Toolkit for preparing and responding to emerging drug trends in Europe

Best Practices and recommendations for strengthening Europe's Responses to Emerging Drug Trends

Title:
Toolkit for preparing and responding to emerging drug trends in Europe

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Contents

Drug-Prep Toolkit with Best Practices

The Toolkit aims to provide practical support to stakeholders directly engaged in providing information related to drug information systems so that they can better prepare for future developments in the drug field. The Toolkit consists of the following three components and related best practices:

1. Strengthening drug information systems
2. Strengthening threat assessment capacity
3. Improving and implementation of response interventions

Introduction

The DRUG-PREP WP2 report provides an overview of current drug-related developments and emerging threats in Europe. It focuses on best practices and recommendations for enhancing preparedness in EU member states. It emphasizes the need for a synchronized approach, improved drug information systems, strengthened threat assessment capacity, and more effective response interventions.

The Toolkit is based on the WP2 report "How drug information systems contribute to enhance preparedness" and the report's overview of the Best Practices reported by the six countries (Belgium, the Netherlands, Portugal, Finland, Ireland and the Czech Republic) participating in the project. The best practices mentioned in the report are not all included in the toolkit. The toolkit also contains some additional best practices. The report identifies gaps and challenges in national drug information systems and response interventions. It highlights the limitations of existing monitoring tools in detecting new signals, the lack of coordination and information exchange across domains, and the absence of formalized response protocols. Stakeholder involvement, timely information access, and improved coordination are crucial for effective response development.

The report offers recommendations and best practices in three key areas to enhance preparedness. Firstly, strengthening drug information systems is advised through investment in innovative monitoring tools, engagement of various experts, and improved access to information from field practitioners. Secondly, enhancing threat assessment capacity requires increased investment, formalized coordination, and the inclusion of all relevant stakeholders in information exchange systems. Lastly, improving and implementing response interventions involves revising communication protocols, formalizing responses, broadening stakeholder engagement, and investing in strategic and coherent national-level responses.

In conclusion, EU member states possess valuable information on drug-related developments, but a more coordinated and evidence-informed approach is needed. Synchronized use of monitoring tools, formalized information exchange, and cross-border collaboration will contribute to more accurate threat assessments and tailored response interventions. By implementing the recommendations and learning from each other, member states can better address the challenges posed by emerging drug-related threats.

The Toolkit includes best practices and recommendations for the abovementioned components. The majority of the project partners submitted 1-2 best practices based as much as possible on available scientific evidence and meeting the needs of those involved. These best practices aim to enhance preparedness and increase response capacity to the growing drug threats in Europe.

All the best practices were instructed to include the following topics in their document:

A general outline of the report for each best practice includes:

1. Executive summary/highlights
2. Brief introduction: describe the current situation; what works, what does not work: explain the current system, including needs and challenges and how to address them
3. General description of the best practice, including challenges and benefits
4. Recommendations for the best practice (what the recommendations are based on)
5. Useful references and links

1 RED ALERT warning system – The Netherlands

1.1 Summary

To ensure a coordinated and timely response to acute drug-related health risks, it is key to develop and implement a formalized risk communication protocol that includes a decision tree to assess whether or not to issue a drug alert, a clear-cut manual how to subsequently issue an alert once the decision has been made and a task division for all stakeholders involved. Such a protocol should also clearly describe all responsibilities of those involved during the process. Evaluating the protocol each time it has been used, it remains fit for purpose and up to date.

For this best practice, the example of the Red Alert warning system developed by the Drugs Information and Monitoring System (DIMS) in the Netherlands has been used.

1.2. Introduction

The use of illicit drugs can cause acute severe harms to health, but the severity depends on several factors. Among them is the unintended intake of extra hazardous substances in illicit drugs. Since the production and distribution of illicit drugs are unregulated, providing reliable information on the composition of the drugs through drug testing is a crucial harm reduction strategy. Not in the least, because adulterants can be

present that potentially could lead to life-threatening health effects. However, even when drug testing is not available, issuing drug alerts as soon as there is analytical confirmation from either forensic or toxicological laboratories that adulterated drugs are in circulation could save lives.

Extensive literature is available on how to govern responses to public health risks and emergencies in general. Key elements include a system that can detect the presence of extra hazardous substances as soon as they are present in illicit drugs, a decision framework that allows the assessment of whether or not to issue an alert, and a risk communication protocol that describes tasks and responsibilities to respond accordingly and rapidly inform communities involved.

A typical example is the Red Alert warning system, operated in the Netherlands for over two decades.

1.3 Description of the best practice

In the Netherlands, the Drugs Information and Monitoring System (DIMS) is responsible for the governance of the Red Alert warning system. They have been formally appointed by the Ministry of Health. DIMS receives information on illicit drug composition weekly through its drug-checking network. In addition, DIMS is in direct contact with the Monitor Drug-related Incidents (MDI), which receives information on adverse health incidents from a sentinel network of emergency departments and ambulance services, as well as first-aid posts on festivals and other music events. Besides that, DIMS is in close contact with the Netherlands Forensic Institute (NFI), which is responsible for the chemical analysis of illicit drugs seized by the police, and the Customs Laboratory, which is responsible for the chemical analysis of intercepted shipments containing illicit drugs or new psychoactive substances (NPS).

As soon as DIMS receives information about the possible presence of adulterated drugs on the illicit drug market (either directly because an extra hazardous substances has been detected or because a serious adverse health event has been reported suspected caused by adulterated drugs), they start an investigation to assess the extent of the risk:

For this purpose, the following checklist has been developed:

- Pharmacological/toxicological profile and concentration of the detected substance
- Physical appearance of the substance
- Setting in which the substance will be used, including the target population and method of use
- Distribution and first time detection (NL /EU)
- Number of samples that already have been identified
- Reported adverse health events
- Forecast on possible further developments
- Other contextual information is needed to assess the risks of the presence of the detected substance in the illicit drug market.

Subsequently, a specifically appointed core team Red Alert (consisting of the head of DIMS, a police officer from the Ministry of Health, and an expert from the Health Inspectorate) assesses the situation and advises the Minister of Health about the steps to take: continue monitoring or issuing an alert according to the Red Alert protocol. Different levels of a Red Alert exist, ranging from a regional or targeted warning to a full-scale national warning, depending on the severity of the situation. Before issuing a Red Alert warning, a notification is sent to the DIMS network to inform them of an ongoing investigation.

To ensure that the subsequent response goes according to plan, a part of the protocol specifically describes all steps that need to be taken from the moment the decision has been made to issue an alert until the end

of the alert. A key element is the additional regional protocols developed by the DIMS network to inform all key stakeholders rapidly and effectively locally once a Red Alert has been issued.

DIMS's responsibility is to develop—on concise notice and with the approval of the core team Red Alert—a comprehensive news item that can be shared with all stakeholders involved once the decision has been taken to issue an alert according to the Red Alert protocol. For this purpose, specific templates have been developed for news items, additional posters, and social media posts. Furthermore, a specific Red Alert app has been developed that notifies everyone using the app via a push message.

During the warning campaign, DIMS is responsible for governing Red Alert. The head of DIMS informs the core team Red Alert about the situation's progress every week. Only the Minister of Health can formally end the warning campaign after the core team Red Alert advises. Each Red Alert warning campaign is subject to a critical evaluation afterward. A specific checklist has been developed for this purpose.

▲ Het hardcorefestival Thunderdome vorig jaar in de Jaarbeurs in Utrecht © Thunderdome

Tienduizenden bezoekers van Thunderdome extra gewaarschuwd na 'red alert' om gevaarlijke drugs

Bezoekers van muziekfestijn Thunderdome in Utrecht worden zaterdagavond extra gewaarschuwd voor gevaarlijke drugs die in omloop zijn. Aanleiding was een 'red alert' (een zeer ernstige waarschuwing) door het Trimbos Instituut, dat onderzoek doet naar drugsgebruik. Trimbos vraagt uit te kijken voor een pil met potentieel dodelijke inhoud.

Emma Thies, Marco Gerling 09-12-23, 15:51 **Laatste update:** 10-12-23, 16:45

Example of the English version of the Red Alert poster and a news item dedicated to a Red Alert issued on Dec 8, 2023, and how the warning was issued at a music festival one day later.

1.4 Challenges and recommendations

Rooted in trial-by-error, a number of lessons have been learned over the years. A few main recommendations are listed below.

- Ensure sufficient capacity to detect and notify the presence of extra hazardous substances in illicit drugs that are in circulation in your country. Include police/law enforcement officers and/or toxicologists/hospital pharmacologists in your network and ensure that they know who to contact in case they have information that potentially could lead to a drug alert. In case an alert has been issued in another (neighboring) country, ensure that you are able to assess whether this could also apply to your national situation together with your network.
- Appoint a (small) group of experts who are able to reliably assess the situation based on their specific expertise, preferably including representatives of PWUD communities. In the end, appoint someone who is ultimately responsible for the decision of whether or not to issue an alert.
- Be mindful about the scope of the drug alert. For example, only issuing a full-scale national drug alert when intake of the drug of concern can lead to life-threatening health risks. Make a clear distinction between updates, regular drug alerts, and Red Alerts.
- Ensure you have an updated list of names and contact numbers from all stakeholders involved, including backups.
- Build effective and strategic relationships/ alliances with law enforcement, (local) governments, PWUD communities, and especially a select group of reliable and well-informed journalists.
- Make templates (and develop a platform/app) for issuing your alert. Keep the description of your warning as straightforward as possible and include a detailed perspective for action. Ideally, include

a clear and detailed photo of the drug (or logo of the drug) you are warning about. Keep in mind who your target audience is. Include an action perspective when someone presents symptoms after using the specific drug.
- Be mindful of the exact timing of the drug alerts: Drug alerts on weekends or Friday after 6 PM generate less attention from journalists and the public than on Friday morning.

1.5 References and useful links

- EU Early Warning System on NPS The EU Early Warning System on new psychoactive substances (NPS) | www.emcdda.europa.eu

- DIMS annual report 2022. 2023. Trimbos institute. INF144. Available at URL: Instituut

- Health risk communication strategies for drug checking services Health risk communication strategies for drug checking services | www.emcdda.europa.eu

- Red Alert warning system Drugs Information and Monitoring System - Trimbos-instituut on Vimeo

- The Drugs Information and Monitoring System. Factsheet on drug checking in the Netherlands. 2019. Trimbos institute. AF1677. Available at URL: Instituut

2 The Reporting Desk for New Drugs – The Netherlands

2.1 Summary

It is vital to have access to local or national data from various sources to monitor drug market dynamics and verify signals of new psychoactive substance (NPS) use. In 2012, the Reporting Desk for New Drugs was established to collect data on NPS production, trade, and consumption in the Netherlands. This was based on the assumption that combining these sources would provide a comprehensive understanding of the national NPS market.

Since its establishment, the Reporting Desk for New Drugs has been acknowledged as a valuable asset for policymakers, specifically to assess risks associated with NPS use. A key element is access to data from both forensic laboratories and drug-checking services. This has proven to be invaluable in verifying signals of NPS use (e.g., of substance groups such as synthetic cannabinoids or cathinones) and assessing the health risks associated with the use of it. Information from all these various sources combined presents a better picture about which NPS are actually being consumed or only intended for trade, rather than if examined as stand-alone sources.

2.2 Introduction

Drug markets are becoming increasingly complex and dynamic. Annually, dozens of substances newly emerge on the European drug market for the first time. Since 1997, the EU Early Warning System, operated by the EMCDDA, has played a pivotal role in enhancing preparedness and developing responses to NPS on an EU level. Over the years, Member States have developed different systems on a national level to detect, assess, and communicate ongoing developments with NPS. In the Netherlands, in 2012, the Ministry of Health, Welfare and Sport (VWS) commissioned the Trimbos Institute and specifically the Drugs Information and Monitoring System (DIMS) to establish the Reporting Desk for New Drugs in order to collect data on production, trade, and consumption of NPS in the Netherlands and to report the main findings annually.

2.3 Description of the best practice

The Reporting Desk for New Drugs assembles, analyzes, and reports on data collected by various organizations in the Netherlands about the production, trade, and consumption of NPS.

Once a year, data triangulation takes place by comparing laboratory data with data about adverse health-related events related to the use of NPS. Additional information about NPS being used in the Netherlands from pre-selected online consumer discussion boards about drugs is also included in this analysis.

Figure 1 Organizational chart Reporting Desk for New Drugs

The following partners are involved:

- The Customs Laboratory provides an overview of intercepted shipments of NPS imported from foreign countries to the Netherlands as final destination or as transit location. Export shipments containing NPS are occasionally analysed and notified to the Reporting Desk for New Drugs.

- The Netherlands Forensic Institute reports on the analysis results of NPS-related cases seized by the police, providing an indication of the production and trade of NPS in the Netherlands.

- The Drugs Information and Monitoring System (DIMS) collects and provides data about illicit drugs, including NPS, that have been detected in samples submitted by PWUD at one of its drug-checking facilities. These facilities are usually affiliated with centres of addiction care (Smit-Rigter and Van der Gouwe, 2019; Hutten and Smit-Rigter, 2023). Additional information about NPS being used in the Netherlands is also collected from pre-selected online consumer drug discussion boards.

- The Monitor Drug-related Incidents (MDI) collects and provides data on adverse health-related events related to the suspected use of NPS reported by hospital emergency departments, ambulance services, forensic doctors, and organizations that staff first aid posts at events.

- The Dutch Poisons Information Centre (DPIC) informs doctors, pharmacists, and other professional care providers about the possible adverse health effects and treatment options in case of a poisoning. All information requests regarding intoxications after suspected NPS use is being reported.

Twice a year, the Reporting Desk for New Drugs analyses the collected laboratory data from its collaborative partners. If a substance requires further investigation or might pose a severe public health risk, the Coordination Point Assessment and Monitoring of New Drugs (CAM) is notified. After a quick scan has been performed, in which all available information about the NPS in question has been gathered, a risk assessment can be executed at the request of the Ministry of Health. Furthermore, all data is transmitted to the EU Early Warning System.

Results are described in an annual report to the Ministry of Health, providing a comprehensive overview of the NPS situation in the Netherlands during the past year. Since 2021, Dutch and English infographics have been available to the general public (Smit-Rigter et al., 2023).

2.4 Challenges and recommendations

Although this unique system results in a more in-depth understanding of the NPS situation in the Netherlands, a few challenges remain:

- Not all NPS seized by the Police are submitted for analysis; this also applies to Customs. Therefore, the data reported by the Reporting Desk for New Drugs are most likely underestimating the actual situation.
- The same applies to the MDI and DPIC. Not all adverse health-related events with NPS in the Netherlands are registered; in most cases, toxicological confirmation is unavailable.
- The Reporting Desk for New Drugs can access data from several innovative monitoring instruments, such as drug checking and online drug monitoring. Additional data from other tools like wastewater analysis would be a great asset. Also, information from forensic toxicological laboratories regarding forensic investigations is still complex to retrieve in the Netherlands.

Essential for establishing a system like the Reporting Desk for New Drugs is that special attention should be given to the governance of such a system. One should invest in a network of key figures that can provide the data necessary to obtain a more in-depth understanding of the NPS situation from various perspectives. In addition, to ensure that information regarding ongoing developments with NPS and possible additional health risks associated with the use of NPS reaches a broader audience, it is highly recommended that the main findings be disseminated in a way that is easy to access and understand.

2.5. References and useful links

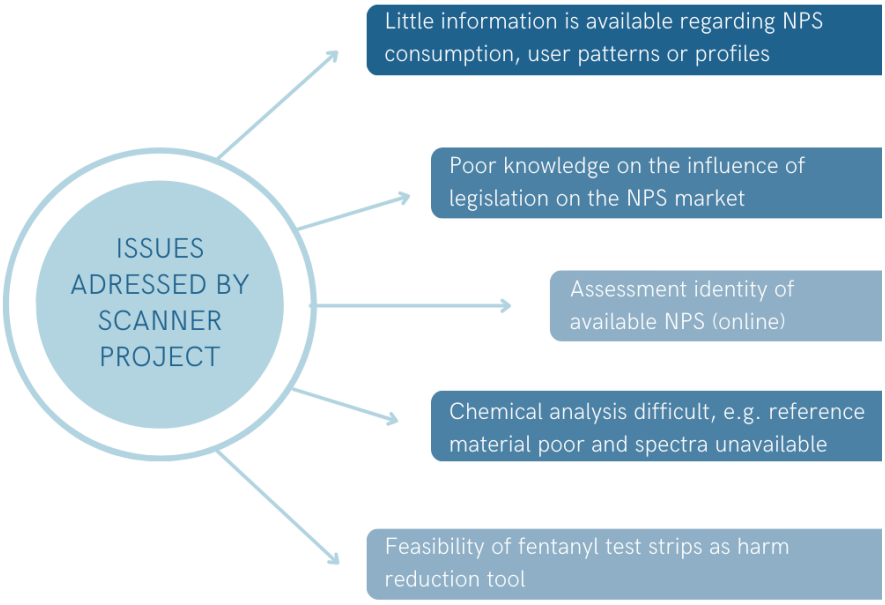
- Annual report Reporting Desk for New Drugs 2022. 2023. Trimbos institute. AF2132. Instituut
- CAM basisnotitie. 2018 RIVM. (in Dutch). Basisnotitie Coördinatiepunt Assessment en Monitoring nieuwe drugs (rivm.nl)
- DIMS annual report 2022. 2023. Trimbos institute. INF144. Available at URL: Instituut
- EU Early Warning System on NPS The EU Early Warning System on new psychoactive substances (NPS) | www.emcdda.europa.eu
- The Drugs Information and Monitoring System. Factsheet on drug checking in the Netherlands. 2019. Trimbos institute. AF1677. Available at URL: Instituut

3 BEST PRACTICES – SCANNER Project – BELGIUM

3.1 Summary

SCANNER was an EU project that focused mainly on understanding the dynamics and consequences of new psychoactive substances (NPS) in rapidly changing online markets.

The main issues addressed by the SCANNER project:



3.2 Introduction

During the last decade, increasing amounts of new psychoactive substances (NPS) have been identified in Europe. These NPS are chemically and toxicologically similar to classic illicit drugs but evade legislation by structural alterations. Little information is available regarding NPS consumption, user patterns, or profiles. Additionally, laboratory analysis of NPS is complex because reference material supply is poor or because chemical spectra are not readily available.

The most frequently used response to tackle the NPS problem is a legislative change. However, little information is available regarding the influence of legislation on the identity and quality of NPS offered for sale online and purchase methods.

The activities of the SCANNER project were to:

- Identify the NPS offered for sale using continuous web monitoring, both before and after a change in legislation. This yields valuable information on the effect of legislation on the identity and price of NPS, which is available online.
- Purchase and subsequently analyze NPS using analytical chemistry and establish to what extent the identity of NPS available online matches the presumed identity as advertised by the vendor.
- Develop and validate reference analysis methods. Drug-checking facilities underwent proficiency testing for NPS. Costly analysis reference materials for NPS were shared amongst the participants.
- Harmonize drug checking operating procedures throughout Europe and improve general analysis result quality.
- Share obtained NPS data with the EU EMCDDA REITOX network (link is external) using the recently developed long-term online platform Drugs link is external). As the Reitox network is a designated national institution reporting on drugs and drug addiction, and the EMCDDA provides a factual overview of European drug problems, this improves the NPS monitor system and usage of the research throughout the EU.
- Collect and analyze heroin samples and investigate the presence of fentanyl. In recent years, dozens of opioids have appeared on the NPS market, most being fentanyl derivatives. Some of these have high potencies and caused countless overdose deaths worldwide. The

information obtained by this part of the project provides a picture of the potential fentanyl hotspots within Europe. Investigating the feasibility of cheap fentanyl test kits contributes to harm reduction because of the potential to save lives.

- Support civil society organizations in collecting prevalence data on NPS use, exchanging methods for epidemiologic research on NPS, and standardizing ways of monitoring NPS use. This will ensure reliable data collection across Europe and help meet the challenges posed by the NPS phenomenon in their general interventions.

3.3 Description of the best practice

a) Monitoring the NPS market

Monitoring of the NPS market consisted of two parts:

1. Purchasing NPS online and analyzing them

The appearance of new NPS molecules on the market is an ever-increasing phenomenon. The project looked into the presence and quality of NPS on the market. Several NPS samples were purchased on a Clearnet website over time. The following things were discovered:

- The price of substances varies over time
- The name of the substance sold does not correspond with the actual content. This could lead to unwitting consumption. This phenomenon was also confirmed during an on-site analysis at the Boom Festival. An extremely high percentage of the drugs submitted to analysis are adulterated or misrepresented (do not meet service user expectations).
- Some substances contained more than one substance, marketed as a pure powder containing one sample.
- Mixtures, e.g., blue bliss pellets, are quite popular online.
- 5-MeO-2-TMT was analyzed; this was the first identification ever (FIE) for Europe.

2. Proficiency testing

Since the different drug-checking facilities in the SCANNER consortium employ different approaches and analytical techniques to identify the active substances and possible adulterants and contaminants in drug samples, it was decided to perform proficiency testing. The idea is to evaluate the capability of the different partners in identifying unknown NPS molecules in samples and compare the different approaches and techniques used.

In total, three different batches were sent to the participants. The first batch consisted of two samples: the second of six and the third of twelve. The participants were asked to identify the (primary) active ingredients in the samples. Based on the results of batches 1 and 2, it was seen that some samples did not contain the NPS they were bought for; therefore, for batch 3, the samples were first analyzed by the coordinator of this project, Sciensano, and therefore Sciensano cannot be considered a participant in the proficiency test for batch 3 since this laboratory was aware of the labeling of the different samples.

The results show that the different participants were able to identify the psychotropic substances, all part of the so-called NPS. The general image of drug-checking services is that they work with test kits (often based

on colorimetry), test strips, thin-layer chromatography, and possibly spectroscopic methods to analyze the samples they receive from different users. In this case, the drug-checking services would be limited to the analysis of the "classic" drugs and some targeted adulterants or contaminants, like fentanyl derivatives (fentanyl strips). Although many drug-checking services started in this way, it is clear that the different drug-checking services participating in this study have access to adequate analytical resources to identify new psychotropic substances to a certain level. However, some of the molecules cannot be identified with 100% certainty since they are structural isomers.

b) **Standardization of data collection within civil society organizations.**

Prevalence data on NPS were gathered via twenty-five civil society organizations in 19 European countries. The civil society organizations involved in the project were supported in improving their data collection by developing and implementing a standardized survey methodology for monitoring NPS use. Involving existing EU-wide civil society networks in this project raised awareness in these organizations about the importance of building the necessary skills and capacity not only for reliable data collection across Europe but also for meeting the challenges posed by the NPS phenomena in their interventions in general.

Based on what has been discussed in the project and after consultation with the EMCDDA, it was concluded that the project would develop standardized surveys based on the 2 NPS questions from the European model questionnaire (EMQ) developed by the EMCDDA. The first question is a generic (catch-all) question to monitor NPS use in general. The second question specifically focuses on the 7 NPS mostly used across Europe in 2020 (Based on data from EMCDDA and SCANNER partners). These substances are: 3-MMC, 4-MMC, 2C-B, 2-FMA, Hexen, a-PHP and 5F-MDMB-PICA. Additionally, all projects could add a maximum of two substances they believe were more commonly used in their region. The 10th option is an open field to add substances not listed before. The decision to focus on the 9 (7 general and two country-specific) most prevalent NPS instead of a long list of NPS was made during the discussion meeting and agreed upon by the EMCDDA.

3.4 Recommendations for the best practice

Regarding **the proficiency testing, monitoring of the NPS market, and improvement of analysis** quality within drug checking services, the following recommendations were set up:

Overall, it can be concluded that the participating drug-checking services have all the necessary analytical tools to characterize psychotropic samples containing NPS so that an initial risk assessment can be carried out and feedback can be provided to PWUD. All this is primarily for harm reduction purposes but also useful for drug policy in broader terms. Based on the results of this limited proficiency testing, a few analytical recommendations can be made when implementing drug-checking services. The basis to adequately analyze NPS is to combine different analytical laboratory techniques at one's own premises or through collaboration with other laboratories or universities and the presence of up-to-date open-source mass spectrometry (MS) libraries. When going more in-depth on the possible adaptations/solutions to the occurring problems, the following ideas can be put forward:

a) Each laboratory can extend its gas chromatography (GC) and/or liquid chromatography (LC) library with retention data from characterized samples or reference standards to distinguish between stereoisomers. Based on this, the screening methods should 'evolve' to separate structural isomers. Alternatively, laboratories can use reference standards or confirmed samples to create a UV library, identify isomers with classic LC-DAD analysis, or invest in an LC-MS where a DAD is put in series before the MS detector.

b) Since most participants use GC-MS as the first choice technique for screening NPS, a uniform standardized method could be proposed, allowing the exchange of retention data for specific molecules. An 'internal' standard molecule could then be chosen to inject with all samples, allowing to work with relative retention times and correct any retention shifts due to minor technical differences (instrument, column age) and environmental influences.

Building a network and collaborating has once again proven to be a key tool to close the growing gap in knowledge about emerging NPS. Furthermore, repetition of proficiency testing, combined with research and purchases on both Clear and Deep web markets, will support laboratories in further tailoring their analysis, give the ability to continuously monitor the market, and remain ever vigilant towards the ever-increasing predominance of NPS.

Regarding **the standardization of data collection within civil society organizations:**

What lessons can be learned from monitoring NPS use via outreach projects (civil society organizations, CSOs)? First of all, we see that many CSOs are interested in monitoring NPS use in a standardized way, and most of them succeeded in collecting good-quality data. However, there is a huge difference in scale between projects. Some projects are small and have little resources, whereas others are better established and more equipped for data collection on substance use. In general, we learned that CSOs can reach out to people who use NPS. More specifically, we noticed that organizations that provide drug-checking services (DCS) seem to be able to reach out more profoundly to the target group and, in this way, are more able to gather relevant data on their substance use patterns. In return, they can provide the people who use NPS with harm-reduction information to help them minimize the risks related to their NPS consumption. This is an important strategy to help people who use drugs maintain 'integrated use' and prevent them from evolving into misuse and addiction.

3.5 Useful references and links

Balcaen, M.; Ventura, M.; Gil, C.; Luf, A.; Martins, D.; Cunha, M.; Tögel-Lins, K.; Wolf, D.; Blanckaert, P.; Deconinck, E. Challenges in Drug Surveillance: Strengthening the Analysis of New Psychoactive Substances by Harmonizing Drug Checking Services in Proficiency Testing. Int. J. Environ. Res. Public Health 2023, 20, 4628. https://doi.org/10.3390/ ijerph20054628

4 Belgian Early Warning System on Drugs (BEWSD)

4.1. Summary

To ensure close monitoring and timely response to new drugs or drug trends, each EU country has been tasked with establishing a national early warning system. For Belgium, this role is taken up by the Illicit Drugs Unit of Sciensano, which closely collaborates with a network of laboratory and health professionals. Data from their findings are shared (for laboratories mandatorily) and centralized by Sciensano, and any relevant findings are fed back to the relevant stakeholders. Historically, all findings were shared via mail, informatives, and alerts. A thorough self-assessment and review has highlighted the need to 1) not hide behind a computer but adopt an easy-to-reach attitude, 2) provide a return of investment for the data providers, and 3) listen to the needs of the partners in the network and adapt the best way of working accordingly. As a result, Sciensano has been working on changing how they work in the last two years, focusing on I) improving physical contact, II) reaching the target audience, III) sharing data willingly, and IV) combining data sources.

4.2 Introduction

In response to national and international repressive measures and demands by people who use drugs, new and often highly potent drugs are continuously appearing on the drug market. A European Early Warning System on Drugs has been created to follow up on the appearance of and harms associated with these new drugs, as well as on any changes that may occur for the "more traditional" drugs. The Belgian Early Warning System on Drugs (BEWSD), coordinated by Sciensano, forms the Belgian national pillar of this European system.

The BEWSD consists of a vast network that unites professionals working in the field of drugs in Belgium, including but not limited to toxicological laboratories (medical, forensic, or private), law enforcement agencies (police and border control), policymakers, university researchers, and harm reduction and prevention organizations (Figure 1). Information from each of these professionals is communicated to and analyzed by the BEWSD, which will determine the potential risk of an emerging drug/phenomenon and collaborate with the relevant professionals to take appropriate action.

Figure 1. Summary of the BEWSD network.

The requirement for laboratories to share their analytical findings with the BEWSD has been fixed in a Royal Decree, but a similar construct does not exist for the other partners in the network. Despite the legal obligation, experience shows that a willingness to participate in the network achieves more rapid, elaborate, and accurate data sharing. The effort expected from the other professionals needs to be matched with at least an equal effort by the coordinators. Currently, practices include ad hoc responses to questions from professionals within (and outside of) the network, sharing analytical libraries and other means to improve the detection of these new substances, and participation in focus and expert working groups to adapt current policy/legislation accordingly. However, the most essential action is the communication of any worrisome findings back to the network in the form of:

- Informatives: non-urgent communication about cases where a new drug or phenomenon has been identified but where no known intoxications or fatal overdoses exist,
- Alerts level 1: communication about Belgian cases with no known intoxications or fatal overdoses but that might cause social panic (e.g., media reports of a dangerous new drug),
- Alerts level 2: communication about Belgian cases with known intoxications but no fatal overdoses, holding a potential risk for public health and for people who use drugs in particular,

- Alerts level 3: Communication about Belgian cases with known intoxications and/or fatal overdoses that pose a clear risk to public health. If needed, level 3 alerts may be sent to the general population rather than the closed BEWSD network.

I. Physical contact

Communicating with large networks such as the BEWSD often relies on e-mail conversations. However, such practice can be a barrier to close collaboration and sharing findings/concerns as soon as possible – not infrequently when scientific confirmation is still pending. Active, in-person participation in meetings, symposia, and research days is strongly encouraged, with the networking opportunity outweighing the time invested in attending. Human interaction daily can be achieved by calling rather than mailing for quick, easy-to-answer questions. More in-depth inquiries or needs should still be communicated or followed up by e-mail conversations for traceability and future reference.

II. Reaching the audience

Infographics and visually pleasing formats are preferred over plain text to encourage interaction with informatives/alerts and retain key messages. Online graphic design software (such as Adobe, Canva, Snappa or Visme) provides an easy and time-efficient alternative. Additionally, the language used should be adapted to the target audience. In the case of the BEWSD, communication meant for the laboratory partners of the network can be written scientifically. However, more general communication means, e.g., police and prevention workers, need to avoid specialized terminology or assumptions on background knowledge. Similarly, any communication needs to be sent out in three languages: English, French, and Dutch.

III. Sharing data willingly

A willingness to share information and share it early requires a return of investment for the data submitters and a constant reminder of the relevance/usefulness of the submitted data. An active survey on the expectations from the BEWSD by the network partners has highlighted the need to share the available data openly. Other findings of the survey include 1) acting as a central point to connect different partners within the network, 2) sharing of information sources such as analytical library updates, interesting articles and legislative changes, 3) feeding back lessons learnt from international conferences and 4) assisting with analyses or inquiries where needed. To this end, a closed portal was created as the first and immediate source of information. Updates on information added are regularly shared in newsletters (Figure 2). Notably, the portal supports the network, not discouraging them from contacting the BEWSD for any questions. An easy-to-reach policy – whether in person, by (video)call, or by e-mail – needs to be adopted and actively communicated.

IV. Combination of data sources

Most target audiences are not interested in simply sharing raw collected data. Instead, a multilateral approach should be adopted to provide a better framing and a more holistic view of emerging drug trends. To this end, the BEWSD should not be seen as a project on its own but as an integrated part of a more significant national focal point focusing on every aspect of the national drug situation.

4.3 Recommendations

The above-described best practice is based on an intense series of meetings with as many partners from within the BEWSD network as possible. Their needs form the basis of building a large yet successfully working network. As such, the BEWSD recommendations are specific to the Belgian context but may be useful for other countries. The outcomes can be summarised as follows:

1) Do not hide behind a computer,
    a. Coordinators need to be easy to reach,
    b. In-person meetings are essential.
2) Provide a return on investment,
    a. Collaborate with partners on research projects and scientific publications,
    b. Provide feedback and insights from the collected data to those who submitted them.
3) Listen to your network's needs,
    a. Submitting all data might not be feasible or imply a too high workload. Solutions and semi-automation need to be kept in mind,
    b. Needs may change; thus, the protocol must be reviewed regularly.

It is important to stress that this is not a one-off assessment (as mentioned in Outcome 3b). The exercise needs to be repeated regularly to include the needs of new partners within the network and the updated needs of existing partners. Self-evaluation and continuous improvement—considering one's possibilities and limitations—are crucial. Best practices may change depending on national and international factors, as well as one's limitations, and a certain fluidity in the protocol may be beneficial.

4.4 Useful references and links

- Belgian Early Warning System on Drugs information

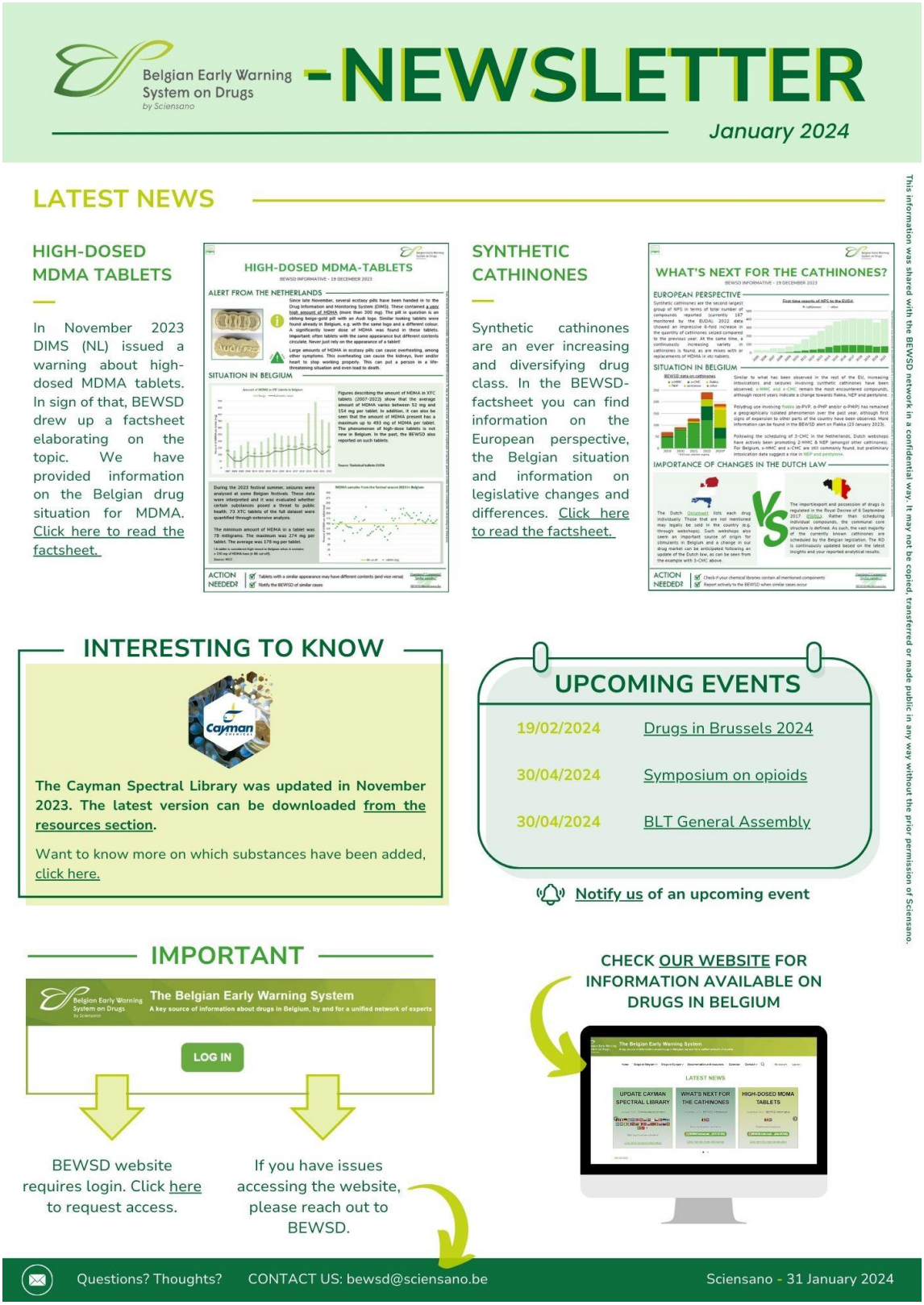


Figure 2. January 2024 newsletter as sent out to the BEWSD network.

5 RIDE Project – Portugal

5.1 Summary

The Kosmicare Association, in partnership with fifteen institutions, launched the RIDE project—Drug Information and Peer Education Network—in two neighborhoods at greater risk of social exclusion. The project aimed to develop various health promotion actions with people who use drugs and the local community. It took place in 2021 and 2022, during the COVID-19 pandemic, and one of the main activities was implementing a community drug-checking service, which made it possible to monitor the drug market and anticipate threats.

5.2 Introduction

The Kosmicare Association is an NGO based in Portugal. It was founded in 2016 and was born out of the Boom Festival, with the main objective of transforming nightlife culture in Portugal. Initially, Kosmicare worked at significant recreational events, but more recently, also in problematic drug use settings, in collaboration with outreach teams and other NGOs, with the aim of inspiring changes in drug policy and promoting the empowerment of people who use them, as well as their families and local communities. Recently, Kosmicare has been developing projects to empower people who use drugs and the community in which they live, thereby strengthening social cohesion.

During the COVID-19 pandemic, Kosmicare designed the RIDE project—Drug Information and Peer Education Network—to implement various health promotion activities with drug users and the local community in two low-income neighborhoods in Lisbon: Picheleira and Portugal Novo. The main objective of the Project was to reduce the social and health risks associated with the intersection between illicit drug use and COVID-19 among people who use drugs in vulnerable contexts.

To this end, Kosmicare invited 15 institutions with local intervention, such as NG0's working in treatment and drug prevention, health authorities (including ICAD), local councils, drug users' associations, peers, and residents' associations.

The intervention territories selected were areas of drug use in the open, where it is very complex to implement the recommendations for the prevention of COVID-19 and/or other infections. Thus, the emergence of the pandemic has increased the risks for people who move, live, or work in these areas, exacerbating pre-existing vulnerabilities. Through participatory strategies and community-based methodologies, such as peer education, health education, and risk reduction and harm minimization, the aim was to empower drug users, residents, and professionals working in the drug domain who intervene in these territories with knowledge and behavioral strategies to improve their health and living conditions and to strengthen the social cohesion of these communities.

The project is primarily based on a drug-checking service (mainly heroin and cocaine), which was the first in Portugal to target people who use drugs in a context of greater vulnerability. Since 2019, Kosmicare has had a drop-in service of drug checking for recreational users of MDMA, psychedelics, and other substances used in the nightlife setting.

5.3 Description of the best practice

To empower this vulnerable population to implement risk reduction strategies that promote their health and well-being, with a particular focus on the prevention of COVID-19 and other infections, as well as drug overdoses, the RIDE project identified five main objectives:

1. to promote the adoption of preventive behaviors against the transmission of SARS-COV-2 among 40% of people who use drugs who come into contact with the project;

2. to promote the adoption of risk reduction and harm minimization strategies for the use of psychoactive substances among 50% of the population contacted;
3. to increase by 90% the knowledge of addictive behaviors among professionals working in the area of intervention strategies for drug use in a pandemic context;
4. to increase the level of mutual trust between different members of the local community by 30%;
5. to promote training actions among 40% of the people who use drugs contacted.

To achieve these objectives, six main activities have been defined, aimed at adults aged between 25 and 64, especially women and migrants living in these two Lisbon neighborhoods:

1. the implementation of a peer education program;
2. mentoring and accompanying the peer educator hired by the project;
3. implementation of a community psychoactive substance analysis service, including high-precision laboratory analysis in partnership with a university forensic laboratory;
4. training sessions for professionals in the field of addictive behavior;
5. awareness-raising activities for the local community;
6. production of information materials.

The Ride project analyzed 147 drug samples and trained 40 peers and 95 drug prevention workers. More than 200 drug users were in contact with the project, and 35 residents were involved.

5.4 Challenges and recommendations

The RIDE project was funded under the Recovery and Resilience Plan (PRR), a European-funded, nationally implemented program until 2026. It aims to implement a series of reforms and investments to restore sustainable economic growth after the pandemic, reinforcing the goal of convergence with Europe over the next decade.

The projects funded by the Recovery and Resilience Plan are, therefore, by definition, not continuous but punctual and temporary. One of the challenges of the RIDE project was to achieve results in a short time (less than two years) and not be able to continue in the same way. Although it is considered a beneficial project with good results, it has not yet been possible to find alternative sources of funding that would allow it to continue or to set up a similar project.

It would be essential to extend or at least ensure the continuity of, the response provided by the RIDE project, which for the first time made it possible to implement a drug testing service among vulnerable populations, to promote safer drug use, and to promote more and better risk reduction and harm minimization strategies, but also to improve knowledge and monitoring of drug markets, particularly given the threat of the emergence of fentanyl or crack cocaine adulteration.

5.5 References and useful links

DICAD LVT (2022). *Relatório de atualização do Diagnóstico do Território "Concelho de Lisboa". RRMD e Tratamento, 2022*. Lisbon: ARS LVT. https://www.sicad.pt/BK/Concursos_v2/Documents/2022/Diagn%C3%B3sticos/Revis%C3%A3o_Diagnostico_ConcelhoLisboa.pdf.

https://jornal.bairrossaudaveis.gov.pt/projetos/335/index.htm


EDUCAÇÃO DE PARES
KOSMICARE
PROJETO RIDE


DRUG CHECKING
KOSMICARE
KOSMICARE
PROJETO RIDE

SERVIÇO DRUG CHECKING MÓVEL

SEGUNDAS-FEIRAS

R. ROBALO GOUVEIA
OLAIAS
13H30 ÀS 15H00

CASAL DO PINTO
PICHELEIRA
17H00 ÀS 19H00

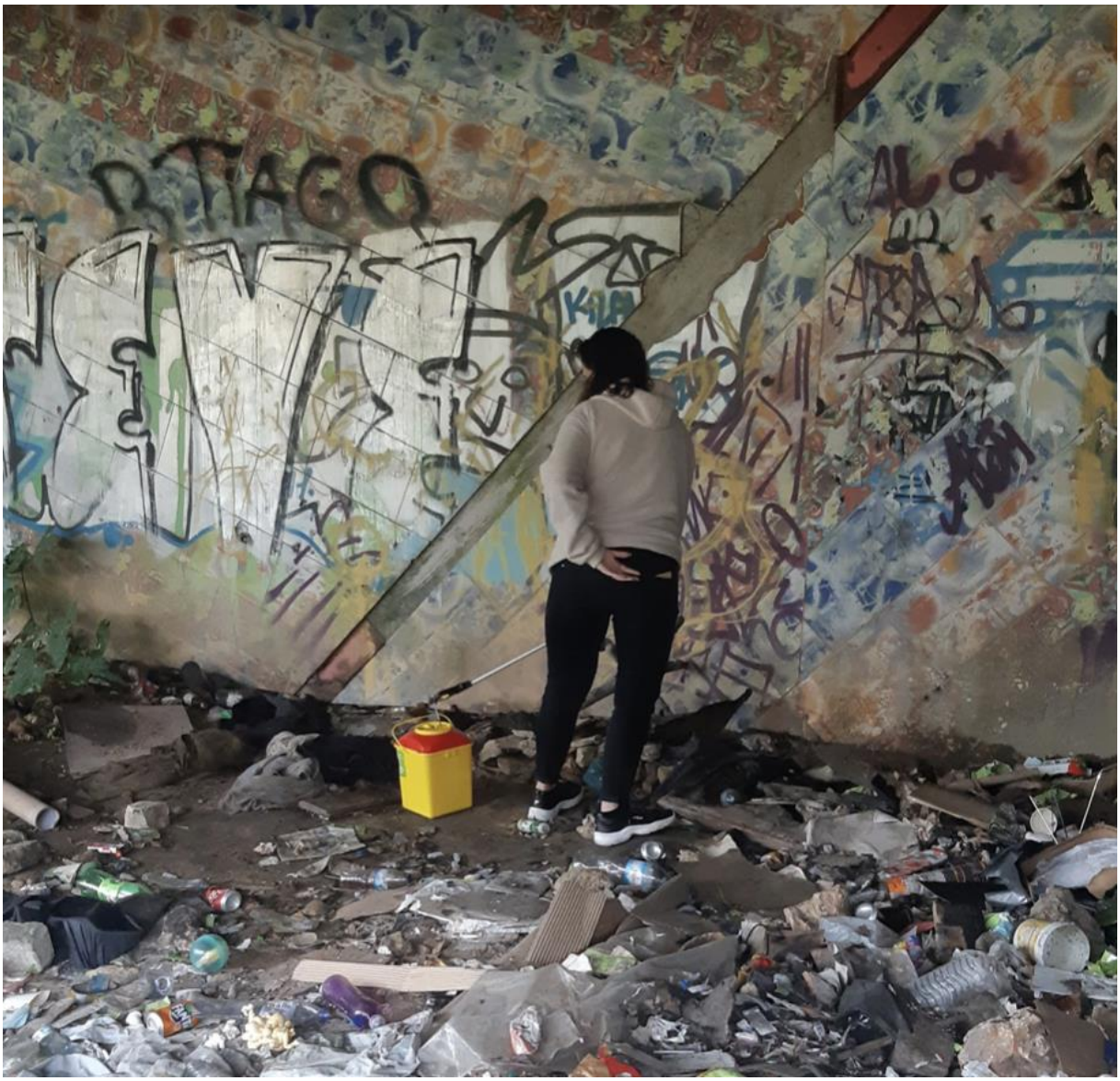
KOSMICARE

RIDE

REDE DE INFORMAÇÃO
SOBRE DROGAS E
EDUCAÇÃO DE PARES

SERVIÇO DE DRUG CHECKING MÓVEL

MARÇO E ABRIL, 2022


BATAGO

6 COSMICARE DRUG CHECKING- PORTUGAL

6.1 Summary

Kosmicare offers a free drug-checking service (chemical analysis of psychoactive drugs) in Lisbon. This type of service has proven to be effective in preventing the risks associated with drug use and simultaneously in monitoring drug markets, including the identification of new threats and emerging phenomena. Kosmicare is a key ICAD partner in the National Early Warning Network and provides important data on what is being used in recreational settings in Lisbon. This harm-reduction initiative has been growing since the end of 2019 and needs to be further expanded to reach new types of users, settings, and substances.

6.2 Introduction

Kosmicare Association is an NGO based in Portugal founded in 2016 and born out of the Boom Festival with the main aim of transforming nightlife culture in Portugal through psychedelic harm reduction, outreach work, drug checking, information, training, and exchange of good practices. Initially, Kosmicare worked mainly at significant recreational events (such as trance parties and music festivals), but more recently, also in problematic drug use settings, such as safe consumption rooms, in collaboration with outreach teams and other NGOs.

Since its beginning, the Kosmicare approach has been centered on three fundamental elements, which are all interconnected: research, community intervention, and advocacy for the adoption of more holistic, fair, and inclusive policies and attitudes toward drug use.

Following the pill testing experience at Boom Festival, Kosmicare opened a drug-checking facility in Lisbon in October 2019, running a free and anonymous drop-in service where users can test their substances every week.

The opening of this open-door drug-checking service was made possible not only by public funding (ICAD) and support (Lisbon Council) but also because drug use is decriminalized in Portugal, and there is a legal framework for this type of harm reduction initiative. This means that Kosmicare runs a facility by the law in coordination with the health and law enforcement authorities. For this reason, users know that they will not get in trouble with the law for testing their drugs, and the same goes for Kosmicare staff.

6.3 Description of the best practice

Kosmicare drop-in center is located in a residential area in the center of Lisbon (Penha de França) and is open on Tuesdays and Wednesdays between 4 pm and 9 pm. During this time, anyone can come and leave a small amount of their drugs (20-30 mg, a drop, or ¼ blotter) for chemical testing, free of charge and anonymously. The results of the different substances present in the drug sample are sent by phone, WhatsApp, Signal, or Telegram the following Friday so that users know exactly what they are planning to use over the weekend.

In addition to drug checking, users can ask for expert advice, as one of the aims of the facility is to contribute to more responsible and less risky drug use. At the facility, Kosmicare can provide materials with information about drugs and harm reduction, as well as snorting kits, earplugs, water sprinklers, and condoms. Recently, Kosmicare provided an online psychological support and harm reduction counseling program (available in Portuguese, Spanish, and English) run by a psychologist and two psychiatrists. With this type of psychological support, Kosmicare aims to create a safe, non-judgmental space where people can have honest conversations about drugs.

From a public health point of view, Kosmicare's drop-in service is an important tool for drug monitoring in Portugal, even if it reaches a niche of users—mainly well-informed recreational users. From 2021, whenever the staff detects new or unusual substances during chemical analyses, the sample will be sent to a better-equipped forensic laboratory at Egas Moniz University, with which Kosmicare has a partnership.

Kosmicare publishes data on the most commonly tested substances and their chemical composition and concentration every three months, and a more comprehensive annual report is sent to ICAD. According to Kosmicare data, MDMA is the main tested substance, followed by cocaine and LSD. Most MDMA samples are what the user expects, while cocaine and amphetamine samples are usually adulterated, sometimes mixed with dangerous substances. In these cases, Komicare sends an alert to ICAD and other partners and disseminates the information through its social media channels. For example, the most recent alert warns the public about pink pills sold as MDMA, which only contain 3-MMC, a synthetic cathinone with stimulant effects. Kosmicare tests the drugs not only for their chemical composition but also for their concentration, which is also an essential factor in monitoring. The main conclusion is that the average dose of MDMA per pill tested (189mg) has increased in recent years and is currently well above the recommended dose per occasion of use (125 mg).

With this drop-in service, Kosmicare plays an essential role in detecting drug threats, such as identifying new substances appearing on the Portuguese market, dangerous mixtures, or adulterations. The introduction of fentanyl into the Portuguese drug market is an issue that deserves the most attention. However, for the time being, no real threat has been identified by drug checking.

In addition to its contribution to the monitoring of the Portuguese drug market, the Kosmicare drop-in service helps to reduce harm and promote safer patterns of drug use, as most users give up using the drugs that are found to be adulterated or do not correspond to what the users were expecting.

6.4 Challenges and recommendations

Although Kosmicare has done pioneering and very important work in the Portuguese drug field, its drug-checking service has limitations, gaps, and areas to be improved or overcome:

- Kosmicare drug-checking users are mainly well-integrated middle-class young male adults (25-35 years old) with high academic qualifications. This population of recreational users tends to be relatively socially and economically privileged and finds it easy to manage their drug use in a less harmful way. The challenge is, therefore, how to reach a more diverse profile of drug users, including vulnerable, high-risk, and less informed users.
- Some substances still cannot be tested at the Kosmicare drop-in center, including cannabis, which is by far the most commonly used drug in Portugal, but also magic mushrooms, ayahuasca, and diluted samples (mixed with water or edibles). At the end of 2021, Kosmicare launched a crowdfunding campaign to raise funds to invest in cannabinoid analysis equipment to improve its drug-checking service.
- The service is aimed at recreational users, so the test results are sent weekly on Friday, excluding drug use that may occur during the week.
- Kosmicare drug checking alerts and reports are disseminated through Kosmicare's social media channels, but it should be possible to access them in PDF format via the Kosmicare website. Creating such an archive would be very useful for users and healthcare professionals.
- This drop-in facility is only possible because of the public funding Kosmicare receives from ICAD. However, economic resources are always scarce, and this is demonstrated by the fact that this NGO regularly asks for donations from anyone interested in supporting its work.

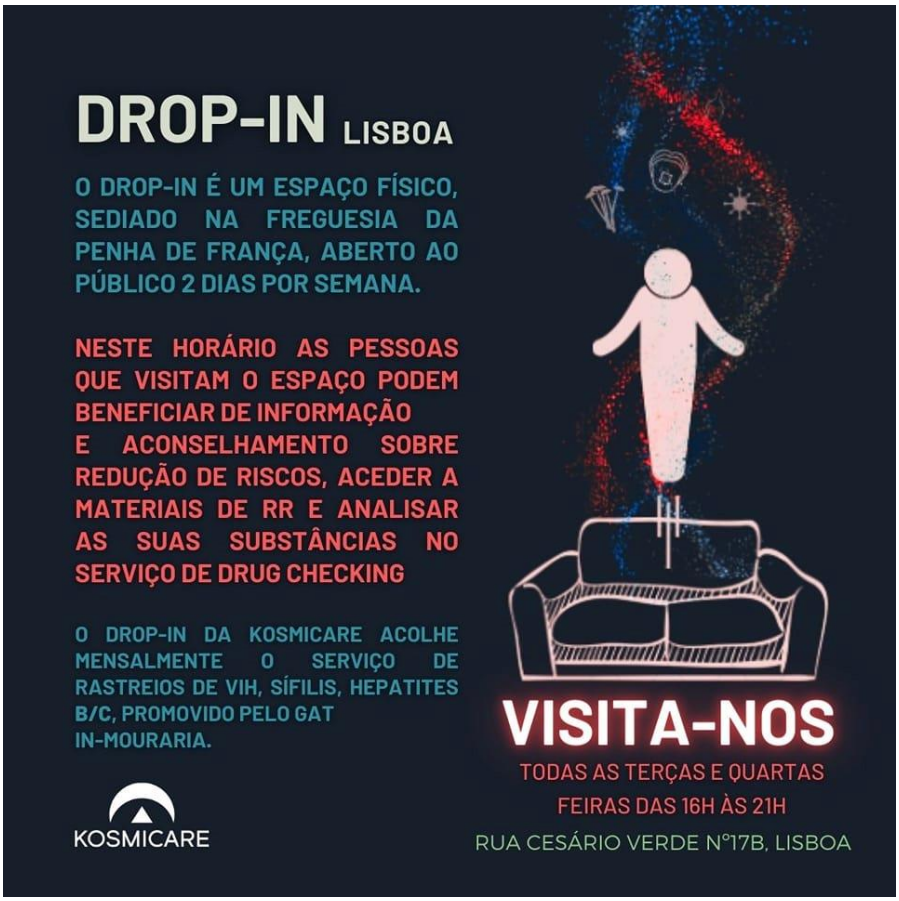
With its drop-in service, Kosmicare has played an important role in proving that drug checking is an effective harm reduction tool. Although Kosmicare has few resources and its services are limited in time (weekly based) and space (only in Lisbon), it plays a crucial role in the National Early Warning Network. Its data are beneficial for ICAD's monitoring of the Portuguese illicit drug market. It would be beneficial for all if Kosmicare could extend its drop-in service to other populations and settings, thereby improving its potential to identify drug-related threats.

6.5 References and useful links

Soares, M. et al. (2017). Tackling harm reduction, human rights and drug uses on recreational environments: Tensions, potentialities and learnings from the Kosmicare Project (Portugal). *Revista Crítica de Ciências Sociais*, 122: 3-24. https://journals.openedition.org/rccs/6535

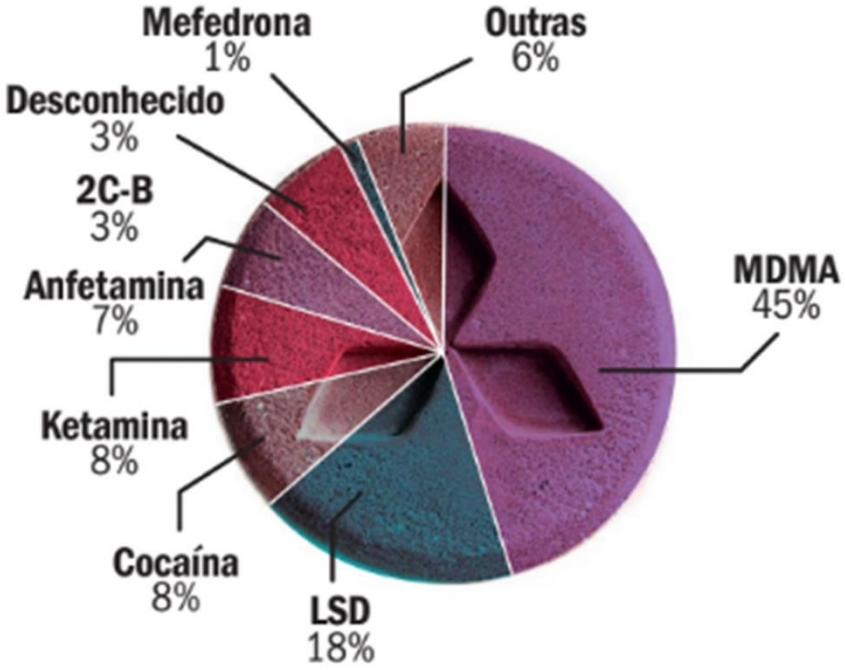
https://issuu.com/nmandeiro/docs/kc_report_2021_pt

https://www.kosmicare.org/checking/


DROP-IN LISBOA
O DROP-IN É UM ESPAÇO FÍSICO, SEDIADO NA FREGUESIA DA PENHA DE FRANÇA, ABERTO AO PÚBLICO 2 DIAS POR SEMANA.
NESTE HORÁRIO AS PESSOAS QUE VISITAM O ESPAÇO PODEM BENEFICIAR DE INFORMAÇÃO E ACONSELHAMENTO SOBRE REDUÇÃO DE RISCOS, ACEDER A MATERIAIS DE RR E ANALISAR AS SUAS SUBSTÂNCIAS NO SERVIÇO DE DRUG CHECKING
O DROP-IN DA KOSMICARE ACOLHE MENSALMENTE O SERVIÇO DE RASTREIOS DE VIH, SÍFILIS, HEPATITES B/C, PROMOVIDO PELO GAT IN-MOURARIA.
KOSMICARE
VISITA-NOS
TODAS AS TERÇAS E QUARTAS FEIRAS DAS 16H ÀS 21H
RUA CESÁRIO VERDE Nº17B, LISBOA


ALERTA
LISBOA, FEVEREIRO 2024
Pastilha vendida como MDMA (ecstasy)
Contém apenas 3-MMC
3-metilmetcatinona
KOSMICARE
Nos últimos meses testámos 6 pastilhas "Bitcoin" cor-de-rosa com a forma de pentágono. Todas as pastilhas foram vendidas como MDMA (ecstasy)
O resultado foi sempre 3-MMC
O 3-MMC é uma substância estimulante com efeitos e riscos diferentes do MDMA
CONTUDO, o logo, a forma ou a cor da pastilha não querem dizer nada
TESTA AS TUAS DROGAS NA KOSMICARE
www.kosmicare.org
KOSMICARE

AS DROGAS QUE CHEGAM AO LABORATÓRIO DA KOSMICARE



DRUG CHECKING

PRINCIPAIS RESULTADOS

SERVIÇO DRUG CHECKING FIXO

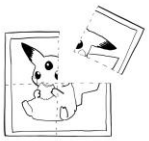
JULHO A SETEMBRO 2023
LISBOA

259 AMOSTRAS ANALISADAS

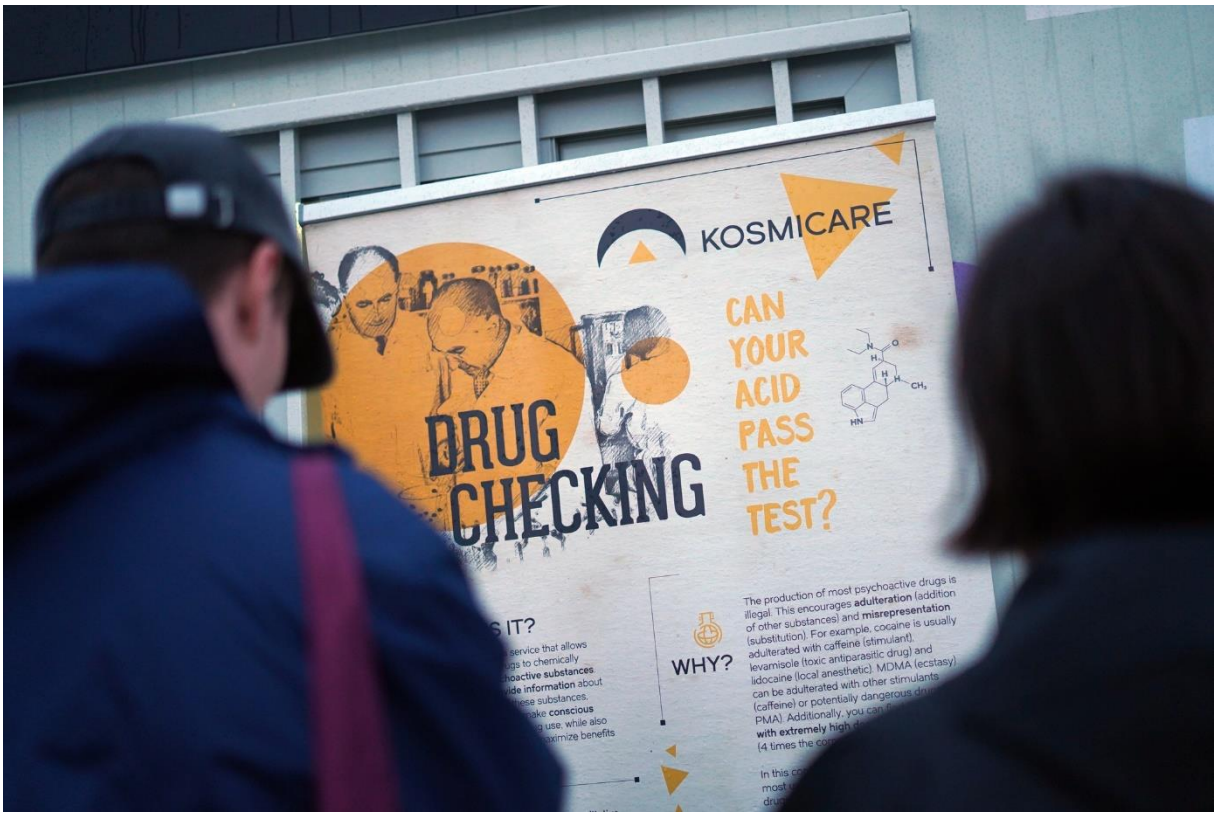
KOSMICARE

46 AMOSTRAS ANALISADAS

28 MDMA
7 LSD
3 2C-B
3 COCAÍNA
2 KETAMINA
1 DMT
1 ANFETAMINA



KOSMICARE



7 The Community-Based Neighbourhood Work - Finland

7.1 Summary

The neighborhood work aims to ensure that the environment will remain comfortable and safe for everyone, including people who use drugs. More broadly, it refers to measures and methods by which, for example, substance use and low threshold services, harm reduction-based health services and day centers, and housing units working on the Housing First principle are integrated into the residential area. One important aim is that the negative stigma on people and people who use drugs and their services will be reduced. According to different studies, negative attitudes and disrespect towards people who use drugs affect their well-being and their position in society and weaken their willingness to seek help in time. Therefore, methods of reducing stigma are also important in terms of preventing drug-related harms.

7.2 Introduction

The background and need for community-based neighborhood work

The so-called 'open drug scenes,' i.e., public places where drugs are sold and used openly, have posed significant challenges for years in terms of city image and order control for decades in some European cities. The closest example of an open drug scene can be found in Oslo (Olsen, 2017), but, for example, in Helsinki, such places can be found at least on a small scale, e.g., in the vicinity of metro stations.

The problem of open drug use has typically been addressed through increased police supervision or, in some European cities, by setting up Drug Consumption Rooms (DCRs). DCRs can be one crucial tool for reducing the harm caused by drug use in local communities. However, one of the significant challenges is that residents do not often accept those facilities in their area. Another barrier is that DCRs are not

currently allowed due to legislation in many countries, including Finland. Therefore, there is an urgent need to create and strengthen community involvement in addressing this issue.

An effective communication and coordination system is needed to manage problems related to open drug scenes. This includes professionals, residents, and people who use drugs. Entrepreneurs, NGO workers, and authorities should also be involved. As traditional police strategies have proven insufficient, solutions can be found through combinations of harm-reducing and prevention measures (Olsen, 2017; Waal et al., 2014).

Over the past ten years, there has been an increase in drug use and related harms in Finland. Drug use may be visible in urban spaces as the illicit sales and use of drugs are visible and may cause harm and side effects, such as public disturbances, littering, and unpleasant or messy environments.

Near housing (especially Housing First units) and substance use services or low-threshold services, a gathering of people who use drugs may increase various side effects and harms in the neighborhood. For example, residents often feel unsafe in places where people who use drugs gather and spend their time. In addition, residents may feel concerned, opposed, and fearful of services aimed at people who use drugs and the establishment of new services for them. Therefore, it is essential to listen and respond to the concerns of everyone involved in the neighborhood and region.

To minimize the side effects and harms caused by substance use and safety concerns experienced by residents, active multi-actor cooperation with the police, community outreach work, substance use services, housing service providers, people who use services, and the entire neighborhood is needed. This collaboration is referred to as community-based neighborhood work.

Finland has extensive experience solving the challenges and safety concerns associated with setting up housing services for people using substances, as well as the media attention they receive. Working actively in the neighborhood can help meet these challenges. The work should start before the service opens and continue throughout the operation to keep the environment safe and comfortable. (Viskari et al., 2016.)

7.3 Description of the best practice

The goal of neighborhood work is to ensure that:

- the environment will remain comfortable and safe for everyone.
- the negative stigma (negative attitudes and prejudices) on people who use drugs and their services will be reduced.
- people will accept people who use drugs and persons in recovery as well as their services in their neighborhoods and areas.
- people who use drugs feel like a part of the community and neighborhood.

How is neighborhood work conducted?

Neighborhood work focuses on practical solutions and is always built on local needs. Systematic and regular neighborhood work should be integrated into certain services as a regular approach. These services include, in particular, housing services (housing first units and services for homeless people), opioid agonist treatment services, health counseling for people who use drugs, and other low-threshold services, such as day centers and, in the future, also supervised injection sites.

Methods

Responding to feedback

Substance use and housing service providers should create a feedback channel for residents and provide information about this in the neighborhood. Potential feedback channels could include a contact form on the service provider's website, a telephone number, an email, or a WhatsApp number.

Neighbourhood walks

Service workers regularly conduct outreach in areas where substance abuse-related harm occurs, including streets, parks, and other public spaces. The work includes encounters with neighbors, responding to neighbors' concerns, and preventing potential problems and conflicts, such as guiding people who use drugs to consider others. In addition, a mediating approach is used to intervene in disturbing behavior and problems.

For example, the workers clean up drug paraphernalia and other litter from the environment. However, the work goes beyond collecting litter; it aims to be visible and available, respond to neighbors' concerns, answer their questions, intervene in public disturbances, and prevent conflict through neighborhood presence.

"Removing people who use drugs from the area and sending them elsewhere does not help the overall situation. Extensive cooperation between different actors is needed. These people should have a place to get help for their circumstances. The best way to find solutions is to collaborate with them." - Finnish Police officer.

7.4 Challenges

One of the challenges is how various stakeholders and neighbors can be willing and committed to collaborating to achieve a shared goal. This challenge can be tackled by organizing collaborative events and discussion sessions about stigma and its impacts. The local police is one of the critical actors in this topic.

7.5 Recommendations

Neighborhood-based work and cooperation with residents and the police should be increased.

It is crucial for areas and municipalities to adopt a working model permanently in areas where public drug use and related harms are prevalent. This will provide a much-needed solution to curb the problem and ensure all communities remain safe and secure.

7.6 Useful links

Bancroft M, Houborg E. (2020). Managing Coexistence: Resident Experiences of the Open Drug Scene and Drug Consumption Rooms in Inner Vesterbro, Copenhagen. https://doi.org/10.1177/0091450920912495

Zurhold, H., Degkwitz, P., Verthein, U., Haasen, C. (2003).

Debeck K, Wood E, Qi J, Fu E, McArthur D, Montaner J, Kerr T. Socializing in an open drug scene: the relationship between access to private space and drug-related street disorder. Drug Alcohol Depend. 2012 Jan 1;120(1-3):28-34. doi: 10.1016/j.drugalcdep.2011.06.015. Epub 2011 Jul 18. PMID: 21764528; PMCID: PMC3202661.

Drug consumption rooms in Hamburg, Germany: Evaluation of the effects on harm reduction and the reduction of public nuisance. Journal of Drug Issues, 663–688.

Knight R, Fast D, DeBeck K, Shoveller J, Small W. "Getting out of downtown": a longitudinal study of how street-entrenched youth attempt to exit an inner city drug scene. BMC Public Health. 2017 May 2;17(1):376. doi: 10.1186/s12889-017-4313-9. PMID: 28464942; PMCID: PMC5414159.

SOLIDIFY - Reinforcing Harm Reduction Strategies at the Local Level – The Role of SDCF

https://issuu.com/efus/docs/english_version

8 The cooperation between the Police, the Customs, and the Finnish Border Guard (BCP-COOPERATION)- FINLAND

8.1 Summary

In Finland, PCB cooperation between the Police, Customs, and the Finnish Border Guard aims to address cross-border and organized crime. The duties of the Customs and Border Guard are related to so-called customs crimes and, in the case of the Border Guard, to people crossing the border, and the Police have the opportunity to combat all crimes in general. Cooperation promotes safety flexibly, quickly, and effectively.

PCB cooperation effectively coordinates the activities of the authorities concerned. The cooperation is based on a shared view of situations and an analysis-based assessment of changes in the operating environment. The 2020–2023 strategy highlights the fight against cybercrime and disrupting the activities of international criminal groups seeking to enter Finland.

Cooperation ensures, for example, that all actors have a common real-time picture of the situation based on analyzed data. The PCB authorities are stronger together than they are individually. Good cooperation has evolved into a nationally and internationally respected collaboration. (Finnish Customs 2021.)

Cooperation also helps to react quickly to new phenomena. The changed operating environment and, for example, technological developments have brought new forms of cross-border crime and pose new challenges to authorities. The authorities' ability to respond to these challenges is critical in changing operational environments.

" *The common goal of the PTR authorities is to promote security in a flexible, rapid, and effective manner and to help to make Finland the safest country in the world.*" (Finnish Boarder Guard 2020)

8.2 Introduction

The cooperation between the PCB authorities is based on a shared and proactive view of the operating environment, daily exchange of information, and consideration of each party's strengths. The goal of the PTR strategy is to steer the cooperation between the PCB authorities in a targeted and mutually agreed direction and to provide a basis for measuring the effectiveness of the collaboration. The PTR authorities' operating environment has undergone significant changes in recent years, and this is likely to continue in the future. (The Police, Customs and Finnish Border Guard PTR strategy 2020-2023.)

Megatrends affecting the operating environment include urbanization, an aging population, the climate crisis, and rapid technological development. Working flexibly, fast, and efficiently together can increase safety as the operating environment changes.

Cooperation in combating crime seeks to combine and benefit from the opportunities created by modern technology. (The Police, Customs and Finnish Border Guard PTR strategy 2020-2023.)

”Intense PCB cooperation is a Finnish curiosity, but an excellent one. Our authorities have continuously renewed their cooperation according to the needs of each time period. Finland’s security environment is currently changing. However, PCB cooperation has been modified to respond to new demands. Our PCB framework is in good form for the implementation of the Government Programme.” *- Lieutenant General Pasi Kostamovaara, Chief of the Finnish Border Guard* (Finnish Boarder Guard 2023.)

8.3 Description of the best practice

The cooperation between the authorities responsible for the Finnish Border Guard, Finnish Customs, and Finnish Police is based on a shared and proactive view of the operating environment. They exchange information daily and consider each party's strengths. The PCB strategy aims to steer the cooperation between the PTR authorities in a targeted and mutually agreed-upon direction and provide a basis for measuring its effectiveness (Viskari & Tammi, 2021).

The main duties of the Border Guard are to control Finland's external land and sea borders, prevent cross-border crime, and ensure security in territorial waters. ("Finland | Europol") Cross-border crime prevention includes trafficking in persons and facilitation of unauthorized entry. The Border Guard performs pre-trial investigations independently or in cooperation with the Police or Customs. Information regarding organized crime is submitted to the National Bureau of Investigation, the Finnish national unit for Europol (Europol, 2022).

The Customs in Finland have the competence to expose and investigate cross-border crime and to submit the offenses to prosecutors for consideration after the investigation. Their competence in preventing, detecting, and investigating crimes (including serious crime) is limited to offenses connected to the Customs general control and fiscal competence, which otherwise involve the cross-border movement of goods. These are often drug crimes, smuggling cases, tax frauds, and offenses against intellectual property rights. Investigation methods are similar to those of the Police. All national coercive measures and preliminary investigation provisions apply equally to the Finnish Customs (excluding undercover operations) (Europol, 2022.).

The Finnish Police's responsibilities are not directly related to cross-border crimes. However, they have a vital role in maintaining public order and safety. Their duties include preventing and investigating all types of crime, maintaining public order, and ensuring road safety. The police also assist other authorities when necessary (Europol, 2022).

8.4 Challenges

The PTR authorities' operating environment has undergone significant changes in recent years and is likely to continue in the future. Megatrends affecting the operating environment include urbanization, an aging population, the climate crisis, and rapid technological development. Working flexibly, fast, and efficiently together can increase safety as the operating environment changes. (Police of Finland 2020.)

Challenges:

- Increases in drug seizures in Europe
- Drug trafficking and organized crime are expected to grow
- New technological developments pose new challenges
- Impacts of Russia's war in Ukraine
- Criminal organizations are drawn to the synthetic opioid and other synthetic drug trade by the potential for significant profits
- The operating environment has significantly changed in recent years, which will likely continue.

8.5 Recommendations

- Law enforcement should prioritize reducing the supply of drugs by disrupting drug trafficking and implementing trade controls, as well as by enhancing surveillance against drug trafficking.

- It is essential to Invest more in inter-institutional cooperation and form multidisciplinary teams to detect, investigate, and prosecute drug-related crimes.
- Law enforcement should also collaborate with relevant parties, such as post and courier services, mobile service providers, payment providers, and technology companies.
- With the increasing prevalence of drug trade online, Finland should develop substance use prevention and monitoring measures that are carried out on the internet, particularly on social media. It is crucial to stay informed about what is happening online.
- Furthermore, moving more crime prevention measures online is essential, which will require additional resources.

8.6 References and useful links

https://www.europol.europa.eu/partners-collaboration/member-states/finland

https://poliisi.fi/en/-/pcb-cooperation-between-the-police-customs-and-border-guard-is-a-key-element-in-the-combat-against-cross-border-crime

https://raja.fi/en/-/pcb-cooperation-between-the-police-customs-and-border-guard-is-a-key-element-in-the-combat-against-cross-border-crime

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