Store Street Garda station. Approximately fifty local residents from the surrounding area meet with senior representatives of the Garda Síochána and Dublin City Council to discuss local drug-related problems.

The primary purpose of the CPF is to coordinate a common strategy between the local community, the Garda Síochána and Dublin City Council in response to drug dealing. The evaluation identified a number of positive outcomes including regular and consistent attendance at CPF meetings. This is particularly significant in an area where there are serious concerns about cooperating with Gardai on the drugs issue owing to fears of reprisal from those involved in drug dealing. Thirty local residents’ groups representing distinct streets or local-authority complexes have been interacting with the process while a further five new groups have been established. Significant progress has been made in relation to a series of drug-related incidents. The evaluation also reports increased cooperation between state agencies as a result of the CPF.

A local survey conducted as part of the evaluation found that 72 per cent of the 44 local residents who participated in the CPF stated that they would be more willing to cooperate with the Gardaí in relation to drug-related crime as a result of the CPF while all of those surveyed wished to see the CPF continue into the future.

Speaking at the launch, the City Manager and Garda Commissioner gave their support to the CPF. Commissioner Byrne felt that the CPF would provide a structure whereby ‘local communities, working in partnership with An Garda Síochána, can develop solutions to local problems’. Mr Tony Gregory TD situated the CPF against a backdrop of ‘open drug dealing on the streets and numerous drug-related deaths’ in a community which, he suggested, felt ‘isolated and traumatised’. He also welcomed the successful completion of the pilot phase of the CPF and called for the speedy implementation of the decision to mainstream it.

Taoiseach Mr Bertie Ahern TD highlighted the ‘active commitment of the community to the project’, regarding this as a ‘key feature of its success’.

The Community Policing Forum is currently in the process of being mainstreamed and extended to other areas of the city.

The CPF project has been funded through the North Inner City Drugs Task Force. A copy of the full report on the Community Policing Forum can be obtained from the North Inner City Drugs Task Force or from the author at jconnolly@hrb.ie


by Jean Long

In August 2003, the Drug Misuse Research Division will publish an Occasional Paper entitled ‘Trends in treated drug misuse in the Republic of Ireland, 1996 to 2000’, based on data from the National Drug Treatment Reporting System (NDTRS). This paper, the ninth in a series, will present a national overview of the socio-economic and demographic characteristics of, types of drugs used by, and risk behaviours associated with, those treated or seeking treatment for problem drug from 1996 to 2000.
One of the key findings in the paper is presented in the figure below. Between 1997 and 2000, the incidence of drug misuse has increased gradually from 10.3 to 12.4 per 10,000 of the 15 to 39 year population. Over the same period, the prevalence of drug misuse has increased from 33.0 to 44.3, indicating that a large proportion of drug users who were previously treated for drug misuse require continued care or further treatment. This places a heavy burden on treatment services.

* Population rates are based on the population figures from the 1996 Census and 1997 to 2000 census projections from Population and Migration Estimates for April 2002, Central Statistics Office September 2002. As the majority of people treated for problem drug use were in the 15 to 39 year age group, the rates for the Republic of Ireland were based on this age group of the population.

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**National Documentation Centre on Drug Use: New developments**

The National Documentation Centre on Drug Use, based on user feedback, has made a number of changes to its website (www.hrb.ie/ndc). The NDC is also developing new online information resources dealing with research on drugs, including alcohol. In order to make its information resources more accessible, a number of improvements have been made to the website’s search interface. The electronic library of full-text online documents and the centre’s library catalogue have been combined into one database. Users can now search the entire database of bibliographical records of the National Documentation Centre’s collection. Search results clearly display which items are available online in full text. Alternatively, website visitors can choose to search only for those records which have full text online documents attached.

A number of other research resources are being developed. A special database of Medline records, dealing with the areas of substance abuse and addiction, has been created and users can search this database in the same manner as the centre’s own databases. A database of current research in the drugs area in Ireland is being created and will be available on the website later this year.

Statistics on website traffic show that there have been almost one thousand unique visitors to the site since it was launched and that users spend an average of 17 minutes per visit.

The National Documentation Centre will host the 15th annual conference of European Libraries and Information Services on Alcohol and Drugs (ELISAD) later this year. The conference will be held in Dublin Castle on 25 and 26 September. The theme of this year’s meeting is ‘Supporting research: the challenge for information specialists.’ The programme will include sessions on evidence-based medicine and the value of the Cochrane Library as an information resource, the current state of drugs research in the European Union and North America, and the importance of networking in research work. Workshops will deal with the themes of research methodology in drug and alcohol research and using the electronic library in research. For further information contact Brian Galvin at bgalvin@hrb.ie or see the ELISAD website at www.elisad.org
The Drug Misuse Research Division (DMRD) of the Health Research Board has been managing Ireland’s participation in the EDDRA project since 1997. EDDRA stands for Exchange of Drug Demand Reduction Action and is an internet-based database providing details of a wide range of drug-response programmes in the European Union (EU). The European Monitoring Centre for Drug and Drug Addiction (EMCDDA) co-ordinates the project from their headquarters in Lisbon.

The project is designed to meet the information needs of drug practitioners, policy-makers and key personnel involved in researching, planning and implementing responses to drug use. The project provides accurate, reliable information on evaluated drug-response interventions in the EU and also promotes contact between practitioners and teams who can benefit from each other’s experience and promotes and facilitates information exchange on project evaluation.

The DMRD is currently working on a set of abstracts on Irish projects that have been included on the database, which will be published as a book later this year. These projects, 28 in total, represent ‘best practice’ intervention responses to illicit drug use in Ireland. The abstracts will include information on the following aspects of the projects:

- Rationale for the emergence of the project
- Aims and objectives
- Theoretical/conceptual framework underpinning the project
- Specific characteristics of project e.g. target group
- Evaluation component
- Additional comments

It is intended that the publication will serve as a resource to service providers in the drug demand reduction field in Ireland. In addition, policy makers, programme planners, researchers and other key personnel in the drug field may benefit from this publication.

In addition, project managers whose projects are being included in the publication have indicated that the reports will be used for the following purposes:

- Internal discussion and reflection on the project’s structure etc
- Inclusion in annual report
- Attachment to project’s funding applications; and
- In project promotional material

The EDDRA manager is seeking to include new projects/interventions on the EDDRA database. If you are involved in a project that you think is suitable, or if you know of a suitable project, please contact Martin Keane at mkeane@hrb.ie

More information on EDDRA is available on the EMCDDA’s website www.emcdda.org.

The EDDRA database can be searched at http://eddra.emcdda.eu.int:8008/eddra/

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**From Drugnet Europe**

**Expert meeting: alternatives to prison**

*Cited from Petra Paula Merino, Drugnet Europe No. 40, March – April 2003*

An expert meeting organised by the EMCDDA from 2–3 December aimed to identify examples of success and failure in applying alternatives to prison, via a detailed analysis of the different stages of the prosecution process (arrest, sentence, imprisonment). Among participants’ conclusions was the fact that drug courts have proven to be successful in reducing drug-related crime in regions where specialised treatment programmes for drug addiction are lacking (since they stimulate the development of treatment services as an alternative to punishment). In Europe such courts only exist in Ireland and Scotland. Elsewhere, it was shown that local initiatives carry out a similar role, with police, courts and drug treatment services joining forces in order to prevent drug users reoffending or to reduce drug addiction or associated harms. Drug treatment as an alternative to prison was also found to be effective in reducing clients’ drug use and criminal activity and increasing their health and employment status.

**Encouraging responsible journalism on drugs – exploding myths**

*Cited from Drugnet Europe No. 40 March – April 2003*

Inaccurate reporting of drug issues has recently been tackled through a new online ‘Media guide to drugs’ published in the UK by Drug Scope. The aim is to help journalists filter fact from fiction and improve the standard of drug information available to the public through the media. Myths around illicit drug use have been allowed to grow and have propagated themselves into a set of commonly held beliefs and misconceptions. Instead, the problems of drug use should be addressed from a solid basis of balanced information. In addition to guidance on drug-related issues, this online tool also contains drug terms and further resources, such as picture libraries and statistics. There is also a brief section referring to problematic styles of reporting.
Legal aspects of substitution treatment in the EU
Cited from Drugs-Lex by Prof. Dr Joris Casselman, Karolien Meuwissen, Danilo Ballotta, Drugnet Europe No. 40 March–April 2003

How international and national legislation on substitution is enforced is the focus of a recent EMCDDA study, which examines nine European countries [including Ireland]. The study also looks at the impact of such legislation on the status, design and organisation of substitution programmes and how they are accepted by the community as a whole. The study reveals the ambiguity still surrounding the issue in some Member States as well as countries’ differing views on the ultimate objective of substitution treatment. Whereas in some, the aim is reducing drug-related harm, in others it is achieving total abstinence. Laws and regulations concerning the prescription and distribution of treatment, entry criteria to services and the overall organisation of programmes, are therefore influenced by how countries view this ultimate treatment goal.

On-site pill-testing
Cited from Gregor Burkhart, Drugnet Europe No. 41 May–June 2003

A European Commission-funded evaluation study of on-site pill-testing interventions in Amsterdam, Hanover and Vienna has recently been added to the EDDRA database. The study, involving 750 people, tested several hypotheses and drew the following conclusions. In the area of primary prevention pill-testing services will most likely: not extend the circle of ecstasy users; deter potential ecstasy users from first use of the drug; and demystify synthetic drugs. In the area of secondary prevention, pill-testing services enable drug workers to contact and communicate with drug users who were previously out of reach; result in better-informed drug users and increasingly health-conscious behaviour; and provide a context where health warnings about dangerous substances are received with more credibility and acceptance.

The Video Project: First aid in drug emergencies
Cited from Kerstin Dettmer and Anand Pant, Drugnet Europe No. 41 May–June 2003

The German NGO, Fixpunkt, has been running an innovative scheme of first-aid training and naloxone distribution for opiate users in Berlin since 1999. Training drug users to identify risks, recognise overdose signs and apply first-aid measures correctly increases their competence to help others when witnessing an overdose. Motivating clients to attend a first-aid training course was the first hurdle the organisation had to overcome. It did so by means of an educational video, which involved drug users in on-screen performances as well as in all stages of production. The evaluation of the video and its effectiveness strongly corroborates the usefulness of this educational method as a supportive tool within a broader harm-reduction/prevention programme to prevent fatal overdoses in drug users.

Drugs in Focus - Policy Briefings

No. 7: Treating drug users in prison – a critical area for health promotion and crime reduction policy

Estimates suggest that at least half the EU’s 356,000-prison population has a drug-use history, and a high proportion of those with the most serious drug use and addiction problems in the general population are to be found in prisons. So reports the 7th Drugs in Focus policy briefing, Treating Drug Users in Prison. Furthermore, relatively high rates of HIV, hepatitis, tuberculosis and other infections associated with drug use are found among the EU prison population.

The briefing proposes that policy-makers in this area should address the needs for:
1. Investment in research and monitoring to inform policy formation and to facilitate effective interventions
2. Better awareness of what constitutes good practice in this area and the development and evaluation of model programmes
3. The involvement of prison staff, a balancing of
control and therapeutic goals, and close co-ordination with health and social support agencies.

4. Protection of the health of prisoners, staff and the wider community, with particular reference to HIV and other injection-related infections.

5. Investment to ensure equivalence of care in prison to the health and social support available to those with drug problems outside prisons.


No. 8: EU Enlargement and drugs – Challenges and perspectives

In most EU candidate countries recreational drug use and experimentation are becoming an integral part of youth culture. In schools, the number of pupils aged 15 to 16 years who have tried any illicit drug at least once doubled between 1995 and 1999. With concomitant rises in alcohol and tobacco use by young people, there are ‘serious concerns’ about the long-term impact of substance abuse among young people.

While most candidate countries have legal and institutional frameworks in place for national drug strategies, the limited funding available is often more oriented towards law enforcement than health-oriented responses. There is an unbalanced approach between addressing supply and demand issues. Also, treatment availability is not yet sufficient to meet demand, and harm-reduction activities do not correspond to the extent of high-risk behaviours.

The 8th issue in the Drugs in Focus policy briefing series, EU Enlargement and Drugs, explores what needs to be done at the policy level. It identifies six areas, which it suggests should be of particular concern to EU policy-makers:

1. The need for a new political culture fostering a common EU response to recreational drug use and experimentation.
2. Investment in health responses that cover all aspects of the drugs phenomenon.
3. A better balance and more coherence in responses developed at national level, based on better understanding of the situation and evidence-based practice.
4. A stronger political and financial framework at EU level, whose aim is to use common tools through a differentiated approach at local level.
5. The formal adoption of EU standards and instruments covering both supply and demand reduction, and information and evaluation.
6. An innovative, integrated approach to the drugs problem.

No. 9: Coordination: a key element of national and European drug policy

Coordination in the field of drugs is a ‘cornerstone of a balanced and comprehensive drug policy’, says the EMCDDA in its 9th Drugs in Focus policy briefing. Furthermore, there is scope for ‘improved coordination within and between states’ and for ‘greater alignment of national drug strategies’. The briefing concludes with six areas which it suggests should be of particular concern to EU policy makers:

1. Further work is needed to define what coordination of drugs policy should entail. It is sometimes confused with the exchange of information or with simple cooperation.
2. The redrafting of the EU’s Constitution provides an opportunity to strengthen the common approach to combating drugs.
3. Enhanced coordination must be promoted and secured at EU level in the context of forthcoming enlargement. Particular challenges in the candidate countries are the risk of increased drug trafficking and the growing problem of addiction and drug-related health consequences among young people.
4. Co-ordinating mechanisms vary considerably between member states. The EU drugs action plan (2000-04) calls for the appointment of national drugs coordinators, who should meet twice yearly within the framework of the EU Horizontal Working Party on Drugs. To date, ten member states have appointed an official responsible for co-ordinating government drug action, who may be identified as the national drug coordinator.
5. Coordination needs to encompass all aspects of national drugs policy, including healthcare, social issues, law enforcement and international collaboration.
6. Research into the effectiveness of present mechanisms for drugs coordination at both national and international level is needed.
Recent Publications

by Joan Moore and Louise Farragher

Books

**Drug misuse and motherhood.**
Klee H, Jackson M, Lewis S. Routledge
2002 ISBN 0 415 27195 9

This book is based on research in the UK that set out to document the experiences of women drug users during pregnancy, childbirth and early motherhood, and to describe the parenting strategies of drug users and the hazards faced by their children. The authors show that the increase in drug use by women of child-bearing age is not matched by a rise in those known to treatment and maternity services. They argue that a lack of information on the part of service providers is closely associated with judgmental attitudes and hostility that undermine the quality of the care available. Semi-structured interviews were conducted with some 50 pregnant drug users and the women were visited at regular intervals to record their ongoing experiences, including their interactions with service providers. By means of these interviews, this book gives drug-using mothers a voice and provides new insights and information in the areas of family life, pregnancy, motherhood, service delivery and development, and implications for policy. The views of service providers give additional insights into the difficulties experienced by practitioners in this area. The research on parenting expanded the scope of the pregnancy study, by examining data from drug-using parents with children of all ages. In all studies of drug-users the methods were the same: semi-structured interviews conducted mostly in the respondents’ homes.

**Drunk and disorderly: A qualitative study of binge drinking among 18 – 24 year-olds.**

This report presents findings from a qualitative study exploring the social context of binge drinking among young adults in 16 focus group discussions conducted in eight locations across England and Wales (a total of 123 people). The research aimed to provide an evidence base for the development of policies addressing two key objectives of the Home Office Action Plan: to reduce public drunkenness and associated criminal and disorderly behaviour; and to prevent alcohol-related violence. The study examines the young people’s experiences of crime, disorder and risk-taking and explores ways in which drinking patterns, attitudes to drinking and the effects of binge drinking are related to these experiences. Among the subjects explored in the focus groups were the interventions that young people felt would be effective in trying to encourage sensible drinking practices, and the links between binge drinking and illegal drug use. The book identifies four key elements of the social context that are relevant in the relationship between binge drinking and disorder: attitudes and motivations, social and peer group norms, the effects on mood and behaviour, and the drinking environment. The research indicates that where certain identified ‘risk factors’ are present, the likelihood of disorder and risk-taking is increased. Separate chapters explore the key elements and risk factors in detail and the report’s conclusion illustrates and explains the integral relationships between them.

**Qualitative research and evaluation methods.**

This book is a resource and training tool for applied researchers, evaluators, and graduate students, and covers all aspects of qualitative inquiry. In this, the third edition, Patton has created a comprehensive, systematic and up-to-date review of qualitative methods, while retaining and expanding upon the 1990 edition’s wide-ranging and somewhat quirky stories and examples that highlight and summarise major issues and guidelines.

This revision is designed to help readers integrate and make sense of the great volume of qualitative works published in the past decade and the widely different perspectives among qualitative researchers. Developmental work in qualitative methods has given rise to debate about the value of different approaches. The book attempts to sort out the major perspectives in that debate, portray the diversity of qualitative approaches now available and examine the influences of this diversity, especially in programme evaluation. The author acknowledges that a variety of methodological approaches are needed and credible, that mixed methods can be especially valuable and that the challenge is to match methods to questions, rather than adhering to some narrow methodological orthodoxy. He seeks to bring together theory and practice/methods without overburdening one or the other. The book takes the approach that all enquiry designs are affected by intended purpose and targeted audience, but purpose and audience deserve special emphasis in the case of qualitative studies, where the criteria for judging quality may be poorly understood or in dispute, even among qualitative methodologists.

The book is in three parts: Part 1 on conceptual issues in qualitative inquiry; Part 2 on qualitative designs and data collection; and Part 3 on analysis,
interpretation and reporting. The text includes ‘Between-Chapters Interludes’ in a lighter vein, and is interspersed with quoted words of wisdom and cartoon drawings.

**Approaches to estimating drug prevalence in Ireland: An overview of methods and data sources.**
National Advisory Committee on Drugs Stationery Office, Dublin 2003 ISBN 0 7557 1577 2

This booklet is intended to provide users with a better understanding of drug prevalence research within the Irish context. Many experts now believe that no one research method will give us a true picture of drug prevalence and several methods should be combined to get the best picture possible. The appropriate method depends on (a) why the prevalence estimate is needed; (b) which population group is under investigation, e.g. men, women, young adults, adolescents, older people, the workforce, the unemployed; and (c) what resources and data are available. This resource document lists sources of data on illicit drug use in Ireland; methods of estimating prevalence, together with examples of Irish studies using the various methods; and a list of references and further reading.

**Drugs and decision-making in the European Union.**

This book is one in a series of studies on drugs policy conducted by the Centre for Drug Research (CEDRO) of the University of Amsterdam. It is set in the context of studies of international drugs control, a policy area dominated by the US since the beginning of the twentieth century and in which the EU has only recently become an active player – essentially since the Maastricht Treaty in 1993. The author attempts to explain why drugs have become such a ‘hot item’ within the EU in such a short space of time. He examines how the policy that is pursued and propagated by the EU came into existence, and focuses on the mechanisms underlining its activities in this field. He argues that, instead of solving the drugs problem, the EU’s bureaucracy actually helps to keep it alive and well.

The first three chapters progress from a review of the historical background of international drugs control and the part that the US has played in it, to an outline of the institutional framework of the EU and a description of the role and powers of the Commission, the Council and the Parliament and their involvement in drug-related matters. The author gives an account of the power struggle between the Commission and the Council and seeks to establish where the power really lies. Chapter 4, on the dynamics of decision-making, examines the prominence of drugs on the political agenda and describes the bureaucratic mechanism that ensures that the issue stays there. The author argues that labelling drugs a problem is ‘populist’ and politically expedient and ensures their place on the EU agenda, where a bureaucratic dynamic comes into play to preserve this prioritisation. The final chapter discusses the action plans and strategies produced by the Commission and the Council, the status of which is far from clear. The study ends with some reflections on the future of European drugs policy.

**Articles**

The following are brief summaries of a selection of articles published in international journals during 2003, relating to the drugs situation in Ireland.

**The Irish alcohol misuser in England: Ill served by research and policy? Some suggestions for future research opportunities.**


Inequalities in the physical and psychological health of the first- and second-generation Irish subjects have been well documented. Despite the fact that the Irish alcohol misuser is subject to a number of unhelpful stereotypes, the research concerning alcohol misuse in the Irish is surprisingly sparse. What little exists indicates that Irish alcohol misusers tend to fit the profile of the “chronic alcoholic.” Specifically, they tend to be older (45 years +) and to have impaired physical and psychological health. Not surprisingly this is accompanied by poor longitudinal outcomes. Furthermore, alcohol problems worsen as a result of migration (this phenomenon is not restricted to the UK). Alcohol and drug services are now frequently merged, and policy is directed towards the visible young illicit drug user. This paper argues that inadvertently Irish alcohol misusers are discriminated against as a result. Future avenues of research are outlined to provide services and policy makers with data to plan services taking full account of the needs of Irish alcohol misusers.
Assessing limiting factors to the acceptance of antiretroviral therapy in a large cohort of injecting drug users.

A comprehensive questionnaire was designed to assess the knowledge and understanding of injecting drug users (IDUs) regarding their HIV disease, and to determine any factors that may increase the acceptance of antiretroviral therapy (ART) by this group. Twenty percent of the total IDU cohort attending the GUIDE (GenitoUrinary Medicine and Infectious Diseases, St. James’ Hospital, Dublin) clinic participated in the study. Fifty-two percent had been homeless in the past 5 years and 84% are unemployed. Seventy-two percent of patients did not complete second level education and 10% were illiterate. Fifty-one percent had siblings or parents with a history of injection drug misuse, and 25% had at least one sibling also HIV positive. Forty-seven percent started using drugs before the age of 13 years, and the most common initial drug was heroin (44%). Ninety-five percent had attended for methadone maintenance therapy (MMT), with 39% currently attending for daily therapy. The majority of patients were unable to simply explain or interpret CD4 cell counts (54%) and ‘viral loads’ (65%). Fifty-seven percent of patients were receiving highly active antiretroviral therapy (HAART). There was a statistically significant association between patients receiving HAART and both attendance at a primary care physician for methadone maintenance therapy \((P = 0.005)\), and weekly take-outs of methadone \((P = 0.005)\). There was also an association between adherence to HAART and attendance at a methadone maintenance clinic \((P = 0.04)\). This study highlights the chaotic lifestyle and complex social background of the IDU. Such factors were not, however, associated with acceptance of HAART. The primary factor associated with both the acceptance of and adherence to HAART was regular and stable attendance for methadone therapy.

Opiate overdose in Dublin.

In this letter to the Editor, the authors explain the impact of patients who overdose on opiate drugs on Accident & Emergency units. An audit of cases of opiate overdose over a six-month period showed that out of 128 cases, 73% were male and the mean age was 26. A 32% increase in victims of acute opiate overdose was observed in the two-month period immediately after the introduction of the new methadone prescribing legislation. The authors conclude that Accident & Emergency Units have an important role to play in monitoring patterns of opiate use.

Retrospective cohort study examining incidence of HIV and hepatitis C infection among injecting drug users in Dublin.

This study measures the incidence of hepatitis C and HIV among injecting drug users in Dublin. Since 1992, all attenders to the Trinity Court treatment centre have been encouraged to consent to hepatitis and HIV testing during their addiction treatment. The date of the first negative test represented the starting point for all patients when calculating their person years at risk. The end point was the date of the last negative test for those who remained seronegative. A history of imprisonment was associated with significantly increased hepatitis C incidence while the group who usually smoked heroin was associated with reduced incidence. Those who had been imprisoned before their initial negative test demonstrated higher incidence of Hepatitis C. Overall, incidence of Hepatitis C was 66 per 100 person years. The incidence of Hepatitis C among injecting drug users in North America, Australia and a number of European countries range from 16 to 38 per 100 person years.

Young people, drug use and early school leaving: Estimating the prevalence, assessing the impact and assisting policy and planning.

This paper provides the first estimates of recorded and hidden prevalence of opiate use among young people in Dublin. It explores the nature of other drugs used and their effect on the decision to leave school early. The author implements the first multisource enumeration of opiate use in young people in Dublin in 1996 and 1997. Hidden prevalence is estimated by the capture-recapture methodology. The nature of other drugs used was examined by surveying early school leavers. A minimum of 1528 young people aged between 10 and 20 years were identified as using opiates through three 1996 data sources. Using three samples it was estimated that 4081 (95% confidence interval (CI) of 3586-4692) were using opiates in Dublin in 1996 and 1997. Hidden prevalence is estimated by the capture-recapture methodology. The nature of other drugs used was examined by surveying early school leavers. A minimum of 1528 young people aged between 10 and 20 years were identified as using opiates through three 1996 data sources. Using three samples it was estimated that 4081 (95% CI of 3586-4692) were using opiates in Dublin in 1996. Using two samples it was estimated that 1141 (95% CI of 901-1381) of these were problematic users. Using the two-sample method it was estimated that this rose to 1315 problematic users in 1997. It was found that 51.1% of those surveyed had tried using drugs before they had left school and 46.5% noted that this use had affected them while they attended school. The implications for policy of the size of the opiate problem among young people of school age is considerable.
Upcoming Events in 2003 – A Selection

June

Wednesday 25 - Friday 27 June 2003

**Hepatitis C: Past Present Future**

**Venue:** Trinity College Dublin, Ireland

**Organised by/Contact:** Consultative Council on Hepatitis C, Conference Coordinators, Project Planning International, Montalto Estate, Spa Road, Ballynahinch, Co Down BT24 8PT

Tel: +44 (0)28 9756 1993

Fax: +44 (0)28 9756 5073

Email: hepc@project-planning.com

**www.hepc2003.com**

**Information:** The aim of this conference is to discuss new developments in research, treatment and management of Hepatitis C in a context that is as accessible to patients, busy health care workers and young researchers as those at the cutting edge.

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July

Tuesday 1 July 2003

**Third National Harm Reduction Seminar**

**Venue:** Leeds

**Organised by/Contact:** Gemma Smith, Conference Administrator

Tel: +44 (0)20 7922 8691

E-mail: conferences@drugscope.org.uk

**Information:** Programme outline:

- Reducing drug related deaths, work on crack/cocaine in custody, prison resettlement, methadone safety and user advocacy, disseminating messages to vulnerable groups, treatment and management of Hepatitis C.

Wednesday 9 – Thursday 10 July 2003

**ACPO Drugs Conference: Crack: Between a Rock and a Hard Place**

**Venue:** Hilton Hotel, Blackpool, UK

**Organised by/Contact:** Conference Organiser, Staff Office, 11th Floor, West Midlands Police HQ, Lloyd House, PO Box 52, Colmore Circus Queensway, Birmingham B4 6QN.

Tel: +44 (0)845 113 5000 ext.2727

**Information:** This year’s ACPO Drugs Conference is devoted to reviewing the achievements of the government’s crack cocaine strategy and considering what more can be done through a multi-agency response to dealing with Class A drugs and in particular crack cocaine. Delegates are expected from crack cocaine. Delegates are expected from crack/cocaine in custody, prison resettlement, methadone safety and user advocacy, disseminating messages to vulnerable groups, Hepatitis C treatment.

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September

Thursday 4 September 2003

**Addiction Research Centre Third Annual Conference: The ‘Substance of Youth’: Alcohol and Drug Use among Young People**

**Venue:** Edmund Burke Theatre, Trinity College Dublin

**Organised by/Contact:** Addiction Research Centre, Goldsmith Hall, Trinity College, 2, Ireland.

**Information:** The theme for this one-day conference is ‘The “Substance of Youth”: Alcohol and drug use among young people’. This conference, which is timely, given recent media coverage of ‘binge’ drinking in the youth population, alongside mounting public awareness of the growing availability of ‘recreational’ drugs, will address questions such as:

- What do we know about the extent of alcohol and drug use among the young?
- What do we know about young people’s views and perspectives on drug and alcohol consumption?
- What meaning does the consumption of psychoactive substances have in young people’s lives?
- What do we know about risk and drug and alcohol consumption?
- What actions and policy responses are appropriate?

Thursday 18 September– Friday 19 September 2003

**Innovations in European Drug Policy: Richard L. Rachin Conference**

**Venue:** Center for Professional Development, Tallahassee, Florida, USA

**Organised by/Contact:** Jeanne Meliorn, Journal of Drug Issues.

Tel: +01 850 644 7368.

E-mail: jmcm245@mail.swsu.edu. To register go to: www.learningforlife.swsu.edu, or E-mail: register@cpd.swsu.edu.

**Information:** This conference is sponsored by the Florida State University School of Criminology and Criminal Justice, in conjunction with the Journal of Drug Issues. It will bring together a group of distinguished European experts on drug law, policy, treatment and research. Each delegate will make a presentation on the current status of marijuana and other drug laws in his or her nation. The focus is on recent developments, innovations in drug policy, enforcement, punishment, and/or treatment.

Thursday 25 – Friday 26 September 2003

**15th Elisad Annual Meeting: Supporting Research: The Challenge for Information Specialists**

**Venue:** Dublin Castle, Dublin, Ireland

**Organised by/Contact:** Brian Galvin, Health Research Board, Holbrooke House, Holles Street, Dublin 2, Ireland.

Tel: +353 (0) 1 676 1176

Fax: +353 (0) 1 661 8567

Email: bgalvin@hrb.ie

**www:** http://www.elisad.org

**Information:** Elisad, the European Association of Libraries and Information Services on Alcohol and other Drugs, is holding its annual conference in Dublin, and receiving sponsorship from the Health Research Board. The primary purpose of Elisad is to enable those working in the field of alcohol and other drugs and facing common challenges, to exchange ideas and experience and, through networking and interaction with each other, to improve their knowledge, skills and performances. This conference will bring together information specialists, librarians, researchers and others with an interest in supporting research in the drug and alcohol addiction area.

If you have information on upcoming conferences or other events, please let us know so that we can include it in future issues of Drugnet Ireland.

Send information to Drugnet Ireland, Drug Misuse Research Division, 73 Lower Baggot Street, Dublin 2.

Tel: (01) 676 1176;

Email: bgalvin@hrb.ie.