



Consultative Group on Programme Development  
Consultative Group on Budgetary Questions

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12. DIAGNOSTIC, THERAPEUTIC AND REHABILITATIVE TECHNOLOGY

12.2/3(b) Abuse of Psychoactive Drugs (APD)

*Substance abuse -  
p + c  
Europe*

1. Situation analysis

The programme is intended to deal with all psychoactive drugs other than alcohol and tobacco. In this context, the term "psychoactive drugs" covers all drugs and substances classified under the Single Convention on Narcotic Drugs 1961, amended in 1972, and the Convention on Psychotropic Substances 1971. The term also covers licit and illicit drugs therapeutically classified as psychostimulants, narcotic analgesics, hypnotics, sedatives and tranquilizers although they have not been scheduled under the aforementioned conventions.

Although young people are a high-risk group, drug-related problems are being unjustly over-identified with them. The total population of a nation or community has to be the target of a prevention and control policy, while high-risk groups have to be given additional consideration.

The available information on drug abuse is based upon single epidemiological studies in different countries at different times and upon experiences gathered in the field. However, the following patterns seem to emerge:

The last 10 to 15 years have witnessed considerable increases in drug abuse in the affluent, highly industrialized countries of Europe. The increasing use of illicit drugs apparent at the end of the 1960s, which culminated in the high levels of the mid-1970s, has since levelled off or decreased. The abuse of licit drugs has been increasing steadily during the last decade. However, in some countries with adequate monitoring systems the overall sales of these drugs have reached a peak and in a few cases shown a small downward trend. In most other countries of the Region similar but delayed developments are taking place.

Experience in a number of Member States suggests that once a drug problem reaches a critical level in urban areas, the probability increases that it will become associated with other health and social problems, such as criminality, unemployment, poverty and certain infectious diseases.

Preventive actions have been dominated by information campaigns and drug education, and their effectiveness has generally not been evaluated. However, there is some evidence regarding age-group sensitivity to drug information as well as the effectiveness of certain methods of imparting information.

Little attention has been given to legislative aspects of advertising and consumers' information on the promotion of pharmaceuticals.

Significant numbers of drug abusers and especially of opiate-dependent persons are to be found in prisons in all European countries due to infractions of narcotic and/or common criminal laws. Nevertheless, few efforts have been made to evaluate the effects of imprisonment on these individuals or on the epidemiology of drug abuse.

<sup>a</sup> 30 April 1982 separate meeting of Consultative Group on Budgetary Questions

There is insufficient systematic evidence of the effects of specific types of therapeutic or legal measures upon different types of drug abuser. However, those studies which are available seem to indicate that, after five years, between 33% and 40% of those treated one or more times for abuse of opiates and injected drugs will be off these drugs, while the remaining 60% to 70% will either still be abusing them or have died.

The extensive political commitment of most European countries to certain preventive and treatment measures has not been matched by a visible impact on the problems. Some of the reasons for this seem to be:

- lack of resources in terms of money and personnel;
- lack of effective methods and models for meeting changing drug problems and for reaching groups in need;
- disagreement about how to define and counter the increasing abuse of drugs particularly among young people, including the question of use of constraints for treatment purposes, the effectiveness of information campaigns, etc.;
- obstacles to change in the traditional service systems, resulting in a lack of necessary flexibility in applying new approaches, particularly in view of the increase in heavy use of drugs among young people and the relative increase among women;
- lack of relevant knowledge about the effectiveness of the methods, services and programmes applied to influence different groups in need of help.

There appears to be a growing demand for psychoactive drugs in most European countries. Some evidence shows that this overall increase in demand and its differing pattern in European countries is linked to social phenomena such as changing lifestyles and changes in cultural identity and living conditions. The health and social problems related to the abuse of these drugs are causing increasing concern in most Member States.

In conclusion, the problems can be summarized as follows.

- (1) In many countries, the ineffectiveness of national policies and programmes in combating a relatively high and increasing overall consumption of psychoactive drugs, accompanied by increases in associated health and social problems.
- (2) Ineffective methods to prevent the abuse of psychoactive drugs and insufficient systematic evaluation of existing programmes.
- (3) A lack of systematic evaluation of existing programmes for treatment and rehabilitation of abusers of psychoactive drugs.
- (4) Insufficient integration of services for prevention, treatment and rehabilitation in relation to abuse of psychoactive drugs into the general health services, especially at the primary care level.
- (5) Insufficient coordination of programmes to combat abuse of psychoactive drugs at the international level.

## 2. WHO programme perspective

Within the framework of the long-term regional mental health programme (1970-1980), a number of activities were devoted to problems related to drug dependence. At the beginning of the period, the activities concerned epidemiology, preventive measures, treatment methodology and health education. Subsequently, the emphasis of the programme changed towards patterns of services and their provision to combat both for alcohol and drug abuse. At the same time, the emergence of youth advisory services was studied and discussed. These were (and remain) services created by young people for young people to deal mainly with drug problems in a large number of European countries. Experience showed that such services, which initially were "anti-establishment", over time became part of national or local service systems and broadened their scope to deal with a number of personal and social problems peculiar to young people.

The two latest major activities carried out by the Regional Office have been a study on present health education experiences concerning tobacco, alcohol and drugs and their evaluation, and a conference on public health aspects of alcohol and drug dependence, where the emphasis was on preventive possibilities and intervention at the primary level.

In addition to the activities carried out by the Regional Office itself, close collaboration has been maintained with the Council of Europe in its activities in this field, and efforts have been made to facilitate exchange of information and experience between Member States.

In view of the broadened scope and increased support for this programme under the Seventh General Programme of Work, attention will focus on ways to promote comprehensive national policies and better programmes for reducing the abuse of psychoactive drugs. Efforts will be made to develop and improve programmes for prevention, treatment and rehabilitation, with special emphasis on vulnerable groups.

The programme will continue to promote the integration of such drug control services into the general health services and pay special attention to the preventive activities and early treatment at the primary care level.

A network of national counterparts will be developed from 1982.

Increased contacts will be established with the relevant United Nations agencies, IGOs, NGOs and countries. One of the aims of this approach will be the formulation of a coordinated intersectoral European programme of work for prevention and reduction of the abuse of psychoactive drugs and related health and social problems.

These preliminary steps should permit the development of a regional policy for the prevention and reduction of abuse of psychoactive drugs by 1983. This policy and the related regional targets for HFA2000 will be reviewed at the 33rd session of the Regional Committee in 1983. In view of the new thrust being given to this programme, progress will be assessed in 1987 and the targets revised if necessary.

To achieve optimal programme effectiveness, close collaboration will be maintained with other programme areas within the Regional Office. Particularly close links will be formed with the mental health, prophylactic, diagnostic and therapeutic substances, health education, health promotion, primary health care, workers' health, accident prevention, health economics and research promotion and development programmes.

### 3. Programme structure

#### Objective

- 1.1 To promote the development of comprehensive national policies and programmes leading to a reduction in the abuse of psychoactive drugs and related health and social problems.

Estimated cost in 1984/85: Regular budget \$ 5 000 Other sources \$ 10 000

<u>Targets</u>	<u>Approaches</u>
1.1.1 An analysis of national policies and programmes for abuse of psychoactive drugs and related problems in a representative sample of Member States by 1986	- A study will be carried out in 1984-85 with the assistance of national centres in countries with different socioeconomic and cultural patterns - A study group will make an analysis of the results to serve as a basis for the development of guidelines under target 1.1.2 (1986) - Profiles on national policies will be published (1987)
1.1.2 Guidelines for planning, monitoring and evaluation of national programmes on the abuse of psychoactive drugs and related problems by 1990	- Draft guidelines will be designed on the basis of the above study, which will include a review of national practices and mechanisms for planning, monitoring and evaluation of programmes, and cost elements (1986)

- Pilot countries/zones will be identified, and a consultation with selected national collaborators will be held in 1987 to plan the testing of the draft guidelines in the pilot zones (1986-89)
- A working group will evaluate the results of the pilot tests (1989), and the final guidelines will be published (1990)

Objective

2.1 To develop more effective approaches to the prevention of abuse of psychoactive drugs with special reference to vulnerable groups.

Estimated cost in 1984/85: Regular budget \$ 20 000 Other sources \$ 30 000

Targets

Approaches

- |   |   |
|---|---|
| <p>2.1.1 An analysis of predominant knowledge, beliefs and attitudes to abuse of psychoactive drugs and its treatment among:</p> <ul style="list-style-type: none"><li>- children, adolescents and parents 1986</li><li>- teachers, community leaders, police 1987</li><li>- health and social personnel 1988</li></ul> | <ul style="list-style-type: none"><li>- Study by national centres in selected Member States, starting two years before the target date (as from 1984)</li></ul>   |
| <p>2.1.2 Regional facilities for the training of national planners and programme managers on prevention of the abuse of psychoactive drugs starting 1987</p>  | <ul style="list-style-type: none"><li>- Based on the above studies, selection of collaborating training centres (1985)</li><li>- Preparation of courses (1986)</li><li>- Annual course in English (starting 1987); biannual course in French (starting 1988)</li></ul>  |
| <p>2.1.3 An assessment of the importance of different etiological factors in the development of abuse of psychoactive drugs by 1988</p>   | <ul style="list-style-type: none"><li>- Study by collaborating centres to assess the influence of the use of alcohol, tobacco and hashish (marihuana) on initiation into the use of opiates and injected drugs (1986-87)</li><li>- Collaborating centre study on the influence of sociocultural factors (including school performance, socioeconomic status/milieu, employment factors, etc.) (1986-87)</li><li>- Study on the use of psychoactive drugs in prisons (1986-87)</li><li>- Study on the influence of advertising and consumer information on legal psychoactive drugs (1987-88)</li><li>- Working group to assess the results of the above studies (in 1988)</li></ul> |
| <p>2.1.4 A model framework of legislative measures to reduce the problems associated with the abuse of psychoactive drugs by 1988</p>   | <ul style="list-style-type: none"><li>- Collaborating centre study to evaluate existing legislation on psychoactive drugs and their abuse and corresponding legislative structures (1986-87)</li><li>- Study group to discuss the analysis; publication (1988) (see also health legislation target and approaches 2.1.1)</li></ul>  |
| <p>2.1.5 Model curricula for training programmes in the prevention of psychoactive drug abuse and the treatment of addicts for health (undergraduate and postgraduate) and other workers (police, educators personnel) by 1988</p>  | <ul style="list-style-type: none"><li>- Collaborating centre study to analyse existing training programmes (in 1984-85) and draft model programme(s) (in 1986)</li><li>- Consultation on the draft model by selected NGOs and universities (1986-87)</li><li>- Working group to develop guidelines; publication (1988)</li></ul>  |

- 2.1.6 Monitoring systems for control of abuse of psychoactive drugs by 1989
- Study on classification of different forms and levels of abuse of psychoactive drugs, including measurement of defined daily dose (DDD) and assessment of existing monitoring systems (1984-85)
  - Working group to discuss and make proposals for monitoring systems (1986)
  - Testing in pilot countries/zones (1986-88)
  - Guidelines on monitoring systems (1989)
- 2.1.7 Guidelines on principles of medical prescription of psychoactive drugs by 1989
- Analysis of existing principles and practices in selected Member States (1984-85)
  - Study group to assess results and draft guidelines (1986)
  - Testing in a pilot zone (1986-88)
  - Publication of guidelines (1989)

Objective

- 3.1 To stimulate the development and improvement of treatment and rehabilitation for abusers of psychoactive drugs.

Estimated cost in 1984/85: Regular budget \$ 25 000 Other sources \$ 20 000

Targets

Approaches

- 3.1.1 Guidelines on evaluation methodology by 1987
- Drafting of guidelines by a consultant (1984)
  - Field testing (see target 3.1.2 below) (1985-86)
  - Workshop to assess results and develop final guidelines; publication (1987)
- 3.1.2 Country profiles of programmes for treatment and rehabilitation for abusers of psychoactive drugs in selected Member States with different socioeconomic and cultural patterns by 1986
- Studies by selected national centres (1985-86)
- 3.1.3 Improved programmes for treatment and rehabilitation of abusers of specific types of psychoactive drug:
- hashish/marihuana 1989
  - opiates 1990
  - prescribed psychoactive drugs 1991
- Study by collaborating centres of existing programmes, including an analysis of the key events influencing cessation/continuation of drug abuse, and the use of existing services (1984-85)
  - Workshop of IGOs, NGOs and collaborating centres to assess the results and make proposals for improved methodology (1986)
  - Testing of new methods in a pilot zone (1986-89)
  - Working group to analyse results in relation to hashish/marihuana (1989)
  - Working group to analyse results in relation to opiates (1990)
  - Working group to analyse results in relation to prescribed psychoactive drugs (1991)
- 3.1.4 Assessment of modalities of non-voluntary treatment of abusers of psychoactive drugs by 1987
- Collaborating centre study of existing non-voluntary treatment of abusers and evaluation of results (1984-86)
  - Study group to assess results and make proposals on strategies of non-voluntary treatment (1987)
- 3.1.5 Analysis of "carriers of abuse" of psychoactive drugs by 1990
- Collaborating centre study of longitudinally different types of abuser and the effects of different interventions (1984-89)
  - Study group to evaluate the findings (1990)

Objective

- 4.1 To improve the integration of services for prevention, treatment and rehabilitation of abusers of psychoactive drugs into the health services at the primary care level, with special attention to vulnerable groups.

Estimated cost in 1984/85: Regular budget \$ 10 000 Other sources \$ 10 000

<u>Targets</u>	<u>Approaches</u>
4.1.1 An analysis of existing services in a selected sample of Member States by 1986	- The study under target 1.1.1 will include the preparation of an inventory of existing services and its analysis by a consultant (1986)
4.1.2 An analysis of the role of different sectors in prevention, treatment and rehabilitation of problems related to the abuse of psychoactive drugs  - specialized services/ primary health care 1987 - lay care/community care by 1988 - sectors other than health by 1989	- Use of the national profiles developed under targets 1.1.1 and 4.1.1(a) as background - Working group to analyse the respective roles of specialized services (including psychiatric hospitals, half-way houses and detoxification clinics) versus the primary care level (general practitioners, nurses and social workers) (1987) - Working group to analyse the role of lay groups and community networks (1988) - Working group to analyse the role of sectors other than health (including the judicial, educational and employment sectors) (1989)
4.1.3 An assessment of models for intersectoral cooperation in the prevention and treatment of abuse of psychoactive drugs by 1989	- Study by collaborating centres of alternative national mechanisms for collaboration between the health, social, educational, judicial, employment sectors and the role played by youth and sports organizations (1984-87) - Analysis of results under target 4.1.3 (1988-89) - Study group to analyse results and draft guidelines (1989)
4.1.4 Models for early detection/treatment ("out-reach") of abusers of psychoactive drugs at the primary level by 1990	- Collaborating centre study based on information under target 1.1.1 (1985-86) - Workshop to design models for early intervention (1987) - Testing in pilot zones (1988-89) - Assessment of results; publication (1990)

Objective

- 5.1 To increase coordinated action to reduce abuse of psychoactive drugs between Member States, United Nations agencies, IGOs and NGOs.

Estimated cost in 1984/85: Regular budget \$ 10 000 Other sources \$ 5 000

<u>Targets</u>	<u>Approaches</u>
5.1.1 An assessment of international aspects of prevention of abuse of psychoactive drugs by 1986	- With the assistance of United Nations agencies, IGOs, NGOs, national centres and review of existing knowledge to identify transboundary factors in drug abuse in the European Region (1984-85) - Working group to make proposals to overcome the constraints (1986)

- 5.1.2 A coordinated international programme of work for prevention and reduction of abuse of psychoactive drugs by 1989
- Review of current policies on abuse of psychoactive drugs in United Nations agencies, IGOs and NGOs (1985-86)
  - Drafting of a common framework for coordinated action and a programme of work (1987)
  - European conference to discuss joint action (1989)
  - Adoption of plan of action by the Regional Committee (1989)

Objective

- n.1 To facilitate continued programme development responsive to the needs of Member States and to support efficient programme delivery

Estimated cost in 1984/85: Regular budget \$ 15 000 Other sources \$-

Targets

Approaches

- |       |   |   |  |
|-------|---|---|--|
| n.1.1 | Cooperation with individual Member States in the development and conduct of national programmes                     | - | Technical advice and collaboration by WHO regional staff, as requested<br>- Provision of consultants   |
| n.1.2 | Continued development of a WHO programme to meet the priority needs of Member States and the strategies for HFA2000 | - | Regular meetings of a programme advisory committee drawn from Member States<br>- Meeting of an internal task force<br>- Coordination with other IGOs, NGOs, national institutes and related WHO programmes<br>- Designation and involvement of collaborating centres in the development and implementation of programmes<br>- Use of individual collaborators in the development and conduct of WHO intercountry programme activities (meetings, training courses, etc.)<br>- Support services |

Staff and intercountry project funds

	1982-83				1984-85			
	No. of Posts	Regular Budget	Other Sources	Total	No. of Posts	Regular Budget	Other Sources	Total
Staff	-	-	-	-	-	-	-	-
Projects		-	-	-		85 000	75 000	160 000
Total		-	-	-		85 000	75 000	160 000

