Public health: Union strategy on drugs 2000-2004, prevention and reduction of risks of drug dependence

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PURPOSE : to adopt a Recommendation aiming to help the Member States to prevent and reduce health-related harm associated with drug dependence. COMMUNITY MEASURE : Council Recommendation 2003/488/EC on the prevention and reduction of health-related harm associated with drug dependence. CONTENT : the Council adopted this Recommendation, with the Italian delegation voting against, on the prevention and reduction of health-related harm associated with drug dependence. The Recommendation is part of the 2000-2004 drugs strategy, endorsed by the European Council at Helsinki in December 1999 with the aim of reducing the prevalence of illicit drug use, reducing substantially the incidence of drug-related health damage, and increasing substantially the number of successfully treated addicts. It calls on Member States to make available a range of different services and facilities, particularly aiming at risk reduction. The text provides a number of specific recommendations with regard to information and counselling, outreach-work, peer involvement, emergency services, networks between agencies, integration of health and social care, and training and accreditation of professionals. Particular emphasis is placed on the prevention of drug-related infections (such as HIV, hepatitis B and C, tuberculosis and sexually transmitted diseases). The Recommendation stipulates that in order to reduce substantially the incidence of drug-related health damage, Member States should: - provide information and counselling to drug users to promote risk reduction and to facilitate their access to appropriate services; - inform communities and families and enable them to be involved in the prevention and reduction of health risks associated with drug dependence; - include outreach work methodologies within the national health and social drug policies, and support appropriate outreach work training and the development of working standards and methods; outreach work is defined as a community-oriented activity undertaken in order to contact individuals or groups from particular target populations, who are not effectively contacted or reached by existing services or through traditional health education channels; - encourage, when appropriate, the involvement of, and promote training for, peers and volunteers in outreach work, including measures to reduce drug-related deaths, first aid and early involvement of the emergency services; - promote networking and cooperation between agencies involved in outreach work, to permit continuity of services and better users' accessibility; - provide, in accordance with the individual needs of the drug abuser, drug-free treatment as well as appropriate substitution treatment supported by adequate psychosocial care and rehabilitation taking into account the fact that a wide variety of different treatment options should be provided for the drug-abuser; - establish measures to prevent diversion of substitution substances while ensuring appropriate access to treatment; - consider making available to drug abusers in prison access to services similar to those provided to drug abusers not in prison, in a way that does not compromise the continuous and overall efforts of keeping drugs out of prison; - promote adequate hepatitis B vaccination coverage and prophylactic measures against HIV, hepatitis B and C, tuberculosis and sexually transmitted diseases, as well as screening for all the aforementioned diseases among injection drug users and their immediate social networks, and take the appropriate medical actions; - provide where appropriate, access to distribution of condoms and injection materials, and also to programmes and points for their exchange; - ensure that emergency services are trained and equipped to deal with overdoses; - promote appropriate integration between health, including mental health, and social care, and specialised approaches in risk reduction; - support training leading to a recognised qualification for professionals. Other measures are provide in terms of developing appropriate evaluation to increase the effectiveness and efficiency of drug prevention and the reduction of drug-related health risks. Member States should report to the Commission on the implementation of this Recommendation within two years of its adoption and subsequently on request by the Commission with a view to contributing to the follow-up of this recommendation at Community level and acting as appropriate in the context of the European Union

Action Plan on Drugs. The Commission is called up to cooperate with the Council of Europe, the WHO, the UN International Drug Control Programme and other relevant international organisations active in the field. On the basis of the information submitted by the Member States and the latest scientific data, a report should be prepared with a view to the revision and updating of this Recommendation. ENTRY INTO FORCE : 18 June 2003.