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# **COMPARATIVE ANALYSIS OF RESEARCH INTO ILLICIT DRUGS ACROSS EUROPE**

Full report





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# Executive summary

## SCOPE AND OBJECTIVES OF THE STUDY

The study presented in this report forms part of the ERA-NET (European Area Network) cooperation project on Illicit Drugs (ERANID) funded by the European Union under the 7th Framework Programme. It consisted in mapping and analysing the situation of the drug-related research in the six ERANID participating countries (Belgium, France, Italy, The Netherlands, Portugal, and United-Kingdom) and at the European Commission (EC) level over the period 2010-2013. The study pursued the following objectives:

1. To map and analyse the drug related research strategies, plans and funding programmes at national and EC level
2. To provide a comparative analysis of recent research projects (2010-2013) carried out at national and EC level
3. To emphasize major strengths or weaknesses of drug-related research in the participating countries and at the EC level with a special focus on human and social sciences.

## METHODOLOGY

An online survey was carried out between June and September 2013 within the six ERANID participating countries. Three distinct questionnaires were developed in order to collect the information sought. The first one focussed on drug-related research policy frameworks and was directed towards the national policy makers. A second questionnaire was dedicated to drug-related research funding schemes and was addressed to national funders. The last questionnaire targeted research organisations, teams and researchers identified by the national partners of ERANID. This questionnaire aimed to gather information about the main features of the projects funded over the period 2010-2013.

Data collected through the online survey have been complemented with documentary research and additional investigations on relevant websites. The EC data were collected on the basis of documentary research, contacts with Directorate Generals' (DG) officers involved in the EC funding programmes and the consultation of relevant websites (CORDIS, REA, EAHC, EMCDDA, websites of the EC funded projects identified....).

Major results<sup>1</sup> of the comparative analysis are as follows:

### **Drug research strategies and plans**

Beyond national differences and specific features, considerable progress has been achieved since the 1990's and drug-related research is a shared concern taken into consideration in the policy documents at national and European level. However, with the notable exception of England and to some extent Wales, drug research is not covered by a specific national strategy. Even if the process is underway at the EU level, there is no formal priority setting mechanisms across the countries. Besides, with few exceptions, the elements dealing with research in the policy documents are not presented explicitly under the heading of "research" which prevents from highlighting clearly what should be a research priority. Also, except in the EU drug strategies, the generic priorities for research are rarely translated into formalised actions.

### **Funding mechanisms**

In recent years, substantial budget resources have been earmarked towards financing research in the drug field by the EC and new mechanisms of funding have been created in some countries to step up drug research. Unfortunately, these steps forward for the development of drug research coexisted with the economic crisis which impacted significantly the available budgets and contributed to the vulnerability of many research teams or institutes involved in the drug field.

### **Research activities: Areas**

Trends in illicit drug research drawn from the 383 projects analysed in the study show the central place of the epidemiology of drug use, the consequences of use and the responses to the phenomenon. Compared with previous mapping of drug-related research, these areas are still being extensively studied. Besides, it appears that the spectrum of areas addressed by researchers was expanded even if substantial differences exist among the considered countries. More attention is paid to the determinants and mechanisms of drug use, even

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1. This executive summary focuses on the outputs of the comparative analysis but national country reports are developed in dedicated chapters of the report.

if it should be noticed that the focus is on risk factors, biological factors and individual susceptibilities. The role of social factors is little explored. A closer look at the responses to the phenomenon shows that research in this area is very unbalanced. Treatment responses are still largely covered, prevention research comes second and efforts in considering and addressing other policy responses are problematic. Harm reduction responses are little addressed and law enforcement is hardly considered. Besides, although implementation of good practices and evaluation of drug policy are stressed as being of prime importance at national and EC level, evaluation studies on policy responses are practically non-existent. Eventually, very few projects address drug supply issues.

### **Research activities: Disciplines**

Scientific disciplines are not equally represented. Epidemiology and neurosciences prevail over social sciences and some disciplines such as Economy, Criminology, Geopolitics, Legal sciences and Political sciences are lacking.

The under-utilisation of social sciences compared with medical sciences prevents from providing crucial findings regarding supply and market issues as well as policy evaluation for instance. Anthropology and History are also hardly mobilised although these disciplines would be of great help to understand evolutions in patterns of use and give a better insight of the process involved in building responses to the phenomenon by all stakeholders (from policy makers, to health professionals and law enforcement services).

### **Research activities: Other features**

The vast majority of projects deals with several substances or focuses on "addiction" without specifying one substance in particular. This emphasizes that most of the researchers have adopted a conceptualisation of drug issues which encompasses all the substances or that they pay attention to the major trend in the patterns of use namely the poly-drug use.

An important number of projects are multidisciplinary which is consistent with the needs emphasized in policy documents. However, there are few interactions and exchanges between social sciences and medical sciences.

Progress has been made regarding the need for cross national studies since the 1990's particularly through the involvement of the countries in EC funded projects. It is worth noticing that the countries involved in ERANID are leader or partners in some or many current EC funded projects. However, research activity is still mainly done at national level and there is plenty of room to improve cross-national partnership. The implementation of comparative studies in particular remains a gap to address.

## LIMITATIONS

Data collection aimed at being as comprehensive as possible but such a stock-taking exercise faced the following difficulties:

As in all similar studies, this one faced the difficulty to reach a portion of relevant respondents or to encourage them to participate. In order to reduce this inherent limitation in surveys, data were also collated through relevant website (universities, funding agencies, research organisations...) but portion of research projects have been missed. Nonetheless, having previous mapping on European research in mind, we believe that we have captured data which provide a reasonable picture of recent and current research activities in the countries considered and at EC level.

A portion of drug-related research projects are funded outside grant programmes or calls fully dedicated to drug research. These various funding streams which include one-time budget are difficult to identify or to trace back. Also, we couldn't provide a detailed overview of the informal mechanisms used to fund the identified research projects.

## GENERAL CONCLUSIONS

In order to promote illicit drug research at national and EC level the following challenges need to be addressed:

### Drug-related research policy and funding

- Developing formal priority setting mechanisms and strategic guidance for drug research at national and EC level consistent with drug research outcomes and changing drug trends;
- Including a wide range of stakeholders and being inclusive when drawing up research priorities/ strategies so that ownership is wide enough to withstand changes in Government;
- Drawing up the priorities beyond the sole needs of policy makers and a short-term focus;
- Promoting the sustainability of drug research resources through the development of long-term funding programmes at national and EC level.

### Research capacities

- Increasing the pool of social sciences experts on drug issues at national and European level (ad hoc training and research grants);
- Promoting a pool of high quality researchers:
  - ✓ Ensuring long-term funding to the teams and institutes devoted to drug research,
  - ✓ Attracting advanced social scientists and encouraging training of young researchers in the field (regular doctoral scholarships, inclusion of the theme of addiction in higher education).
- Promoting the development of networks of drug researchers across the disciplines;
- Implementing monitoring processes to facilitate the accessibility and visibility of research findings.

### Research activities

- Promoting visibility and dissemination of social sciences literature in the drug field;
- Promoting the development of qualitative data and empowering the attention given to the specific findings of qualitative studies;
- Promoting extensive literature reviews demonstrating the added value of recent drug research projects and underlining potential waste that could be avoided (identifying unnecessary or poorly designed studies for example);
- Providing strong support for the development of research in the fields of drug supply and drug policies (particularly the evaluation of prevention and law enforcement interventions);
- Expanding research activities and knowledge in the following fields: social determinants of drug use, further work on reviewing and assessing drug harms (including NPS but not exclusively), prevalence and patterns of NPS' use;
- Developing inter-disciplinary studies combining social sciences and medical sciences.



# Introduction

## SCOPE AND OBJECTIVES OF THE STUDY

The work described in this report forms part of the ERA-NET (European Area Network) cooperation project on Illicit Drugs (ERANID) funded by the European Union under the 7th Framework Programme. ERANID brings together eleven funding and research organisations from six EU Member States, Belgium (BE), France (FR), Italy (IT), The Netherlands (NL), Portugal (PT) and the United Kingdom (UK), and works in cooperation with the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and the Pompidou Group to strengthen cross-border drug-related research. The ultimate goal of ERANID is to improve cooperation in drug research to allow well-founded policy decisions that are effective in addressing the complex issue of drugs. This report presents the results of the first phase of the ERANID project, which consisted of a study mapping the current situation of drug-related research in the six ERANID participating countries and at the European (EU) level. The main objective of the study was to provide a comparative analysis of national and European drug-related research strategies, plans and funding programmes on the one hand, and of recent and current research projects on the other hand. Furthermore, the study sought to use the results to provide sound recommendations on how remaining problems in research may be overcome and how to bridge identified gaps.

### ERANID Full Partners

Belgium	Belgian Federal Science Policy Office (BELSPO)
France	French Monitoring Centre for Drugs and Drug Addiction (OFDT) / National Centre for Scientific Research (CNRS) / National Institute of Health and Medical Research / Public Health Institute (ISP/INSERM)
Italy	Italian Department of Antidrug Policies (DPA)
The Netherlands	the Netherlands Organisation for Health Research and Development (ZonMw) / Welfare and Sports (MoH)
Portugal	Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD)
United Kingdom	Centre For Public Health (CPH)/Liverpool John Moores University (LJMU) / UK Government Department of Health (DH) / UK Home Office (HO)

## BACKGROUND

The study provides an overview of recent developments in research on illicit drugs at the European level and within each of the ERANID participating countries over the period 2010-2013. This mapping exercise forms part of a series of works, all seeking to document the state of play in European drug-related research [1, 5, 6, 7]. The previous successive mapping exercises are as follows (in chronological order):

### Drugs Research related initiatives in the European Union: synthesis report (general conclusion)

This report provided an overview of drug-related research in fifteen Member States<sup>2</sup> based upon an analytic inventory of community research programmes into illicit drugs produced in 1996<sup>3</sup>[2]. It brought together the relevant information from several working documents and thematic reports prepared for an Academic Joint Seminar on “Drug research related initiatives in the European Union”, organised by the European Commission (EC) and the EMCDDA, and held on 13 and 14 December 1996 at the Robert Schuman Centre of the European University Institute in Florence. Fifteen reports were produced by the Reitox Focal Points<sup>4</sup> as part of the joint EU-EMCDDA initiative, aiming to provide an overview of the drug research situation, scientific priorities and specific needs in the Member States. The Chair of COST A6<sup>5</sup> drafted a report on the cross-national research situation and needs at the European level. In addition, three other thematic reports were produced on the “Evaluation of action against drug abuse in Europe”[3], the “Research on the medical, socio-economic and detection aspects of drug abuse” (DGXII/Irish Presidency 1996) and the “Criminological research” [4].

### National Drug-related research in Europe

This report was based on information sent to the EMCDDA by twenty-five Reitox National Focal Points, Croatia, Norway and Turkey through a Selected Issue chapter on drug-related research in their 2007 National Reports. Countries were asked to provide as much information as possible on their national drug-related research structures and policies, a snapshot of current drug-related research and a description of national structures and approaches for collecting and disseminating drug-related research findings. Based on the information collected, the EMCDDA's report described the situation in Europe in 2007 and the main developments that had taken place since the 1996 Academic Joint Seminar.

2. At that time: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Italy, Ireland, Luxembourg, the Netherlands, Portugal, Spain, Sweden and the United Kingdom.

3. The aim of this inventory was to analyse the existing Community research programmes regarding the possibility of funding research into illicit drugs, to identify the research areas which were not covered by the existing programmes, and to formulate suggestions so as to the possible establishment of an integrated research action on drugs.

4. See: <http://www.emcdda.europa.eu/about/partners/reitox-network>

5. COST A6 (“Evaluation of Action against Drug Abuse in Europe”) was considered as one of the main drug research networks organised at the European level under the Directorate-General Science Research and Development. It focused on evaluation in various drug-related areas (prevention, treatment, crime, instrument development and policy).

This study led to regular monitoring of drug-related research by the EMCDDA and the creation of a specific webpage on the EMCDDA's website<sup>6</sup>. However, the monitoring carried out by the EMCDDA does not capture all of the drug-related research carried out in Europe as it depends upon the extent to which National Focal Points report the results of drug-related research within their National Reports.

## Comparative Analysis of Research into Illicit Drugs in the European Union

This study, commissioned by the European Commission's Directorate-General for Justice, Freedom and Security (DG JLS), covered the twenty-seven Member States and also considered the projects funded by the EC or other European organizations. The study covered the period 2001-2006 and aimed to address six major objectives presented as follow:

*“1/ To map the key research areas, research disciplines and recent research trends, covering both drug demand and drug supply reduction, taking into account any important interrelations with related thematic areas (i.e. mental health and addiction, licit substance abuse, etc.).*

*2/ To map and analyse the capacity, infrastructure and model of coordination of drug related research in the member states (MS). An analysis of the participation of the national research communities in EU programmes should also be conducted.*

*3/ To map and analyse the capacity, infrastructure and coordination of illicit drug-related research at European and international level, taking into account the drug-related research activities of the Pompidou Group of the Council of Europe and the World Health Organisation as well as the activities of significant private or semi-private research bodies.*

*4/ To briefly describe – for comparative purposes - the drug-related research trends, capacity, infrastructure and model of coordination in the US, Canada and Australia as well as major research collaborations in the drug field with EU partners.*

*5/ To identify strengths and weaknesses in EU drug-related research as well as gaps in the knowledge infrastructure in this field, always bearing in mind that the focus of this study covers both supply and demand of illicit drugs.*

*6/ To assess options for strengthening – if necessary – the drug-related research infrastructure in EU.”*

The analyses were based upon several sources: EMCDDA information, databases and other online information from the Directorate Generals (DG) and from national websites, PubMed and Scopus, and interviews with key experts and national contact persons<sup>7</sup>.

6. <http://www.emcdda.europa.eu/activities/research>

7. See Appendix 2.1 - 2.4 of the report

## Drug-related research in Europe: recent developments and future perspectives

This thematic paper aimed to update the EMCDDA's 2008 Selected Issue on national drug-related research in Europe[5]. Research activities in Europe were analysed on the basis of the studies mentioned by the Reitox National Focal Points in their National Reports over the period 2008 to 2010. The thematic paper reported on the developments and changes since 2008 and suggested potential future opportunities in the field of drug-related research.

The coverage and scope of the successive mapping studies differ and no consistent approach to the topic exists. However, each of the findings set a baseline against which to appraise the progress and ongoing weaknesses in drug-related research. This report adopts a similar approach, providing an analysis of recent progress and new developments in drug-related research. It suggests potential options to fill the information gaps and to address the identified weaknesses.

Firstly, the report investigates research rationales and priorities underpinning EU and national research initiatives by examining the stated needs and priorities contained within the most current policy documents. Secondly, it focuses on dedicated funding schemes targeted to drugs and other generic funding mechanisms. Finally, the report explores the characteristics of the drug-related research projects that have been supported by the European Commission and the national funding institutions over the period 2010-2013. This in-depth analysis puts a specific emphasis on the main features of the identified research projects. The report concludes with a consideration of the findings from this data collection, putting them in perspective with the main conclusions from previous studies.

# Methodology

## DATA COLLECTION

The first stage of data collection relied on an online survey. Three distinct questionnaires were developed in order to collect the information needed [see Annex B]. The first one focussed on drug-related research policy frameworks and was directed towards policymakers. Respondents were asked about the existence of a drug-related research policy document (name/link to the document if any); the existence of a national strategy wholly dedicated to drug-related research (name/link to the document if any); the potential budget for the implementation of the strategy; and the authorities responsible for defining drug-related research priorities and implementing the strategy(ies). A second questionnaire was dedicated to drug-related research funding schemes including questions such as the name(s), time span/frequency, topics, budget of research call(s) and/or larger programmes dedicated to drug-related research (if any); and the number and status of funding institutions involved. This questionnaire was addressed to national funders. The last questionnaire targeted research organisations, teams and researchers. It aimed to gather information about the main features of the projects funded over the period 2010-2013: title of the project; topics addressed; main goals; disciplines used; number of research organisation/teams involved; duration; funders; and budget.

The three questionnaires were developed by OFDT in collaboration with all of the ERANID partners. They were pre-tested in the UK in order to assess the understanding of their content, the feasibility of completion and the promotional work needed before and during the data collection to obtain as much information as possible.

At the national level, one partner (BELSPO, OFDT, DPA, ZonMw, SICAD, CPH) was responsible for identifying<sup>8</sup>, contacting and encouraging the different stakehol-

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8. Partners were provided with a chart of national funding institutions and research organisations identified in previous mappings and available on the EMCDDA website. They were asked to update this list of key informants using their own networks and knowledge.

ders to participate in the survey, under the overall coordination of OFDT. Partners were also responsible, where appropriate, for completing questionnaires based on their knowledge of national policy frameworks, funding programs, and recent and current projects.

A strategy to raise awareness about the ERANID project and the survey was devised in May 2013 and the online data collection was carried out between June 2013 and mid-September 2013.

For each country, OFDT complemented the online survey with a search of relevant documents and additional searches of relevant websites (universities, websites of the projects identified if any, National Research Agency (ANR) – FR, DPA – IT, Medical Research Council (MRC) – UK,...)

The EC data were collected by OFDT through three main channels: documentary research, contacts with Directorate Generals' (DG) officers involved in the EC funding programmes [see chapter III] and the consultation of relevant websites (CORDIS, REA, EAHC..., EMCDDA, websites of the EC funded projects identified).

The analysis of the data, at national and EC level, was performed by OFDT. The draft of the final report was commented on by the management group of ERANID and the EMCDDA.

## DEFINITIONS AND APPROACHES USED IN THE STUDY

For the purpose of the present report, the following terms and approaches refer to the definitions below:

### Research

Although there is no international accepted definition of what constitutes drug-related research[6], this report uses the definition of drug-related research proposed by the EMCDDA in its 2012 thematic paper, "Drug-related research in Europe: recent developments and future perspectives":

"Drug-related research involves performing a study on illicit drugs which may involve a range of disciplines, through the use of scientifically accepted methods and procedures, in order to test a hypothesis or answer a specific question".

The EMCDDA's definition of research considered, and built on, previous approaches to defining and categorising drug-related research [1, 6, 8]

### Research in Social Sciences and Humanities (SSH)

Although definitions of SSH vary across scholarly institutions and groups, this report refers to a broad sense of SSH in which the humanities are those disciplines that investigate the human condition, using primarily analytical, critical, or speculative methods (including, but not limited to, literature, history, philosophy, religion ...). Broadly understood, the social sciences are closely linked to the humanities, and are fields of study that may involve more empirical methods to consider society and human behaviours (including, but not limited to, anthropology, criminology, economics, political science, sociology, psychology ...).

## Basic research

Also called **pure research** or **fundamental research** and “applied research”: The definitions of “basic and applied research” adopted here are the definitions used in the EMCDDA’s 2008 thematic paper “National drug-related research in Europe”. “Drug-related basic research” refers to “studies undertaken to acquire new knowledge about drug-related issues, without any immediate application in view”. Pure research advances fundamental knowledge about the human world. The EMCDDA’s 2008 thematic paper defines “applied research” as “research which is focused on epidemiological studies, specific interventions and policy measures relating to drug use” [5].

## Translational research

Research that aims to make findings from basic science useful for practical applications that enhance human health and well-being. It is practiced in fields such as environmental and agricultural science, as well as the health, behavioural, and social sciences. With its focus on multi-disciplinary collaboration, translational research has the potential to advance applied science.

## Classification of drug-related research

Previous illicit drugs research mapping studies have used several approaches to the classification of drug-related research [5-7]. The current analysis builds on the seven categories used by the EMCDDA in its most recent study (see table below) by adding further categories, for example sub-dividing the policy responses category into four categories (prevention, treatment, harm reduction, law enforcement) and adding drug-related crime as a separate category.

### Research categories used by the EMCDDA

1. Prevalence, incidence and patterns of drug use — this category includes (general and specific, including school) population surveys, estimates of problem drug use, studies on the characteristics of drug users or patterns of drug use;
2. Responses to the drug situation — this category includes studies on demand reduction interventions such as the evaluation of interventions (treatment, prevention, etc.), the implementation of policies and laws, estimates of public expenditure and other economic topics;
3. Determinants of drug use — this category includes studies on risk and protective factors for drug use;
4. Consequences of drug use — this category includes studies on health, social and legal consequences of drug use;
5. Mechanisms of drug use and effects — this category includes neurobiological, pharmacological and behavioural studies, as well as research on the aetiology and developments of drug use;
6. Supply and markets — this category includes studies on supply reduction interventions, such as law enforcement interventions, as well as studies on market characteristics, such as the availability and purity of drugs;
7. Methodology issues — this category includes feasibility and validity studies on the implementation of EMCDDA indicators and comparisons between different methodologies.

Source: EMCDDA, 2012

## STUDY CHALLENGES AND LIMITS

In order to provide an overview of drug related policy frameworks, funding programmes and current or recent drug-related research projects in the six ERANID countries and at the EC level, the study aims at being as comprehensive as possible. However, such a stocktaking exercise faces the following difficulties:

- National policy documents dealing with drug-related research are quite easily accessible but drug research policy guidance at regional level might exist and wasn't included in the scope of the study. Even if it is likely that long term research priorities are established at national level, studying policy documents at regional level would have refined the analyses.
- A portion of drug-related research projects are funded outside grant programmes or calls fully dedicated to drug research. These various funding streams which include one-off budgets are difficult to identify. In the present studies, in addition to our own investigations, the researchers were asked to mention the sources of funding of their projects but when the answer was missing it was not always possible to trace back their funding sources. Also, it was not possible to estimate the extent to which informal mechanisms were used to fund the research project.
- As in all similar studies, this one faced the difficulty of reaching some relevant respondents and encouraging them to participate. In order to reduce these inherent survey limitations, data were also collated through relevant website (universities, funding agencies, research organisations...). But looking for information on current and recent research projects this way is both easier and harder than for older projects. It can be easier because recent projects may be listed in official results of a call, because researchers may advertise their activities or because the first results may be published in the latest issues of scientific journals. But information on recent projects may be far less accessible than for older projects for some of the following reasons: the project has just been funded through a bottom-up programme which doesn't mention drug issues; only the title of the project is available in the website of a research organisation; it is too soon for the researchers to produce results or none of the results have been published yet. It is therefore likely that a number of research projects have been missed.

## Drug-related research in policy documents: rationale and priorities

This chapter examines policy relevant documents in the field of illicit drugs. It analyses written policy statements with the aim of identifying commonalities between the different national and EU policy documents. The first section presents the policy frameworks investigated for the purpose of the study. The second section focuses on research rationales mentioned in the policy documents. Finally, the last section provides a critical overview of stated research priorities.

### **POLICY DOCUMENTS PROVIDING A FRAMEWORK FOR DRUG-RELATED RESEARCH**

The policy documents falling within the scope of the present study are predominantly those running over the period 2010-2013. Nevertheless, non time-limited policy documents have also been appraised even if they do not explicitly state that they cover this period. There are a variety of documents investigated for the aim of this study. These policy documents differ in level of governance (EU or within the State members) and also in scope (policy documents fully dedicated to drug research or documents defining drugs policy which refer to drug-related research) and in statutory nature (law, white paper, policy note, strategy or action plan) according to the level of political commitment or level of decision of the signatory authority endorsing the policy framework (Council of the EU, European Commission, National Councils of Ministers, Regional State Governments, Joint National Ministers or the Inter-ministerial conference bringing together Federal, Regional and Community authorities).

### **EU Policy Framework: Active interest in drug-related research activities**

At the European level, several policy papers exist addressing the topic of drug-related research. Almost all of the EU drug policy documents examined within this project give specific consideration to research-related matters.

### **EU Council Policy**

The EU Council's policy relating to drug-related research is set out in the following policy documents:

*The EU Drugs Strategy, 2005-12 and its second Action Plan, 2009-12:* Drug research is mentioned in the last section of these documents (section 6 of the strategy and section V of the action plan). Both refer to drug research as a cross-cutting theme along with information and evaluation. The EU Action Plan 2009-12 makes two mentions of research: Action 63 and Action 66 (see table Priorities for research: Level of formalisation and priority setting mechanisms).

*Council conclusions on strengthening EU research capacity on illicit drugs (2009):* This policy document was adopted by the Council to address the main research-related priorities emphasized in the EU Drug Strategy for 2005-12 and its Action Plan for 2009-2012. The Council's conclusions took into account both the Specific Programme "Drug Prevention and Intervention (2007 – 2013)" and the Seventh Framework Programme of the European Community for research, technological development and demonstration activities (2007 – 2013). In addition, the document took stock of the Commission staff's working paper on strengthening EU research capacity on illicit drugs and the outcome of the conference, Bridging the research gap in the field of illicit drugs organised by the Commission in September 2009. It remains the Council's only policy document entirely dedicated to drug research. This policy statement emphasised the need for a broader based approach to drug research, which reflects differences in national research approaches as well as differences in drug problems and responses at a national level.

### **Recommendations from the European Commission to the EU decision-making institutions**

The communication from the Commission to the European Parliament and Council, "*Towards a stronger European response to drugs*" [9] made several proposals to the EU's decision-making institutions on how to refresh EU drugs policy in response to the changing drug situation. Of concern was the rapid emergence of new drugs, the distribution of these drugs and new methods of trafficking drugs and drug precursors. Focused on monitoring needs, the document does not address research as a distinct topic.

### **The EU Drug Strategy 2013-20 and its first Action Plan, 2013-16:**

As in the previous EU policy documents, drug-related research is dealt with in the latter part of the Strategy and Action Plan (section VI of the Strategy and section 5 of the Action Plan) as a cross-cutting theme. Again, drug-related research is not covered in its own dedicated section but is addressed in combination with drug-related information, evaluation, and also now with monitoring. Research is also covered in three objectives (Objectives 14-16) and eight actions (Actions 45, 46, 48, 50-54)

## National policy frameworks: A reflection of national differences in policy

At the national level, all the EU Member States participating in ERANID (Belgium, France, Italy, the Netherlands, Portugal and the United Kingdom) have drug-related policy documents although they rarely have a fully dedicated drug research strategy. In addition, policy documents seldom make explicit the concrete mechanisms used for developing research priorities and their underlying rationales.

### A dedicated drug research strategy: a previous example from the UK

In 2010 the UK Government published a cross-government strategy fully dedicated to drug related-research, “Cross-Government Drugs Research Strategy – Tackling Drugs Changing Lives” [HM (Her Majesty's) Government 2010a]. This followed a commitment in the 2008 Drug Strategy to improve the quality and use of the drugs evidence base by better coordinating drugs research across Government. It was developed as part of a new coordination arrangement entitled the Cross-Government Research Programme on Drugs (CGRPD). The geographical coverage of the research strategy reflected that of the Drugs Strategy, which was mainly England and in some policy areas, Wales.

The main objective of the drugs research strategy was to “provide the foundation, direction and guidance for collaboration within Government, and between Government and other stakeholders, in the development of a robust scientific evidence base for the Government’s drug policy in the short and long term”. It also contained several sub-aims:

- To develop and communicate a shared vision across Government of the future direction of drugs research;
- To develop and communicate a list of prioritised drug research needs for the short- and- longer term;
- To develop and communicate an overview of existing and planned Government research into drugs.

Two major Research Councils, the ESRC (Economic and Social Research Council) and the MRC (Medical Research Council) were standing members of the CGRPD Strategic Board. Their core activities were recognized as particularly relevant to the CGRPD research strategy. However, shortly after its publication a new Government was elected and the new drug strategy, whilst stating the Government’s support for evidence-based policy making, did not refer to the CGRPD research strategy. The CGRPD was also disbanded at this time and replaced by the Cross-Government Drug Strategy Research Group.

### Research Frameworks within broad drug policy documents

In each ERANID country, there is at least one policy document that refers to domestic drug-related research. As mentioned above, in most of the countries, drug-related research is addressed in broad drug policy documents rather than in separate research specific policy documents.

The United Kingdom differs from the other ERANID countries because of the existence of separate drug strategies for each of the devolved administrations. The extent to which research is addressed within these strategies varies. The 2010 Drug Strategy for England, (“Reducing demand, restricting supply, building recovery: supporting people to live a drug free life”) does not mention the previous Government’s Cross-Government Drugs Research Strategy. It does state that Central Government will “take a central role in carrying out research to develop and publish an evidence base as to what works”. Research is mentioned in the Scottish Government’s “The road to recovery: a new approach to tackling Scotland’s drug problem” published in May 2008, in the Welsh policy document “Working together to reduce harm: The substance misuse strategy for Wales 2008-18”, its Three-year Implementation Plan (2008-2011) and Delivery Plan for 2013-2015 and in the “New Strategic Direction for alcohol and drugs: A Framework for Reducing Alcohol and Drug Related Harm in Northern Ireland 2006-11 –Phase 1” launched in 2006. In 2011, a second phase of the Northern Ireland initiative was launched covering the period 2011-16 and following the same principles as the first phase.

Among the other countries participating in ERANID (Portugal, Belgium, France, Italy and the Netherlands), the diversity in terms of the statutory nature of the drug-related policy documents should be highlighted.

Portugal is the only country where the policy document is part of law. Approved through the Resolution of Council of Ministers No. 46/99, the 1999 Portuguese Drug Strategy is envisaged as a long-lasting policy document. It recognizes the importance of coordinating the Portuguese strategy with the policies of the United Nations and the European Union. Research on drugs and drug addictions is broadly addressed in chapters II, IV, V and XI. Drug-related research is presented as one of its main strategic options. The National Plan against Drugs and Drug Addiction 2005-12, which was not a legislative text, was designed to ensure continuity with the 1999 National Strategy and further implement its aims. Drug-related research was presented as a cross-cutting theme along with information, training and evaluation. Within the current Portuguese plan, “Plano Estratégico 2013-15”, research is also a strategic option.

In Belgium, the current drug policy is defined by two major policy frameworks which have been endorsed by different signatory authorities: in one case, by the Federal Authorities alone and in the other, by the Federal Authorities alongside the Regional and Community decision making authorities. The “Federal Policy Note on the problematic of drugs” was adopted by the Council of Ministers in January 2001. It refers to research in chapter 4.2, along with epidemiology and evaluation. The Federal Note mentions the European obligation to run epidemiological surveillance systems and studies. The other key document guiding the Belgian drug-related policy is the “Common Declaration on a Global and Integrated approach on Drugs”. It was endorsed in January 2010 by the Inter-Ministerial Conference,

which involved 21 ministers from Federal, Regional and Community government. It reaffirms previous consensus on the approach set in the 2001 Federal Policy Note and provides further policy statements. Scientific research is considered as one of the five priorities of the Common Declaration (part 4.5).

In France and Italy, national drug policy is mainly set out in policy strategies and action plans. In France, two national strategies cover the period 2010-2013: “Government Plan for combating drugs and drug addiction 2008-11” and “Government Plan for combating drugs and addictive behaviours 2013-17”. Implementation of the latter is guided by its first “action plan 2013-15”. As far as the 2008-11 French strategy is concerned, drug-related research was addressed in a specific chapter alongside training and observation (part 4). In the most recent strategy, research is one of three priorities of action alongside observation and evaluation. Research also features in a dedicated section of the ongoing strategy (part 4).

As regards Italian drug policy documents, the most recent action plan is the “Piano di Azione Nazionale 2013-15” adopted in December 2013. It is entirely dedicated to prevention responses. It makes two mentions of research: to carry out targeted research projects focusing on a better understanding of the behavioural addiction; and to further invest in collaborative research projects in the field of prevention. Previously, there was the “Piano di Azione nazionale Antidroga 2010-13” implemented by its “2010 Project plan” which established the National Network for Addiction Research (NNRD) and mapped the future research projects to be carried out in the field. Referred to as “azioni trasversali” (cross-cutting actions) which support the main areas of intervention, scientific research was defined as a “motore fondamentale” of the policy (“essential driver”).

In addition to the policy strategy and action plan in Italy, in July 2011 the Italian Government adopted a policy statement on scientific collaboration in the field of addictions referred to as “Dipartimento Politiche Antidroga (DPA) Statement on Scientific International Collaborations”. It states the general aims of future agreements on international scientific cooperation as well as the main areas of interest in the field of addiction. It also sets specific mechanisms for strategic coordination. This policy document is unique in its focus on international collaboration although, in other EU Member States of the ERANID network (Netherlands and France), bi-national agreements of scientific collaboration have been signed between a foreign collaborative scientific institute (NIDA in USA) and an intermediate scientific organisation (the ZonMw in the Netherlands) or research institute (the INSERM in France)

In the Netherlands, the White Paper “Drugs Policy in the Netherlands – Continuity and Change” released by the Government in 1996 after discussions with Parliament, addressed research and statistics in its last section. It attached great value to “the production of improved and comparable statistics and research data” and recognised the importance of “a careful evaluation of the results, which have been

achieved and of the current problems to set out changes in policy”. However, this policy document doesn’t frame current research policy anymore<sup>9</sup>. In the Netherlands, refreshed research priorities are not officially stated in policy documents, but research manager organisations refresh and update new guidance in collaboration with the two main ministries dealing with drugs and drug addiction (Health and Justice) on a regular basis.

## RESEARCH RATIONALES IN POLICY DOCUMENTS

This section explores the public authorities’ stated aims regarding drug-related research.

### Shared motives for facilitating drug-related research by EU, national and regional authorities

At European level, the strategies and action plans examined in this study explicitly mention the intention to promote scientific research in policies and actions, predominantly as part of an integrated approach with other “linked activities” such as information, evaluation (Drug Strategy 2005- 12 and its second Action Plan 2009-12) and monitoring (EU Drug Strategy 2013-20 and its first Action Plan 2013-16). It is, therefore, difficult to distinguish between what may be essential and specific to the research rationale and what may be subsidiary because the scopes of research, information, monitoring and evaluation are presented as closely intertwined.

The EU Council, however, has stated the rationale for its commitment to strengthen research capacities in this field across Europe. Expressed through the 2009 document, Council conclusions on strengthening EU research capacity, it emphasises the “importance of research to inform drug policies and develop the necessary evidence-based responses to reduce the adverse consequences of drug abuse and illicit drug trafficking in the EU”.

In the ERANID countries, research is not addressed as a distinct topic in policy documents. In fact, it is addressed along with other related issues such as epidemiology and evaluation (Belgium), observation and evaluation (France), monitoring and evaluation (Portugal, Scotland, Northern Ireland and the Netherlands) and data collection/information and evaluation (Italy)<sup>10</sup>. Although this makes it difficult to establish the underlying policy rationales for promoting scientific research, a common thread seems to weave through the national drug policy documents examined here: addressing gaps in knowledge on specific or emerging

9. Even if current drug-related research priorities are not stated at the parliament level, as the White paper is the only policy document addressing drug research priorities, it will be detailed in next sections

10. Epidemiology and evaluation come under the definition of research adopted in this report although monitoring does not. They are part of research but they do not cover research as a broad, general topic

topics, having a better and comprehensive understanding of all aspects of drugs, and/or improving policy responses.

In Belgium the rationales stated by the authorities have evolved since 2001 from “identifying blind-spots and carrying out targeted studies (for the most part in the fields of the epidemiology and evaluation on treatment interventions)” (Federal Policy Note of 2001) to the need stated in its Common Declaration of 2010 for “a comprehensive understanding of complex drug phenomena which requires developing scientific knowledge”.

In France, research was recognised as “an important part of the drugs plan for 2008-11 because it can help to improve public action”. In addition, this policy document emphasised that knowledge needs in the field have largely not been met. The subsequent French Government strategy for 2013-17 devotes particular attention to research, identifying it alongside observation and evaluation as one of three strategic priorities. It states that “the research efforts should not be solely aimed at understanding addictive behaviours but should also be concerned with improvement of the public responses”.

The strategic importance of “scientific research” is explicitly stated by the Portuguese authorities through the Resolution of Council of Ministers No. 46/99. The emphasis in the national strategy is on scientific research, the document stating that “the increase in scientific research constitutes one of the most important structural options of this policy document and that, it is essential to provide support for more lucid and efficient political decisions”. According to this policy document, the drug phenomenon is neither comprehensible nor explainable without the help of a wide range of knowledge. Scientific research has a crucial role to play in order to inform policy decisions. A unique feature of the 1999 Portuguese strategy is that it clarifies what is expected of scientific research. It uses the terms “administrative and academic research” in relation to scientific research. While it sees academic research as predominantly investing in basic research and focusing on explanations and interpretation of the drug phenomenon, it views administrative research as epidemiological studies and studies on interventions carried out on a permanent basis. The plan for 2005-12 emphasised the development of research so that “it supports the decision-making process in all intervention areas”. The current Portuguese Strategic Plan, 2013-15 sets three strategic aims, one of which focuses on strengthening research “so as to inform decision-makers and practitioners in particular, as well as the civil society in general” and “to respond to emerging needs in terms of sound interventions”.

The current Scottish drugs strategy recognizes that “sound evidence, proper evaluation and reliable data are at the heart of good policy-making”. It refers to the reason for carrying out research as the need “to develop further the understanding of the drug using population, the factors affecting people’s substance misuse, the harms experienced and the most effective interventions”.

The Welsh substance misuse strategy “Working together to reduce harm” for the years 2008-2018, emphasises the importance of research in particular “to evaluate the effectiveness of interventions”. The document stresses the importance of using findings from research to help target support and to prioritise resources. The Northern Irish drugs policy document contains a firm commitment to improve the evidence base on drug problems and what works in tackling them. Both the Welsh and Northern Irish strategies rely on information collection, systematic monitoring, evaluation of interventions and targeted research projects. The strategy for 2006-11 called for “addressing gaps in knowledge and exploring specific topics and issues in greater detail”. For the years 2011-16, the strategy recognises the importance of “increasing awareness, information, knowledge and skills on all aspects of drug-related harm”.

The “Dutch White Paper” of 1996 calls for “a better understanding of the principles and effects of the Netherlands’ drugs policy”. It states that regular studies “would enable the effects of current policy to be determined more accurately, which would mean that discussions on policy could be more substantive and less dominated by preconceptions and opinions”. This policy document commits the Netherlands government to “take steps to expand the statistical and scientific programmes relating to drug use, partly within the framework of the EU and the UN initiatives and to pay more attention to monitoring and evaluation”.

In Italy, the “National plan of action 2010-13” stresses the need for “a better understanding of the drug phenomenon and an optimal response to the drug problem”. Furthermore, the Italian strategy states that “fundamental importance is attached to scientific research in the field of the addictions” and expresses its firm commitment to facilitate it. The “DAP Statement on scientific international collaborations” of 2011 recognises that “initiatives and action in the addiction field must be based on scientific evidence, on constant assessment of the practical effectiveness of the initiatives, and be based on ethics and respect of human rights”. It stresses the importance of scientific research as well as the translation of the results of the research studies into appropriate policy responses.

The main reasons cited above for strengthening research in national and regional drug policy frameworks appear to be consistent with those mentioned in the EU documents guiding research along with related-issues such as information, evaluation or monitoring:

The main result expected from the EU drugs strategy 2005-12 in the field of information and research was “a better understanding of the drug problem and the development of an optimal response to it through a measurable and sustainable improvement in the knowledge base and knowledge infrastructure”.

Its second action plan 2009-12 called for “improving the understanding of all aspects of the phenomenon of drug use in order to expand the knowledge base for

public policy and raise awareness among citizens of the social and health implications of drug use, and to carry out research”.

The EU drugs strategy 2013-20 calls for “a better dissemination of monitoring, research and evaluation results and a better understanding of all aspects of the drugs phenomenon and of the impact of interventions in order to provide a sound and comprehensive evidence-base for policies and actions”.

Its first action plan 2013-16 also contains an explicit policy rationale for developing information, research and evaluation, expressed in terms of its “contribution to a better understanding of all aspects of the drugs phenomenon and of the impact of measures in order to provide sound and comprehensive evidence for policies and action”.

Finally, the “Cross-Government Drugs Research Strategy” developed by the CGRPD is the only policy document in which the reasons for facilitating research in the drug field are both explicit and detailed. Six main topic areas are emphasized either because they represent long-standing gaps in knowledge or government policy needs, expressing a firm commitment to address these gaps/needs in the implementation of the research strategy (for the detail of these priorities (see Table: Priorities for research: Extent to which research priorities and priority setting mechanisms are formalised p.42).

### **Needs-assessment approaches used**

Although the preparation process of all the policy documents examined here is based on scientific evidence, it is extremely rare for the documents to mention any type of formalised methodological approach to carrying out their need assessments in order to build their priorities.

Portugal constitutes the exception. Led by the Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD), three different models of “Diagnóstico Estratégico” (strategic needs assessment) were used for elaborating the rationale which underpins the “Portuguese 2013-2015 strategy”. As regards research, the strategic analysis undertaken calls for the need for “a continuous production of knowledge and a higher awareness of international research works” as well as “the empowerment of the public bodies devolved (as the SICAD and the Technical Cross-ministerial Committee) so as to strengthen narrowed collaboration in deciding which type of research study to carry out”.

Currently, the most common mechanism cited to determine the research related priorities within strategies is a consultation process with stakeholders and experts. Few strategies, however, make fully explicit the concrete mechanisms used.

Belgium and Portugal mentioned the commissioning of a Parliament report in order to prepare their long-term drug policy documents (The Belgium federal Policy

Note of 2001 and the Resolution of Council of Ministers No. 46/99). In Portugal, the preparation of “the 1999 Resolution” also benefited from the proposals of an ad-hoc committee, which brought together renowned specialists entrusted by the Government. Civil society was also encouraged to participate in a public debate. In the Netherlands, the national Parliament was consulted to discuss the “Dutch White Paper on Drugs of 1996” with the Government. In other countries such as France and Italy, the consultation process was orchestrated by a public body nominated by the Government (the MILDECA in France and the DPA in Italy) while the department with lead responsibility for the drug strategy in the UK, the Home Office, coordinated the consultation process through the CGRPD. The consultations involved different types of stakeholders, from civil servants in ministerial departments at national and regional levels, through to practitioners working in the field (charity bodies, clinics, practitioners’ and drug users’ networks...), and academic experts, scientists and think-tanks.

At the EU level, the drugs strategies and action plans are prepared by the European Commission. These policy documents rely systematically on the successive evaluations commissioned by the European authorities as well as the EMCDDA’s data and expertise.

## **ANALYSIS OF THE RESEARCH PRIORITIES IN THE POLICY DOCUMENTS**

The current section looks into the drugs-related research priorities set out in the policy documents which fall within the scope of the present report and investigates to what extent these policy documents provide well-focused strategic guidance for drugs research, built on clear and precise policy priorities which can be easily translated into operational actions.

A series of tables are used to synthesise information on the main features of the current national and EU priorities for research. They seek to provide a comprehensive overview of the research priorities identified in the different national and EU policy documents examined here.

The first table is titled “Level of formalisation and priority setting mechanisms”. Firstly it considers the way in which the policy document refers to research (solely or along with other related activity). Secondly, it contains an analysis of the extent to which the priorities have been formalised level of formalisation of the priority. If the priorities have been translated into specific actions, these are also mentioned. Finally, where the policy document refers to them, current or future priority setting mechanisms are presented.

Additional comparative tables follow in subsequent sections of this part of the report. The priorities are presented by country and by category, and are based on how the policy documents present research needs in terms of gaps in knowledge or as weaknesses in research infrastructure, capacity or coordination (for example, by key areas of interest, by disciplines under-invested in or in terms of improvements to the skills base and human competencies).

## Extent to which research priorities and policy mechanisms for priority setting are formalised

### *Existence of formal research priorities*

Although there is still plenty of room for improvement when it comes to defining research policy priorities within the EU and national policy frameworks, considerable progress has been accomplished since the 1996 study [1]. It can be said that, at EU level as well as in the countries participating in ERANID, all the policy documents set out explicit areas of interest, which can be seen as research priorities. However, except in the UK as far as the Cross-Government Drugs Research Strategy is concerned, these elements are rarely presented explicitly under the heading of “research priorities”. The terms used in the different policy documents are rather wide-ranging. They can be referred to as “actions, proposals or measures to undertake in priority” but also as “priority themes or principles”. However, most of the policy documents still do nothing more than list the many cases in which research initiatives should be carried out under the heading of research. Beyond the lack of homogeneity in the vocabulary or the differences in the formal presentation, the nature of the priority itself and the degree of specificity (overly generic or more detailed) can also differ significantly from one policy document to another.

### *Priority setting mechanisms*

In 1996, Kenis also reported very few countries with concrete priority setting mechanisms across Europe. Although the situation has not changed drastically, some progress regarding the recent policy documents can be reported.

Policy documents examined within this study in Belgium, France, Portugal and the United Kingdom have clear responsibilities for establishing and refreshing priorities for research set out, through regular calls for proposals within specific research programmes (Belgium, France, the United-Kingdom) or/and working annual strategic agendas for research (Belgium, Portugal). At EU level, since 2009, action has been taken to provide better guiding principles for facilitating research in the field of drugs (for further explanations, see “Establishing a policy framework for drugs related research at EU level: a slow and ongoing process”).

Further clarifications on these two topics are provided in the table below.

Priorities for research: Extent to which research priorities and priority setting mechanisms are formalised in recent and current policy documents

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<b>Belgium Federal Policy Note of January 2001</b>	<p>✓ Nothing else than evoked.</p> <p>Epidemiology studies and surveillance systems (so as to be in conformity with EMCDDA obligations)</p> <p>Scientific evaluation in prevention and treatment</p> <p>Scientific studies dealing with criminality and drug-related nuisances</p>	<p>✓ Cited under the heading of "Actions":</p> <p>Along with epidemiology and evaluation</p> <p>Within the law enforcement policy and criminality section</p>	✗	<p>✓ The Federal Note formulates straightforward detailed statements.</p>	<p>✓ Responsibilities: Clearly defined but not fully operational</p> <p>Federal research programme on drugs set: Intended to fund research projects in support of the federal level (only)</p> <p>Annual budget provided to organise and manage the drug research programme</p>
<b>Belgium Common Declaration of January 2010</b>	<p>✓ Referred to as "research principles":</p> <p>i.e. Scientific excellence and international integration, concentration around key questions covering multiple compe-</p>	<p>✓ Cited under the heading of "Actions":</p> <p>Along with epidemiology and evaluation</p> <p>Within the law enforcement policy and criminality section</p>	✗	<p>✓ The Federal Note formulates straightforward detailed statements.</p>	<p>✓ Responsibilities: Clearly defined but not fully operational</p> <p>Federal research programme on drugs set: Intended to fund research pro-</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>tences, research themes in support of strategic orientations on drug policy, collaboration at federal, regional, communities and international level should be fostered</p>				<p>jects in support of the federal level (only)</p> <p>Annual budget provided to organise and manage the drug research programme</p>
<p><b>Referred to as "research topics":</b></p>	<p>i.e. Research on supply topics such as the production, the price or the availability and also, topics regarding the illicit drug demand, that is, the prevention of the drug use and treatment in particular, as well as drug-related epidemiology and drug</p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
French Government Plan 2008-11	<p>✓</p> <p>Three "thematic actions sheets" (1.1; 1.2; 1.3) address the research issue.</p> <p>(1.1) Develop research in priority cross-discipline fields to suit needs for government action</p> <p>(1.2) Develop research potential for drugs and drug addiction phenomena</p> <p>(1.3) Develop clinical research in addition to increase the efficiency of treatments and improve care practices</p>	<p>✓</p> <p>Priorities presented in a cross-cutting section along with training and observation</p>	<p>✓</p> <p>Mentioned as "the main research priority themes" when referring to the existing or new calls of proposals.</p> <p><b>Priority themes identified (1st call of proposals):</b> School trajectories &amp; drugs Drug use at work Binge drinking and, initiation for the abuse of the cocaine)</p> <p><b>Priority themes identified (2nd call of proposals):</b> Drug-related social da- images Public policy evaluation.</p>	<p>✓</p> <p>Concise and detailed actions presented within the French Government Plan under the heading of "Measures &amp; proposals"</p> <p><b>Main research areas:</b> Prevention and early identification of risk uses of drugs, particularly for teenagers and young adults; social damage associated with the use/abuse of drugs and evaluation of public policies</p> <p><b>Multi-disciplinary approach :</b> Gaps in cross-cutting re- searches combining public health approaches and social and human science approaches.</p> <p><b>Referred to as "main priority research themes":</b> Consumption of drugs and difficulties encountered at school; consumption of drugs and addictive behaviours in work</p>	<p>✓</p> <p><b>Budget allocated to grant drugs research projects selected:</b> 1 million € A permanent addiction theme in the Hospital Clinical Research Programme (PHRC) set A specific addiction line of re- search within the National Neuro- science Institute developed</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				<p>Priorities translated into formalised actions</p>	<p>Further priority setting mechanisms formalised</p>
<p>environments; excessive alcoholism in the young; initialisation to cocaine use; relations between violence, delinquency and uses of illegal and legal psychoactive substances; problems with precariousness and social isolation related to drug addiction behaviours</p>					
<p><b>Referred to as "priority domains for new investigations":</b></p>					
<p>Senior consumption of alcohol and psychotropic drugs,</p>					
<p>Gambling addiction, drug use and precariousness / social integration,</p>					
<p>Mortality related to illegal drugs,</p>					
<p>Characteristic patterns of use among minors involved in the criminal justice system in comparison with young people of the same age in the general population, Consumption of smuggled tobacco.</p>					



Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
French Government Plan 2013-17	<p>✓</p> <p><b>Multi-disciplinary approach:</b> Multidisciplinary research into the motivations, perceptions and attitudes of population groups considered as taking priority</p> <p><b>Translational and multi-disciplinary research:</b> Translational (clinical and preclinical) and multidisciplinary (preclinical, human and social sciences) projects aimed at improving the treatment of sub-stance-based and behavioural types of dependence (gambling, Internet, screens, doping behaviours) will be promoted through calls for research projects (hospital clinical research, programme in particular).</p>	<p>✓</p> <p>Addressed under the heading of "Supporting research and observation"</p>	<p>✓</p> <p>French Action Plan 2013-15 underway The adoption of a second Action Plan 2015-17 is planned</p>	<p>✓</p> <p>Drug-related research programming mechanisms / funding organisations mentioned in the French Government Plan (PHRC, ANR, ANRS, INSERM, EHES, INCa, MILDECA).</p>	<p>Research annual budget MILDECA: €4.23 million for research and observation, of which more than €1 million for research (projects granted falling within the 2013-15 Action Plan)</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p><b>Priority disciplines:</b>  <i>Neurosciences research into molecular and cellular mechanisms; factors of genetic predisposition and specific biological markers among young people in particular;</i>  <i>Clinical research (systemic)</i>  <i>Epidemiological research into the health and social effects of drug use among young people</i>  <i>All disciplines (neurosciences, clinical research and research in the social sciences) for tobacco research</i></p> <p><b>Priority research areas:</b>  <i>Research into public policies (prevention responses in particular)</i></p> <p><b>Key research themes and emerging questions:</b>  <i>Effects of alcohol, cannabis and tobacco use during adolescence</i></p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
	<p>Psychological and social risks associated with excessive gambling and use of the Internet and screens at an early age</p> <p>Innovative medicines and new therapeutic strategies</p>				
	<p><b>Type of studies in priority:</b> Longitudinal studies (effects due to early use of drugs); Studies as a decision-making support tool</p> <p><b>Research capacity and coordination:</b> Facilitating scientific, national and international scientific cooperation</p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<b>Italian Plan of Action 2010-13</b>	<p>✓</p> <p><b>Main disciplines:</b> It calls for more research in the field of the neurosciences and the neuroimaging but also in the field of the sciences of the behaviour, social and educational</p> <p><b>Research capacity and coordination:</b> It states that funding priority will be given to scientific-based projects able to promote national collaborative network; it also recognises the importance of supporting the creation of an institutional scientific community, facilitating scientific publications and training but above all, it supports cross-ministerial collaborations with accredited research centres</p>	<p>✗</p> <p>Under the heading of "Main principles of the National Plan of Action" (Principi generali del PAN)</p>	<p>✗</p>	<p>✓</p> <p>Italian Project Plan of 2010</p>	<p>✗</p> <p>Note that drug related research annual budget is provided: Roughly €1 million (4 % of €26 millions)</p>

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p><b>Italian DPA Statement on scientific international collaborations</b></p> <p>✓</p>	<p>✓</p> <p><b>Multidisciplinary research:</b> It states that the Italian Government aims to respond to the drug problem with a scientific evidence based, integrated and multidisciplinary approach.</p> <p><b>Translational research:</b> It considers essential to translate the results of the research studies to the clinical and education fields.</p> <p><b>Research disciplines:</b> It stresses the need to increase the number of studies and research projects being conducted in the field of the neurosciences.</p> <p><b>Research capacity:</b> It considers imperative to encourage contact with and creation of cooperative networks among researchers, clinical staff and rehabilitation professionals.</p>	<p>✓</p> <p>Cited in a drug research dedicated document</p>	<p>✗</p>	<p>✗</p>	<p>✗</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p><i>It plans concrete activities to build cooperation (specific clinical projects and trials - joint scientific research, training programmes and cross-national training opportunities (sharing expertise), workshops and congresses).</i></p> <p><i>It engages the DPA to promote involvement in the studies by the national networks of the pre-existing cooperative centres as well as Regions.</i></p>				
	<p><b>Referred to as "Scientific scope of particular interest for DPA":</b></p> <p><i>Clinical trials of promising medications</i></p> <p><i>Studies on Early Detection, drug testing and brief interventions</i></p> <p><i>Natural history studies of drug abusers</i></p> <p><i>Italian Electronic Medical Record (SIND system) and assessment of the outcome</i></p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
	<p><i>Clinical neurosciences with in-depth analysis above all of the cognitive-behavioural aspects and their changes during treatment</i></p> <p><i>Neuroimaging of addiction</i></p>				
<b>Dutch White Paper of 1996</b>	<p>✓ <b>Nothing else than listed.</b></p> <p><b>Areas (set in 1996):</b>  <i>Regular user studies</i>  <i>Projects on quality</i>  <i>Evaluation of preventive measures (effectiveness and efficiency of prevention work)</i>  <i>Medical trials to be conducted on the effectiveness and harmfulness of prescribing heroin on medical grounds to any type of addict</i></p>	<p>✓ This policy document calls for a greater attention to be paid to research, monitoring and evaluation. Priorities are listed under the heading of "Annex II: principal policy intentions indicated in the policy document on drugs"</p>	✗	✗	✗

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
Dutch White Paper of 1996	<p>Future scenarios</p> <p><b>Key questions (set in 1996):</b></p> <ul style="list-style-type: none"> <li>Coffee shop policy</li> <li>THC-levels (harm)</li> <li>Synthetic drugs (harm)</li> </ul>				
Portuguese Resolution of Council of Ministers n° 46/99	<p>✓</p> <p><b>Multidisciplinary methods:</b></p> <p><i>It recognises that the priorities of scientific research should include interdisciplinary studies in general.</i></p> <p><b>Priority disciplines:</b></p> <p><i>Studies should call on biology, pharmacology, toxicology, the neurosciences, psychology, behavioural sciences, ethnology, economics and criminology in particular.</i></p> <p><b>Types of studies to conduct in priority (five priorities):</b></p> <p><i>Firstly, descriptive studies of the phenomenon of drugs (surveys and indirect indicators and others of a</i></p>	<p>✓</p> <p>Under the heading of "Chapter XI into research and training: Research on drugs and drugs addictions"</p>	<p>✓</p>	<p>✓</p> <p>First "Portuguese Action Plan" adopted: The 30 objectives for the fight against drugs and drug addiction on the horizon of 2004 (research initiatives listed).</p> <p><b>Studies promoted:</b></p> <p><i>Research designed to characterize the profiles of problematic drug takes and new patterns of consumption, namely of synthetic drugs</i></p> <p><i>Research in view to determining the hazards of drugs and damage caused to health</i></p> <p><i>Research into the development and assessment of needle exchange/distribution schemes, supervised consumption schemes and</i></p>	<p>✗</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p>... Portuguese Resolution of Council of Ministers n° 46/99</p> <p>✓ Yes ✗ No</p>	<p>quantitative or qualitative nature)</p> <p>Secondly, explanatory and interpretative studies of the drugs phenomenon to enable the consensual "law of effect" to be empirically put into effect, that is to say, that analyse the different variables: substances, the individual and the context. In this case, it is necessary to study the relation between types of drugs, types of individual behaviour and types of surrounding context.</p> <p>Thirdly, studies of the dangers of different drugs, including the new synthetic drugs, which help prevention and treatment policies, and which also contribute to a well-founded definition of the external policy and legislative policy on this matter.</p> <p>Fourthly, studies of social experimentation initiatives, especially concerning the establishment of so-called shooting rooms and on the therapeutic or</p>			<p>administration of opiate therapy in prisons in other countries</p> <p>Research assessing rehabilitation work ad schemes</p> <p>Economic and financial studies of the impact of drug trafficking and consumption and on the laundering of drug money</p> <p>Research into the quality of drugs circulating and estimates on quantities</p> <p>Research assessing treatment programmes and schemes</p> <p>Research to characterize the consumption profile of benzodiazepines and antidepressants in the Portuguese population, including factors contributing to the use of these drugs.</p>	

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p>... Portuguese Resolution of Council of Ministers n °46/99</p>	<p>controlled administration of heroin, but also the exchange of syringes at prison establishments, in order to obtain a description of these experiences and to make a scientific analysis of the need, viability and technical, economic and legislative conditions for its possible experimentation in Portugal.</p> <p>Fifthly, studies on programme evaluation methodologies, to enable evaluation of prevention, treatment, harm reduction and social reintegration programmes carried out in Portugal, including the most important programmes that have taken place over the last 10 years.</p>				
	<p><b>Human resources:</b> A stable scientific community. Few scientists devote their university careers to this theme, often because the relative lack of interest of the universities only</p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p>... Portuguese Resolution of Council of Ministers n °46/99</p>	<p>permits episodic research, aimed at obtaining academic degrees or at the request of State organisations. This is a challenge to the universities themselves. In the field of "administrative research", it is important to introduce the career of scientific research into the organic structure of the public services, in which the production of scientific knowledge about drugs is developed in a systematic way. This is the solution suggested by the Organic Law of the recently created Portuguese Institute for Drugs and Drug Addictions – IPDT (Decree-Law 31/99 of 5 February). One of the most important tasks of the IPDT is that of congregating and encouraging scientific research on the phenomenon of drugs and drug addiction.</p>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
Portuguese plan 2005-12	<p>✓</p> <p><b>In the field of research, the following priorities are identified as such:</b></p> <p>Increasing the interaction between knowledge, decision and intervention, namely by promoting combined research and action projects;</p> <p>Enhancing the support for population-based projects, both those directed to the general population and those targeting specific groups, i.e., in schools, the prison environment, the military environment, and the working environment in general;</p> <p>Promoting studies on the reliability and relevance of the indicators used, as well as on the significance of their variations, both geographical and between different population groups.</p> <p>Negotiating with the relevant bodies a research agenda together with a</p>	<p>✓</p> <p>Addressed along with "Information, training and evaluation" and referred as a cross-cutting area.</p> <p>As regards dissuasion, prevention and reintegration issues here pinpointed, the research related priorities are not recognized as such.</p>	<p>✓</p>	<p>✗</p>	<p>✓</p> <p>The Portuguese plan sets as a priority to negotiating with the relevant bodies a research agenda together with a consistent stable matching funding plan for the period of implementation of this National Plan, with well-defined criteria and priorities for project selection.</p>

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>consistent stable matching funding plan for the period of implementation of this National Plan, with well-defined criteria and priorities for project selection.</p> <p><b>Research areas of interest not identified as such:</b></p> <ul style="list-style-type: none"> <li><i>Improving scientific knowledge in the area of dissuasion: assessing the impact of implementing the drug decriminalization law</i></li> <li><i>Promoting research in the field of prevention</i></li> <li><i>Promoting research in the field of Reintegration</i></li> </ul>				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
Portuguese plan 2013-15	✓	✓ Research is referred as a strategic pillar of the Strategy, under the heading of "developing knowledge" and along with related activities (monitoring, evaluation, information).	✓ One of the strategic objectives of the Portuguese plan is to "developing the priority lines of research" so as to respond to emerging needs in terms of action.	✓ The Portuguese strategy sets research related initiatives so as to reach the strategic objective previously established <b>Studies promoted in previous areas of interest (epidemiological surveys):</b> School-based epidemiological studies Prison-based epidemiological studies Studies estimating problematic users prevalence National surveys into beliefs, behaviors, attitudes towards drugs and drug addiction	✗
				<b>Studies promoted in new areas of interest:</b> Studies of cohort into the mortality related to drug addiction and alcohol abuse. Studies into young people' culture, addictive behaviour and emerging phenomena	

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p>...Portuguese plan 2013-15</p>				<p>Research-action projects in view to carry out needs assessments and public policy evaluation studies</p> <p>International research projects in innovative areas</p> <p><b>Research capacity building:</b></p> <p>Setting a national network bringing together scientists in view to disseminating academic works into additions</p> <p>Contributing to the creation of an European network of scientists</p>	
<p>UK Cross-Government Drugs Research Strategy 2010</p>	<p>✓</p> <p>In consultation with key stakeholders the CGRPD established the following priority areas for research:</p> <p>To strengthen our understanding of drug use: aetiology, incidence, prevalence and patterns of use in the population.</p>	<p>✗</p> <p>Fully dedicated strategy to illicit drugs research issues</p>	<p>✓</p>	<p>✓</p> <p>The strategy provides the following details regarding the priorities established, along with reference to any current or planned work addressing them with lead department(s)</p>	<p>✗</p> <p><b>No needed. The current strategy provided it:</b></p> <p>Funding for projects comes out of individual department budgets and is controlled by individual departments</p> <p>The CGRPD is responsible for the following activities to support delivery of the research strategy:</p>

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
... UK Cross-Government Drugs Research Strategy 2010	<p>To further strengthen our knowledge of drug use and needs amongst a number of groups, including young people, black and minority ethnic (BME) groups, families, and drug-using offenders.</p> <p>To review our knowledge and measures of drug-related harms.</p> <p>To develop our understanding of treatment, prevention, and other demand-side interventions.</p> <p>To review and strengthen understanding of UK drug markets, and interventions to tackle them.</p> <p>To strengthen our understanding of public confidence, perceptions, and behaviour.</p> <p>In addition the strategy encourages a focus on improving understanding of what works for whom to support better targeting of interventions.</p>			<p><b>Priority 1</b> Work with partners to improve UK-wide estimates of problem drug use. Work towards provision of robust comparative estimates of PDU prevalence across Europe. Map and monitor the emergence of new drugs and changing patterns of drug use. Make better use of existing administrative data. Develop evidence on incidence and desistance.</p> <p><b>Priority 2</b> <b>Young People:</b> Characteristics of young people entering problem drug use. Evidence on pathways and resilience.</p> <p><b>BME:</b> Prevalence of drug use amongst BME groups. Drug treatment needs. BME contact with CJIS and treatment.</p>	<p>Annual stock-takes of ongoing government research on drugs and monitoring of their delivery; Annual review of each department's business plans in relation to drugs research. Assessment of research needs and activity against the Drug Strategy and Drug Strategy Action Plan. Annual review of research priorities established, progress made and further priorities needed</p>

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
				<p><b>Families:</b> Impact on families. Children of drug users. Effectiveness of family-based interventions.</p> <p><b>Offenders:</b> Assess and understand drug-using offender groups and their journeys through CJIS and treatment. Develop the evidence on the drug-use patterns and needs of offenders in prison and the community as well as young offenders.</p> <p><b>Priority 3:</b> Review drug harms. Further work on assessing specific drug harms.</p> <p>Impact of ecstasy, cannabis/kunk on health. Drug market harms</p> <p><b>Priority 4:</b> Effectiveness of DIP and other interventions in custody and the community on preventing offending.</p>	

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
✓ Yes ✗ No	<p>Effectiveness of residential, community and prison-based treatment and their place in a balanced system of care.</p> <p>Role and effectiveness of specific reintegration and rehabilitation interventions.</p> <p>Long-term impact of treatment.</p> <p>Effectiveness of interventions for hardest to treat groups.</p> <p>Place of drugs education in school-based Personal, social, health and economics education (PSHE).</p> <p>Evaluate use of the benefits system in relation to problem drug use.</p> <p>System change pilots evaluation.</p>				
				<b>Priority 5:</b>	<p>Literature review of social and economic literature on drug markets.</p> <p>Stock-take of economic modelling.</p>

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<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				<p>Modelling drug markets.</p> <p>Measuring impact of interdiction/enforcement on drug markets, as well as on prevalence and patterns of use.</p> <p>Assessing value for money of supply-side interventions.</p> <p>Priority 6:</p> <p>Review perceptions evidence.</p> <p>Assess effectiveness of interventions to improve public perceptions.</p> <p>Although the following research activities of the Research Councils are not specifically included as such within the strategy, the CGRPD states that they are particularly relevant to its research strategy:</p> <p>Biomedical research addressing the causes, mechanisms and treatment (MRC)</p> <p>Social and economic research addressing risk, behaviour and intervention (ESRC)</p>	

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
	✗	✗	✗	✗	✗
	✓	✓	✗	✗	✗
	<p><b>Methodological issues:</b> Well-designed and targeted research projects so as to address gaps in knowledge and seek to explore specific topics in greater detail.</p> <p><b>Effectiveness of public responses:</b> It will be essential that the resources available to deliver the NSD are properly targeted at activities and programmes that have been shown by previous works to be effective. This does not devalue the need for innovation.</p>				
				Biological research addressing the underlying cellular processes that impact upon addictive behaviour (BBSRC)	

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
Scottish policy document of 2008	<p>✓</p> <p>The Scottish strategy recognises the need to use previous research as well as emerging research to develop further understanding of addictions problem.</p> <p><b>Areas of interest targeted:</b></p> <p>The drug using population, the factors affecting people's substance misuse, the harms experienced and the most effective interventions in education, prevention and treatment.</p>	<p>✓</p> <p>Under the heading "Strengthening our evidence base about what works."</p>	✗	✗	<p>✓</p> <p>To set research priorities, the Scottish strategy has recently established:</p> <p>a National Drugs Evidence Group – as a project group of the Scottish Advisory Committee on Drug Misuse (SACDM).</p>
Welsh policy document 2008-18	<p>✓</p> <p>The Welsh strategy recognises the need to "to evaluate the effectiveness of interventions". The document stresses the importance of using such findings from research to help target support and to prioritise resources.</p>	<p>✓</p> <p>Along with delivering the strategy and supporting partner agencies</p>		<p>✓</p> <p>The Substance Misuse Strategy, Three-year Implementation Plan 2008-11</p> <p>Substance Misuse Delivery Plan 2013-2015</p>	✗

Policy framework	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
✓ Yes ✗ No	✓ <b>TFurther priority setting for research</b> "Each of the EU action plans should include priority research topics to be fostered at EU level, taking into account the rapid evolution of the drugs problem".	✓ Research priority topics presented as a cross-cutting theme of the strategy alongside "Information and evaluation".	✓ Three priorities for "information, evaluation and research" of which one of them refers explicitly to research topics.	✓ The two action plans adopted (2005-08 and 2009-12) under the 2005-12 Drugs strategy translate the EU priorities for research into objectives, actions and their respective indicators.	✓ One of the key priorities for research set the need for including priority research topics to be fostered at EU level in the related EU actions plans.
<b>EU drugs strategy 2005-12</b>	<b>Human resources for research</b> "Special attention should be given to the training of professionals and to consulting private and public actors".			<b>EU Action plan on Drugs (2005-08)</b> Action 43, "Promote research in the field of drugs", aims to facilitate research in the context of the Community programme for research and technological development (FP7) and the Member States' own research.	
	<b>Dissemination of research works</b> Large-scale exchanges and dissemination of research results, experiences and good practices should be promoted at Member State and EU levels, taking into account the work done by the relevant international organisations.			Action 44, "Create networks of excellence in drug research", aims at encouraging research networks, universities and professionals to develop and create networks of excellence for the optimal	

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<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				<p>use of resources, together with the effective dissemination of results.</p> <p><b>EU Action plan on Drugs (2009-12)</b></p> <p>Action 63, "Identify future EU research priorities in the field of illicit drugs and the mechanisms needed in order to generate new knowledge, develop new approaches and technologies and finally, to strengthen research capacity by developing and focusing its strategic direction and taking steps to improve cooperation in the EU".</p> <p>Action 66, "To conduct a scientific study to assess the use of the internet as a tool in relation to illicit drug trafficking and to analyse which national, European and/or international measures may be effective to counteract".</p>	

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<p><b>Conclusions of the Council of Europe on strengthening research capacities</b></p>	<p>✓</p> <p>The 1st conclusion of the Council refers to the "future EU priorities in the field of drugs so as to support the expansion of the drugs knowledge base and evidence base for drugs policy making"</p> <p>The Council identifies the following future EU priorities in the field of illicit drugs:</p> <p>The cause and nature of drug problems and how these develop in society, as well as the responses to them;</p> <p>The evaluation research, in which theory and practice are monitored and examined.</p>	<p>✗</p> <p>Solely dedicated to research in the field of illicit drugs</p>	<p>✓</p> <p>Five conclusions related to research were endorsed by the EU decision taking authorities in 2009</p>	<p>✓</p> <p>Conclusion 4th of the Council considers a series of detailed actions to be taken in order to strengthen drug research capacities at national and cross-national level across the Member States as well as at EU level, by the European bodies and agencies (Council, Commission and the EMCDDA).</p>	<p>✓</p> <p>This document already sets key priorities for future research in the EU. Furthermore, in his 5th conclusion, the Council recognizes "the importance of establishing a sustainable long-term framework for research in the field of illicit drugs" and encourages the MS to actively contribute to consultations on the "future European research policy"</p> <p>Among the statements made, the Council agrees "to establish an annual exchange on drugs-related research within the framework of the HDG that aims to create an understanding of the research priorities necessary to support the implementation of the EU action, as well as to provide input for the annual work programmes of the relevant EC funding programmes".</p>

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
<b>EU drugs strategy 2013-20</b> ✓ ✗	✓ <b>Four priorities refer to research topics:</b> Areas of interest for research The EU and its Member States should continue to invest in research [...] of the drug situation and responses to it at national and EU level. This should cover all relevant aspects of the drug phenomenon, including drug demand and drug supply. Member States, EU institutions and agencies should promote and support research, including applied research, into new psychoactive substances.	✗ Along with information, evaluation and monitoring presented as a cross-cutting theme of the strategy	✓ Ten priorities for "information, evaluation, monitoring and research" of which four of them refer explicitly to research topics.	✓ The action plan adopted over the period 2013-16 under the 2013-20 Drugs strategy translate the EU priorities for research into objectives, actions and their respective indicators. <b>EU Action plan on Drugs (2013-16)</b> Action 45, "Promote appropriate financing of EU-level drug-related multidisciplinary research and studies including through EU related financial programmes (2014-2020)" Action 46, "Ensure that EU-supported (research projects) take account of the priorities of the EU Drugs Strategy and action plans on drugs, take account of gaps in policy formulation, deliver clear added value and ensure coherence and synergy, avoid duplication with research under other programmes and bodies and take account of the impor-	✗
	<b>Knowledge infrastructure &amp; coordination</b> Member States, EU institutions and agencies should ensure cooperation and coordination between networks at national and EU level in order to strengthen the understanding of the phenomenon.				

Policy framework ✓ Yes ✗ No	Research related priorities present in the policy framework	Present along with related activities or in other sections	Formal research priorities recognised as such	Priorities translated into formalised actions	Further priority setting mechanisms formalised
... EU drugs strategy 2013-20	<p>The EMCDDA should, within its mandate, further enhance the knowledge infrastructure and should continue to play a key role as the central facilitator, supporter and provider of research [...] of illicit drugs across the EU.</p> <p><b>Funding needs for research</b></p> <p>Ensure adequate financing for drug-related research and development projects at EU and national level, according to financial resources including through the EU financial programmes covering the period 2014-20. Projects supported at EU level should take into account the priorities of the Strategy and its Action Plans and deliver a clear EU added value, ensuring coherence and synergies while avoiding duplication within programmes and with EU bodies.</p>			<p>tance behavioral research and neuroscience.”</p> <p>Action 48, “By maintaining networking and cooperation and develop capacity within and across the EU’s knowledge infrastructure for research [...] continue to provide comprehensive analyses of the EU drugs situation, the dynamics of drugs use within general populations and target groups, and responses to drug use.</p> <p>Action 50, “Enhance data collection, research, analysis and reporting on: (a) drug demand reduction; (b) drug supply reduction; (c) emerging trends, such as poly-drug use and misuse of prescribed and controlled medicines; that pose risks to health and safety; drug demand reduction interventions and services in prison settings; (d) blood borne viruses associated with drug use including but not limited</p>	

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<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				<p>to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis; (e) psychiatric and physical co-morbidity; (f) drug problems among prisoners and the availability and coverage of drug demand reduction interventions and services in prison settings; and (g) other drug related consequences."</p>	<p>Action 51, "Improve the capacity to detect, assess and respond effectively to the emergence and use of new psychoactive substances and monitor the extent to which such new substances impact on the number and profile of users"</p>

## **Main features of research priorities**

Due to the fact that drug-related research has a multifaceted dimension, policy priorities are not expressed in a homogenous manner. Depending on how the examined policy documents choose to address their specific needs within future actions, research priorities may be expressed in terms of knowledge gaps to bridge (in an area or specific discipline under-invested in, for example) or as concrete weaknesses in research capacity to be dealt with.

### ***Priorities focusing on progress to gain a better understanding of the complex phenomenon of the drugs problem***

The policy documents examined sometimes opt for setting out their priorities in terms of promoting a specific approach, which is seen as particularly relevant in order to improve understanding of drug problems and to increase the knowledge-base on drugs. Major emphasis is thus put on multi-disciplinary approaches or on cross-border research initiatives.

Research priorities may also focus on facilitating research in particular scientific disciplines (clinical neurosciences, epidemiology, sociology...) or in major research areas (prevalence, incidence and patterns of drug use, responses to the drug situation, determinants of drug use, consequences...) that are considered to be relatively under-researched.

Priorities may also reflect the need to apply a certain type of methodological approach (cohort studies, clinical trials, epidemiological surveys...), which is considered crucial in order to address specific research questions.

In addition, policy documents emphasise the need for research on emerging issues (new psychoactive substances, new pattern of use...).

### ***Priorities dealing with gaps in research capacity***

The policy documents analysed here also set out policy priorities that mainly seek to respond to weaknesses and limitations identified in terms of human resources capacity (skills, critical mass of researchers), funding resources and financial mechanisms (availability of financial resources, channels of information of the existing financial schemes, scope and duration of the grant programmes, critical size of the budgets allocated, allocation criteria...) and research infrastructure and coordination (policy and funding bodies, research agencies and structures, existing research networks, access to the dissemination channels).

## **Research priorities drawn from the EU and national policy documents: disparities in coverage and the level of detail**

While currently at EU level, the generic priorities for research set out in the EU Drugs strategies are systematically translated into actions in their related EU action plans on drugs, the situation in the Member States participating in ERANID is more diverse.

At national level, priorities for research have been formulated covering broad aspects related to research or, conversely, statements have been made in quite a detailed manner and focus on a very specific topic for research. Thus, the Belgium policy documents such as the Federal Policy Note of 2001 or the Belgium Common Declaration of 2010 have defined broad priorities (for example, making mention of the need to facilitate research “on supply topics but also on topics regarding the illicit drug demand” or to “improve coordination among the Federal, Regional and Community level”). This pattern is in stark contrast to the approach of the Netherlands’ authorities who, in their national policy document of reference, opted for setting quite detailed priorities for research. These priorities were formulated as a series of concrete studies on a specific research question (for example, a study on medical research on the harmfulness of prescribing heroin on medical grounds, research into THC-levels or the coffee shops are referred to as priorities for research in the Dutch White Paper of 2001).

Some similarities across countries are worth mentioning. For instance, France, Italy, Portugal and the United-Kingdom have chosen to first define wide thematic priorities and subsequently to translate these generic statements into more specific needs for research. The national authorities may do this on the basis of a single policy document as is the case with the national drug strategies in France and the United-Kingdom but countries may use different policy documents such as the national drugs strategy and its related action to establish the guiding priorities and the corresponding actions. This last pattern was seen in Italy and Portugal.

In order to allow an in-depth analysis of the similarities and differences across the ERANID countries and at EU level when it comes to defining priorities for research through the policy documents of reference, a detailed comparative overview of specific features and characteristics is presented in the following pages.

According to the specific needs to be addressed, five tables are provided. The following different categories of priorities are presented respectively:

Table 1 presents the priorities reflecting the need for promoting a specific approach. The three approaches below were identified while examining the policy documents:

- Cross-multidisciplinary approaches
- Cross-border projects
- Translational research

Table 2 details the family of priorities translating the need for facilitating research in a particular scientific discipline. Scientific disciplines are grouped in three categories as follows:

- Medical sciences
- Epidemiology
- Human and social sciences

Table 3 considers the category of priorities reflecting the need for facilitating research in a particular area. Eleven areas have been identified:

- Prevalence, incidence and patterns of drug use
- Prevention responses
- Treatment responses
- Law enforcement responses
- Harm reduction responses
- Drug-related crime responses
- Determinants of drug use
- Consequences of drug use
- Mechanisms of drug use and effects
- Supply and markets
- Methodological issues

Table 4 presents the category of priorities reflecting the need to apply a certain kind of methodological approach:

- Pre-clinical development approaches
- Clinical/ medical trials and proof-of-principle studies
- Mechanistic studies
- Descriptive and explanatory studies
- Cohort studies
- Studies of evaluation, research-action approaches and projects on quality

The final table classifies the priorities related to limitations in research capacity. Three categories of limitations were identified:

- Human resources
- Funding mechanisms
- Research infrastructure (collaborative networks, scientific cooperation, dissemination of research findings ...)

Table 1: EU and national policy documents setting out research priorities reflecting the need for promoting a specific approach

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes</p> <p>✗ No</p>							
Cross-disciplinary approaches	<p>✓</p> <p>"Key questions covering multiple competences should be sought" (BCD, 2010)</p>	<p>✓</p> <p>"Gaps in combining public health with human and social research" (FP 2008-11)</p> <p>"Action in favour of prevention and treatment requires the development of an ambitious multidisciplinary research policy" (FGP, 2013-17)</p> <p>"Need to carry out multidisciplinary research into motivations, perceptions and attitudes" (FGP, 2013-17)</p>	<p>✓</p> <p>"Need to respond to the drug problem with an evidence-based, integrated and multidisciplinary approach" (DPA, 2011)</p>	<p>✗</p> <p>Not formally made explicit (DWP, 1996)</p>	<p>✓</p> <p>"interdisciplinary studies should be included when it comes to setting research priorities" (PR 46/99)</p> <p>"The use of drugs is neither comprehensible nor explainable without the help of a wide range of knowledge. Cross-disciplinary is therefore fundamental for research on drugs and drug addiction" (PR 46/99).</p>	<p>✗</p> <p>Not formally made explicit in the policy documents here examined</p>	<p>✓</p> <p>The 2nd conclusion of the Council recognizes that "today's multifaceted drugs problems require an increasingly multidisciplinary approach [...]" (CCSRC, 2009)</p> <p>Made explicit while translating EU priorities into Action 45, "Promote appropriate financing of EU-level drug-related multi-disciplinary research and studies" (EU Action plan on Drugs, 2013-16)</p>

## Comparative analysis of research into illicit drugs across Europe

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes</p> <p>✗ No</p>							
Cross-border initiatives	<p>✓</p> <p>"International integration should be fostered" (BCD, 2010)</p>	<p>✓</p> <p>Particular attention is paid to "sharing of research funds across Europe and make use of EU funds" (FGP, 2008-11)</p> <p>International scientific coordination is promoted (FGP, 2013-17)</p>	<p>✓</p> <p>International collaboration (joint projects and training) is promoted (DPA, 2011)</p>	<p>✓</p> <p>"The Netherlands Government will take steps to expand scientific programme relating to drug use, partly within the framework of the EU and UN initiatives" (DWP, 1996)</p>	<p>✓</p> <p>Scientific collaboration at international level is promoted (PR 46/99)</p>	<p>✓</p> <p>Scientific collaboration at international level is promoted (CGDRS, 2010)</p>	<p>✓</p> <p>The Council recognizes the significant benefits of European cooperation to complement national research and promote drugs-related cross-border research cooperation". (CCSC, 2009)</p> <p>Furthermore, collaborative research across Member States forms part of the eligibility criteria set by EU authorities managing the EU financial programmes.</p>

✓ Yes  
 ✗ No

Translational  
 research

EU

United Kingdom

Portugal

The Netherlands

Italy

France

Belgium

✓  
 The Council stresses the need to translate knowledge into practice (CCSC, 2009) in his 3rd conclusion.

✗  
 Not formally made explicit but the Cross-Government Drugs Research Strategy supports the mission of OSCHR "to facilitate more efficient translation of health research into health and economic benefits in the UK through better co-ordination of health research and more coherent funding arrangements to support translation.

✓  
 "Increasing the interaction between knowledge, decision and intervention" is identified as a research priority (PP, 2005-2012)

✗  
 No formally made explicit but the Dutch White Paper of 1996 calls for a "pragmatic policy geared to practical results" (DWP, 1996)

✓  
 "It's seen essential to translate research results to clinical and education fields" (DPA, 2011)

✓  
 "Translational research will be promoted through calls for research projects" (F-GP, 2013-17)

✓  
 "Research themes should come in support of strategic orientations" (BCD, 2010)

Table 2: EU and national policy documents setting out research priorities reflecting the need for facilitating research in a particular scientific discipline

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes</p> <p>✗ No</p>							
Medical sciences	<p>✗</p> <p>Not formally made explicit in the policy documents here examined (neither BFPN, 2001 nor BCD, 2010)</p>	<p>✓</p> <p>Biology (FGP, 2013-17) Genetic (FGP, 2013-17) Neurosciences (FGP, 2013-17)</p>	<p>✓</p> <p>Neurosciences (IPA, 2010-13) Neurosciences with in-depth analysis of cognitive-behavioural aspects and changes during treatment (DPA, 2011) Neuroimaging (IPA, 2010-13)</p>	<p>✗</p> <p>Any scientific discipline formally made explicit in the policy documents here examined (DWP, 1996)</p>	<p>✓</p> <p>Biology (PR 46/99) Pharmacology (PR 46/99) Neurosciences (PR, 46/99) Toxicology (PR, 46/99)</p>	<p>✗</p> <p>Not formally made explicit in the policy documents here examined</p>	<p>✓</p> <p>The 2nd conclusion of the Council in 2009 recognises the importance of health [...] related research, including among others, neurosciences and biomedicine, addiction, epidemiology, [...] pharmacology and toxicology (CCSC, 2009).  The importance of the research in neurosciences (along with behavioural research) is also recalled by the EU authorities while translating priorities into actions: "Action 46, Ensure that EU-46 supported projects take account of the importance of the behavioural research and neuroscience." (EU Action plan on Drugs, 2013-16)</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes ✗ No</p> <p>Epidemiology</p>	<p>✓</p> <p>(BFPN, 2001 and BCD, 2010)</p>	<p>✓</p> <p>(FGP, 2013-17)</p>	<p>✗</p> <p>Not cited as such among the priority areas of interest for research identified in the policy documents here examined</p>	<p>✗</p> <p>Any scientific discipline formally made explicit in the policy documents here examined but the policy paper of 1996 calls for “comparable statistics” (DWP, 1996)</p>	<p>✓</p> <p>Epidemiological surveys (school-based studies, prison-based studies, problematic drug use) (PP, 2013-15)</p>	<p>✓</p> <p>“Work towards provision of robust comparative estimates of PDU prevalence” (CGDRS, 2010)</p>	<p>✓</p> <p>The 2nd conclusion of the Council in 2009 recognises the importance of epidemiology, among others disciplines (CCSC, 2009). While translating priorities into research related actions (Action 50), the EU authorities call for research into “emerging trends, such as poly-drug use and misuse of prescribed controlled medicines, that pose risks to health and safety, blood borne viruses associated with drug use including but not limited to HIV and viral hepatitis, as well as sexually transmissible diseases and tuberculosis; psychiatric and physical co morbidity; drug problems among prisoners and other drug related consequences.” (EU Action plan on Drugs, 2013-16)</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes							
✗ No							
Socio-economic Sciences and Humanities	<p>✗</p> <p>Not formally made explicit in the policy documents here examined (neither BFPN, 2001 nor BCD, 2010)</p>	<p>✓</p> <p>Research in criminology, in law and legal sociology, on the black market, on sociology of poverty and on drug-related behavioural changes and health (FGP, 2008-11)</p> <p>Formally present in the last French plan (FGP, 2013-17)</p>	<p>✓</p> <p>(IPA, 2010-13)</p>	<p>✓</p> <p>Any scientific discipline formally made explicit in the policy documents here examined (DWP, 1996)</p>	<p>✓</p> <p>Psychology, behavioural sciences, ethnology, economics and criminology (PR, 46/99)</p>	<p>✓</p> <p>Not formally made explicit in the policy documents here examined</p>	<p>✓</p> <p>Alongside health related research, the 2nd conclusion of the Council recognises the importance of "socio-economic research" as well as "research into criminal behaviours, drug markets, organised crime, corruption, money laundering, forensic science, detection and surveillance technology" (CCSC, 2009).</p> <p>The importance of the behavioural research (along with neurosciences) is recalled by the EU authorities while translating priorities into actions: "Action 46. Ensure that EU-supported projects take account of the importance of the behavioural research and neuroscience." (EU Action plan on Drugs, 2013-16)</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes		✓	✓	✓	✓	✓	✓
✗ No	✗						
Prevalence, incidence and patterns of drug use	Not cited as a research related priority in the policy documents here examined	Drug use (at school and in work environments) and alcohol abuse among young users (FGP, 2008-11) Characteristic patterns of drug use among minors involved in the criminal justice system (FGP, 2008-11) Initiation to cocaine use (FGP, 2008-11) Senior use of alcohol and psychotropic drugs (FGP, 2008-11) Gambling addiction (FGP, 2008-11)	Natural history studies of drug abusers (DPA, 2011) HIV/AIDS infectious diseases (DPA, 2011)	Regular user studies (DWP, 1996)	Natural history studies of drug abusers (PR, 46/99) Problematic use prevalence (PP, 2013-15)	Biological and social prevalence / incidence data is mentioned as a priority area for research (CGDRS, 2010)	While translating priorities into research related actions (Action 50), the EU authorities recall the importance of research into "emerging trends, such as poly-drug use and misuse of prescribed controlled medicines, that pose risks to health and safety, blood borne viruses associated with drug use including but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis; psychiatric and physical comorbidity; and other drug related consequences." (EU Action plan on Drugs, 2013-16)

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes ✗ No	✓ Scientific evaluation in prevention (BFPN, 2001) Research on the prevention of the drug use (BCD, 2010)	✓ Prevention and early identification of risk uses of drugs particularly for teenagers and young adults (FGP, 2008-2011) Evaluation studies on the field of limitation of drug use (FGP, 2008-2011) Research into public policies and in prevention responses in particular (FGP, 2013-17)	✓ Early detection, drug testing and brief interventions (DPA, 2011) HIV/AIDS infectious diseases testing and counselling (DPA, 2011)	✓ Evaluation of preventive measures (DWP, 1996)	✓ Assessing the impact of the decriminalization law (PP, 2005-12)	✓ Priority 4 and specific focus expected due to financial pressures (GDIRS, 2010) Evaluating the effectiveness of interventions (Scottish drug strategy document 2008; Welsh drug strategy document 2008-2018)	✓ The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions (Action 48), the EU authorities seek to "continue to provide comprehensive analyses of the EU responses to drug use. (EU Action plan on Drugs, 2013-16)
Prevention responses							

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes ✗ No	✓ Scientific evaluation in prevention (BFPN, 2001) Research on treatment (BCD, 2010)	✓ Promising medicines and new therapeutic strategies (FGP, 2013-17)	✓ Promising medications (DPA, 2011) Transcranial magnetic stimulation (DPA, 2011) Antiretroviral treatment for drug addicts suffering with HIV/AIDS infectious diseases to (DPA, 2011)	✓ Effectiveness and harmfulness of prescribing heroin on medical ground to any type of addict (DWP, 1996)	✓ Assessing the impact of the decriminalization law (PP, 2005-12)	✓ Priority 4 and specific focus expected due to financial pressures (CGDRS, 2010) Promoting the most effective interventions (Scottish drug strategy document 2008 ;Welsh drug strategy document 2008-2018)	✓ The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions (Action 48), the EU authorities seek to "continue to provide comprehensive analyses of the EU responses to drug use. (EU Action plan on Drugs, 2013-16)
✓ Yes ✗ No	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✓ Assessing the impact of the decriminalization law (PP, 2005-12)	✓ Priority 5 (CGDRS, 2010)	✓ The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions (Action 48), the EU authorities seek to "continue to provide comprehensive analyses of the EU responses to drug use. (EU Action plan on Drugs, 2013-16)
✓ Yes ✗ No	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✓ Assessing the impact of the decriminalization law (PP, 2005-12)	✓ Priority 5 (CGDRS, 2010)	✓ The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions (Action 48), the EU authorities seek to "continue to provide comprehensive analyses of the EU responses to drug use. (EU Action plan on Drugs, 2013-16)

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes ✗ No							
Harm reduction responses	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✓ Coffee shop policy (DWP, 1996)	✓ Assessing the impact of the decriminalization law (PP, 2005-12) Shooting rooms, therapeutic heroin, exchange of syringes at prison establishments (PR, 46/99)	✓ Priority 4 Harm reduction is not mentioned as such, but mention is made of "other demand-side intervention" (CGDRS, 2010) Promoting the most effective interventions (Scottish drug strategy document 2008, Welsh drug strategy document 2008-2018)	✓ The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions, the EU authorities seek to: Action 48 "Continue to provide comprehensive analyses of the EU responses to drug use." (EU Action plan on Drugs, 2013-16) Action 50, "Promote research into drug demand reduction interventions and services in prison settings." (EU Action plan on Drugs, 2013-16)

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes ✗ No</p> <p>Drug related crime responses</p>	<p>✓</p> <p>Studies dealing with criminality and drug-related nuisances (BFPN, 2001)</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✓</p> <p>Assessing the impact of drug decriminalization laws (PP, 2005-12)</p>	<p>✓</p> <p>Priority 5 (CGDRS, 2010)</p>	<p>✓</p> <p>The responses to the drug problems (CCSRC, 2009) While translating priorities into research related actions (Action 48), the EU authorities seek to "continue to provide comprehensive analyses of the EU responses to drug use. (EU Action plan on Drugs, 2013-16)</p>
<p>Determinants of drug use</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✓</p> <p>Priority 1 (CGDRS, 2010)</p>	<p>✓</p> <p>The cause and nature of drug problems (CCSRC, 2009)</p>

## Comparative analysis of research into illicit drugs across Europe

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes</p> <p>✗ No</p>							
Consequences of drug use	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✓ Drug-related social damage and in particular, relations between violence, delinquency and use of drugs, problems with precariousness and social isolation related to drug addiction behaviours (FGP, 2008-11)</p> <p>Drug related mortality (FGP, 2008-11)</p> <p>Psychological and social risks associated with gambling and screens abuse at an early age (FGP, 2013-17)</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✓ Harms caused by the use of new psychoactive drugs and harms associated to THC-levels (DWP, 1996)</p>	<p>✓ Harms caused by the use of new psychoactive drugs (PR, 46/99)</p> <p>Studies into mortality (PP, 2013-15)</p>	<p>✓ Priority 4 (CGDRS, 2010)</p>	<p>✓ While translating priorities into research related actions (Action 50), the EU authorities recall the importance of the research into drug related consequences (EU Action plan on Drugs, 2013-16)</p>
Mechanism of drug use and effects	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✓ Effects dues to early use of drugs (FGP, 2013-17)</p> <p>Effects of alcohol, cannabis and tobacco use during the adolescence (FGP, 2013-17)</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✓ Harms related to THC-levels and synthetic drugs use (DWP, 1996)</p>	<p>✓ Harms and dangers of different drugs (PR, 46/99)</p>	<p>✓ Priority 1 and 4 (CGDRS, 2010)</p>	<p>✓ The cause and nature of drug problems and how these develop in society, as well as the responses to them (CCSRC, 2009)</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes ✗ No							
Supply and markets	✓ Research on supply topics such as the production, the price or the availability (BCD, 2010)	✓ Research on the black market	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✓ Assessing the impact of drug decriminalization laws (PP, 2005-12)	✓ Priority 5 (CGDRS, 2010)	✗ Not cited as a research related priority in the policy documents here examined
Methodological issues	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined	✓ Studies on programme evaluation methodologies (PR, 46/99) Studies on the reliability and relevance of indicators used as well as on the significance of their variations (at geographical level and between population groups) (PP, 2005-12)	✗ Not cited as a research related priority in the policy documents here examined	✗ Not cited as a research related priority in the policy documents here examined



	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes ✗ No</p>							
<p>Descriptive and explanatory studies</p>	<p>✗ Not cited as a research related policy documents here examined</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✓ Surveys and other quantitative and qualitative indicators describing the phenomenon of drugs (PR, 46/99)  Studies enable to analyse the relation between types of drugs, types of individuals and types of surrounding context (PR, 46/99)</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>
<p>Studies of cohort</p>	<p>✗ Not mentioned</p>	<p>✗ Not mentioned</p>	<p>✗ Not mentioned</p>	<p>✗ Not mentioned</p>	<p>✓ Studies of cohort into mortality related to addiction (PP, 2013-15)</p>	<p>✓ Cohort studies are promoted to improve knowledge of drug use by adult offenders (CGDRS, 2010)</p>	<p>✗ Not cited as a research related priority</p>
<p>Studies of evaluation, research-action approaches and projects on quality</p>	<p>✓ Scientific evaluation (BFPN, 2001)</p>	<p>✓ Evaluation of public policy is promoted (FGP, 2013-17)</p>	<p>✓ Assessment of the outcome (DPA, 2011)</p>	<p>✓ Research projects on quality are promoted (DWP, 1996)</p>	<p>✓ Social experimentation initiatives (shooting rooms, controlled administration of heroin, exchange of syringes ...) (PR, 46/99)</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>	<p>✗ Not cited as a research related priority in the policy documents here examined</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
Studies of evaluation, research-action approaches and projects on quality					Evaluation of prevention, treatment, harm reduction and reintegration programmes (PR, 46/99)		
					Research action projects should be promoted (PP, 2005-12 and PP, 2013-15)		

Table 5: EU and national policy documents setting out research priorities stressing ultimate goals or addressing limitations in terms of research capacity

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes ✗ No</p>	<p>✓</p> <p>Scientific excellence should be fostered (BCD, 2010)</p>	<p>✓</p> <p>PhD grants; Post-doc training; Post-doc training in leading foreign research institutes; Masters on additology particularly in clinical research</p>	<p>✓</p> <p>The Italian plan of action recognises the importance of the training of future researchers (IPA, 2010-13)</p>	<p>✗</p> <p>Not addressed as a priority</p>	<p>✓</p> <p>Among the difficulties to be overcome, the lack of a stable scientific community in the field is addressed. Few scientists devote their university careers to this theme (often because the relative lack of interest of the universities only permits episodic research, aimed at obtaining academic degrees or at the request of State organisations) (PR, 46/99). In the field of "administrative research", it is important to introduce, in accordance with the law (Article 13 of Decree-Law 31/99 of 5 February), the career of scientific research into the</p>	<p>✗</p> <p>Not cited as a research related priority in the policy documents here examined</p>	<p>✓</p> <p>One of the priority needs addressed by the EU strategy over the 2005-2012 refers to improving the human capacity across Europe. It calls for "a special attention to be given to the training of professionals" (EU Drugs strategy 2005-12).</p>
<p>Human resources</p>							

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
✓ Yes ✗ No							
Human resources					organic structure of the public services, in which the production of scientific knowledge about drugs is developed in a systematic way (PR, 46/99)		
Funding mechanisms	✓ Flexible funding mechanisms should be sought (2010, BCD) Collaboration with other funding entities should be fostered (authorities at the federal, regional, community, international level) (2010, BCD).	✓ Give priority to sharing of research funds across Europe and make use of EU funds.	✗ Not addressed as a priority	✗ Not addressed as a priority	✓ The strategy stresses the need to overcome the tendency for short-term financial management of research and to provide financial support, for projects involving fundamental long-term research, which may lead to the construction and corroboration of sound explanatory models. It is also important that when projects are considered, especially by the Foundation for Science and Technology, the specificity of research on drugs and drug addiction must be taken into account" (PR, 46/99)	✓ "Funding for projects comes out of individual department budgets and is controlled by individual departments." (CGDRS, 2010)	✓ The EU strategy calls for an adequate financing for drug-related research and development projects at EU and national level while avoiding duplication within programmes and with EU bodies (EU Drugs strategy 2013-20)

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes</p> <p>✗ No</p> <p>Research infrastructure (collaborative networks, scientific cooperation, dissemination of research findings, ...)</p>	<p>✗</p> <p>Not addressed as a priority</p>	<p>✓</p> <p>Research networks are promoted (FGP, 2008-11)</p> <p>Scientific national and international scientific cooperation should be facilitated (FGP, 2013-17)</p>	<p>✓</p> <p>Funding priority will be given to scientific-based projects</p> <p>able to promote national collaborative network, it also recognises the importance of supporting the creation of an institutional scientific community and facilitating scientific publications and above all, it supports cross-ministerial collaborations with accredited research centres (IPA, 2010-13)</p> <p>It considers imperative to encourage the creation of cooperative networks among researchers, clinical staff and rehabilitation professionals (DPA, 2011)</p>	<p>✗</p> <p>Not addressed as a priority</p>	<p>✗</p> <p>Not addressed as a priority</p>	<p>✓</p> <p>Research networks are promoted (CGDRS, 2010)</p> <p>Scientific national and international scientific cooperation should be facilitated (CGDRS, 2010)</p>	<p>✓</p> <p>The EU strategy 2005-12 calls for a large-scale exchange and dissemination of research results, experiences and good practices should be promoted at Member State and EU levels, taking into account the work done by the relevant international organisations (EU Drugs strategy 2005-12).</p> <p>As regards knowledge infrastructure &amp; coordination, the EU strategy 2013-20 gives priority to ensuring cooperation between networks at national and EU level in order to strengthen the understanding of the phenomenon.</p>

	Belgium	France	Italy	The Netherlands	Portugal	United Kingdom	EU
<p>✓ Yes ✗ No</p> <p>Research infrastructure (collaborative networks, scientific cooperation, dissemination of research findings. ...)</p>			<p>It considers imperative to encourage the creation of cooperative networks among researchers, clinical staff and rehabilitation professionals (DPA, 2011)</p> <p>It engages the DPA to promote involvement in the studies by the national networks of the pre-existing cooperative centres as well as Regions. (DPA, 2011)</p>			<p>The role of the EMCDDA as a facilitator, supporter and provider of ... research [...] of illicit drugs across the EU is stated (EU Drugs strategy 2013-20)</p>	

## Making EU priorities explicit

In its introduction, the EU Drugs Strategy 2005-2012 endorses one of the recommendations of the final evaluation of the previous EU drugs strategy and action plan (2000-2004), which stressed the importance of improving the quality of the policy setting approaches and mechanisms at the EU level. In line with this, it called for “clear and precise objectives and priorities to be set out” and it was highlighted that both elements “can be translated into operational indicators and actions in the future action plans, with responsibilities and deadlines for their implementation clearly defined”[10].

From a formal point of view, the written EU drugs strategies and action plans examined here adhere to this recommendation. Research-related priorities were a formal part of the EU strategy 2005-12 as well as in the current EU Drugs policy documents. Indeed, these priorities are explicitly translated into a number of objectives, actions and indicators, which are set out in the related action plans. As regards responsibilities and timelines, the EU strategy for 2013-20 makes these clear and explicit while the previous strategy did not. Some progress has thus been made.

The main limitations identified within this review of policy documents are the large scope and extended boundaries of the research priorities established by the EU authorities and particularly, the lack of clear and distinctive hierarchy among them all. As far as the EU authorities seek to provide useful guiding policy principles to the EU Member States in the field of drug research, the presentation and formulation of research priorities remain too ambiguous to be operationalised at the national level.

## Establishing a policy framework for drug-related research at EU level: an ongoing process

The establishment of drug-related research priorities at EU level is in its infancy; the first steps to review the existing research priority setting mechanisms at EU level only date back to 2009.

### Starting point

In 2009, the Swedish Presidency of the EU Council initiated a formal and reasoned process aimed at setting drug related research priorities in order to provide better guiding principles to the EU Member States in the field of drug-related research. This step was taken in line with the contents of the 2005-2012 EU strategy and its related action plan on drugs for the period 2008-2012, which can be considered as the driver of such an initiative. The proposed action was formally set out by Action 63 of the Action Plan, in which the EU authorities made the commitment to “identify future EU research priorities and the mechanisms needed in order to generate new knowledge”.

Three major initiatives formed part of the work of the Swedish Presidency in 2009:

- The “Comparative Analysis of Research into Illicit Drugs in the European Union” commissioned by the European Commission’s Directorate-General for Justice, Freedom and Security (DG JLS)[6]

- The outcome of the conference “Bridging the research gap in the field of illicit drugs” organised by the Commission and held 24-25 September 2009.
- The Commission’s working document on “Strengthening EU Research Capacity on Illicit Drugs” which described the needs that research should address and proposed a number of actions to strengthen drug-related research capacity, cooperation and coordination at both national and EU level. These actions covered four main purposes: improving coordination at national and EU level; stimulating cross border research cooperation; enhancing research capacity and infrastructure; and improving access to research findings.

### *The first steps taken in setting research priorities at EU level*

In 2009, the Council endorsed the Commission’s working document on Strengthening EU research capacity on illicit drugs and provided guidance on how to strengthen EU research capacity through five major Council conclusions. The first conclusion stated the EU priorities in order to support the expansion of the drugs knowledge. In its second conclusion on strengthening research capacities, the Council defined the research fields particularly in need of “multidisciplinary approaches and new technologies”. The third conclusion reaffirmed the need to improve coordination between policy, research and practice. In its fourth conclusion, the Council invited the MS, and the EMCDDA to perform a series of actions in order to better address research needs in the field of illicit drugs. The fifth and final conclusion invited the MS and the research communities to contribute to the consultations to build the future EU drugs strategy and action plans. On this basis, the Council agreed to establish an annual exchange on drug-related research within the framework of the Horizontal Drugs Group (HDG)<sup>11</sup> to strengthen links between policy and research, to improve collaboration at EU level, and to reflect on progress made to-date. In the words of the Council conclusions, this dialogue aimed to “create an understanding of the research priorities necessary to support the implementation of the EU Drugs Action Plan 2009-2012 and beyond, as well as to provide input for the annual work programmes of the relevant commission funding programmes.” The Commission was then invited to prepare the “annual exchange” with the assistance of the EMCDDA and its Scientific Committee<sup>12</sup>, in accordance with Regulation (EC) 1920/2006, and the Member States. The first exchange was planned for the first half of 2010.

11. The Horizontal Working Party on Drugs (HDG) is the main coordinating body in the field of drugs in the General Secretariat of the Council. The group consists of representatives from the Member States’ ministries and organisations responsible for national drug policies, which deal with both demand reduction and public order protection. The ministries involved are usually those of health, internal affairs or justice. This group prepares all relevant legislation and political documents adopted by the Council, such as the EU drugs strategies and action plans. In addition, the members of the group, under the leadership of the presidency, elaborate EU statements on drug-related aspects to be presented at international fora, such as the UN Commission on Narcotic Drugs (CND).

12. The EMCDDA’s Scientific Committee advises and assists the Management Board of the Centre and the Director and delivers its opinion on any scientific aspect of the Centre’s activities which the Board or the Director submits to it. The Committee consists of at most fifteen well-known scientists appointed by the Management Board in view of their scientific excellence and their independence, following a publication of a call for expressions of interest in the Official Journal of the European Union.

### ***The contribution of the EMCDDA and its Scientific Committee to the HDG's Annual Dialogue on Drug-related Research***

Since 2010, the EMCDDA and its Scientific Committee have contributed to the HDG's Annual Dialogue on Research; since 2012, a methodology for research priority setting has been developed.

In 2010, members of the EMCDDA's Scientific Committee were asked to indicate three main issues requiring research at national and European levels. The EMCDDA used the classification from the DG JLS commissioned study as a meaningful and validated categorisation. The classified list of research topics was submitted to the Committee in order to rank the items according to priority. Subsequently, the final paper was submitted to the Committee for approval and to the HDG.

In 2011, in agreement with the European Commission, Directorate-General for Justice (DG JUST), the EMCDDA asked its Scientific Committee to update the document on research priorities submitted to the HDG the previous year. As a result of the consultation, none of the needs and priorities for research identified in 2010 were deemed obsolete and two new priorities emerged.

The outcome of the 2010 and 2011 research priority setting exercises are summarised in the table below.

#### **2010 research priorities**

First priority: Treatment intervention ...

Examples of research topics: effectiveness of new medical and psychosocial interventions, impact of the drug treatment on the natural history of addicts and recovery from addiction, effects of after care, ...

... and Prevention interventions

Examples of research topics: impact of early intervention, impact on affected families, ...

Second priority: Policy analysis

Study fields: how national and European policies are shaped formed and decided upon and how policy is implemented and the difficulties related to this.

Third priority: Drug supply

Cultivation - production / trafficking - diversion(leakage) / drug markets - distribution

Fourth priority: Epidemiological research

Further research needed on: estimating the size of drug using population (and specific sub-groups), the long-term course of differing patterns of use, pathways of recovery, ...

Fifth priority: Basic research on aetiology and course of drug use and related disorders

#### **2011 research priorities**

The five priorities identified in 2010 were still to be taken into consideration

New concerns

Drug supply

increasing urgency for research on:

- production / high level, middle level and low level drug market
- cannabis market and cannabis policy

In 2012, as a further contribution to the HDG's dialogue on research, the EMCD-DA's Scientific Committee provided a reflection note on drug-related research priorities for the 2014-2020 financial framework. Taking into account budget cuts and financial concerns across Europe, the Committee emphasised the need for European bodies and Member States to build new research governance in order to promote better rationalisation of costs and cost efficiency. To this end, the Committee proposed to commit to developing an empirical based framework for identifying research gaps and suggesting research priorities: a Research Priority Framework (RPF). Such an evidence-based, systematic approach was conceived as a tool to support both EU institutions (decision-making on funding in public and private institutions, the Annual Dialogue on Research promoted by the HDG) and national stakeholders (national research funding bodies...).

In 2013, the EMCDDA's Scientific Committee provided the HDG with the results of two priority selection exercises:

- a gap analysis pilot study on the area of drug treatment effectiveness composed by a synthesis of the available systematic reviews of evidence and complemented by interviews to privileged witnesses [11].
- a priority selection exercise based on the RPF "tool" focused on the 21 priorities for the policy area (drug demand reduction and supply reduction) defined in the EU Drugs Strategy 2013-2020.

The results of these exercises are presented in the table below:

Drug demand reduction	
Priority from the EU strategy (2013-2020)	Comments and study designs
19.3. Develop effective measures to respond to challenges such as: polydrug use, (...) misuse of prescribed controlled medications and the use of new psychoactive substances	<ul style="list-style-type: none"> <li>Involve user populations, e.g. focus groups, peer projects</li> <li>- Information of medical staff, control and law enforcement</li> <li>- Better methods to enumerate harms of EPS</li> <li>- Policy research: how to fund and manage services which cross types of drug misuse (e.g. prescribed and illicit), how to respond coherently and speedily to new substances</li> <li>- Detailed case study research into precisely what happens with users and problem users of each (e.g.) – polydrug; prescribed; new substances</li> <li>- Gap analysis and multicentre primary intervention studies</li> <li>- Qualitative, Internet and forensic applied studies</li> </ul>

19.4. Invest in and further research on effective risk and harm reduction measures

- Research on early signs of risk, on early identification and on effective action
- Minimum 10 EU countries, two parallel qualitative studies using different methods, one on drug deaths and one on drug users with infectious blood-borne diseases. Focus on life circumstances (including care, material resources, social resources, characteristics of drug use, etc.), their perception and attitudes and as far as possible on perceptions of their environment (professionals caring for them, partners, etc.)
- Gap analysis and multicentre primary intervention studies
- Promote innovative methodologies targeting populations not/less reached with conventional strategies
- Process and impact evaluation studies

Priority from the EU strategy  
(2013-2020)

Gap analysis findings

19.5. Expand the availability, accessibility and coverage of effective and diversified drug treatment across the EU to problem and dependent drug users including non-opioids users, so that all those who wish to enter drug treatment can do so, according to relevant needs

- Issues related to the organisation and management of health and social care
- Need to provide better evidence about matching interventions with clients
- More systemic approach concerning the target population, i.e. besides drug users, both family members and health professionals should be included in research projects
- Aging users and adolescents with occasional and recreational use
- Need for further understanding of other drugs such as cannabis, stimulants and 'legal highs'
- Better understand how to keep patients in treatment, help people with psychiatric co-morbidity, occasional users and/or polydrug users

## Drug supply reduction

Priority from the EU strategy  
(2013-2020)

Comments and study designs

22.10. Reinforcing policy evaluation and analysis to improve the understanding of drug markets, drug-related crimes and the effectiveness of drug-related law enforcement responses

- Facilitate independent scientific research
- Field studies
- Study size and nature of drug markets, e.g. through qualitative research
- Qualitative local studies on desired and non-desired effects of policy and law enforcement each carried out in at least 10 countries with varying policies and varying levels of law enforcement on the interdependency of (1) criminalisation strategies and drug use patterns, (2) police activities and drug distribution/ markets, (3) law enforcement and drug crime, etc.
- Analysis of routine data and monitoring systems/quantitative survey/qualitative interviews

- 
- 22.3. Respond effectively to the evolving trends, such as the diversion of certain chemicals (...) and the supply of drugs through the use of new technology
- Market analyses
  - Improve knowledge of trends and market mechanisms
  - Integrate technical and social research expertise
- 

### ***The role of the ERANID project***

The Eranid project forms part of the European process that aims at setting drug-related research priorities. Both the present mapping and the consultations of key stakeholders at national levels<sup>13</sup> were intended to build a Strategic research agenda that reflects as closely as possible research needs, consistent with policy needs in the drug field.

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13. National consultations were carried out in the six participating countries. Policy makers, researchers, patients organisations were asked to come up with research priorities in the field of illicit drugs.

## An overview of the manager agencies and the main grant research programmes in the field of illicit drugs

Across Europe, a number of organisations provide funding to support research in the field of illicit drugs. Such institutions may provide targeted funds for facilitating drug-related research through a fully dedicated grant programme, although it is not the sole existing funding mechanism. This part of the report focuses on both the drug-related, specific funding programmes set out by the European and national institutions to promote research in the field of the illicit drugs as well as the identified calls for proposals not targeted specifically to drugs but covering drug research initiatives as part of a broader programme of work.

Along with the grant programmes reported for the purpose of this study, the major manager agencies with responsibilities for funding research in the domain of drug addiction, their budgets and objectives are described in the section below.

### **DEDICATED DRUG-RELATED GRANT PROGRAMMES (2010-2013)**

At European level, in September 2007, the Directorate General for Justice (DG Justice) was given the mandate by the European Parliament and the Council of Europe to run the sole EU programme over the period covered by the present report (2010-2013) that was specifically targeted towards illicit drugs. The DG Justice “Drug Prevention and Information Programme” (DPIP) was set out as a part of the “Fundamental Rights and Justice Programme”, in order to contribute to the strengthening of the EU objectives in the area of Freedom, Security and Justice over the period 2007-2013 and sought to promote studies and research on illicit drugs among other types of actions.

In the ERANID countries, a single or at most, a few manager agencies at the national level centralise part of the funds allocated to drug-related research through specific programmes or drug-related scientific collaborative initiatives.

■ In Belgium, scientific calls for proposals targeted on drugs are managed by the Federal Science Policy Office (BELSPO) through the “Federal research programme Drugs” and the research projects funded in this programme support the “integral and integrated policy on drugs” set out in the current Belgium policy documents in the field of drugs. This programme was set in 2001 and is run on a yearly basis.

■ In France, the Interministerial Mission for Combating Drugs and Addictive Behaviours (MILDECA) jointly with the National Cancer Institute (INCa) and the University of Paris Nord 13 provide targeted financial support to facilitate drug-related research through the “PREVDROG call for proposals: Prevention, Drugs and Society” under the responsibility of their research departments. This call for proposals was launched for the very first time in June 2011 and the last campaign closed in May 2013. The calls for grants are organised on a yearly basis and have been since 2011.

■ In the Netherlands, the Netherlands Organisation for Health Research and Development (ZonMw) run a research programme entirely dedicated to drug use and addiction known as the “Risk Behaviour and Dependency Programme”. This programme is supported for the most part by the Ministry of Health but also by the Ministry of Justice by intermediate of the Netherlands Organisation for Scientific Research (NOW). Dutch research projects targeted on drugs are also funded by the ZonMw through a long-lasting international scientific collaboration with the NIDA (United States of America).

■ Three scientific calls for grants solely dedicated to drugs have been organised in the UK as part of “The addiction and substance misuse research strategy for the United Kingdom”. These calls for proposals have been managed by the Medical Research Council (MRC) in partnership with the Economic and Social Research Council (ESRC) on behalf of the Office for Strategic Coordination of Health Research (OSCHR).

Further details with respect to such fully dedicated programmes in the EU, Belgium, France, the Netherlands and the UK are presented in the section below (see “Funding programmes targeted on drugs”). In particular, it concerns data collected on budgets allocated to such programmes as well as their main objectives and identified research priorities.

In Italy and Portugal, no information was reported about the existence of a formal “structural financing” identified as a fully dedicated research programme for drugs.

■ In Italy, a “Governmental statement on scientific international collaborations” exists, which defines the national framework to support research at national level in conformity with the international agreements of current and future scientific collaborations. Through this document, the Anti-drugs Policy Department (DPA) engages formally to “support national research networks in financial and organisational terms” and in particular, to finance the collaborative national research centres to conduct research projects in the field of drugs and drug addiction as far as such projects are in line with the international agreements and the Italian drug action plan.

■ Although Portugal was reported as one of the first EU member states to have established a fully dedicated funding research programme in the field of drugs[6], no specific research financial programme or scheme seems to currently exist. A specific funding programme was launched in 2001 by the Ministry of Science and Technology through the Science and Technology Foundation (“Fundação para a Ciência e a Tecnologia” – FCT) and the Portuguese Institute of Drugs and Drugs Addiction but it was not a long-lasting initiative. In 2004, the evaluation of the national drug strategy reported dramatic advances in drug-related research in Portugal that could explain, at least in part, why no specific funding programme has been run since then.

## EU Drugs-targeted programming: the DPIIP

The programme “Drug prevention and information” (DPIIP) was set out on September 2007 by the EU authorities (Decision n° 1150/2007/EC). It ran for a full seven-year execution period (2007-2013) as a specific EU programme providing a funding mechanism specifically dedicated to projects on illicit drugs. A general overview of the objectives and priorities set out in the annual work agenda under this programme are presented below. The types of grants and the funding amounts deployed to support research through the calls for proposals supported for the period 2010-2013 by the DPIIP are also detailed here.

### *Objectives of the DPIIP*

The aim of the DPIIP was to exchange and transfer best practice across the EU to improve the quality of prevention and treatment services, to reduce drug-related health damage and to prevent drug use. The programme was structured around general objectives divided into specific objectives.

## General and specific objectives of the DPIP

General objectives	<p>To prevent and reduce drug use, dependence and drug related harm</p> <p>To contribute to the improvement of information on drug use</p> <p>To support the implementation of the EU Drugs Strategy</p>
Specific objectives	<p>To promote transnational actions to:</p> <p>Set up multidisciplinary networks</p> <p>Ensure the expansion of the knowledge base, the exchange of information and the identification and dissemination of good practices, including through training, study visits and staff exchange</p> <p>Raise awareness of the health and social problems caused by drug use and to encourage an open dialogue with a view to promoting a better understanding of the phenomenon of drugs</p> <p>Support measures aimed at preventing drug use, including by addressing reduction of drug-related harm and treatment methods taking into account the latest state of scientific knowledge</p> <p>To involve civil society in the implementation and development of the EU Drugs Strategy and EU Action plans</p> <p>To monitor, implement and evaluate the implementation of specific actions under the Drugs Action Plans 2005 to 2008 and 2009 to 2012. The European Parliament is involved in the evaluation process through its participation in the Commission's evaluation steering group.</p>

### *Thematic priorities in the DPIP Annual work programmes*

In addition, each year, the annual work programme emphasised several thematic priorities attached to the above specific objectives (see table below covering the period 2009-2013). In order to be funded, the projects had to fit within the scope of the programme and they had to address at least one of the thematic priorities emphasized.

### Drugs related thematic priorities within the DPIP annual programmes (2009-2013)

#### 2009 and 2010 Annual work programmes

Specific objective	Thematic priorities attached
Ensure the expansion of the knowledge base, the exchange of information and identification and dissemination of good practices in the area of drug-demand reduction	<p>Exchange of knowledge on and/ or development of effective approaches in prevention, in particular interactive interventions following social influence approaches and life-skills (e.g. interactive teaching, conflict handling, coping skills</p> <p>Develop prevention approaches including brief intervention and assessment specifically targeting the combined use of licit and illicit substances (poly-drug use), in particular aimed at young people.</p> <p>Develop successful models for E-health interventions for early detection, self-management and brief interventions aimed at drug users and/or their families.</p> <p>Development of approaches in selective prevention targeted at vulnerable groups at high risk of developing problem drug use (e.g. families at risk, young offenders, homeless, prisoners)...</p>

	<p>Development of preventive and treatment approaches that take into account the needs of specific drug user groups (e.g. sex workers, (pregnant) women, migrants and minority groups, specific age groups).</p> <p>Exchange of best-practices on treatment programmes targeted at non-opioid drug users (e.g. cocaine, cannabis)</p> <p>Development of innovative approaches aimed at preventing relapse and at reintegration and rehabilitation of (long-term) drug users</p>
<p>Raise awareness of the health and social problems caused by drug use and to encourage an open dialogue with a view to promoting a better understanding of the phenomenon of drugs</p>	<p>Exchange of best practice on innovative awareness raising campaigns targeted at young people and integrated with prevention activities on the risks associated with drug use.</p> <p>Exchange of best practice on innovative approaches, via the internet, to provide information and advice to parents/family and members/careers of drugs users to support their involvement in preventing the use of drugs by young people.</p>
<p>Support measures aimed at preventing drug use, including by addressing reduction of drug-related harm and treatment methods taking into account the latest state of scientific knowledge</p>	<p>Identify and develop innovative approaches in harm reduction to reduce drug-related deaths, in particular targeting poly-drug use and non-opioid drug users.</p> <p>Develop and implement approaches to reduce drug-related harm to drug users in prisons and/or on release from prison and improve their access to treatment.</p> <p>Develop models of good practise in information and training for staff in emergency services and recreational settings (Nightclubs, pubs, etc.) to effectively respond to drug-related incidences.</p>
<p>Involve civil society in the implementation and development of the EU Drugs Strategy and EU Action plans</p>	<p>Exchange of best-practices on cooperation between authorities and civil society at local and/ or regional level, by public services providing prevention, education, harm reduction, and law enforcement working together with voluntary organisations and service providers from civil society.</p>
<p>Monitor, implement and evaluate the implementation of specific actions under the Drugs Action Plans 2005 to 2008 and 2009 to 2012. The European Parliament is involved in the evaluation process through its participation in the Commission's evaluation steering group.</p>	<p>Development and exchange of best practice in policy and programme evaluation at different levels in the drug field (local, regional and national)</p>
<p><b>2011 Annual work programme: A new thematic priority attached to the following specific objective:</b></p>	
Specific objective	Thematic priorities attached
<p>Ensure the expansion of the knowledge base, the exchange of information and identification and dissemination of good practices in the area of drug-demand reduction</p>	<p>Same priorities than 2009-2010 as well as the following one: Develop integrated and innovative approaches to identify, monitor and respond to new trends and patterns in the consumption of – in particular – new psychoactive substances which are not controlled ("legal highs") but which may pose health and social risks including new types of drug dependence</p>
Other specific objectives	Same priorities than 2009-2010

**2012 Annual work programme**  
**Three new thematic priorities attached to the 1st specific objective and 2 new priorities attached to the 3rd specific objective**

Ensure the expansion of the knowledge base, the exchange of information and identification and dissemination of good practices in the area of drug-demand reduction

Same priorities than 2011 and in addition:  
 Enhancing the economic analysis of the drugs phenomenon.  
 Develop and implement best practice in the field of quality standards and guidelines in the field of drug demand reduction.  
 Review current practices and barriers to monitoring data on health, drug use and drug services in prison settings, and develop guidelines and models of good practice for demand reduction in prison and on continuation of care on release.

Support measures aimed at preventing drug use, including by addressing reduction of drug-related harm and treatment methods taking into account the latest state of scientific knowledge

Same priorities than 2011 and in addition:  
 Review opportunities for developing and implementing (innovative) interventions, including training activities, to prevent hepatitis C in drug users.  
 Develop approaches the systematic collection of data on emergency rooms admission for drugs, with a particular focus on identifying trends in use and adverse consequences relating to stimulant and poly drug use.

Other specific objectives

Same priorities than in 2011

**2013 Annual work programme**  
**The scope of priorities is tightened**

Ensure the expansion of the knowledge base, the exchange of information and identification and dissemination of good practices in the area of drug-demand reduction ó the scope of priorities is tightened, seven previous priorities are abandoned

Priorities maintained:  
 Develop approaches in selective prevention targeted at vulnerable groups at high risk of developing problem drug use (e.g. families at risk, young offenders, homeless, prisoners);  
 Develop preventive and treatment approaches that take into account the needs of specific drug user groups (e.g. sex workers, (pregnant) women, migrant and minority groups, specific age groups), and in particular also approaches addressing comorbidity between drug-related substance use disorders and other mental illnesses  
 Develop innovative approaches aimed at preventing relapse and models of good practice for reintegration and rehabilitation of (long-term) drug users, including – inter alia - those released from prison;  
 Develop and implement best practice in the field of quality standards and guidelines in the field of drug demand reduction;  
 Enhance the economic analysis of the drugs problem, including the development of methodologies to estimate social costs, the impact of economic crises on drug use and drug policies.

Raise awareness of the health and social problems caused by drug use and to encourage an open dialogue with a view to promoting a better understanding of the phenomenon of drugs ó the scope of priorities is tightened, one priority is reworded instead of two previously	Exchange of best practice on innovative awareness-raising and prevention methodologies targeted at young people and their parents/family/carers, by making use of – inter alia – social media tools and applications- targeting the risks associated with drug use, including those associated with the use of new psychoactive substances
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Support measures aimed at preventing drug use, including by addressing reduction of drug-related harm and treatment methods taking into account the latest state of scientific knowledge. The two priorities added in 2012 do not appear again. The priority linked to NPS appeared first in 2011 but was not attached to the same specific objective (First specific objective initially)	2009-2011 and in addition: Develop innovative methodologies to identify and monitor new trends and patterns in the consumption and adverse consequences of – in particular – new psychoactive substances, and the development of targeted approaches in prevention, harm reduction and treatment
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Other specific objectives	Same thematic priorities than previously
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### Types of grants supported by the DPIIP

Several kind of projects were supported by the DPIIP: transnational projects (Action grants), the activities of non-governmental organisations or other entities pursuing an aim of a general European interest (Operating grants), and, specific actions initiated by the Commission (Calls for tenders).

The DPIIP launched annually two kinds of calls: the first one was dedicated to Action grants, the second one to Operating grants. Since the Operating grants did not cover projects with a research element, their respective calls and detailed information about the projects are not examined in the present report.

### Research grants and budget allocated in the DPIIP

Since the establishment of the programme in 2007, five calls related to “Action grants” have been launched in the following years: 2007 / 2008 / 2009-2010 / 2011-2012 and 2013. This analysis covers the last 3 calls.

The following table details the budgets related to Action Grants over the period covered by the present report.

#### Budget allocated to drug Action Grants under the DPIIP Programme (2009-2013) (M€)

Call (Action Grant)	2009 - 2010	2011 - 2012	2013
Available provisional budget (*)	4 177 600	5 103 200 (2.400 000 + 1.717 600)	2 634 000 (3.045.200 + 2 058 000)
Budget allocated to drug research projects	3 306 628	4 317 941	2 596 009

\* The total budget is not necessarily invested only in studies and research projects. Part of this amount may have been allocated to exchange of best practice/ training, study visits / staff exchanges /seminars, meetings, conferences or may be a combination of these activities. In addition, these amounts may have been increased thanks to the appropriations arising from the internal assigned revenue (revenue from recoveries) from the previous year, for instance.

## National level

### *Belgium: The “Federal Drugs Research Programme”*

The “Federal Drugs Research Programme” was established through the Final decision of the Ministers Council of 5 July 2001 in the framework of the “Federal Policy Note on the problematic of drugs” adopted on January 2001. For carrying on such a mission, a drugs-targeted annual budget was allocated to the Belgium Minister in charge of the federal science policy. The research programme is implemented through calls for proposals organised on a yearly basis. The Federal Science Policy Office (BELSPO) has been responsible for managing this programme since 2001.

#### *General objective of the “Federal research programme Drugs”*

The purpose of the federal research programme was, from 2001 to 2009, primarily intended to fund research projects in support of the illicit drug-related policy promoted by the Federal authorities. Since the adoption of the Cross-Federal Cooperation Agreement signed in September 2008, the “Federal research programme” has been reoriented to fund research projects in support of the global and integrated approach on drugs for Belgium also at regional and community levels. Because the global and integrated policy on drugs for Belgium endorsed in 2010 by all the Belgium authorities officially focuses not only on illicit drugs but also on licit substances as alcohol, tobacco and psychotropic substances, since then, the Federal research programme has been extended to research projects tackling any of these substances.

#### *Priority themes set in the Federal research programme through its calls for proposals*

As regards priority research areas of interest, the specific research themes are set on a yearly basis in the annual work programme prepared by BELSPO that is used for guiding the annual scientific calls for proposals funded by the programme. The authority competent in setting out new research themes and preparing the annual work programme is the “Scientific research and information sub-cell” that forms part of the General Cell for Drugs Policy (PCD) in charge of supervising the overall management of the drug-related policy for Belgium. The Federal research programme allocated funding from 2010 to 2013, through three calls for proposals; with the exception of 2012 where no call for proposal was launched because of budget cuts.

## Thematic priorities set out in the calls for proposals during the period 2010-2013

2010 Call for proposals	2011 Call for proposals	2013 Call for proposals
<p>Two thematic priorities</p> <p>Theme 1: 'Children, adolescents and consumption of substances ». This Policy relevant thematic is clearly supporting all members of the PCD in charge of the global and integrated Drugs policy, specifically the FPS Public Health, the Walloon Region and The Flemish Community who helped drafting this theme. This theme is fully funded by BELSPO. Maximum allocated budget: 360.000€</p> <p>Theme 2: Analysis and optimisation of treatment for substances in Belgium. This is « Policy driven » theme supports the needs of the FPS Public Health and gained the support of other actors in the Policy Cell Drugs. Maximum allocated budget: 280.000€</p>	<p>Four thematic priorities and a non-thematic priority:</p> <p>Theme 1: Supply of illegal drugs indicators</p> <p>Theme 2: Qualitative evaluation of a pilot project on the creation of a specialised court for non-organised drug related crimes</p> <p>Theme 3: High-risk computer use in Belgium: definition, prevalence and approach</p> <p>Theme 4: Use of alcohol, illegal drugs, hypnotics and tranquilizers in the Belgian population. Prevention and treatment by general practitioners, and health surveillance on the work floor by occupational physicians: knowledge needs and supply.</p> <p>Non-thematic project in support of the integral and integrated drug strategy in Belgium</p>	<p>Three thematic priorities and a non-thematic priority:</p> <p>Theme 1: Social cost of drugs in Belgium</p> <p>Theme 2: Consensus building on minimum quality standards, and standards of excellence, in illicit drug demand reduction</p> <p>Theme 3: Threat of illegal cannabis plants for the population in general and intervention personnel in particular</p> <p>Non-thematic project in support of the integral and integrated drug strategy in Belgium</p>

### *Annual budget allocated to the “Federal research programme Drugs”*

A budget of 910 000 EUR is made available annually to fund drug-related research projects through the annual call for proposals launched by BELSPO and in line with the annual work programme.

### **France: The “PREVDROG funding initiative”**

The French “PREVDROG funding initiative: Prevention, Drugs and Society” was first launched in June 2011. Established by the French authorities competent in the field, it built on the 2008-2011 Governmental Plan for the fight of drugs and drug addictions. Its last campaign ended in May 2013. Three public organisations combined funding for this programme once a year: the Interministerial Mission for Combating Drugs and Addictive Behaviours (MILDECA), the National Cancer Institute (INCa) and the University of Paris Nord 13.

### *General objective of the “PREVDROG funding initiative”*

This funding initiative aimed to facilitate research in the field of drugs in order to provide policy recommendations to decision-makers, in particular in terms of prevention responses, with a special focus on under-investigated areas of research such as human and social sciences as well as clinical research.

Priority themes set in the PREVDROG through its calls for proposals

The thematic pillars of the calls for proposals are set by the MILDECA in partnership with the INCa and the University of Paris Nord 13.

### Thematic priorities set in the call for proposals for the period 2010-2013

PREVDROG2011	PREVDROG2012	PREVDROG2013
<p>Four thematic priorities:</p> <p>Theme 1: Social inequalities, precariousness and use of tobacco, alcohol and illicit drugs</p> <p>Theme 2: Addictive behaviours in a professional environment</p> <p>Theme 3: Use and misuse of licit and illicit substances, school trajectories, parenting.</p> <p>Theme 4: Recovery and identity and social reconstruction through life trajectories</p>	<p>Three thematic priorities:</p> <p>Theme 1: Drugs, vulnerability and life trajectories</p> <p>Theme 2: Drugs and perceptions</p> <p>Theme 3: Drugs, markets, governance and prevention</p>	<p>Three thematic priorities:</p> <p>Theme 1: Drugs, vulnerability and life trajectories</p> <p>Theme 2: Drugs and perceptions</p> <p>Theme 3: Drugs, markets, governance and prevention</p>
<p>Approximate budget available per project: 80 000 EUR-100 000 EUR (5 research projects max).</p>	<p>Approximate budget available per project: 80 000 EUR-100 000 EUR (5 research projects max).</p>	<p>Approximate budget available per project: 80 000 EUR-100 000 EUR (5 research projects max).</p>

#### *Annual budget allocated to "PREVDROG"*

An annual budget of 500 000 EUR was allocated from 2011 to 2013 to fund drug-related research projects through the two call for proposals launched in partnership by the MILDECA, the INCa and the University of Paris Nord 13.

#### ***The Netherlands: The "Risk Behaviour and Dependency Programme"***

The "Risk behaviour and dependency Programme" was first launched in 2005. It is a research programme solely dedicated to addiction behaviour characterised by abuse and dependency of illicit drugs and alcohol. The primary emphasis is problematic cocaine, cannabis and poly-drug use in relation to other risk behaviour. This programme was established by the Ministry of Health and the Ministry of Justice. The ZonMw is responsible for running this programme in collaboration with the NWO. The programme is due to conclude its work in 2015.

#### *General objectives of the "Risk Behaviour and Dependency Programme"*

The Risk Behaviour and Dependency Programme aims to "identify key factors that influence the onset, course and chronicity of substance dependency". It seeks to "unravel the interactions between the internal and external factors that underlie addiction, and develop and implement prevention and treatment methods based on that knowledge". The programme thus "embraces the full innovation cycle, linking knowledge development, synthesis, translation, dissemination, implementation and evaluation."

### *Priority themes targeted by the Netherlands "Risk Behaviour and Dependency Programme"*

The programme has four specified themes, which were established by the Ministry of Health under the proposal of the ZonMw. Consultation with the practitioners in the field was organised and the final proposal took into account the state of art of drug-related research.

The four central themes are:

- Factors that influence the onset of risk behaviour and substance dependency, particularly at a young age.
- Factors that influence the course and chronicity of risk behaviour and substance dependency.
- The nature, severity and scale of problems associated with substance use, poly-drug use and dependency.
- Effectiveness of interventions.

A common strand running through the research is life course - the distinguishable stages in human lives at which external factors manifest differently as they interact with an individual's genetic make-up. The particular focus is childhood and youth.

### *Annual budget allocated to the "Risk Behaviour and Dependency Programme"*

A budget of €13 million was allocated for this programme for the period 2005-2015. It is funded by the Ministry of Health, Welfare and Sport and the Ministry of Justice by intermediate of the ZonMw and the NWO.

### ***UK: The Medical Research Council-led funding initiative under the "Addiction and substance misuse research strategy"***

The Medical Research Council (MRC) alongside the Economic and Social Research Council (ESRC) was charged in 2009 with facilitating multidisciplinary and novel research on drugs in the framework of the "Addiction and substance misuse research strategy for the United Kingdom". This strategy, which also aimed to build research capacity in the field of addictions and make better use of existing expertise and infrastructure, provided funding for research over the period 2009-2010 through three calls for grants.

### *General objective of the MRC's funding initiative*

This initiative aimed to fund innovative and cross-disciplinary research so as to meet the needs of a wide range of stakeholders and lead to improvements in public health by reducing the harm caused by illicit drugs, alcohol, tobacco and problem gambling.

### *Priority themes for research set in the MRC's funding research initiative*

The key topics for research funded through the calls for grants under the "2009 Addiction research strategy" for the UK were as follows:

## Thematic priorities set in the call for proposals launched from 2009 to 2010

First call (grants for the pilot phase)	Second & third calls (seed corn funding)
<p>Nine key topics for research:</p> <p>Theme 1: Adolescent substance use trajectories.</p> <p>Theme 2: Understanding alcohol's effects on inhibition of behaviour: implications for treatment.</p> <p>Theme 3: Genetic influences underlying impulsivity and risk for drug addiction.</p> <p>Theme 4: Predicting relapse in treatment-seeking pathological gamblers using impulsivity and compulsivity assays.</p> <p>Theme 5: Neurobiology of cognition and craving in opiate addiction: implications for relapse.</p> <p>Theme 6: Molecular and physiological mechanism of GABA(A) receptor function in striatal circuits underlying addiction.</p> <p>Theme 7: Imaging D3 receptors in alcoholism.</p> <p>Theme 8: Exploring the potential of D-cycloserine and cannabidiol to enhance cue exposure therapies in substance dependence.</p> <p>Theme 9: Transdermal delivery of a buprenorphine / naltrexone combination for the treatment of poly-drug abuse.</p>	<p>Nine key unmet priority needs:</p> <p>Theme 1: Developing evidence-based behaviour change interventions and policies to reduce alcohol use and misuse among young people</p> <p>Theme 2: Developing innovative cognitive-motivational and neuroscientific interventions for alcohol abuse</p> <p>Theme 3: Experimental and clinical research on treatment of alcohol misuse and dependence</p> <p>Theme 4: Addictions in youth and young adulthood: Causes, trajectories and risk factors</p> <p>Theme 5: Causes, epidemiology and prevention of substance use (and gambling) among young people</p> <p>Theme 6: Research for effective alcohol policies capacity development for alcohol policy effectiveness research</p> <p>Theme 7: Nationally integrated quantitative understanding of addiction harms</p> <p>Theme 8: Research in aetiology and translation in addiction with partnerships functional genomics and identification of biomarkers in addictions</p> <p>Theme 9: Causes of addiction and vulnerability factors</p>

### *Budget allocated under the calls for proposals launched*

In February 2009, a budget of £1.95m (2.44 million Euros) was allocated to fund pilot research through a first call for grants. The second call for proposals provided initial seed-corn funding with a view to develop interdisciplinary addiction research by establishing national networks of experts. It closed in May 2009. Together, the MRC and the ESRC made available £4.5m (5.63 million of Euros) to fund unmet research priority needs under a third call, which was launched in the final quarter of 2009. Awards were made in 2010.

## **BROADER GRANT PROGRAMMES OPEN TO RESEARCH TEAMS FOR RESEARCH IN THE FIELD OF DRUGS (2010-2013)**

Drug-related research projects can be also funded through other public or private organisations in broader thematic programmes wider than research specific to the field of drugs and drug addiction. Detailed data have been collected at EU level; however the data collected on the basis of the questionnaire have been of poor quality. Only data at EU level could be provided here.

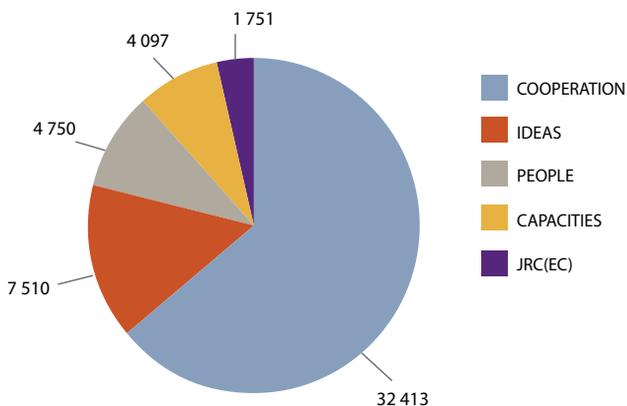
There are also other mechanisms to financially support the research teams that conduct research projects, for example, a contract award relying on writ-

ten research proposals without the frame of an open bidding procedure (grant awards). For more information on these mechanisms, see part V of this report which makes an in-depth presentation of drug-related research projects reported over the period 2010-2013.

### The 7th Framework Programme for Research and Technological Development (Fp7): objectives, research themes, calls for proposals launched and budgets allocated to drugs research

The “FP7 Programme” was managed by the Directorate General for Research, Technology and Development (DG RTD). With a total budget of around 53.2 billion Euros, FP7 was a major research funding source at the EU level. It was structured around five specific programmes: Cooperation, Ideas, People, Capacities and Nuclear Research.

#### Fp7 budget (€ million)



Note: Euratom FP: € 2.7 billion over 5 years - not included above

While there was no specific research topic “illicit drugs” under FP7, there were a number of potential entry points for drug-related research under the following themes of the “Cooperation Programme”: “Health”, “Social economic sciences and humanities” and “Security”.

In addition, the “People Programme” aimed to support the work of highly qualified researchers (Marie Curie Fellowships) dedicated to addiction issues, the “Ideas Programme” sought to fund fundamental research in all scientific fields (addiction issues included) and the “Capacities Programme” aimed to fund the development and optimisation of the use of research infrastructure.

### **Objectives of the “FP7 Cooperation Programme”: Health, SSH and Security themes**

The specific programme, “Cooperation”, supported all types of research activities carried out by different research bodies in transnational cooperation and aimed to gain or consolidate leadership in key scientific and technology areas.

The general objective of the “Health theme” under this programme was to improve the health of European citizens and to boost the competitiveness of health-related industries and businesses, as well as to address global health issues.

The “SSH theme” sought to generate an in-depth, shared understanding of the complex, interrelated socio-economic challenges that Europe faces in order to improve the knowledge base for drawing up European policies that have a clear relevance. This overarching objective covered 8 areas of investigation most of them being open to addiction issues (in particular areas 3, 6, 7 and 8, see table below).

#### **Areas emphasized in Fp7 - SSH**

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- Growth, employment and competitiveness in a knowledge society:  
*Innovation, competitiveness and labour market policies;*  
*Education and life-long learning;*  
*Economic structures and productivity.*
  - Combining economic, social and environmental objectives in a European perspective:  
*Models within Europe and across the world; Economic and social and cohesion across regions;*  
*Social and economic dimensions of environmental policy.*
  - Major trends in society and their implications - demographic change, reconciling family and work, health and quality of life, youth policies, social exclusion and discrimination.
  - Europe in the world - trade, migration, poverty, crime, conflict and resolution.
  - The citizen in the European Union - political participation, citizenship and rights, democracy and accountability, the media, cultural diversity and heritage, religions, attitudes and values.
  - Socio-economic and scientific indicators - the use and value of indicators in policymaking at macro and micro levels.
  - Foresight activities - the future implications of global knowledge, migration, ageing, risk and the emerging domains in research and science.
  - Horizontal actions - including research for policy support and international cooperation.
- 

Amongst the general objectives of the “Security theme”, the need for knowledge to protect the security of citizens from threats such as crime was an important rationale for drug supply research (drug trafficking, policy to controlling supply, geo-policy of drug crime ...).

#### **Calls for proposals launched falling under the frame of the “FP7 Cooperation Programme”**

Between 2009 and 2013, 6 calls were opened to addiction issues under the FP7 programme:

- FP7-HEALTH-2009-single-stage

- FP7-SECURITY Sub-programme area: SEC-2009-1.3-2 Collaborative project (generic)
- FP7-SSH-2010-1, topic SSH.2010.3.2-1.
- FP7-HEALTH-2011-two-stage
- FP7-SECURITY Sub-programme area: SEC-2011.1.4-1
- FP7-ERANET-2012-RTD, topic SSH.2012.3.2-4.

**EU financial efforts to promote drugs-related research projects under the “FP7 Cooperation Programme” (2010-2013)**

The following table presents the budgets allocated to drug research projects (M€) under the Health, SSH and Security themes in the FP7 Cooperation Programme:

	2009	2010	2011	2012	2013
FP7 HEALTH	/	2.999 312 0,9% of annual budget	6.0 0,9% of annual budget	/	/
FP7 SSH	No topics open to drugs.	7.978 226 11% of annual budget	/	1.999 725 2,2% of annual budget	No topics open to drugs.
FP7 SECURITY	3 486 406 2,7% of annual budget	/	0.881 742 0,4% of annual budget	/	/

For more information, see [http://cordis.europa.eu/fp7/home\\_en.html](http://cordis.europa.eu/fp7/home_en.html)

**Objectives of the “FP7 Ideas Programme”**

The FP7 Ideas programme was implemented by the European Research Council (ERC). Its major objective was to reinforce excellence, dynamism and creativity in European research. The programme supported basic research at the frontiers of knowledge, independently of thematic priorities. Research could be carried out in any area of science or technology, including engineering, socio-economic sciences and the humanities. Excellence being the sole criterion to select the projects, the programme was open to addiction researchers.

**Calls for proposals launched under the “FP7 Ideas Programme”**

Under the FP7 IDEAS programme, research projects were financed each year through Starting Grants and Advanced Grants. Except in 2011, drug research projects were funded every year since 2009 through these two funding mechanisms.

The programme distinguished 3 areas of scientific disciplines: Physical Sciences & Engineering (PSE), Life Sciences (LS) and Social Sciences & Humanities (SSH). These scientific areas were not put on equal footing as detailed below:

- Physical Sciences & Engineering (PSE) counted for 44% of the total budget since 2011 (39% previously)

- Life Sciences (LS) counted for 39% of the total budget since 2011 (34% previously)
- Social Sciences & Humanities (SSH) counted for 17% of the total budget since 2011 (14 previously)

### **EU financial efforts to promote drugs-related research projects under the “FP7 Ideas programme” (2009 – 2013)**

The table below presents the budgets allocated to drug research projects (M€) under the “FP7 Ideas Programme”:

	2009	2010	2011	2012	2013
FP7 IDEAS	6.05 (0.77% of the indicative annual budget)	1.5 (0.13% of the indicative annual budget)	/	6.1 (0.43% of the indicative annual budget)	/
Type of grants and disciplines	1 StG Neurosciences 1 AdG Neurosciences 1 AdG SSH	1 StG SSH	/	1 StG Neurosciences 2 AdG Neurosciences	/

### **Objectives of the “FP7 People”**

The general objective of the programme was to encourage people to enter into the profession of researcher, strengthening, quantitatively and qualitatively the human potential in research and technology in Europe. The programme addressed researchers in terms of their skills and competence development at all stages of their careers. The programme supported mobility and career development for researchers both within and outside Europe. As research fields were chosen freely by the applicants, the People programme was open to addiction researchers.

### **Calls for proposals launched under the “FP7 People Programme”**

The activities supporting training and career development under the programme referred to as “Marie Curie Actions”. They covered several types of grant-funding: International Incoming Fellowships (IIF) / Intra-European Fellowships (IEF) / International Outgoing Fellowship (IOF) / Career Integration Grant-Support for training and career development of researchers (CIG) / Networks for Initial Training (ITN) / International re-integration Grant (IRG). The majority of these grants enabled research projects to be carried out.

## EU financial efforts to promote drugs-related research projects under the “FP7 People Programme” (2009 – 2013)

The table below presents the budgets allocated to drug research projects (M€) under the “FP7 People Programme”:

	2009	2010	2011	2012	2013
FP7 PEOPLE	.261 293	.210 092	.657 311	4. 278231	.100 000
Type of grants	.161 293 (1 IIF) 100 000 (IRG)	.210 092 (1 IIF)	.456 940 (2 IEF) .200 371 (1 IIF)	.100 000 (1 CIG) 4.178 231 (1 ITN)	1 CIG

## The EU Public Health programme EAHC: objectives, research themes, calls for proposals launched and budgets allocated to drugs research

### Objectives of the Public Health Programme (2008-2013)

This report comes under the second Health programme 2008-2013. The general objectives pursued by this programme were as follow:

- To improve citizens' health security,
- To promote health, including the reduction of health inequalities, and
- To generate and disseminate health information and knowledge.

### Calls for proposals launched under the Public Health Programme (2008-2013)

Under this programme, research projects were funded each year through a “Call for proposals for projects” drawing on the annual work programmes.

### Budget under the Public Health Programme (2008-2013)

Between 2009 and 2012, within the framework of the Health Programme 2008-2013, 74 projects were awarded grants. Among these 74 projects, 2 research projects addressed illicit drugs issues. Since 2010, illicit drug issues no longer appear within the annual work programmes. Whereas the topic appeared until 2010 within the “Priority actions for the second objective ‘Promote health’”, since then alcohol and tobacco have been mentioned in the annual work programmes but not illicit drugs.

The budget allocated to drug research under the Public Health Programme (2008-2013) is presented below:

Annual Call	2009	2010	2011	2012	2013
Total Budget (M€)	24	13,4	4,7	13,3	
Total number of projects funded	34	17	7	16	
Budget and number of Illicit drug projects granted	1. 161 295 (2 illicit drug research projects)	/	/	/	/

## Drug-related research projects (2010-2013)

This section of the report describes the research projects carried out over the period 2010-2013 that were mapped on the basis of the data collection conducted for the purpose of the ERANID project [see Methodology part II]. To begin with, a global overview of the projects is provided. The main features of the projects are presented without specifying the funding source. In addition, the analysis provides comparative insights between national-level and EU projects. This section is followed by a detailed presentation of the research projects. Firstly the EU projects are presented, and the report concludes with a series of country reports for each of the Member States participating in ERANID (Belgium, France, Italy, the Netherlands, Portugal and the UK).

### OVERVIEW OF ALL RESEARCH PROJECTS MAPPED

#### Summary

Trends in illicit drug research drawn from the 383 projects analysed in this study show the central place of the epidemiology of drug use, the consequences of use and the treatment responses in recent and current research on illicit drugs. Only a few projects identified, however, address drug supply issues and law enforcement responses. Those trends are in line with previous research mapping exercises carried out during the 2000s but it appears that the spectrum of areas investigated by the identified projects is wider, despite substantial differences between countries. The attention given to the consequences of drug use suggests a shift compared to previous mapping. Indeed, this area appears to be one of the major research foci whereas it was little investigated according to previous mapping since the 1990s. Consistent with these trends, epidemiological and neuro-scientific analyses are more or less well developed across the surveyed countries, whereas social sciences analyses are lacking. Also, few projects combine medical and social sciences in their analysis.

Partnership is a common feature of many projects. However, cross-national cooperation is still little developed with variations across the surveyed countries. Regarding funding mechanisms, the most common process is to use public funds allocated through calls for applications.

### Number of research projects identified by country, 2010-2013

BE	FR	IT	NL	PT	UK	EC	Total
19	89	36	60	32	90	57	383

### Topics of the mapped projects: areas, substances and disciplines

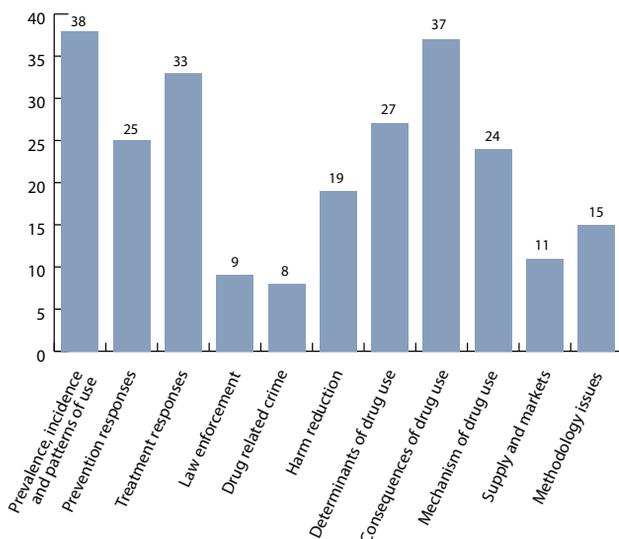
#### Areas

##### Global overview

Considering all the projects identified together over 2010-2013 (N=383), four broad areas of intervention appear. Priority is given to prevalence issues, treatment responses and the consequences of drug use. A little more than one-third of the projects deals with these areas.

Then comes the issues related to the determinants of drug use, prevention responses and the mechanisms of the uses with around one-quarter of the projects deals with these areas. Then, harm reduction and methodological issues are addressed by fifteen to nineteen per cent of the projects. Supply and markets, law enforcement responses and drug-related crime appear to be neglected. Barely ten per cent of the projects identified take these areas into consideration.

#### Percentage of projects per drug related area (potentially more than one area covered by the same project)



Reading: 37% of the research projects (2010-2013) deal with the consequences of drug use. (N=383)

A closer look at the results reveals that the responses to the phenomenon are not addressed to the same extent. From one-quarter to one-third of the projects deal with treatment and prevention responses but harm reduction responses are less considered and law enforcement issues are clearly neglected; less than ten per cent of the projects pay attention to this area. Having in mind the outputs of previous mappings, Epidemiology and treatment responses are still given priority. On the other end of the spectrum, policy analysis and law enforcement in particular are still little studied. Nevertheless, the scope of areas investigated has broadened and major topics such as the determinants and mechanism of drug use are given more thorough attention.

**Research areas and fields covered by numbers of EC funded projects over the period 2001-2006<sup>14</sup>**

Understanding drug-use behavior			Demand reduction	Supply reduction	Policy analysis		Other	Total	
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Interdiction	Policy	Legal framework	E.g Meta areas	
9	4	50	30	1	5	1	1	/	100%
24	9	126	76	2	12	2	2	[6]	259

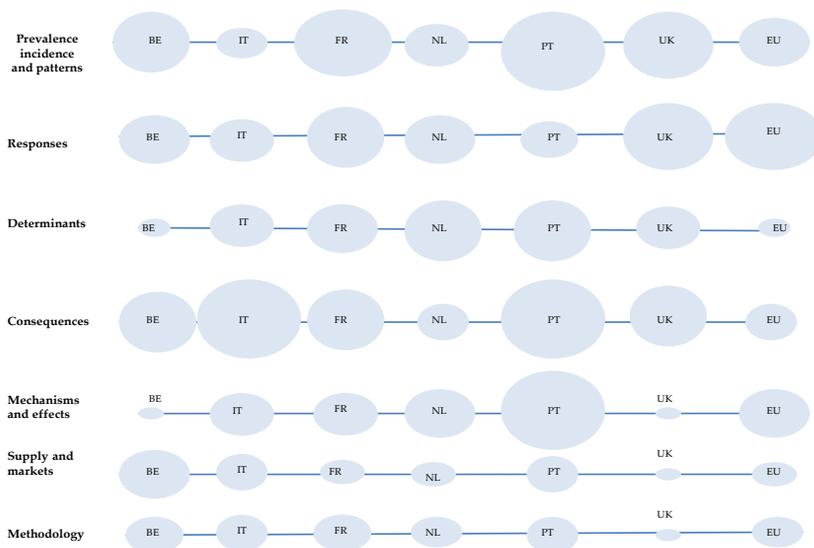
Source: Bühringer et al., 2009

*Comparative insight: what are the key areas across the ERANID participating countries and at the EC level?*

The global overview presented above masks substantial differences across the national and EU funded projects. The following graph provides a comparative insight regarding the key research areas addressed in each country and at the EC level.

14. This table is presented here in order to put the results of the two mappings into perspective. A strict comparison is not relevant. Neither the categorisation of drug areas nor the scope is the same in the two studies. But, the overview established by Bühringer et al. provides benchmarks against which to appraise the most prominent changes.

Graph: key areas covered in the ERANID participating countries and at the EC level



A horizontal reading of the graph allows comparison of the respective foci of the national projects and EU funded projects against one another. The comparison is not based upon the number of projects, which is extremely different across countries but in proportion to their respective global effort regarding drug research. This makes it possible to emphasize what areas are given the most or the least attention.

For instance, compared with the other ERANID participating countries and the EC funded projects, the Portuguese projects pay more attention to epidemiology and to the mechanisms and effects of drug use. The determinants of drug use are studied in the same proportions in the Dutch and the Portuguese projects. The consequences of drug use are particularly studied in Italy and comparatively understudied in the EU funded projects. Supply and market issues globally receive little attention but they are far more studied within the Belgian projects than within the French projects. Methodology issues are another neglected area that receives more or less the same attention between countries except within the British projects, where they are less studied.

Regarding the responses to the phenomenon, the apparent homogeneity that appears in the graph does not reflect accurately the weight attached to each type of response. Prevention, treatment, harm reduction and law enforcement do not receive the same attention. For instance, it appears that, in proportion to the respective global effort for drug research, EU funded projects come first regarding

prevention responses, an area that receives little attention within the British and Dutch projects. Treatment responses are much more studied in the British and French projects compared to in the Portuguese projects. Also, British and French projects are more concerned with harm reduction issues than Belgian and Italian studies. By contrast, Belgian research is comparatively more interested in law enforcement issues than the other countries. In addition, a vertical reading of the graph above shows to what extent each country as well as the EC funded projects address the distinct areas of drug research. These specific findings are developed by means of country reports in the next sections.

### ***Illicit drug(s) targeted***

With regards to the illicit drugs targeted, it should be noted that a very large majority of the projects do not address one illicit drug (or the same family of drugs) in particular (see table below). Their scope has been widened to cover several substances. This suggests two different conclusions that are not mutually exclusive: on the one hand polydrug use which is a widespread pattern of drug use is now well integrated in the analysis and, on the other hand research projects tend to focus on “addiction”, a concept which encompasses all drugs.

### **Substance(s) targeted in the projects (N=383)**

Cannabis	Opioids	Crack/Cocaine	NPS/Legal Highs	MDMA/ Methamphetamine	SIEDs*	Several Substances
33	28	22	9	3	2	286

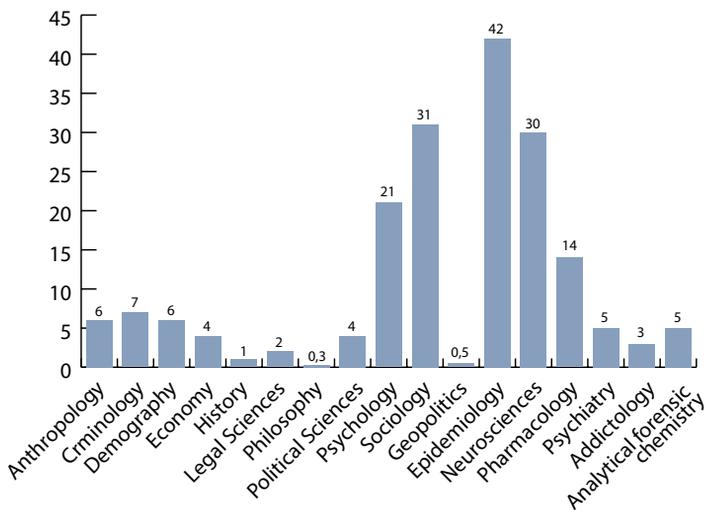
\* Steroids and Image Enhancing Drugs

### ***Disciplines***

Regarding the approaches adopted by the researchers, it appears that three major disciplines dominate the analysis of drug issues: epidemiology and, to a lesser extent, sociology and neurosciences. As ‘mirroring’ these dominant disciplines, the most striking finding here is an almost total absence of crucial analysis based on social sciences such as geopolitics, economics, history, legal sciences ...

More than half of the ongoing research projects (53 per cent) are multidisciplinary. However, in proportion to their global investigation of drug issues, the different countries as well as the EC funded projects do not mobilise the disciplines in the same way. For instance, Belgian projects are the most involved in social sciences analysis while British projects are the most productive in medical sciences analysis. Portuguese projects appear to combine social sciences and medical sciences more than the other national and EC funded projects. Besides, compared to the other countries, French projects put an important emphasis on social sciences. That said, Belgium is the leader on this specific point but Belgium projects are less likely to mix social sciences and medical sciences (see the comparative insight below). The detailed overviews of the national situations are discussed in next sections (V.3 to V.8).

**Disciplines involved in the projects (potentially more than one discipline in the same project)**



Reading: 30% of the projects provide a neuroscientific analysis of drug issues (N=383)

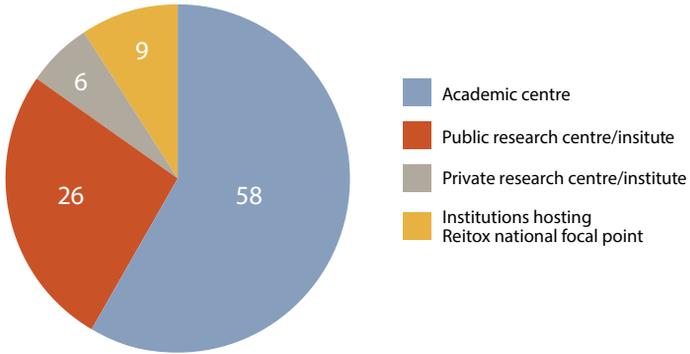
**Comparative insight on the multidisciplinary of the projects: social sciences and/or medical sciences**

Country	Proportion of projects solely SSH	Ranking SSH	Proportion of projects solely Medical	Ranking medical sciences	Proportion of mixed projects	Ranking Mixed projects
BE (N=19)	62%	1	12%	6	25%	7
FR (N=89)	18%	2	29%	4	53%	3
IT (N=36)	5%	6	44%	2	50%	4
NL (N=60)	17%	3	15%	5	68%	2
PT (N=32)	19%	2	9%	7	72%	1
UK (N=90)	13%	5	49%	1	38%	6
EC (N=57) (8 nr)	14%	4	37%	3	48%	5

## Research team affiliation and partnership mobilised

In most cases, the projects identified are led by an academic centre.

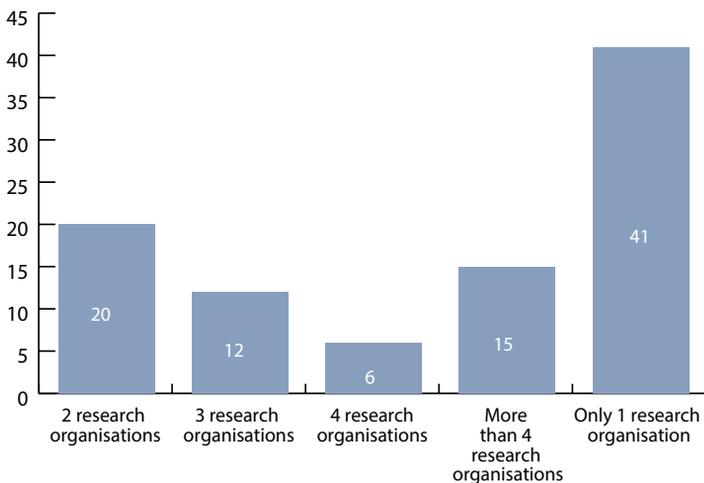
### Main research team affiliation (%)



Reading: 6% of the projects are carried out by a private research centre/institute (N=383/nr=8)

Partnership appears to be a common feature of the projects but an important part of them are carried out by a single team.

### Number of research organisation(s) per project (%)



Reading: 41% of the projects are carried out by a single research organisation (N=383/nr=26)

## Funding related features of the research projects

Half of the current research projects reported have been selected through a call for tender and the same proportion of projects are funded by a single institution. The large majority of these projects received public funds, five per cent of them however being funded by a private body. The size of the budgets is addressed in next sections.

Funding project mechanism* (%)	
Call for tender	53
Direct award(without tendering procedure)	16
Other funding mechanism	15
Number of funding institution by projects** (%)	
One funding institution	51
Two funding institutions	18
More than two funding institutions	5

\*nr=16 \*\*nr=26

## SPECIFIC FEATURES OF THE EC FUNDED PROJECTS BETWEEN 2010 AND 2013

### Summary

Illicit drug research has been given significant and increased attention at EC level in recent years. The number of projects funded in three years (2010-2013) was far more than in the previous ten years (2001-2010). In addition, the spectrum of drug research areas investigated has broadened with increased focus on the mechanisms of drug use, prevention responses and prevalence issues. The importance of projects dealing with prevention responses is a feature of EC funded projects compared to the ERANID participating countries. In addition, it should be noted that EC funded research projects meet some of the major needs emphasized in policy documents such as a better understanding of the causes, nature and consequences of the phenomenon as well as prevention and treatment responses. On the other hand, major drug supply related topics are hardly addressed and most social sciences are neglected.

### Historical insight: research areas and needs previously identified

Over the period from 2001 to 2006, thirty four EC-funded projects were identified and examined by Bühringer et al. [6]. The authors pointed out that the topics of prevention and treatment (including harm reduction) received the highest attention either regarding the number of projects funded or in drug policy documents. The same result was observed at the MS level, but treatment and prevention issues were not addressed on an equal footing and most projects were dedicated to a large variety of treatment responses.

Another key area of interest for the EC-funded projects is basic research. By contrast, member states (MS) indicated low interest in that field. The EC funded

projects focused in particular on the analysis of the determinants and mechanisms of drug use (risk and protective factors; onset and course). Very little interest on the epidemiology of use was found. However, as far as population based studies were concerned, this didn't appear problematic because surveys in this field were more and more important at the MS level. By contrast, epidemiological research on specific groups (drug users in prison, socially excluded drug users...) was found to be neglected both at MS level and at the EC funded projects level. Regarding supply reduction issues, the authors observed that research activities were almost non-existent. They emphasized the high discrepancy between the policy needs expressed in this field in the EU drug strategy (2005-2012) and the production of scientific knowledge.

#### Research areas and fields covered by numbers of EC funded projects (2001-2006)

Understanding drug-use behavior		Demand reduction	Supply reduction	Policy analysis		Other	Total		
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Inter-diction	Policy	Legal framework	E.g Meta areas	
8	1	1	15	2	7	/	/	/	34

Source: Bühringer et al., 2009

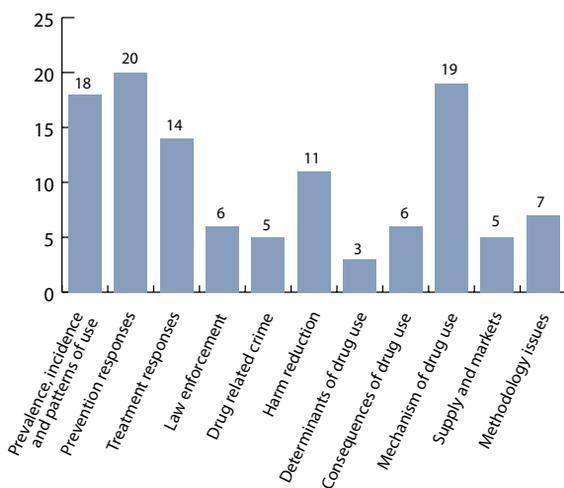
#### Current overview: areas of research promoted, substances covered and scientific disciplines involved

##### Areas

Among all the specific research priorities considered, three broad groups appear. The first areas of interest draw together the following issues: prevention responses, mechanisms of drug use and the epidemiology of drug use. Between fifteen and twenty projects deal with at least one of these areas of research. To a lesser extent, two other groups of issues are addressed by the EC funded projects. The first one draws together treatment responses and harm reduction. Between ten and fifteen projects address these issues but all other research areas appear poorly investigated.

Still, compared with the overview established regarding the EC funded projects for the period 2001-2006 [see table above], the coverage of drug issues has clearly improved. Drug mechanisms and policy responses (treatment and prevention) to address problematic drug use are still covered by a lot of projects and the involvement of researchers in epidemiological approaches can be noticed as well as in harm reduction issues. Also, it appears that the research spectrum has been broadened. Today, none of the areas taken into account are neglected even if some of them are still poorly investigated: that is the case of the supply reduction side of drug issues as well as methodological issues related to drug research.

**Number of EC funded research projects per drug related research areas (potentially more than one area covered by the same project) (N=57)**



Reading: 19 of the 57 EC funded research projects deal with the mechanisms of drug use (nr=5)

**Illicit drug(s) targeted**

The vast majority of EC funded projects deal with several substances or focus on “addiction” without specifying one substance in particular. This feature is also found at national level within the ERANID participating countries. The emphasis is on polydrug use or on a comprehensive approach of drug issues. However, it should be noted that cannabis and novel psychoactive substances (NPS) occupy a rather particular place in EC funded projects.

**Substance(s) targeted in the current EC funded projects (N=57)**

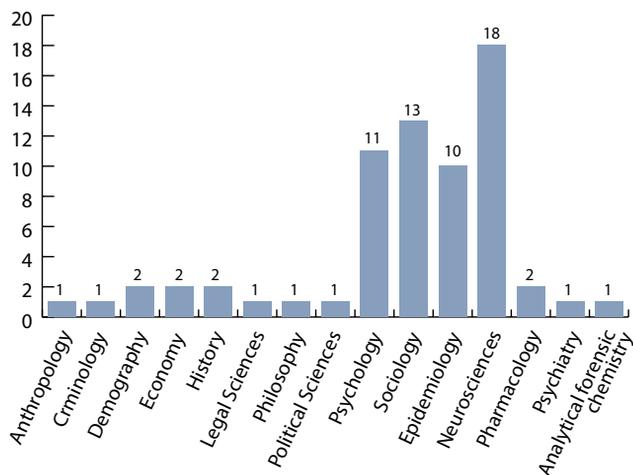
Cannabis	Opioids	Crack/ Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	SIEDs*	Several Substances	Comprehensive approach
8	5	3	6	/	/	12	23

\* Steroids & Image Enhancing Drugs

**Disciplines**

The disciplines which are used most frequently in the projects are consistent with the most covered areas; neurosciences and psychology appear in eighteen and eleven projects respectively which is consistent with the dominant investigations related to the mechanisms of drug use. Epidemiology and sociology are also quite often used compared to a number of other disciplines (except neurosciences and psychology). Again, this result is consistent with an important investment in the area of prevalence, incidence and patterns of drug use.

### Disciplines involved in the EC funded projects (potentially more than one discipline in the same project)



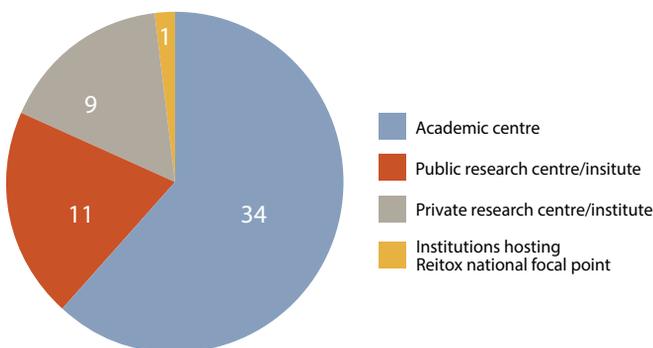
Reading: 18 EC funded projects provide a neuroscientific analysis (N=57/nr=8)

In addition, at EU level as well as in the ERANID participating countries, a medical approach dominates the analysis of drug issues. Among the forty eight projects for which the information is available, only eleven projects provide a mixed analysis combining medical and social sciences and eight projects focus on social sciences.

### Scope of the research projects: scientific partnership mobilised and funding size

As regards the status of the project leader, it should be noted that most of the projects are led by an academic centre (33) or a public institute (11).

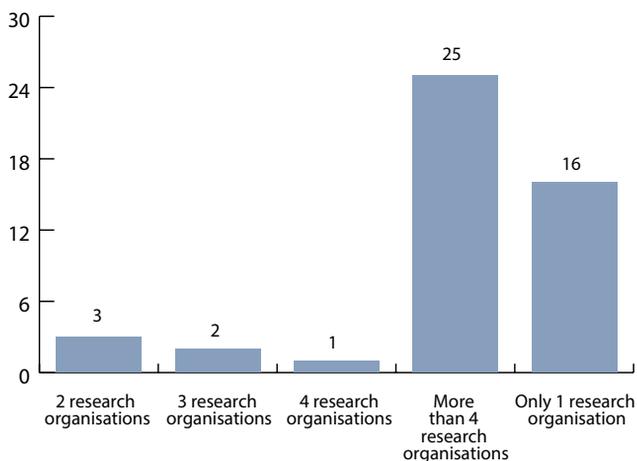
#### Main research team affiliation (N=57)



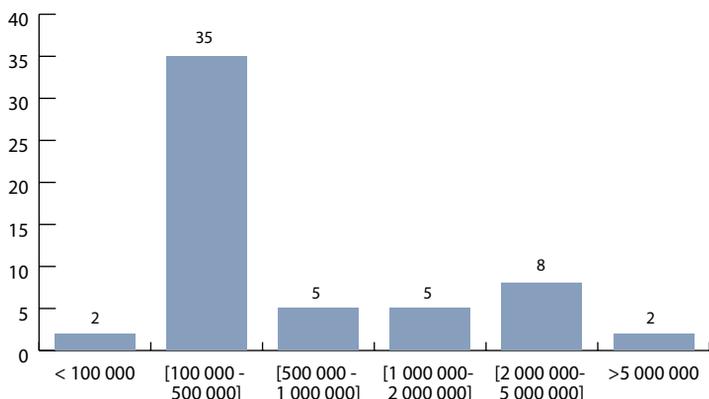
Reading: regarding 34 projects, the leader of the project is a member of an academic centre (nr=2)

Among the several funding schemes of the EC, some programmes provide financial funding to one researcher in particular. This is the case of specific grants of the programme referred to as “Marie Curie Actions” within the Fp7 People programme and grants from Fp7 Ideas [see part IV]. Between 2010 and 2013, thirteen projects were funded thanks to those kinds of grants which involve by definition a single research organisation. Amongst the remaining projects, seven out of ten involve more than four research organisations. This result is consistent with the rules adopted by the EC within most of its funding schemes: multiple partnerships are required.

### Number of research organization(s) per project (N=57)



### Budget of the EC funded projects (€)



Reading: 35 EC funded projects out of 57 received between 100 000€ and 500 000€

As regards the budgets, over the period considered in this report, the majority of EC funded projects received between 100 000€ and 500 000€. These amounts are consistent with the usual budget of the DPIP programme, -the only EC programme dedicated to illicit drugs between 2010 and 2013<sup>15</sup>. The projects that were allocated a budget of more than 1M€, obtained this funding from non-thematic grant programmes.

### Consistency of the research projects funded with the research priorities set within EU policy documents

Some major features of the EC funded projects throughout 2010 and 2013 are in line with the priorities stated in policy documents. This is particularly the case of the areas of prevention and treatment responses as well as the prevalence, incidence and patterns of use. A significant number of projects address drug issues related to these areas. Major concerns emphasized at EC level such as the need for a better understanding of the cause and damages of drug use and harm reduction responses are also investigated but to a lesser extent. On the other hand, while the research needs into criminal behaviours, drugs markets, organised crime, money laundering are specifically stated as priorities, the projects dealing with these topics amongst other research questions regarding drug supply and related crime are practically non-existent. In addition, regarding research disciplines, the low use of many social sciences should be noted. Multidisciplinarity is a major feature of EC funded projects but progress should be made in order to combine medical and social sciences analyses.

### Consistency or discrepancies between research priorities set within EU policy documents and research projects: some highlights

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed	<ul style="list-style-type: none"> <li>■ Prevention and treatment responses</li> <li>■ Prevalence, incidence and patterns of use</li> <li>■ Mechanism of drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Neurosciences</li> <li>■ Sociology</li> <li>■ Epidemiology</li> </ul>	<ul style="list-style-type: none"> <li>■ Multidisciplinarity</li> <li>■ Inter-disciplinarity (to be strengthened)</li> </ul>
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Determinants of drug use</li> <li>■ Consequences of drug use</li> <li>■ Harm reduction responses</li> <li>■ Drug related crime</li> <li>■ Supply and markets</li> </ul>	<ul style="list-style-type: none"> <li>■ Pharmacology</li> <li>■ Toxicology</li> <li>■ Criminology</li> <li>■ Economics</li> </ul>	<ul style="list-style-type: none"> <li>■ Translational research</li> <li>■ Evaluation research</li> </ul>

\* Interaction and exchanges between SSH and medical sciences

15. To have an overview of the EC funding mechanisms, see part IV. EU funding programmes targeted on drugs and Non-thematic grant programmes opened to addictions

## NATIONAL SITUATION IN BELGIUM

### Summary

In Belgium, the epidemiology of drug use, the effects of misuse as well as prevention and treatment responses are still well established within research projects. Highlights include the weight of social sciences in the recent projects, and in particular disciplines hardly mobilised in other countries. Another salient point of the national situation regarding illicit drug research includes the almost exclusive position of academic centres. Overall, partnership appears to be well developed inside the country but the involvement of the teams within cross-national collaboration remains relatively modest. It has to be noted that the budgets allocated to the projects are relevant for certain designs of studies but they are not sufficient for large scale projects, which can be a barrier to accessing a wider range of partners.

With drug-related research priorities being little formalised in policy documents, it is scarcely possible to examine the consistency between current research projects and policy needs. However, it should be noted that the need for knowledge in the area of supply and markets mentioned in the Belgium Common Declaration of January 2010 is addressed by some current projects. On the other hand, although social sciences are significantly present they are not emphasized in the policy documents.

### Historical insight: research areas and needs previously identified

Drug-related research in Belgium marked a turning point in the 1990s. Generally speaking, research activities increased at that time, their scope spread beyond the sole illicit substances, and they adopted a public health point of view. More specifically, epidemiological and sociological surveys were implemented and new sub-populations of users were taken into consideration. Regarding this decade, Kenis established that several types of drug research were carried out in several areas[1]. Still, numerous gaps in knowledge appeared both in the areas investigated and regarding topics such as the determinants, the consequences and the supply of drugs.

#### Type of drug research and research needs in Belgium in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	<ul style="list-style-type: none"> <li>■ Drug use survey in the school population</li> <li>■ Drug use survey in other specific population</li> <li>■ Study of users in contact with services</li> <li>■ Characteristics/typologies of drug users</li> </ul>	<ul style="list-style-type: none"> <li>■ Same topics +</li> <li>■ Study of polydrug use and use in specific settings</li> <li>■ Characteristics/typologies of drug users</li> <li>■ Development of methodological instruments</li> </ul>
Risk factors and effects of the use of drugs and dependency	/	<ul style="list-style-type: none"> <li>■ Health, social and psychological risks</li> <li>■ Psychiatric co-morbidity</li> <li>■ Drug-related death</li> <li>■ General risk factors of specific drugs</li> </ul>

Research Area	Type of research carried out	Research needs identified
Aetiology of drugs	/	Whole area
Primary prevention	<ul style="list-style-type: none"> <li>■ Evaluation of prevention programmes</li> <li>■ Development of methodological instruments</li> </ul>	Same topics + <ul style="list-style-type: none"> <li>■ General prevention programmes</li> <li>■ Group-specific prevention</li> <li>■ Prevention in specific settings</li> <li>■ Methods of prevention</li> </ul>
Treatment and treatment services	<ul style="list-style-type: none"> <li>■ Evaluation of treatment</li> </ul>	Same topic + <ul style="list-style-type: none"> <li>■ Treatment needs</li> <li>■ Group-specific treatment</li> <li>■ Treatment methods</li> </ul>
Health and social care service (other than treatment)	/	Care services and their evaluation
Drug policies and drug control strategies	<ul style="list-style-type: none"> <li>■ National drug policies</li> <li>■ Evaluation of drug policies</li> <li>■ Drug control strategies</li> <li>■ Jurisdiction</li> </ul>	Same topics + <ul style="list-style-type: none"> <li>■ Specific drug policies</li> <li>■ History of drug policies</li> <li>■ Evaluation of drug control strategies</li> </ul>
Consequences of drug use	<ul style="list-style-type: none"> <li>■ Drug related crime</li> <li>■ Drug-related traffic accidents</li> </ul>	Same topics + <ul style="list-style-type: none"> <li>■ Social and institutional consequences</li> </ul>
Supply of drugs	/	<ul style="list-style-type: none"> <li>■ Drug trafficking</li> </ul>
Detection of drugs and drug profiling	/	/
Knowledge, attitudes towards and opinions on drugs	<ul style="list-style-type: none"> <li>■ Social attitudes/opinion survey on drugs</li> </ul>	Same topic + <ul style="list-style-type: none"> <li>■ Presentation of drugs in media and drug discourses</li> </ul>

Source: Kenis, 1997

In the 2000s, Bühringer et al., established that Belgian research comprehensively covered the prevention and treatment topics as well as the effects of drug misuse within existing cultural and social contexts. Basic research regarding the determinants and mechanisms of drug use, policy analysis and supply reduction remained neglected [6].

#### Number of Belgian projects covering research areas and fields (2001-2006)

Understanding drug-use behavior			Demand reduction	Supply reduction	Policy analysis	Other	Total		
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Inter-diction	Policy	Legal framework	E.g. Meta areas	
/	/	6	2	/	3	/	/	/	11

Source: Bühringer et al., 2009

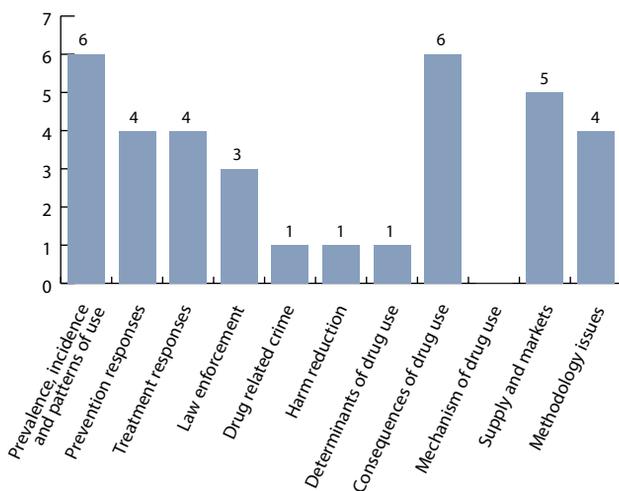
Regarding funding and research capacities, previous mapping on research in Belgium emphasized the needs for additional funding for drug research as well as a long term earmarked budget line for specific drug-related projects. Throughout the 2000s, efforts were made to meet these needs. Bühringer et al. reported a will to move away from short term funding of research and a “clear priority to develop a viable funding infrastructure which promotes capacity building projects”. In-terms of coordination structures, Kenis also reported the need for a “Drug research Plan”. At present, research priorities are established by means of the calls for proposals organized on a yearly basis within the framework of the Federal research programme Drugs. Still, the country has not opted for a policy document specifically dedicated to drug research.

## Overview of the current projects: thematic areas, substances covered and scientific disciplines involved

### Areas

The analysis of the Belgian projects identified over 2010-2013 shows that epidemiology and consequences of drug use are important fields of investigation followed by policy responses apart from harm reduction. Compared to the other countries examined in this report, the Belgian projects do not neglect the supply and market issues as much. However, other areas such as drug-related crime and also the mechanisms of drug use are hardly considered. Those main features appear in the figure below.

Number of Belgian projects per drug-related research area (Potentially more than one area covered by the same project) (N=19)



Reading: 6 of the 19 Belgian projects deal with the consequences of drug use

Compared to the projects identified over 2001-2006, two major findings appear. Firstly, the understanding of drug-use behaviour thanks to epidemiology continues to be a significant proportion of the ongoing Belgian projects. On the other hand, the areas of interventions in the fields of demand reduction<sup>16</sup> and supply reduction appear to be investigated far more in the current Belgian projects than previously, as well as the consequences of drug use and the area of supply and markets. Indeed, among the eleven Belgian projects identified by Bühringer et al., over 2001-2006, six dealt with the understanding of drug use behavior from an epidemiological approach, two dealt with the area of demand reduction and three with the interdiction of drugs (see section above).

### *Illicit drug(s) targeted*

Regarding the substances targeted, the focus of the Belgian projects is consistent with the major characteristic of current patterns of use, namely polydrug use. Eleven out of sixteen projects do not target a specific substance but address several substances. However, proportionally, cannabis appears to be quite an important focus of attention.

#### **Substance(s) targeted in the Belgian projects (N=19)**

Cannabis	Opioids	Crack/ Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	Several Substances	Comprehensive approach
4	1	/	/	/	6	8

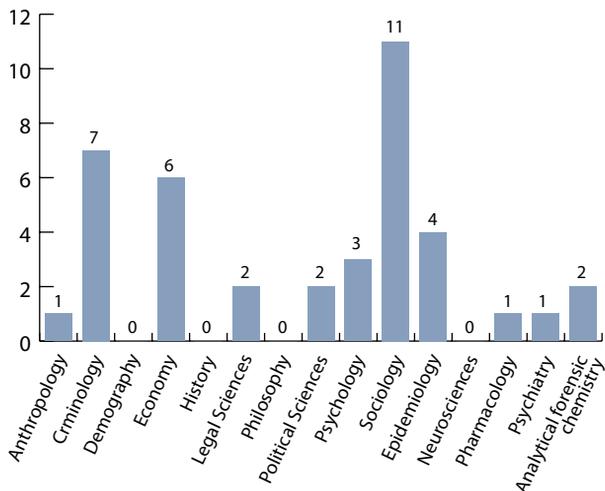
### *Disciplines*

Regarding the disciplines, proportionately, one of the main features of the Belgian projects is the overriding importance of social sciences compared to medical sciences. None of the ongoing Belgian projects mobilise the neurosciences. On the other hand, more than two third of these projects provide a sociological analysis. In addition to sociology, the Belgian projects include an important focus on economical and criminological analyses which are hardly considered elsewhere.

The way the Belgian projects combine the social sciences and the medical sciences further enhance this result. Indeed, even if three out of four projects are multidisciplinary, only four out of sixteen projects provide a mixed investigation. The majority of the projects focus on a social sciences analysis (one or several disciplines) and two out of sixteen projects provide a purely medical analyses.

16. In the present study the interventions in the field of demand reduction have been approached in terms of prevention responses, treatment responses, and harm reduction responses.

**Disciplines involved in the projects (potentially more than one in the same project). (N=19)**



Reading: 7 of the 19 Belgian projects provide a criminological analysis of drug issues

**Mixing social sciences and/or medical sciences (N=19)**

Number of projects solely SSH	Number of projects solely Medical	Number of mixed projects (SSH and Medical)
13	2	4

**Scope of the Belgium research projects: collaborative nature of the project and funding size**

A large proportion of current Belgian projects are carried out in partnership (eleven out of sixteen projects involve several research teams) but this partnership hardly crosses the Belgian borders. Belgian teams are represented in only ten per cent of the cross-national projects identified in this report.

It is worth noting that all the current projects are led by an academic centre. Neither private nor public research institutes have been reported as leaders of a research project. All the projects received public funding, mainly through calls for tender. Very few of them were funded through a direct award allocated to the academic centre. Half of the projects identified received between 100 000€ and 300 000€ and two of them received between 300 000€ and 500 000€ (nr=7).

## Key research institutions & teams in Belgium

### Universities

University of Antwerp  
(Faculty of Medicine, Department of Epidemiology and Social Medicine; University Scientific Institute for drug problems)

Ghent University  
(several research groups at the Faculty of Psychology and Educational Sciences, Faculty of Law and Faculty of Pharmaceutical Sciences)

(French) Free University of Brussel  
(department of Epidemiology and Health Promotion)

(Dutch) Free University of Brussels  
(department of Developmental and Life Span Psychology)

University of Liège  
(one laboratory)

University of Leuven  
(Faculty of law; faculty of psychology and educational sciences; academic centre for general practitioners and the research group psychiatry)

University Hospital Gasthuisberg, Leuven  
(one department)

### Others

VAD (Vereniging Voor Alcohol-En Anreere Drugproblemen wzw)

Network of services around the sub-focal point Eurotox (Modus Vivendi, Infor Drogues, prospective-jeunesse, ...)

Scientific Institute of Public Health

Source: EMCDDA ; Bühringer et al. report 2009

## Consistency of the funded research projects with research priorities set by the Belgium authorities

Given that drug-related research priorities are hardly formalised in Belgian policy documents, it is difficult to appraise the consistency between current research projects and the research needs of the authorities. However, it should be noted that the need for knowledge in the area of supply and markets mentioned in the Belgium Common Declaration of January 2010 is addressed by some current projects. Also, Belgian projects meet the need for multidisciplinary approaches expected by the authorities. By contrast, progress should be made in the field of prevention and treatment responses as well as regarding cross-border and translational approaches. Surprisingly, whereas a priority on social sciences and humanities was not formally made explicit in the policy documents, these disciplines are particularly mobilized in the projects identified. Prevalence, incidence and patterns of use are also an important focus of projects whereas the area is not mentioned as a research priority.

## Consistency or discrepancies between the research priorities set by the authorities and research projects: some highlight

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed			Multi-disciplinarity
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Supply and market</li> <li>■ Prevention responses</li> <li>■ Treatment responses</li> </ul>		<ul style="list-style-type: none"> <li>■ Inter-disciplinarity*</li> <li>■ Cross-border initiatives</li> <li>■ Translational research</li> </ul>
Significant gaps between current projects and research policy's priorities	/	/	/
Feature of the projects not defined as a priority	<ul style="list-style-type: none"> <li>■ Prevalence incidence and patterns of use</li> <li>■ Consequences of drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Social sciences and humanities</li> </ul>	

\* Interaction and exchanges between SSH and medical sciences

## NATIONAL SITUATION IN FRANCE

### Summary

Compared to previous mapping, it appears that French drug-related research has been strengthened. The governmental body for drug issues (Interministerial Mission for Combating Drugs and Addictive Behaviours - MILDECA) placed increased emphasis on drug research and more teams have entered the field. Several topics such as the patterns of use, treatment responses, the determinants and consequences of drugs uses are well covered. Other issues receive less attention or are neglected. This is particularly the case of drug supply issues and law enforcement responses. Epidemiological analyses are clearly the most often carried out in the projects. Medical sciences are mobilised to a lesser extent and except sociology, nearly no social sciences analyses is provided. In other words, the spectrum of analyses of the phenomenon is little diversified. In addition, it should be noticed that a lot of teams are used to work together on a same project even if the partnership is rarely trans-national. Although drug research priorities are not formally made explicit by the authorities, the policy documents raise strong concerns which are addressed by a number of current research projects.

### Historical insight: research areas and previously identified needs

Little research was conducted in France at least in the social sciences before the 1990s. The field was dominated by clinical approaches and a psychoanalytical model in particular. The only available data came from the police or health care system registers. However, no reliable quantitative or qualitative data existed that would have provided an overview of the phenomenon. The double epidemic of heroin and AIDS in the 1980s marked a turning point. A social sciences research community was formed in the 1990s and the creation of the French monitoring centre for drugs and drug addiction (OFDT) made it possible to produce reliable scientific data to inform policy decisions. Compared to the research needs identified by Kenis, much was done throughout the 2000s to promote a better understanding of the drug phenomenon, particularly regarding the epidemiology of drug use.

### Type of drug research and research needs in France in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	/	<ul style="list-style-type: none"> <li>■ Characteristics/typologies of drug users</li> </ul>
Risk factors and effects of the use of drugs and dependency	/	<ul style="list-style-type: none"> <li>■ Health and psychological risks</li> </ul>
Aetiology of drugs	<ul style="list-style-type: none"> <li>■ Psychological and biological factors</li> </ul>	Same topics + <ul style="list-style-type: none"> <li>■ Environmental, genetic and social factors</li> </ul>
Primary prevention	/	<ul style="list-style-type: none"> <li>■ Evaluation of prevention programmes</li> <li>■ Ethical aspects of prevention</li> </ul>
Treatment and treatment services	/	<ul style="list-style-type: none"> <li>■ Evaluation of treatment</li> <li>■ Treatment methods</li> </ul>

Research Area	Type of research carried out	Research needs identified
Health and social care service (other than treatment)	■ Evaluation of care services	/
Drug policies and drug control strategies	■ National drug policies	■ Evaluation of drug policies
Consequences of drug use	/	■ Social and economic consequences
Supply of drugs	/	/
Detection of drugs and drug profiling	/	/
Knowledge, attitudes towards and opinions on drugs	/	/

Source Kenis, 1997

In spite of the remarkable development of drug-related research throughout the 2000', at the end of this decade major areas remained to be addressed (see table below). Indeed, over the fifteen projects included in their analysis, Bühringer et al. showed that the majority of projects focussed on the understanding of drug use (except for the aetiology of drug use), all the other areas of research being neglected or nonexistent. In addition, the authors reported that far more projects were identified but 77 of them didn't meet the criteria for European and international visibility necessary to be included in the study (see table below). The understanding of drug use and especially drug mechanisms were given the same priority in the included and excluded projects, the distribution of all projects (total) and included projects differed especially in the fields of aetiology, epidemiology and demand reduction.

#### Research areas and fields covered by French projects (2001-2006)

Understanding drug-use behavior		Demand reduction	Supply reduction	Policy analysis	Other	Total			
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Inter-diction	Policy	Legal framework	E.g Meta areas	
7	1	4	1	1		/	/	/	15
27	16	10	11	2	2	2	3	4	77

Source: Bühringer et al., 2009

Regarding research capacity, a permanent mobilization of young researchers was reported as essential in the 1990s. The same challenge was repeated in several governmental drug strategies since. The budgets allocated on a yearly basis since 2010 to fund the PhD of young researchers are a significant step to meet this need. Among the other needs identified, Bühringer et al., emphasized the lack of a central agency coordinating national research on illicit drugs. The MILDT (today MILDECA) is responsible for establishing drug research priorities but it was repor-

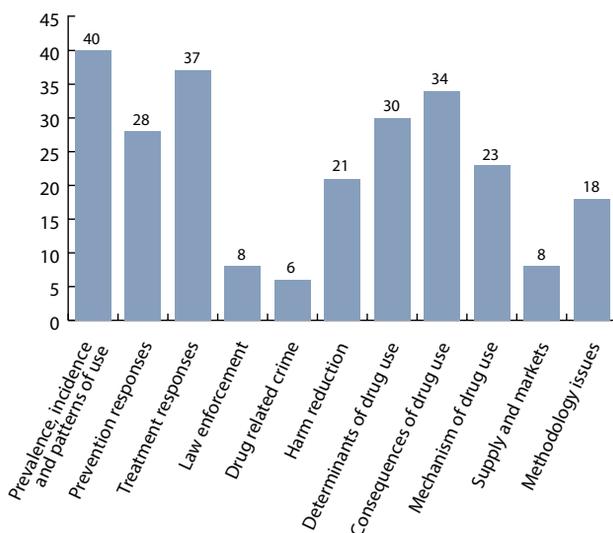
ted to have limited impact on scientific research at the end of the 2000s. Since this time significant progress has been made to tackle this problem and in particular, the development of multiple collaborations built with national research institutes and the launch of the PREVDROG programme specifically dedicated to fund drug research projects. Also, significant efforts have been made in order to attract new scientists in the field. However, the major French bodies responsible for structural funding of research in general (ANR-CNRS...) still do not have a specific focus on research on illicit drugs. Drugs as such are not yet a topic of high relevance among the scientific research community. Regarding social sciences in particular, the progress to create a community of drug researchers in these disciplines in the 1990s seems to have ceased.

## Overview of the current projects: thematic areas of the research, substances covered and scientific disciplines involved

### Areas

Current French projects cover various areas of research more or less in a balanced way. This is the case of epidemiology, treatment responses, the determinants and consequences of drug use. Prevention, harm reduction and the mechanisms of drug use are investigated but not to the same degree. In the same way as the other ERANID participating countries, drug supply issues and law enforcement responses receive little attention. However, compared to previous studies on drug-related research, the scope of French research has widened significantly, particularly in the field of epidemiology and demand reduction.

### Number of French research projects per drug related research areas (potentially more than one area covered by the same project) (N=89)



Reading: 30 out of 89 French projects deal with the determinants of drug use (N=89)

### Illicit drug(s) targeted

It should be noted that the vast majority of projects address several substances. This approach is consistent with the dominant pattern of poly-drug use as well as with the focus on “addiction” rather than on a specific substance. However, it is interesting to notice that twelve French projects focus exclusively on opioids and eight on cocaine.

#### Substance(s) targeted in the ongoing French projects (N=89)

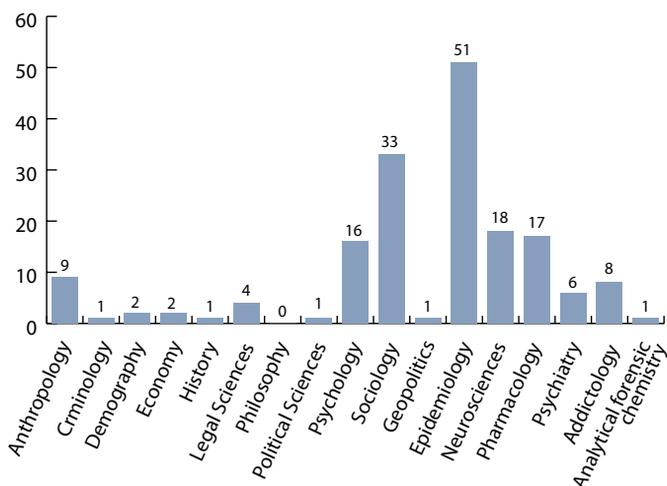
Cannabis	Opioids	Crack/ Cocaine	NPS/Legal Highs	MDMA/ Methamphetamine	Several Substances	Comprehensive approach
3	13	9	/	1	30	33

### Disciplines

Regarding the scientific disciplines involved, it appears that most French projects (51/89) provide an epidemiological analysis of drug issues. Sociology is the other main discipline involved in the analysis (33/89). Compared to these two disciplines, medical sciences are much less common and the other social sciences are hardly, if ever, mobilised.

More than half of the ongoing French projects (45/89) are multidisciplinary. They combine several disciplines be they solely social sciences, solely medical sciences or a mix of them. But it has to be noted that only nineteen projects provide a mixed analyses of drug issues, namely the association of social and medical sciences.

#### Disciplines involved in the ongoing French projects (potentially more than one discipline in the same project)

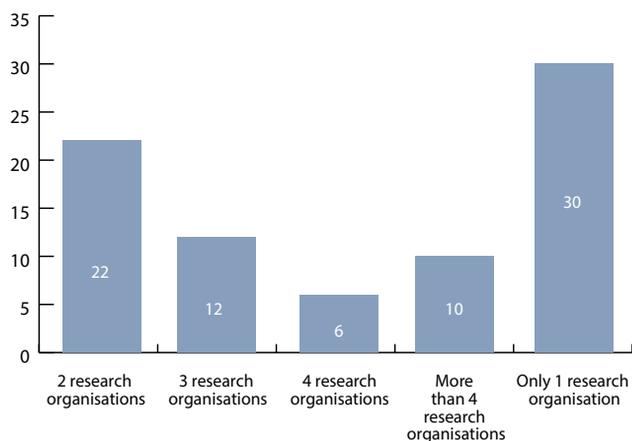


Reading: 33 out of the 89 French projects provide a sociological analysis of drug issues

## Scope of the French research projects: collaborative nature of the project and funding size

Partnership appears to be common, the majority of research projects being carried out in collaboration. However, this collaborative effort remains at a national level. Less than ten per cent of the current French projects are cross-border. Still, French organisations are involved in seventeen research projects funded by the European Commission, and are the principal investigator of three of these EC funded projects.

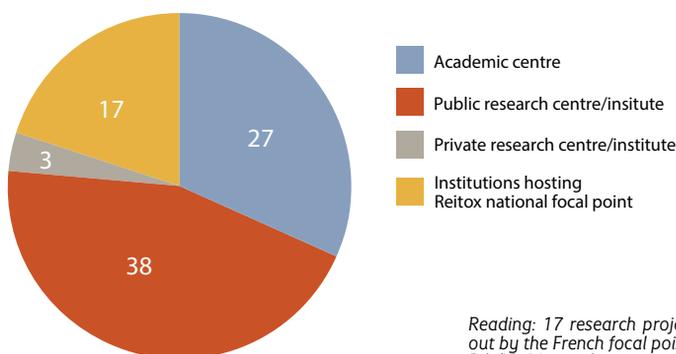
### Number of research organisations per projects



Reading: 22 French projects are carried out by 2 research organisations (N=89, nr = 9)

In France as well as in the other ERANID participating countries, public funding remains the key enabler of drug-related research. Only twelve projects out of the eighty five analysed in the current report are funded by a private body. In addition, except for three projects, the main research team of the projects comes from a public body which is an academic centre in a third of the cases.

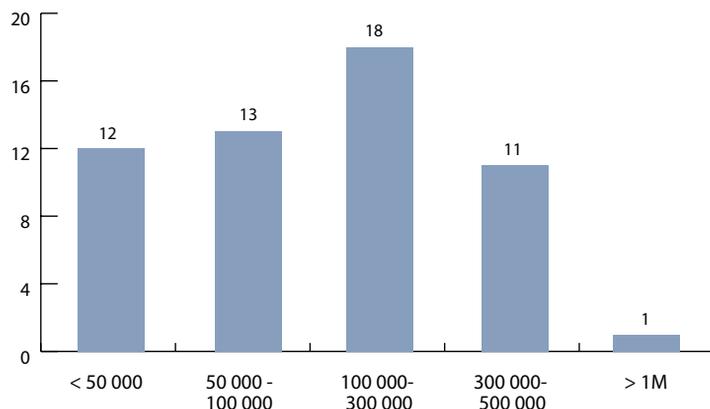
### Main research team affiliation (Number of projects)



Reading: 17 research projects are carried out by the French focal point of the EMCDDA (N=89, nr=4)

A large majority of French projects (two out of three) are funded through calls for tenders. Less than one-third of these projects (23) received a direct award while the other funding mechanisms of the seven remaining projects have not been specified by the respondents. Regarding the fifty-five budgets reported, the amount of funding remains below 300 000€ in the majority of the cases.

#### Amount of funding allocated to the projects (€)



Reading: 11 French projects received between 300 000€ and 500 000€. (N=89/nr=30)

#### Key research institutions & teams in France

CNRS

(Centre national de la recherche scientifique/National centre for scientific research)

InVS

(Institut national de veille sanitaire / French institute for public health surveillance)

INSERM

(Institut national de la santé et de la recherche médicale/ French Institute for Health and Medical Research)

OFDT

(Observatoire français des drogues et des toxicomanies/ French Monitoring Centre for Drugs and Drug addiction)

EHESS

(Ecole des hautes études en sciences sociales)

EHESP

(Ecole des hautes études en santé publique)

INRA

(Institut national de recherche agronomique)

INED

(Institut national d'études démographiques)

Sciences Po Paris

INPES

(Institut de prévention et d'éducation pour la santé / National Institute for Prevention and Health Education)

Source: EMCDDA ; Bühringer et al. report 2009

## Consistency of the research projects funded with the research priorities set by the French authorities

Although drug research priorities are not formally made explicit by the authorities, the policy documents raise strong concerns which are addressed by a number of current research projects. This is particularly the case regarding the epidemiology of drug use, treatment and prevention responses. Also, specific approaches supported by the authorities such as epidemiology and neurosciences are addressed by a number of projects. More knowledge is expected regarding prevention responses, supply reduction and the authorities also express their interest in the genetics of addiction, which is neglected by researchers. By contrast, current research projects give special attention to areas that are not particularly emphasised in the policy documents such as the determinants and mechanisms of drug use as well as harm reduction responses.

### Consistency or discrepancies between the research priorities set by the authorities and research projects: some highlights

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed	<ul style="list-style-type: none"> <li>■ Prevalence incidence and patterns of use</li> <li>■ Treatment responses</li> <li>■ Consequences of drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Epidemiology</li> </ul>	<ul style="list-style-type: none"> <li>■ Multi-disciplinarity</li> </ul>
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Prevention responses</li> </ul>	<ul style="list-style-type: none"> <li>■ Social sciences and humanities</li> <li>■ Neurosciences</li> <li>■ Biology</li> <li>■ Genetics</li> </ul>	<ul style="list-style-type: none"> <li>■ Inter-disciplinarity*</li> <li>■ Translational research</li> <li>■ Cross-border initiatives</li> </ul>
Significant gaps between current projects and research policy's priorities	<ul style="list-style-type: none"> <li>■ Supply and markets</li> </ul>		
Feature of the projects not defined as a priority	<ul style="list-style-type: none"> <li>■ Determinants of drug use</li> <li>■ Harm reduction responses</li> <li>■ Mechanisms of drug use</li> </ul>		

\* Interaction and exchanges between SSH and medical sciences

## NATIONAL SITUATION IN ITALY

### Summary

Italian research projects identified in the survey focus primarily on the consequences of drug use, the cause and mechanisms of drug use as well as prevention responses come second. The other drug issues are examined to a lesser extent, or are little explored. A medical approach to drug-related issues dominates Italian research projects, mainly based upon neurosciences and coupled with little epidemiological research. Also, very little attention is paid to drug supply issues as in the other ERANID participating countries. Similarly, social sciences have only a modest presence. The national coordination body (Dipartimento Politiche Antidroga - DPA) plays a significant role in funding research projects. This approach is consistent with the strategic development and vision behind the development of research capacity and funding that have been identified previously. Indeed, the establishment of the National Research Centre provided a strong support to important basic science research but less attention and capacities were dedicated to other areas of drug research.

### Historical insight: research areas and needs previously identified

Drug-related research in Italy has long suffered from limited funding and the lack of coordination or prioritisation of problems. Nevertheless, research took off in the 1980s due to the epidemic of AIDS and focussed on epidemiological and clinical analysis. Kenis establishes that, as a result of the use of “new drugs” by young people, a general trend of psychological research developed in the 1990s. At the same time, research started to address the fields of supply reduction and organised crime. More specifically, researchers started to examine the epidemiology of drug use and its determinants as well as the national policy. At that time, there remained substantial gaps in knowledge for instance regarding health and social responses to the phenomenon. During the 2000s, the country was still wrestling with many challenges regarding the organisation and delivery of drug research and policy responses to the phenomenon. Nevertheless, Bühringer et al., reported that the country provided at that time some high quality basic sciences and that high quality epidemiological and evidence based work were underway [6].

### Types of drug research carried out and research needs in Italy in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	<ul style="list-style-type: none"><li>■ Drug use survey in the school population</li><li>■ Drug use survey in other specific population</li><li>■ Study of users in contact with services</li></ul>	<ul style="list-style-type: none"><li>■ Drug use survey in the school population</li><li>■ Development of methodological instruments</li></ul>

Research Area	Type of research carried out	Research needs identified
Risk factors and effects of the use of drugs and dependency	<ul style="list-style-type: none"> <li>■ Health and psychological risks</li> <li>■ Psychiatric comorbidity</li> </ul>	/
Aetiology of drugs	<ul style="list-style-type: none"> <li>■ Biological factors</li> </ul>	/
Primary prevention	/	<ul style="list-style-type: none"> <li>■ Group-specific prevention</li> <li>■ Prevention in specific settings</li> <li>■ Methods of prevention</li> </ul>
Treatment and treatment services	/	<ul style="list-style-type: none"> <li>■ Treatment needs</li> <li>■ Treatment methods</li> <li>■ Organisational aspects of treatment</li> <li>■ Evaluation of treatment</li> </ul>
Health and social care service (other than treatment)	/	/
Drug policies and drug control strategies	<ul style="list-style-type: none"> <li>■ National drug policies</li> </ul>	/
Consequences of drug use	<ul style="list-style-type: none"> <li>■ Drug related crime</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug-related traffic accidents</li> </ul>
Supply of drugs	<ul style="list-style-type: none"> <li>■ Drug trafficking</li> </ul>	/
Detection of drugs and drug profiling	/	/
Knowledge, attitudes towards and opinions on drugs	/	/

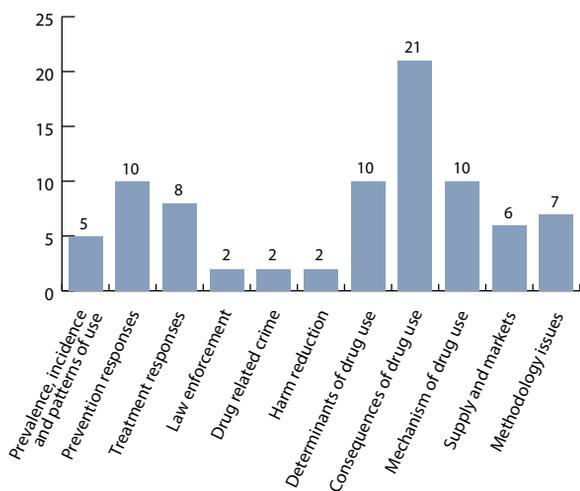
Source: Kenis, 1997

## Overview of the current projects: thematic areas of the research, substances covered and scientific disciplines involved

### Areas

The Italian projects identified over 2010-2013 focus on the consequences of drug use. This dominant area is followed by an interest in the determinants and mechanisms of drug use as well as in prevention and treatment responses. It seems that the projects address in first instance brain damages or the biology or genetic disposition of addiction. This research aims at providing behavioral and neurochemical evidences to help define preventive and therapeutic strategies.

**Number of Italian research projects per drug related research areas (potentially more than one area covered by the same project)**

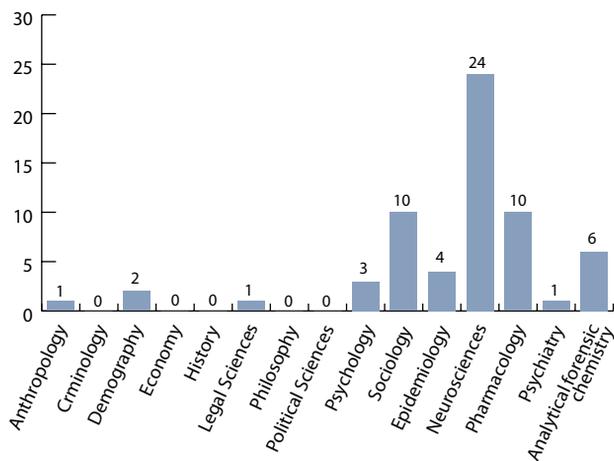


Reading: 21 of the 36 ongoing Italian projects deal with the consequences of drug use (N=36)

**Disciplines**

Disciplines mainly involved in the projects are consistent with the topics covered with neurosciences coming first. This is a significant feature of Italian projects compared with the other ERANID participating countries, in the same way that social sciences holds a central place in Belgian projects. However it should be noted that ten Italian projects include sociological analyses of drug issues.

**Disciplines involved in the Italian projects (potentially more than one discipline in the same project)**



Reading: 24 out of 36 Italian projects provide a neuroscientific analysis of drug issues (N=36)

### Illicit drug(s) targeted

Regarding the substances targeted, most of the projects adopt a multifaced-approach including several substances or all at once. Again, this is consistent with the focus on the consequences and determinants of “addiction” and not on the use of a single substance. However, it is interesting to notice that eight projects address cannabis only.

#### Substance(s) targeted in the ongoing Italian projects (N=36)

Cannabis	Opioids	Crack/Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	Several substances	Comprehensive approach
8	2	2	2	/	6	16

### Scope of the Italian research projects: collaborative nature of the project and funding size

Partnership appears to be the norm. Four projects out of ten are carried out by three or more research organizations together, nearly half of the projects being carried out by two or more teams.

#### Number of research organisation(s) per projects

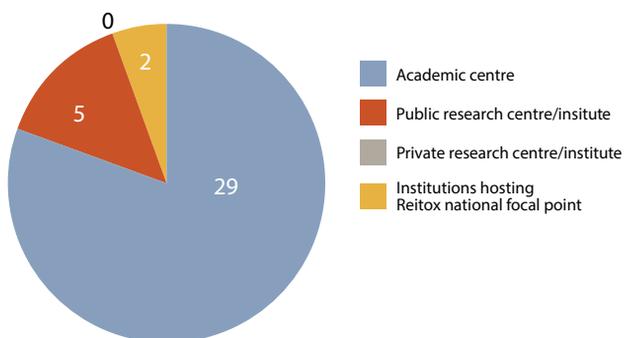


Reading: 19 of the Italian projects documented are carried out by a single research organisation (N=36)

### Main research team affiliation

Twenty nine Italian projects out of thirty six are carried out by an academic centre; none of them are carried out by a private body

### Main research team affiliation (N=36)

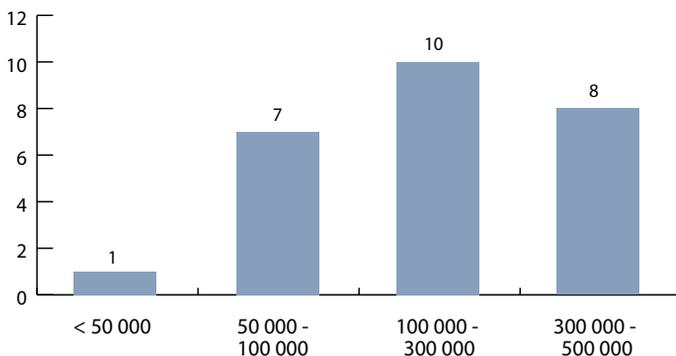


Reading: 5 Italian projects out of 36 are carried out by a public research centre

A large majority of the Italian projects are not cross-national. The country is however involved in nine EC funded research projects on illicit drugs and is the principal coordinator of one of these European projects.

Approximately one-third of the projects have not provided information regarding their funding. However, amongst the remaining projects, it has to be noted that the majority is funded through direct award a minority receives their budget through a call for tender. This feature is specific to the Italian projects compared to the others that have been identified in this report. All the Italian projects documented in this report are publicly funded, most of them thanks to the national drug coordination body (DPA), with no private funding being reported. The amounts of funding reported are detailed in the following figure.

### Amount of funding allocated to the Italian projects (€)



Reading: 8 Italian projects received between 300 000 and 500 000€ (N=36/nr=10)

## Key research institutions & teams in Italy

National Network for Addiction Research  
NNRD

National Research Council

National Institute on Drugs

Institute Superiore de Sanita

University of Verona  
(Department of Neurological Sciences and Vision, Faculty of Medicine and Surgery)

University of Milan  
Faculty of Pharmacy, Center of Neuropharmacology, Department of Pharmacology  
Chemotherapy and Medical Toxicology

University of Eastern Piedmont "Amedeo Avogadro"  
Department of Clinical and Experimental Medicine

University of Sassari  
Department of Pharmaceutical Sciences

Catholic University of Rome  
Hospital "Agostino Gemelli" Department of Internal Medicine

University of Cagliari  
(Department of Biology, Animals and Ecology, Faculty of Pharmacy-Department  
of Toxicology-

University of Parma  
Department of Genetics, Biology of Microorganisms, Anthropology, Evolution

University of Camerino  
Department of Experimental Medicine and Public Health

Second University of Naples  
Faculty of Medicine, Department of Psychiatry

University of Bologna  
Faculty of Pharmacy, Department of Pharmaceutical Sciences

Source: EMCDDA ; Bühringer et al. report 2009

## Consistency of the research projects funded with the research priorities set by the Italian authorities

The following table provides an overview of the consistency of the projects identified with the policy priorities set by the Italian authorities. Italian policy priorities regarding drug research are not made fully explicit in the relevant documents. However, it can be said that the strong emphasis put on neuro-scientific analyses of drug issues in current projects reflects a concern of the authorities as well as an increase in cross border initiatives. Areas such as the epidemiology of drug use as well as prevention and treatment responses, which are emphasised in policy documents still need further investigations. In addition, current projects tend

to combine several disciplines as expected by the authorities but there is room to promote interactions and exchanges between medical sciences and social sciences. It should be noted that major foci of drug researchers are not mentioned explicitly as priorities in policy documents. This is the case of the determinants, the mechanisms and consequences of drug use.

**Consistency or discrepancies between the research priorities set by the authorities and research projects: some highlights**

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed		■ Neurosciences	■ Multi-disciplinarity
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Prevention responses</li> <li>■ Treatment responses</li> </ul>		<ul style="list-style-type: none"> <li>■ Inter-disciplinarity*</li> <li>■ Cross-border initiatives</li> <li>■ Translational research</li> </ul>
Significant gaps between current projects and research policy's priorities	<ul style="list-style-type: none"> <li>■ Prevalence incidence and patterns of use</li> </ul>	<ul style="list-style-type: none"> <li>■ Social sciences and humanities</li> </ul>	
Feature of the projects not defined as a priority	<ul style="list-style-type: none"> <li>■ Consequences of drug use</li> <li>■ Determinants of drug use</li> <li>■ Mechanisms of drug use</li> </ul>		

\* Interaction and exchanges between SSH and medical sciences

## NATIONAL SITUATION IN THE NETHERLANDS

### Summary

Current research in the Netherlands appears to address more or less a large spectrum of areas. Except drug supply issues and law enforcement –which are neglected in all the ERANID participating countries and at EC level- the Dutch projects deal with all areas related to drug issues, although harm reduction and prevention responses receive less attention. Due to their large spectrum of investigation, these projects address many of the major needs set by the Netherlands authorities. Still, compared to the areas targeted in the policy documents, prevention and harm reduction responses remain insufficiently covered. By contrast, the country is well represented at European level meeting the need for cross-border initiatives emphasized by the authorities. In addition, it should be noted that medical approaches dominate social sciences analyses, which are totally neglected.

### Historical insight: research areas and needs previously identified

The Netherlands has a long tradition of research in the drugs field. Epidemiological studies have existed since the 1970s at national level and were carried out both at local and regional level since the 1980s. The 1990s were characterized by the development of methodologies in the area of comparative epidemiology and the implementation of effectiveness studies based on clinical trials. Basic sciences aiming at identifying the nervous system mechanism involved in substance use disorders were also promoted as well as research in primary and secondary prevention. Bühringer et al., reported that “the vision behind these developments was to create the funding conditions to stimulate high quality research scholarship in both basic and applied clinical and social science arenas”. Since the 1990s, research studies have been reported in a wide range of areas but, at that time, the country also emphasized the existence of specific research needs in the investigated fields.

#### Type of drug research and research needs in the Netherlands in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	<ul style="list-style-type: none"> <li>■ Regular drug use survey in the general population , drug use survey in the school population and in other specific population</li> <li>■ Study of users in contact with services</li> <li>■ Study of polydrug use and use in specific settings</li> <li>■ Characteristics/typologies of drug users</li> </ul>	<ul style="list-style-type: none"> <li>■ Development of methodological instruments</li> </ul>
Risk factors and effects of the use of drugs and dependency	<ul style="list-style-type: none"> <li>■ Health, social and psychological risks</li> <li>■ Psychiatric comorbidity</li> <li>■ Drug-related death</li> </ul>	<ul style="list-style-type: none"> <li>■ Psychological risks</li> <li>■ Psychiatric comorbidity</li> </ul>

Research Area	Type of research carried out	Research needs identified
Aetiology of drugs	<ul style="list-style-type: none"> <li>■ Psychological, environmental, biological, genetic and social factors.</li> </ul>	Same topics
Primary prevention	<ul style="list-style-type: none"> <li>■ Evaluation of prevention programmes</li> <li>■ Development of methodological instruments</li> <li>■ Group-specific prevention</li> <li>■ Prevention in specific settings</li> <li>■ Methods of prevention</li> <li>■ Ethical aspects of prevention</li> </ul>	<ul style="list-style-type: none"> <li>■ Group-specific prevention</li> <li>■ Evaluation of prevention programmes</li> <li>■ Development of methodological instruments</li> </ul>
Treatment and treatment services	<ul style="list-style-type: none"> <li>■ Evaluation of treatment</li> <li>■ Treatment needs</li> <li>■ Group-specific treatment</li> <li>■ Treatment in specific settings</li> <li>■ Treatment utilization</li> <li>■ Treatment methods</li> <li>■ Organisational aspects of treatment</li> <li>■ Development of methodological instruments</li> </ul>	<ul style="list-style-type: none"> <li>■ Treatment utilization</li> <li>■ Evaluation of treatment</li> <li>■ Treatment methods</li> <li>■ Development of methodological instruments</li> </ul>
Health and social care service (other than treatment)	<ul style="list-style-type: none"> <li>■ Care needs</li> <li>■ Care utilisation</li> <li>■ Care services and their evaluation</li> </ul>	<ul style="list-style-type: none"> <li>■ Care needs</li> <li>■ Care utilisation</li> <li>■ Care services</li> </ul>
Drug policies and drug control strategies	<ul style="list-style-type: none"> <li>■ National drug policies</li> <li>■ Evaluation of drug policies</li> <li>■ Specific drug policies</li> <li>■ History of drug policies</li> <li>■ Drug control strategies</li> <li>■ Evaluation of drug control strategies</li> <li>■ Jurisdiction</li> </ul>	<ul style="list-style-type: none"> <li>■ National drug policies</li> <li>■ Evaluation of drug policies</li> </ul>
Consequences of drug use	<ul style="list-style-type: none"> <li>■ Social, economic and institutional consequences</li> <li>■ Drug-related crime</li> </ul>	<ul style="list-style-type: none"> <li>■ Social and economic consequences</li> </ul>
Supply of drugs	<ul style="list-style-type: none"> <li>■ Production of drugs</li> <li>■ Drug trafficking</li> <li>■ Drug markets and their developments</li> <li>■ Drug tourism</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug trafficking</li> </ul>
Detection of drugs and drug profiling	<ul style="list-style-type: none"> <li>■ Drug profiling</li> </ul>	/
Knowledge, attitudes towards and opinions on drugs	<ul style="list-style-type: none"> <li>■ Social attitudes/opinion survey on drugs</li> </ul>	/

Source: Kenis, 1997

At the end of the 2000s, the launch of the Risk Behaviour and Dependency programme was partly intended to stimulate research on problematic drug uses. The mapping of research projects over 2001-2006 provides evidence of the importance of treatment and epidemiological issues.

### Research areas and fields covered by numbers of Dutch projects (2001-2006)

Understanding drug-use behavior		Demand reduction		Supply reduction		Policy analysis		Other	Total
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)		Drug supply	Inter-diction	Policy	Legal framework	E.g Meta areas
1	/	3	8		/	/	/	/	12

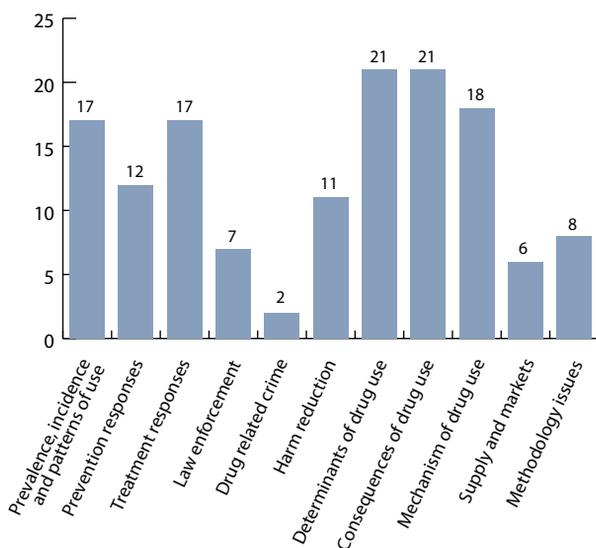
Source: Bühringer et al., 2009

### Overview of the current projects: thematic areas of the research, substances covered and scientific disciplines involved

#### Areas

Between 2010 and 2013 a large spectrum of topics has been investigated by Dutch projects more or less in a balanced way except supply reduction issues. Like in the other ERANID participating countries, this area is poorly investigated. Compared to previous overviews of Dutch projects (see table above), treatment and prevention responses remain important fields of investigation but new topics like the aetiology and the consequences of drug use are well covered. It should be noted that research appears less interested in harm reduction responses.

#### Number of Dutch projects per drug-related research areas (potentially more than one area covered by the same project)



Reading: 21 of the Dutch research projects deal with the determinants of drug use (N=60)

**Illicit drug(s) targeted**

Most of the projects adopt a multi-faceted or a comprehensive approach to drug issues instead of targeting one substance in particular. However, it is interesting to note that cannabis and cocaine depart from this trend. Indeed seventeen and thirteen projects respectively focus on these sole substances.

**Substance(s) targeted in the Dutch projects (N=60)**

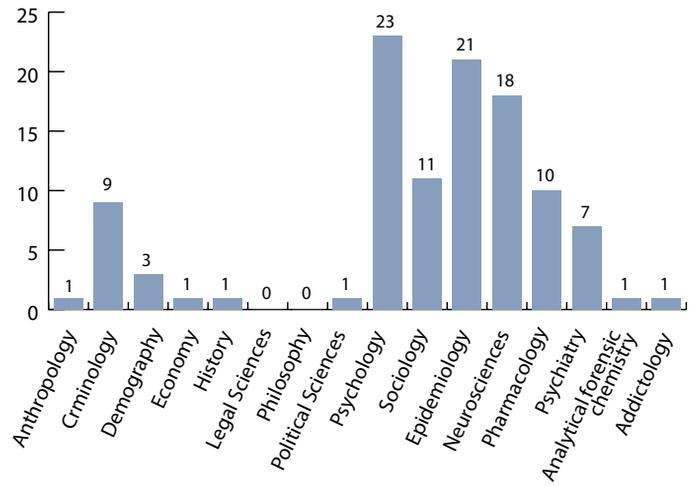
Cannabis	Opioids	Crack/Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	Several Substances	Comprehensive approach
17	2	13	/	1	8	19

\* Steroids & Image Enhancing Drugs

**Disciplines**

Among the disciplines involved, medical sciences are well represented whereas nearly all of the social sciences considered are rarely used by researchers. Nevertheless, thirteen projects are based upon social sciences only and ten projects provide a mixed analysis.

**Disciplines involved in the Dutch projects (potentially more than one discipline per project) (Number of projects)**



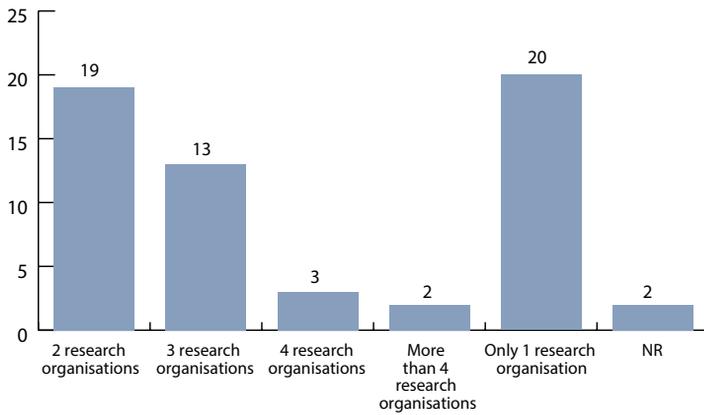
Reading: 23 Dutch projects provide a psychological analysis of drug issues (N=60)

**Scope of the Dutch research projects: collaborative nature of the project and funding size**

Partnership appears to be common; two projects out of three are carried out by more than one research organisation. The large majority of Dutch projects are

not transnational. However, the Dutch teams are involved in twenty five transnational projects, seventeen of them being funded by the EC. In addition as principal investigator, the country leads six of these seventeen EC funded projects.

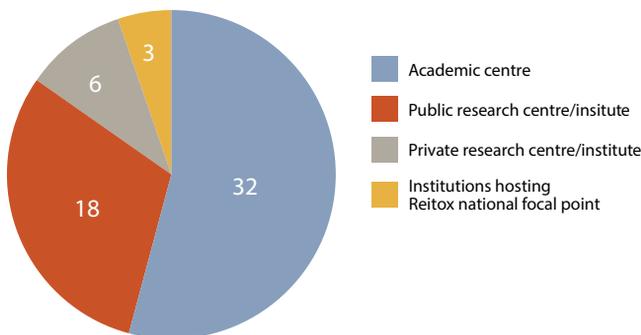
**Number of research organisation involved in the same project (Number of projects)**



Reading: 19 Dutch projects are carried out by a team of two research organizations (N=60; nr=3)

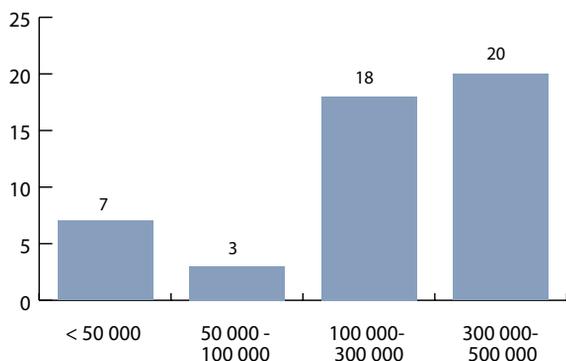
It should also be noted that more than half of the research projects (32) are led by an academic centre and nearly all of them received a public funding. Only two projects among the fifty-nine reported mention private funding. Budgets are primarily allocated through call for tenders (32). Thirty eight projects received more than 100 000€; twenty of the teams have received a budget allowing them to carry out rather big projects -somewhere in between 300 000€ and 500 000€ (see figures below).

**Main research team affiliation (Number of projects)**



Reading: Amongst the 60 Dutch projects, 32 are led by an academic centre (nr=1)

## Amount of funding allocated to the Dutch projects (€)



Reading: 18 Dutch projects received between 100 000€ and 300 000€ (N=59/nr=11)

## Key research institutions & teams in the Netherlands

### From Universities

#### University of Amsterdam

- Amsterdam Institute for Addiction Research (AIAR)
- Institute for Criminology
- Amsterdam School for Social Science Research (ASSR)
- Academic Medical Centre: Departments of Clinical Epidemiology and Biostatistics, Human Retrovirology, Nuclear Medicine, Psychiatry
- Graduate School of Neurosciences, Department of Radiology

#### VU University Amsterdam

- University Medical Centre: Department of Psychiatry, Department of Biological Psychology, Institute of Extramural Medicine
- Department of Clinical Psychology, VU University Amsterdam,

#### Erasmus University Rotterdam

- Institutes of Psychology, of Health Policy and Management, and of Psychology
- Department of Psychiatry, O3 Research Centre Mental Health Care Rijnmond

#### Groningen University

- Department of Sociology

#### Leiden University Medical Centre

- Department of Psychiatry

#### Maastricht University

- Departments of Psychiatry and Neuropsychology; of Experimental Psychology, of Neuro-cognition, Brain and Behaviour, the Experimental Psychopharmacology Unit
- Health Care Sciences, Section Medical Sociology

#### Radboud University Nijmegen, Medical Centre

- Departments of General Practice and Family Medicine, of Medical Technology Assessment, and of Clinical Psychology
- Department of Psychiatry

### Others

#### Bureau Driessen

CVO Research, Education, Training, Consultancy, Cooperation (CVO)

Intraval

National Drug Monitor (NDM)

Netherlands Institute of Mental Health and Addiction (Trimbos Instituut)

Scientific Bureau on Lifestyle, Addiction and Related Social Developments (IVO)

Source: EMCDDA; Bühringer et al. report 2009

## NATIONAL SITUATION IN PORTUGAL

### Summary

Current research in Portugal continues to prioritise the epidemiology of drug use. Even compared to the other ERANID participating countries and in proportion to their respective global effort for drug research, Portugal comes first regarding prevalence issues but it should be noted that closer attention is being paid to the consequences, mechanisms and determinants of drug use. These characteristics are in line with the concerns raised by the authorities in policy documents. Like the other countries considered in this report, Portugal shows little interest in supply reduction and law enforcement. More surprisingly, treatment issues are little considered whereas this is seldom the case elsewhere. By contrast, compared to the other countries, Portuguese projects are more likely to combine social sciences and medical sciences and by doing so, research meets another needs set by the authorities. Still, medical views on drug issues are dominant and most social sciences are very much neglected. Partnership is not developed particularly extensively in the country along with cross national projects, but progress has been made on that front.

### Historical insight: research areas and needs previously identified

In the 1990s, drug research in Portugal was marked both by the epidemic of heroin use and AIDS. The focus was on treatment settings, clinical population and heroin use. However, a wider range of issues were also taken into consideration particularly in the area of epidemiology and important gaps in knowledge were identified.

#### Type of drug research and research needs in Portugal in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	<ul style="list-style-type: none"> <li>■ (regular) Drug use survey in the school population</li> <li>■ Drug use survey in the general population</li> <li>■ Drug use survey in other specific population</li> <li>■ Characteristics/typologies of drug users</li> <li>■ Development of methodological instruments</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug use survey in the general population</li> <li>■ Drug use survey in other specific population</li> <li>■ Study of the use of specific drugs</li> <li>■ Characteristics/typologies of drug users</li> <li>■ Development of methodological instruments</li> </ul>
Risk factors and effects of the use of drugs and dependency	<ul style="list-style-type: none"> <li>■ Health and psychological risks</li> <li>■ Psychiatric comorbidity</li> <li>■ Drug-related death</li> </ul>	<ul style="list-style-type: none"> <li>■ Social risks</li> </ul>
Aetiology of drugs	/	/
Primary prevention	/	<ul style="list-style-type: none"> <li>■ Group-specific prevention</li> <li>■ Evaluation of prevention programmes</li> <li>■ Development of methodological instruments</li> </ul>

Research Area	Type of research carried out	Research needs identified
Treatment and treatment services	<ul style="list-style-type: none"> <li>■ Treatment needs</li> <li>■ Evaluation of treatment</li> <li>■ Development of methodological instruments</li> </ul>	<ul style="list-style-type: none"> <li>■ Treatment needs</li> <li>■ Organisational aspects of treatment</li> <li>■ Evaluation of treatment</li> <li>■ Development of methodological instruments</li> </ul>
Health and social care service (other than treatment)	<ul style="list-style-type: none"> <li>■ Evaluation of care services</li> </ul>	/
Drug policies and drug control strategies	/	<ul style="list-style-type: none"> <li>■ Specific drug policies</li> <li>■ Evaluation of drug policies</li> </ul>
Consequences of drug use	<ul style="list-style-type: none"> <li>■ Drug related crime</li> </ul>	<ul style="list-style-type: none"> <li>■ Social and economic consequences</li> <li>■ Drug-related traffic accidents</li> </ul>
Supply of drugs	/	/
Detection of drugs and drug profiling	/	/
Knowledge, attitudes towards and opinions on drugs	<ul style="list-style-type: none"> <li>■ Social attitudes/opinion survey on drugs</li> <li>■ Presentation of drugs in media and drug discourses</li> </ul>	/

Source: Kenis, 1997

Between 2001 and 2006, Bühringer et al., reported an important focus on epidemiological studies. The authors mentioned the strong commitment of the country to developing prevention and treatment strategies and the close link between this ambition and research activities.

#### Research areas and fields covered by numbers of Portuguese projects (2001-2006)

Understanding behavior	Drug-use	Demand reduction	Supply reduction	Policy analysis	Other	Total
Basic research						
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Inter-diction	Policy Legal frame-work E.g Meta areas
/	/	7	/	/	/	7

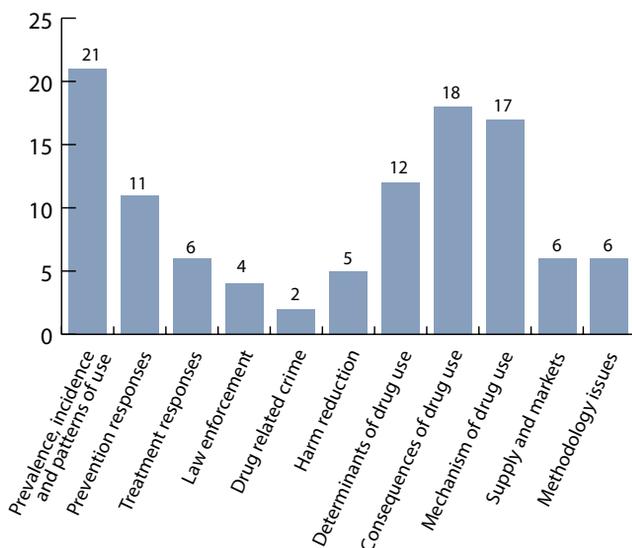
Source: Bühringer et al., 2009

#### Overview of the current projects: thematic areas of the research, substances covered and scientific disciplines involved

##### Areas

Epidemiology and the consequences of drug use are the main areas addressed by the Portuguese projects between 2010 and 2013. Even, compared to the other ERANID participating countries and in proportion to their respective global effort for drug research, Portugal comes first regarding prevalence issues. Like the other countries considered in this report, Portugal shows little interest in supply reduction, law enforcement but also treatment and harm reduction which are not neglected everywhere. However, while previous mapping had shown that the focus of projects was on epidemiology, the spectrum of investigation has widened.

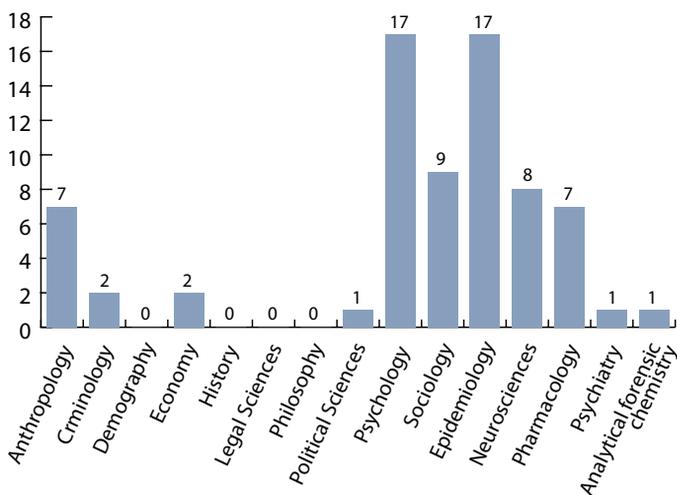
Number of Portuguese research projects per drug related research areas (potentially more than one area covered by the same project)



### Disciplines

In terms of disciplines, it is worth noting that the majority of the Portuguese projects are multidisciplinary (23/32) and one-third of them combine social sciences and medical sciences. However, medical views on drug issues are dominant and most social sciences are very much neglected.

Disciplines involved in the Portuguese projects (potentially more than one discipline in the same project)



Reading: 17 of the 32 Portuguese projects provide an epidemiological analysis, 2 of them propose an economic approach of drug issue (N=32)

### Illicit drug(s) targeted

A very large majority of projects are consistent with a global approach of drug issues that do not focus on a single substance. Most of Portuguese projects deal with polydrug use or with addiction regardless of the substance involved.

#### Substance(s) targeted in the Portuguese projects (N=32)

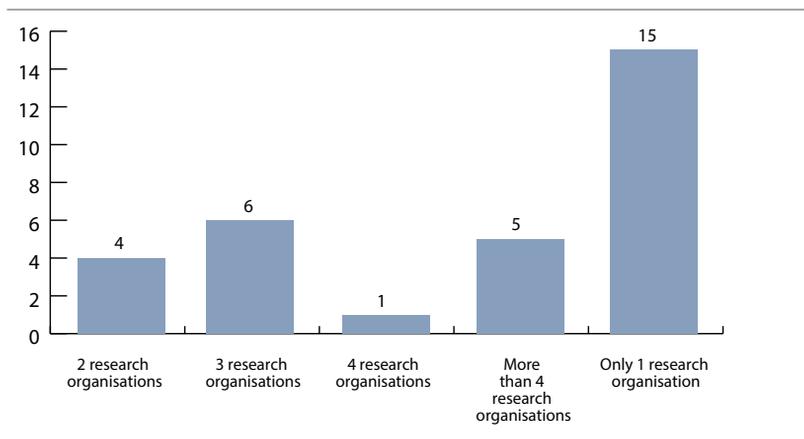
Cannabis	Opioids	Crack/ Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	Several Substances	Comprehensive approach
1	1	/	2	5	14	9

\* Steroids & Image Enhancing Drugs

### Scope of the Portuguese research projects: collaborative nature of the project and funding size

Partnership is not developed particularly extensively, half of the projects are carried out by a single organization and three-quarters of the projects reported are not cross-national. However, Portugal is involved in twelve transnational projects, six of them being funded by the EC.

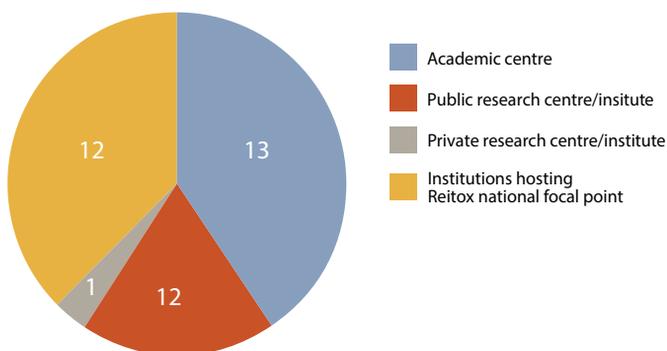
#### Number of research organization(s) per projects



Reading: 15 of the Portuguese projects are carried out by a single research organisation (N=32/nr=1)

Regarding the main research team affiliation, it should be noted that the institution hosting the Reitox national focal point carries out a significant part of the projects. A large majority of projects are led either by an academic centre (13) or by the Reitox national focal point (12).

### Main research team affiliation



Reading: 13 projects out of 32 are carried out by an academic centre (N=32)

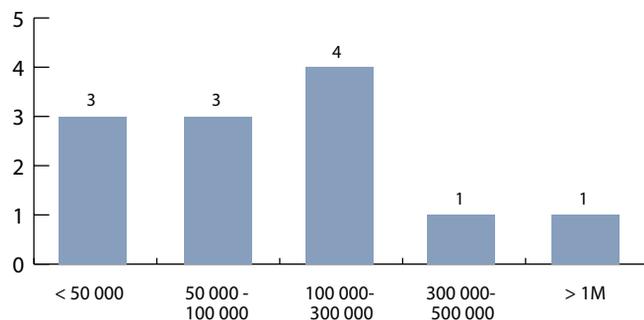
As regards funding mechanisms, most of the Portuguese projects (21 out of 32) are funded by a public body (nr=1) and a significant part of them received budget neither through a call nor by a direct award. The respondents specified that these projects were carried out in the framework of a PhD without specific funds or thanks to the operating budget of the institution leader of the project.

### Funding mechanism of the Portuguese projects (N=32/nr=10)

Call for tender	direct award	Other funding mechanism
7	4	11

Missing information prevents us from delineating the salient points of the global budgets allocated. However, the amounts allocated to the reported projects are divided as follow:

### Amount of funding allocated to the Portuguese projects (€)



Reading: 4 Portuguese projects received between 100 000€ and 300 000€. (N=32/nr=20)

## Key research institutions & teams in Portugal

### From Universities

University of Porto

Abel Salazar Biomedical Sciences Institute

New University of Lisbon

CesNova, School of Social and Human Sciences (FCSH)

University of Lisbon

School of Human Kinetics (FMH) at the Technical

University of Coimbra

School of Medicine

Porto University

School of Psychology and Educational Sciences (FPCE)

### Others

CIES at the Institute of Business and Labour Sciences (ISCTE)

SICAD

Source: EMCDDA ; Bühringer et al. report 2009

## Consistency of the research projects funded with the research priorities set by the Portuguese authorities

Some major features of current Portuguese projects are in line with the concerns raised by the authorities. This is the case regarding the strong emphasis put on the epidemiology of drugs as well as knowledge expected regarding the mechanisms and consequences of drug use. The way research projects develop interaction between social sciences and medical science meet another expectation of the authorities. However, concerns expressed regarding law enforcement, harm reduction and drug-related crime need further investigations. Researchers are also invited by the authorities to use a far wider spectrum of disciplines such as neurosciences, pharmacology, toxicology, biology, ethnology, criminology and economics.

## Consistency or discrepancies between the research priorities set by the authorities and research projects: some highlights

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed	<ul style="list-style-type: none"> <li>■ Prevalence, incidence and patterns of use</li> <li>■ Consequences of drug use</li> <li>■ Mechanism of drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Epidemiology</li> <li>■ Psychology</li> </ul>	<ul style="list-style-type: none"> <li>■ Multidisciplinary</li> <li>■ Inter-disciplinary</li> </ul>
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Harm reduction</li> <li>■ Prevention responses</li> </ul>	<ul style="list-style-type: none"> <li>■ Neurosciences</li> <li>■ Pharmacology</li> <li>■ Toxicology</li> <li>■ Biology</li> <li>■ Criminology</li> </ul>	<ul style="list-style-type: none"> <li>■ Cross-border initiatives</li> </ul>
Significant gaps between current projects and research policy's priorities	<ul style="list-style-type: none"> <li>■ Drug related crime</li> <li>■ Law enforcement responses</li> <li>■ Methodological issues</li> </ul>	<ul style="list-style-type: none"> <li>■ Ethnology</li> <li>■ Economics</li> </ul>	
Feature of the projects not defined as a priority	<ul style="list-style-type: none"> <li>■ Determinants of drug use</li> </ul>		

\* Interaction and exchanges between SSH and medical sciences

## NATIONAL SITUATION IN THE UNITED-KINGDOM

### Summary

The UK has a long-standing tradition of drug-related research and compared to the other ERANID participating countries, academic centres involved in drug-related issues are numerous in the country. In addition the UK is the only country to have published a strategy fully dedicated to drug-related research. Although the geographical scope of this strategy covered only some areas of England and Wales and was not enacted, it nevertheless constitutes an unprecedented initiative to promote drug-related research. The projects identified between 2010 and 2013 focus primarily on treatment and epidemiological issues. These results are in line with the features of the British projects identified in the 2000s. However, compared to this period, more attention is being paid to the determinants and consequences of drug use. Also, compared to the other ERANID participating countries, harm reduction responses is an area significantly addressed in current projects. By contrast, all the other research areas receive very little attention. In line with these features, the main disciplines used are epidemiology, neurosciences and sociology. The very low use of other disciplines emphasizes important discrepancies between the topics addressed, current British projects being particularly focused on treatment and epidemiological issues. In proportion to their global investment on drug research, British projects tend to favor medical approaches of drug issues more than in the other ERANID participating countries. Partnerships do not appear to be particularly developed, the majority of the projects identified as being led by a single research organisation. Also, three out of four projects identified are not cross-national; nevertheless, the country is very present at European level. The UK is involved in forty eight transnational projects, twenty of them being funded by the EC.

### Historical insight: research areas and needs previously identified

The UK has a long-standing tradition of drug-related research. Both clinical and ethnographic research developed in the 1970s combining quantitative and qualitative data as well as the use of indicators. In the same way as the other ERANID participating countries, the epidemic of AIDS and particularly the threat to the drug injecting population marked a turning point in the development of research. Kenis' study provides an overview of the kind of research carried out in the 1990s that are summarized in the table below. It is interesting to notice that the UK was the sole country to address supply issues such as 'prescription drug leakage' at that time.

## Type of drug research and research needs in the UK in the 1990s

Research Area	Type of research carried out	Research needs identified
Prevalence incidence and patterns of use	<ul style="list-style-type: none"> <li>■ Drug use survey in the general population</li> <li>■ Drug use survey in other specific population</li> <li>■ Characteristics/typologies of drug users</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug use survey in other specific population</li> <li>■ Study of polydrug use and use in specific settings</li> <li>■ Characteristics/typologies of drug users</li> </ul>
Risk factors and effects of the use of drugs and dependency	<ul style="list-style-type: none"> <li>■ Health, social and psychological risks</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug-related death</li> </ul>
Aetiology of drugs	/	/
Primary prevention	<ul style="list-style-type: none"> <li>■ Prevention in specific settings</li> <li>■ Methods of prevention</li> <li>■ Evaluation of prevention programmes</li> </ul>	<ul style="list-style-type: none"> <li>■ Evaluation of prevention programmes</li> </ul>
Treatment and treatment services	<ul style="list-style-type: none"> <li>■ Treatments in specific settings</li> <li>■ Organisational aspects of treatment</li> <li>■ Evaluation of treatment</li> </ul>	/
Health and social care service (other than treatment)	<ul style="list-style-type: none"> <li>■ Evaluation of care services</li> </ul>	/
Drug policies and drug control strategies	<ul style="list-style-type: none"> <li>■ Specific drug policies</li> <li>■ Drug control strategies</li> <li>■ Evaluation of drug control strategies</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug control strategies</li> </ul>
Research Area	■ Type of research carried out	■ Research needs identified
Consequences of drug use	<ul style="list-style-type: none"> <li>■ Drug related crime</li> </ul>	<ul style="list-style-type: none"> <li>■ Economic consequence at cross-national level</li> </ul>
Supply of drugs	<ul style="list-style-type: none"> <li>■ Prescription drug leakage</li> </ul>	<ul style="list-style-type: none"> <li>■ Production of drugs</li> <li>■ Drug trafficking at cross national level</li> <li>■ Drug market and their development at national and cross-national level</li> </ul>
Detection of drugs and drug profiling	<ul style="list-style-type: none"> <li>■ Detection of drugs in individuals</li> <li>■ Drug profiling</li> </ul>	<ul style="list-style-type: none"> <li>■ Drug profiling</li> </ul>
Knowledge, attitudes towards and opinions on drugs	<ul style="list-style-type: none"> <li>■ Social attitudes/opinion survey on drugs</li> </ul>	/

Source: Kenis, 1997

In the 2000s, Bühringer et al. reported the high incidence of research in the field of treatment and to a lesser extent in the epidemiology of drug use. The determinants and mechanisms of drug use appeared to be given little attention, the supply reduction and the policy field being neglected.

### Research areas and fields covered by numbers of British projects (2001-2006)

Understanding drug-use behavior		Demand reduction	Supply reduction	Policy analysis	Other	Total			
Basic research									
Drug mechanism	Aetiology & course	Epidemiology	Intervention (Prevention and treatment)	Drug supply	Inter-diction	Policy	Legal framework	E.g. Meta areas	
4	4	10	20	/	/	1	1	1	40

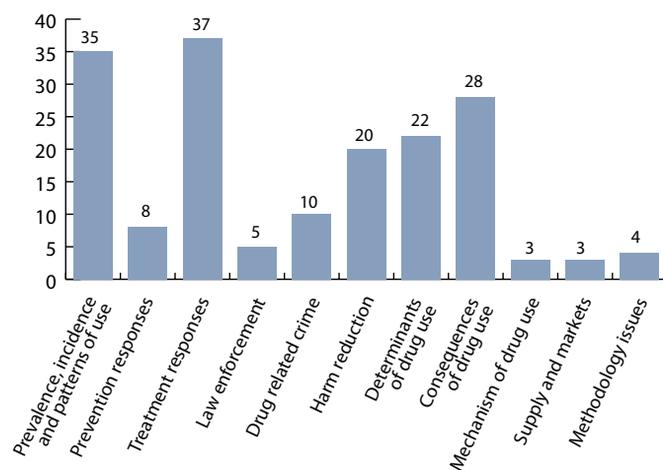
Source: Bühringer et al., 2009

### Overview of the current projects: thematic areas of the research, substances covered and scientific disciplines involved

#### Areas

It appears that treatment responses are a major focus of these projects as well as the prevalence, incidence and patterns of use. These results are in line with the features of the British projects identified in the 2000s. Within the period considered in the report, the consequences of drug use are more intensively studied along with the determinants of drug use and harm reduction responses. All the other topics receive much less attention.

#### Number of British research projects per drug related research areas (potentially more than one area covered by the same project)



Reading: 20 of the 90 ongoing British projects deal with harm reduction (N=90)

### Illicit drug(s) targeted

Regarding the substances targeted, projects in the UK are in line with the dominant approach of drug use which encompasses the specific substances under the concept of addiction or focuses on polydrug uses. Nevertheless, it is worthy of note that opioids are still targeted individually by seventeen projects. In addition, two projects are looking at the issue of the SIEDs (Steroids and Image Enhancing Drugs), reported nowhere else in this study.

### Substance(s) targeted in the British projects (N=90)

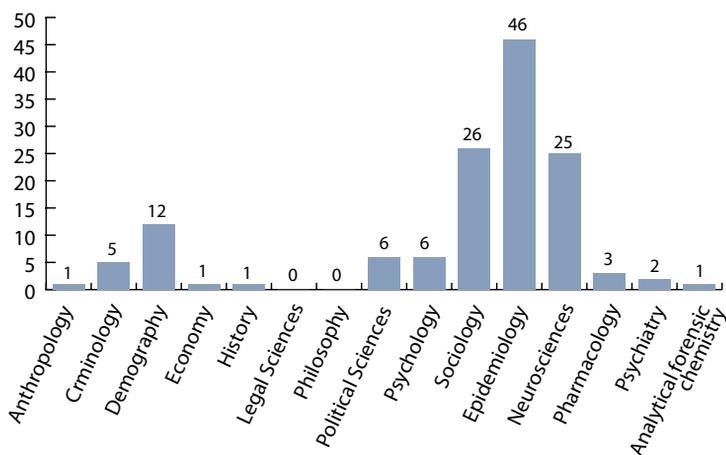
Cannabis	Opioids	Crack/ Cocaine	NPS/ Legal Highs	MDMA/ Methamphetamine	SIEDs*	Several Substances	Comprehensive approach
7	18	7	2		2	37	17

\* Steroids & Image Enhancing Drugs

### Disciplines

Regarding the disciplines, the 90 projects identified mobilise mainly epidemiology, sociology and neurosciences. The very low use of other disciplines emphasizes that there are huge differences between the topics addressed, the British projects being particularly focused on treatment and epidemiological issues.

### Disciplines involved in the UK projects (potentially more than one discipline in the same project)



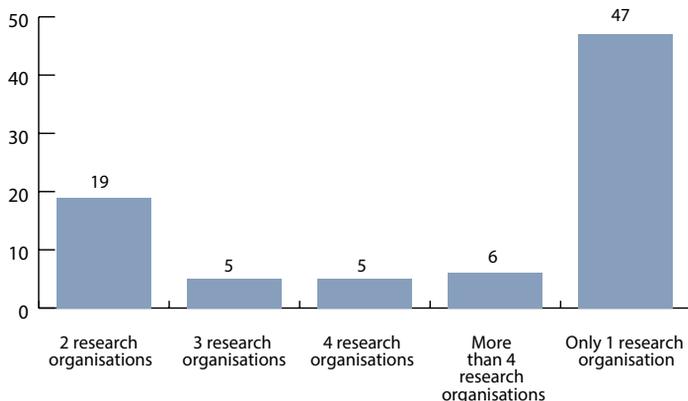
Reading: 46 of the 90 UK projects provide an epidemiological analysis, none of them propose a legal science approach of drug issue (N=90)

Three quarters of the projects are multidisciplinary. But the vast majority follow a medical approach of drug issues. It appears that eleven projects are based upon social sciences only and twenty-three projects provide a mixed analysis of the drug issues they consider.

## Scope of the British research projects: collaborative nature of the project and funding size

In terms of partnership, it should be noted that the majority of the British studies are led by a single research organisation and that the studies carried out in partnership rarely exceed two research organisations. Also, among the British projects documented, three out of four are not cross-national. Another striking point is that the UK is involved in forty eight transnational projects, twenty of them being funded by the EC. In addition to being the principal investigator, the country leads fourteen of these EC funded projects.

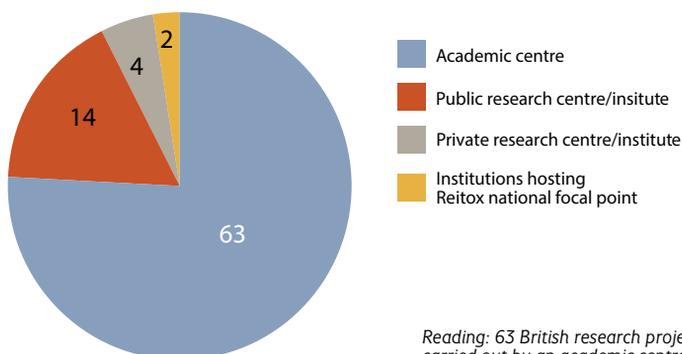
### Number of research organization(s) per projects



Reading: 47 of the UK projects are carried out by a single research organisation (N=90 / nr=8)

The large majority of projects (63/90) are carried out by an academic centre. Compared to the other ERANID participating countries, academic centres involved in drug-related issues are numerous in the UK and are major producers of scientific literature on drugs.

### Main research team affiliation



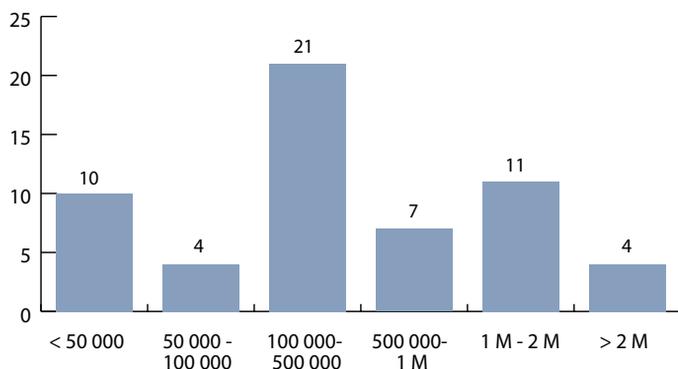
Reading: 63 British research projects out of 90 are carried out by an academic centre (N=90 / nr=7)

Regarding funding mechanism and research budgets, the large majority of the ongoing mentioned projects (3 out of 4) are funded by a public body, ten of them receiving funds from a private body (N=90/nr=10). Budgets are mainly allocated through calls for tender and it should be noted that compared to the other ERA-NID participating countries an important number of projects received large budgets exceeding one million Euros. Eleven projects received between one and two million Euros and four projects were funded with more than two million Euros.

### Funding mechanisms for the British projects (N=90)

Call for tender	53
Direct award	9
Other	6
nr	21

### Amount of funding allocated to the UK projects (€)



Reading: 21 UK projects received between 100 000€ and 500 000€. (N=90/nr=33)

### Key research institutions & teams in UK

#### From Universities

University of Keele

■ Addictions Research Group

International Centre for Drugs Policy (St. George's Hospital)

University of the West of Scotland

■ Institute for Applied Health Research

University of Bath

■ Mental Health Research and Development Unit

National Addiction Centre

University of Manchester

■ National Drugs Evidence Centre

### From Universities

University of York

■ Department for Health Science

■ Centre for Criminal Justice Economics and Psychology

Middlesex University

■ Drug and Alcohol Research Group

Plymouth University

■ Drug and Alcohol Research Unit

University of Edinburgh

■ Centre for Law and Society

Sheffield Hallam University

■ Centre for Regional Economic and Social Research

Liverpool John Moore's University

■ Centre for Public Health

London School of Hygiene and Tropical Medicine

■ Centre for Research on Drugs and Health Behaviour

University of Birmingham

■ Birmingham Alcohol Drugs Gambling and Addiction Research Group

University of Dundee

■ Centre for Addiction Research and Education Scotland

Centre for Crime and Justice Studies (King's College)

University of Glasgow

■ Centre for Drug Misuse Research

Oxford Brookes University

■ School of Health and Social Care

University of Stirling

■ Scottish Addiction Studies

University of Kent

■ Centre for Health service studies

### Others

Crime and Drugs Analysis and Research, (Home Office)

Crime and Justice Research (Scottish Government)

Drug Misuse Information, (Scotland)

Health Protection Agency

Health Protection (Scotland)

Northern Ireland Statistics and Research Agency

National Public Health Service for Wales

NHS Information Centre

Public Health Research and Information Branch, (Northern Ireland)

National Centre for Social Research

Drug Misuse Research Initiative (DMRI)

Health Promotion Agency

Drug and Alcohol Information and Research Unit within DHSSPSNI

The Beckley Foundation

Source: EMCDDA ; Bühringer et al. report 2009

## Consistency of the research projects funded with the research priorities set by the British authorities

Examining the consistency of the British research projects identified with the research priorities emphasized by the authorities is particularly difficult given that separate national policy documents are involved. Also, the current paragraph only focuses on specific highlights. One of them is both the scope and the specificity of the Cross-Governmental Drug Research Strategy (CGDRS) enacted in 2010. This strategy emphasized specific research priorities regarding all the dimensions of the drug phenomenon (prevalence, patterns, responses consequences, causes, mechanisms, drug markets and drug related crime). As the corollary of this, all the scientific disciplines were supposed to be mobilized in research projects. The recent projects cover the needs stated by the authorities regarding the epidemiology of drug use, treatment responses and the consequences of drug use. On the other hand, some areas strongly emphasized in 2010 - such as supply and market issues - are much less addressed.

In addition, it should be noticed that the major features of projects identified in the UK suggest a strong dominance of medical approaches. This is both strength of current projects and a weakness compared to a more balanced approach that is suggested in the policy documents.

### Consistency or discrepancies between the research priorities set by the authorities and research projects: some highlights

	Area of research	Scientific discipline	Specific approach
Research policy's priorities addressed	<ul style="list-style-type: none"> <li>■ Prevalence, incidence and patterns of use</li> <li>■ Treatment responses</li> <li>■ Consequences of drug use</li> </ul>	<ul style="list-style-type: none"> <li>■ Epidemiology</li> <li>■ Neurobiology</li> </ul>	<ul style="list-style-type: none"> <li>■ Cross-border initiatives</li> </ul>
Research priorities receiving less attention	<ul style="list-style-type: none"> <li>■ Harm reduction</li> </ul>		
Significant gaps between current projects and research policy's priorities	<ul style="list-style-type: none"> <li>■ Supply and market</li> <li>■ Mechanisms of use</li> <li>■ Prevention responses</li> <li>■ Law enforcement responses</li> <li>■ Drug related crime</li> </ul>	<ul style="list-style-type: none"> <li>■ Economics</li> <li>■ Criminology</li> </ul>	

## Main conclusions of previous studies and recent developments found

The following part of the present report summarises the key conclusions of previous works in terms of weaknesses as far as the research in the field of drugs is concerned and pinpoints recent progress already accomplished.

### **GAPS FOUND BY KENIS: LESSONS DRAWN BY THE END OF THE 1990's**

Kenis' work provides an overview of the trends in research by the end of the 1990s in the fifteen Member States at that time and at the EC level. The analysis are based on fifteen national reports which address the national drug research situation and the Research Needs, a report on the cross-national research situation and needs at the European level drafted by the Chair of COST A6 (see page 18) and the appraisal of key respondents. The analysis also includes information from thematic reports.

The key points made by the author are as follow:

#### **Research activities**

In terms of areas, Kenis classified the research needs both in relation to their importance and to the discrepancy existing between these needs and the research studies already carried out (see table page 169).

## Discrepancy between research needs and research carried out

	Small discrepancy between needs and research carried out	Large discrepancy between needs and research carried out
Important research needs	<ul style="list-style-type: none"> <li>■ Prevalence, incidence and patterns of use</li> </ul>	<ul style="list-style-type: none"> <li>■ Primary prevention</li> <li>What works? (Concerns of the policy makers)</li> <li>Why does something work? (Interest of the researchers)</li> <li>■ Development of methodological instruments</li> </ul>
Relatively important research needs	/	<ul style="list-style-type: none"> <li>■ Policies</li> <li>■ Treatment (needs, utilization, access, cross national evaluation)</li> <li>■ Economic consequences</li> <li>■ Drug-related death and traffic accidents</li> <li>■ Drug trafficking and markets</li> <li>■ Care services (evaluation)</li> </ul>

*Kenis, 1997*

In the areas where relatively important research needs are reported the author emphasizes not only the need for carrying out studies but for rousing the interest of researchers and strengthening research structures.

In addition, Kenis reported less important research needs such as the detection of drugs and drug profiling on the one hand and the knowledge, attitudes towards and opinion on drugs on the other.

In line with the research areas to address, the author stated that the following disciplines should be strengthened and mobilized: policy sciences, sociology, economics, clinical research, public health research, psychology, organizational research and criminology.

In addition, Kenis emphasized the following cross-cutting needs:

- Defining research priorities in terms of research questions rather than in terms of research disciplines;
- Performing cross-national and comparative studies as well as outcome and cost-effectiveness studies;
- Empowering the comparability of research methods and research instruments
- Promoting qualitative research;
- Developing multi-disciplinary and inter-disciplinary studies.

### Research funding, budgets and programmes

- The degree of institutionalization or the earmarking of the funds varies a lot across countries and there is a lack of regular and institutional type of funding in a lot of countries;
- At the European level, there is a lack of transparency and visibility of the funding possibilities.

## GAPS FOUND BY BÜHRINGER ET AL.: KEY CONCLUSIONS DRAWN AT THE END OF THE 2000'S

While mapping research activities, capacities and funding programmes, Bühringer et al., in their study for the EC "Comparative Analysis of Research into Illicit Drugs in the European Union" drew some key conclusions regarding gaps and weaknesses to be addressed that are recapped below.

### Research activities

#### 1) Areas

- High discrepancy appears between policy needs, scientific knowledge and related research, especially in the fields of drug supply interdiction and drug policy legal framework. No projects or publications were reported by the authors in these two fields. The discrepancy between formulated research needs and the research reality appears to be even larger in the policy field than in the field of supply reduction;
- Hardly any research projects or publications in the prevention area (while the prevention activities are generally considered a national priority);
- The shortage of some types of research (research on specific risk groups in the epidemiology area, analytical and longitudinal studies regarding basic research...);
- Gaps in the treatment research area –including harm reduction- such as treatment of cocaine, amphetamine and polydrug use, early detection and brief interventions outside specialist services, outcome of harm reduction... (although research exist on a large variety of treatments).

Compared to the findings reported by Kenis regarding the 1990s, the authors emphasize that at the end of the 2000s epidemiology continues to be a major research focus while supply reduction continues to have low priority. Changes appeared regarding basic science research which was given less of a priority than in the previous mapping. By contrast, research on intervention became a major area of interest but only regarding treatment issues. Prevention changed from high relevance to low priority and policy analysis received less interest than before.

#### 2) Other features

- Lack of cross-border research projects;
- Unbalanced distribution of research activities between MS (especially new MS having few activities);
- Limited visibility and accessibility to information on EU research projects due to language barriers, low coverage of European journals in international databases and lack of (accessible) project descriptions.

### Research structures and capacity

- Most research activity is done at national level;
- Need for better coordinated research effort at MS level;
- Need to develop ground level research capacity and research networks.

## Research funding, budgets and programmes

- General under-utilization of the EC funding instruments mainly due to a lack of knowledge;
- Rare and unbalanced distribution of EU funding programmes by MS (especially new MS);
- Difficulty in grappling with the complex application process.

## LAST CONCLUSIONS DRAWN FROM THE EMCDDA'S REPORTING NETWORK ACROSS THE REITOX PARTICIPATING COUNTRIES

The following section focus on the development of drug related research and perspectives highlighted by the EMCDDA regarding the period 2008-2010[7]. The conclusions of the agency are based on 1808 references found regarding the ongoing studies identified across the REITOX participating countries over the period considered. The major findings are as follows:

In terms of areas, the following three were still the most frequently addressed: responses to the phenomenon, consequences of drug use, prevalence incidence and patterns of use. These areas were between one-quarter and one-third of all studies cited. On the other hand, methodology issues, the mechanisms and effects of drugs, the determinant and risk or protective factors as well as supply and markets made up only in three, four or five per cent of all studies cited.

The total number of reported references to the studies increased every year across the period considered, suggesting that more studies were carried out. However, large differences appeared among the countries and it is also possible that the rise in the number of references reflected a closer look at research activities already underway.

Having in mind the outputs of previous mappings and the results of its specific study, the agency came to the following conclusions:

Encouraging progress was made regarding the dialogue and coordination needed between research and policy. In particular, research findings were made increasingly accessible and used by the authorities at national and EU level. However, the agency recommended a need to keep on improving the well-functioning coordination between research and political decision-making through the development of public hearings and consultations of all relevant stakeholders. In addition, the need for a stable funding strategy and framework for drug-related research was pointed out as well as the need for a wide and prompt availability of research findings in formats tailored for the professionals and policy makers.

## Learning from recent developments found relying on the present report (2010-2013)

This section looks back to the major findings drawn from the analysis of the policy frameworks, the mechanisms of funding and the 383 projects identified over the period 2010-2013 in the six ERANID participating countries and at the EC level. Major strengths and weaknesses in the drug-related research are emphasized with previous results of the successive mapping on research in mind. Thus, the section highlights key gaps to address so as to accomplish further efforts in research in the field of illicit drugs.

### **STRENGTHS AND WEAKNESSES OF DRUG RESEARCH IN THE ERANID PARTICIPATING COUNTRIES AND AT THE EC LEVEL**

#### **Drug research policy framework**

Beyond national differences and specific features, the following are some essential dimensions of drug research policy frameworks examined in this report.

Drug research is a shared concern expressed in the policy documents at national and EU level and all those documents set out explicit elements which can be seen as research priorities. These elements are expressed in terms of facilitating research in a major area or in a particular scientific discipline, in terms of human resources capacity, funding resources and financial mechanisms or research infrastructure and coordination. From this standpoint, considerable progress has been achieved since the 1990s. However, with the exception of England and to some extent Wales, drug research has not been covered by a specific national strategy. Even if the process is underway at the EU level, there is no formal priority setting mechanisms across the countries. However, with few exceptions, the elements dealing with research in the policy documents are not presented

explicitly under the heading of “research” which prevents clear direction on what should be a research priority. Also, except in the EU drug strategies, the generic priorities for research are rarely translated into formalised actions.

Defining a well-focused strategic guidance for drug research, built on clear and precise policy priorities which can be easily translated into operational actions remains a key issue to be tackled.

## Research funding

Major steps forward in the development of drug research have been taken in recent years. At the EC level, substantial budget resources have been earmarked to financing research in the drugs field. Thanks to this effort, the number of drug-related studies launched in three years (2010-2013) is more than what was funded in the previous decade (2001-2010). Also, for the first time within the framework of the cooperation programme of the Fp7, the theme of “Addictions” was chosen for a large-scale integrating project in 2010 with a focus on the social sciences and humanities. Thanks to its size and the number of high level scholars and research institutes involved, the project funded under this grant (ALICERAP) promotes cross national partnerships and should increase awareness and knowledge in the field and provide useful guidance documents for policy makers.

At national level, new mechanisms of funding have been created in some countries to step up drug research.

However, the economic crisis significantly impacted the budgets available and contributed to the vulnerability of many research teams or institutes involved in the drug field.

Several conclusions of previous studies are still relevant today such as the need for sustainability of funding. Research teams and institutes devoted to drug research are facing the uncertainties of their funding. Also, the complex application process of EC grants prevents research teams in several countries from accessing EC funding programmes. This plays an important role in the unbalanced involvement of the countries in EC funded projects and further efforts are needed in order to ensure adequate investments.

Thanks to the successive mappings on drug research available to date, the authorities have information on current drug research activities and funding mechanisms but a specific investigation should be promoted in order to establish to what extent current drug research delivers a clear added-value in terms of knowledge. Recent analyses were performed about increasing the value of research and reducing avoidable waste regarding clinical and biomedical research in particular. The authors carried out extensive literature reviews in order to identify to what extent research in these fields chose “the wrong questions for

research”, provided “studies that were unnecessary or poorly designed”, failed to “publish relevant research promptly, or at all”, produced “biased or unusable reports of research”. Their findings prove to be of great interest in order to bridge the gaps between research results and policy needs on the one hand, research results and their translations into policy implementations on the other. The authors also propose metrics for stakeholders to monitor the implementation of their recommendations [12-15]. Such an analysis could be fruitfully replicated in the field of drug research.

## Research activities

### Areas

Trends in illicit drug research drawn from the 383 projects analysed in this study show the central place of the epidemiology of drug use, the consequences of use and the responses to the phenomenon. Compared with previous mapping, these areas are still being extensively studied but it appears that the spectrum of areas addressed by researchers has expanded, even if substantial differences exist among the countries considered.

The epidemiology of drug use is studied intensively in the considered countries. Many projects have been carried out in this area since the 1990s. From this standpoint, according to the three stages ‘sequencing’ in the development of drug-related research established by Kenis, research examined in the present report reached far beyond the first stage of development.

The attention given to the consequences of drug use is more significant in current research which suggests a shift compared to previous mapping. The area proves to be one of the major research foci whereas it was little investigated previously.

More attention is also paid to the determinants and mechanisms of drug use. However it should be noted that the focus is on risk factors, biological factors and individual susceptibilities. The dynamics of the trajectories in drug use and the individual choices receive little or no attention. In other words, the influence of the drug user’s motives, the knowledge they develop of drugs in order to control their practice, the impact of the set, the settings and social norms and interactions in the use of drugs are not taken into consideration. Nevertheless, the role of these factors as crucial mechanisms behind drug use has been demonstrated by the social sciences since the 1940’s onward [16-24]<sup>17</sup>

A closer look at the responses to the phenomenon shows that research in this area is very unbalanced. In line with the previous mappings of research, treat-

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17. This is a non exhaustive list. It includes some examples of the more ancient studies. The authors and studies demonstrating the role of social mechanisms behind drug use is far more important.

ment responses are still the most covered area with prevention research coming second. The efforts in considering and addressing the other policy responses are problematic. Harm reduction responses are little addressed and law enforcement is hardly considered. In addition, although the implementation of good practices and the evaluation of drug policy are stressed as being of prime importance at national and EC level, evaluation studies on policy responses are practically non-existent, particularly outcome and effectiveness studies.

Research needs on drug supply are another major challenge. Little or nothing substantial is devoted to drug supply issues.

The major gaps highlighted regarding the areas under-investigated have been emphasized since the end of the 1990's. Also, it is deemed important to better understand the obstacles which may hinder progress in these fields. Regarding drug supply in particular, there might be a lack of researchers specifically trained to focus on these issues or a lack of encouragement on the part of the authorities to attract researchers in the field. Also, there is a discrepancy between the will to launch evidence based policy and the efforts to promote evaluation studies of well-designed, properly conducted and followed through policy responses.

### *Disciplines*

In line with the trends in research mentioned above, epidemiological and neuroscientific analysis of drug issues are more or less well developed across the countries surveyed and the EC funded projects identified but crucial social sciences are lacking. Among them, economics, criminology, geopolitics, legal sciences and political sciences are practically non-existent. This prevents from providing crucial findings regarding supply and market issues as well as policy evaluation for instance. Anthropology and history are also neglected. Nevertheless, the mobilisation of those disciplines would be of great help in order to explain the evolution in the patterns of use as well as the way all the stakeholders (from policy makers, to health professionals and law enforcement agencies) have gradually built several responses to the phenomenon.

It is worth noting that an important number of projects are multidisciplinary which is consistent with the needs emphasized in policy documents. However, there are few interactions and exchanges between social sciences and medical sciences. It is still necessary to strengthen the inter-disciplinarity in order to expand knowledge in the field and meet the expectations of the authorities.

Moreover, while the importance of qualitative research was mentioned since the 1990s [25] there is a striking gap between the qualitative data available and the quantitative data. Surveys and indicators, and other quantitative methods are much more developed. In more general terms, this feature of the projects identified is consistent with a lack of enabling environment for qualitative social research on addiction [26].

### *Other features*

It should be noted that the vast majority of projects deals with several substances or focus on 'addiction' without specifying one substance in particular. This emphasizes that most of the researchers have adopted a conceptualisation of drug use which encompasses all the substances or that they pay attention to the major trend in the patterns of use namely the poly-drug use. However, it should be noted that very few projects deal with new psychoactive substances, although the very fast and wide development of these substances is a growing concern at European level.

In addition, progress has been made regarding the need for cross national studies since the 1990s particularly through the involvement of the countries in EC funded projects. It is worth noting that the countries involved in ERANID are leaders or partners in some or many current EC funded projects. However, research activity is still mainly done at national level and there is plenty of room to improve cross-national partnership. Comparative studies in particular are.

Access to the inputs of the studies is another major issue. The projects examined in this report are underway; it is too soon to appraise the extent to which researchers will ensure wide accessibility to study results through European or international publications, conferences but also other means of communication tailored to the needs of national and EC authorities. The latter point particularly, should be closely monitored. Scientific evidence does not spread automatically. Specific strategies are needed to establish a link between the research findings and the policy developments [27, 28]. Besides, in order to underpin an evidence-informed drugs policy, both researchers and policy makers need to improve their coordination. The more collaborative is the relationship between researchers and decision makers, the likelier is the influence of researchers on policy decision-making [29, 30]. The scientific community should continue its efforts to translate knowledge in a format accessible for policy makers who, in turn, should work towards a clarification of their priorities for a coherent long term drug research strategy.

## **SUMMARY OF POSSIBILITIES TO IMPROVE DRUG RESEARCH**

In line with the mapping carried out for the purpose of the ERANID project and having in mind previous work on drug related research, the following section emphasizes several options that may be of use in order to strengthen drug research. Some of the gaps found in previous works are still valid today. Therefore the section includes the recommendations related to them already emphasized in the past and which go beyond the scope of the ERANID countries. The ERANID project aims to step-up drug research with a specific focus on social sciences, several recommendations are closely linked to those sciences.

## GENERAL CONCLUSIONS

In order to promote illicit drug research at national and EC level the following challenges need to be addressed:

### Drug-related research policy and funding

- Developing formal priority setting mechanisms and strategic guidance for drug research at national and EC level consistent with drug research outcomes and changing drug trends;
- Including a wide range of stakeholders and being inclusive when drawing up research priorities/ strategies so that ownership is wide enough to withstand changes in Government;
- Drawing up the priorities beyond the sole needs of policy makers and a short-term focus;
- Promoting the sustainability of drug research resources through the development of long-term funding programmes at national and EC level.

### Research capacities

- Increasing the pool of social sciences experts on drug issues at national and European level (ad hoc training and research grants);
- Promoting a pool of high quality researchers:
  - ✓ Ensuring long-term funding to the teams and institutes devoted to drug research,
  - ✓ Attracting advanced social scientists and encouraging training of young researchers in the field (regular doctoral scholarships, inclusion of the theme of addiction in higher education).
- Promoting the development of networks of drug researchers across the disciplines;
- Implementing monitoring processes to facilitate the accessibility and visibility of research findings.

### Research activities

- Promoting visibility and dissemination of social sciences literature in the drug field;
- Promoting the development of qualitative data and empowering the attention given to the specific findings of qualitative studies;
- Promoting extensive literature reviews demonstrating the added value of recent drug research projects and underlining potential waste that could be avoided (identifying unnecessary or poorly designed studies for example);
- Providing strong support for the development of research in the fields of drug supply and drug policies (particularly the evaluation of prevention and law enforcement interventions);
- Expanding research activities and knowledge in the following fields: social determinants of drug use, further work on reviewing and assessing drug harms (including NPS but not exclusively), prevalence and patterns of NPS' use;
- Developing inter-disciplinary studies combining social sciences and medical sciences.

## Abbreviations used

BELSPO: Federal Public Planning Service Science Policy (BE)

DPA: Department of Antidrug Policy (IT)

ESRC: Economic and Social Research Council (UK)

HDG: Horizontal Drugs Group (EU)

INCa: French National Cancer Institute (FR)

MILDECA: Interministerial Mission for Combating Drugs and Addictive Behaviours (FR)

MRC: Medical Research Council (UK)

NIDA: National Institute on Drug Abuse (USA)

NWO: The Netherlands Organisation for Scientific Research (NL)

SICAD: General-Directorate for Intervention on Addictive Behaviours and Dependencies (PT)

ZON: Health Research and Development Council (NL)

ZonMw: The Netherlands Organisation for Health Research and Development (NL)

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# Annexes

**Annex A: List of the research projects mapped (2010-13) and  
main features**

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Adapting best practice guidelines for the detection, prevention and treatment of substance abuse in children and youngsters to a local Belgian context	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses.	BE	FR, BE	University	Comprehensive approach	358420	Apr 2011- Sep 2013	Epidemiology, psychology, sociology	NR*	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/59">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/59</a>
Analysis and optimization of substitution treatment in Belgium (SUBANOP)	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Harm reduction responses.	BE	BE	University	Opioids	278000	Feb 2011- Jun 2013	Criminology, epidemiology, sociology, psychiatry	NR	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/58">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/58</a>
Cannabis production in Belgium: assessment of the nature and harms, and implications for priority setting (CANMARKT)	Supply and markets.	BE	BE	University	Cannabis	170000	Feb 2012- Jul 2013	Anthropology, criminology, economics, sociology	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/63">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/63</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
COMIQS.BE : consensus building on minimal quality standards for drug demand reduction in Belgium	Methodology issues.	BE	BE	University	Comprehensive approach	180000	Sep 2013- Sep 2014	Psychology, sociology	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/organisation/publ/pub_ostc/Drug/rDR66synth_fr.pdf">http://www.belspo.be/belspo/organisation/publ/pub_ostc/Drug/rDR66synth_fr.pdf</a>
Determination of the yield of an illegal indoor cannabis plantation (YILCAN)	Supply and markets.	BE	BE	University	Cannabis	192565	Dec 2009- May 2011	Economics, botanical sciences	NR	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/56">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/56</a>
Driving under the influence of illicit or psychoactive drugs: detection in blood and oral fluid	Prevalence, incidence and patterns of drug use. Law enforcement responses.	BE	NR	University	Several substances	NR	Jan 2011- Dec 2012	Analytical toxicology, toxicology	UA BOF KP 2011	/
Drug treatment Court Ghent, qualitative outcome evaluation (QUALECT)	Law enforcement responses.	BE	None	University	Comprehensive approach	135000	Dec 2011- Mar 2013	Criminology, legal sciences, sociology	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/61">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/61</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Drug use among female sex workers in Belgium (DRUSEB)	Prevalence, incidence and patterns of drug use. Consequences of drug use.	BE	NR	University	Several substances	NR	Oct 2008- Dec 2011	Epidemiology, sociology	NR	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/38">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/38</a>
Drugs in figures (DIC III)	Consequences of drug use.	BE	USA	University	Several substances	192000	Dec 2009- Sep 2011	Economics	NR	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/57">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/57</a>
HILCAN: hazards of illicit cannabis cultivation for public, users and intervention staff	Supply and markets.	BE	BE	University	Cannabis	100000	Sep 2013- Sep 2014	Pharmacology, toxicology	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/67">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/67</a>
Indicators for the supply of illegal drugs in Belgium (SUPMAP)	Supply and markets. Methodology issues.	BE	/	University	Comprehensive approach	100000	Dec 2011- Jan 2013	Criminology, economics, political sciences, sociology	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/62">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/62</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Mapping supply indicators	Law enforcement responses. Drug related crime responses. Consequences of drug use. Supply and markets.	BE	/	University	Comprehensive approach	NR	Dec 2011- Jan 2013	Criminology	NR	/
Poly drug use and mental health among drug users who ask for treatment (POLYMEH)	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Consequences of drug use. Methodology issues.	BE	BE, NO	University	Several substances	175000	Dec 2009- Aug 2011	Psychology, sociology	NR	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/55">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/55</a>
Social cost of drugs (SOCOST)	Consequences of drug use. Methodology issues.	BE	BE	University	Several substances	428000	Sep 2013- Sep 2015	Criminology, economics, legal sciences, political sciences, sociology	BELSPO research programme on drugs	/

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Social supply among cannabis users	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	BE	/	University	Cannabis	NR	Feb 2012- May 2015	Criminology, sociology	NR	<a href="http://www.ugent.be/re/strafrecht-criminologie/en/research/isd/projects.htm/currentproject-socialsupply.htm">http://www.ugent.be/re/strafrecht-criminologie/en/research/isd/projects.htm/currentproject-socialsupply.htm</a>
Use of alcohol, illegal drugs, hypnotics and tranquilizers in the Belgian population (UP TO DATE)	Prevention responses. Treatment responses.	BE	BE	University	Several substances	260000	Dec 2011- Dec 2014	Epidemiology, sociology, economics	BELSPO research programme on drugs	<a href="http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/60">http://www.belspo.be/belspo/fedra/proj.asp?l=en&amp;COD=DR/60</a>
The influence of incarceration on legal and illegal drug use patterns	Prevalence, incidence and patterns of drug use	BE	BE	Public research center/ institute	Several substances	60 000/ 2yrs	Nov 2007- Oct 2011	Criminology	NR	/

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
The intersection between science and drug policy: the role of epidemiology in national and local drug policy in Belgium	Law enforcement	BE	/	Public research center/institute	Comprehensive approach	/	Jan 2009 – Dec 2014	Criminology	/	/
Turning points in the criminal careers of drug using offenders	Prevalence, incidence and patterns of drug use	BE	/	University	Comprehensive approach	/	Feb 2009 – Jan 2013	Criminology	PhD	/
ABSTINENCE- Mood disruption in prolonged abstinence from drugs of abuse: molecular mechanisms and gene discovery in the dorsal raphe	Treatment responses.	FR	/	Public research center/institute	Comprehensive approach	300000	Jan 2012- Dec 2015	Neurosciences, pharmacology, molecular psychiatry	NR	<a href="http://www.agence-nationale-recherche.fr/en/anr-funded-project/?tx_lwmsuivi_bilan_pi2[CODE]=A-NR-12-BSV4-0028">http://www.agence-nationale-recherche.fr/en/anr-funded-project/?tx_lwmsuivi_bilan_pi2[CODE]=A-NR-12-BSV4-0028</a>

Title	Major research area	MS <i>Project Coordinator</i>	MS <i>Partners</i>	Project coordinator affiliation	Substance	Project total cost <i>EU contribution</i>	Project time period <i>Start - End</i>	Major scientific disciplines	Contract type	project website
Addiction among youth in the Haute-Loire region	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use.	FR	/	Public research center/institute	Comprehensive approach	19534	Jan 2010-Apr 2011	Epidemiology	NR	<a href="http://www.ors-auvergne.org/mm_files/259.pdf">http://www.ors-auvergne.org/mm_files/259.pdf</a>
Analyses of patients treated by methadone and buprenorphine for more than 8 years	Prevalence, incidence and patterns of drug use. Treatment responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	University	OST	NR	Jan 2011-Jan 2013	Epidemiology, neurosciences, psychology, addictology	NR	/

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Baromètre santé 2010 in Poitou-Charentes - Health Barometer on addictions on the Poitou-Charentes French region	Prevalence, incidence and patterns of drug use.	FR	FR	Public research center/institute	Comprehensive approach	NR	Mar 2010-Jun 2012	Epidemiology	NR	<a href="http://www.ors-poitou-charentes.org/pdf/alkZcYBS10b.pdf">http://www.ors-poitou-charentes.org/pdf/alkZcYBS10b.pdf</a>
Baromètre santé 2010 - National Health Barometer - Illicit drugs focus	Mechanism of drug use and effects.	FR	FR	Public research center/institute	NR	NR	NR	Epidemiology	NR	/
Baromètre santé 2010 in Ile-de-France - Health Barometer on addictions in the Paris region in 2010	Prevalence, incidence and patterns of drug use. Determinants of drug use.	FR	FR	Public research center/institute	Several substances	NR	Jan 2013-Dec 2013	Demography, epidemiology, sociology	NR	<a href="http://www.ors-idf.org/dmdocuments/2013/fiche%20methodo_Web.pdf">http://www.ors-idf.org/dmdocuments/2013/fiche%20methodo_Web.pdf</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Baromètre santé 2010 in PACA - Health Barometer on addictions in the Provence-Alpes-Côtes d'Azur (PACA) region in 2010	Prevalence, incidence and patterns of drug use. Determinants of drug use.	FR	FR	Public research center/institute	Several substances	NR	May 2012-Feb 2013	Epidemiology	NR	<a href="http://www.sesstim-orspaca.org/depot/pdf/13_SY1.pdf">http://www.sesstim-orspaca.org/depot/pdf/13_SY1.pdf</a>
2010 Health Barometer in Auvergne. Consumption of tobacco, alcohol and illicit drugs in the Auvergne French region	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use.	FR	FR	Public research center/institute	Several substances	45356	Jan 2010-Oct 2012	Epidemiology	NR	<a href="http://www.inpes.sante.fr/Barometres/barometre-sante-2010/index.asp">http://www.inpes.sante.fr/Barometres/barometre-sante-2010/index.asp</a>

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Baromètre santé Jeunes 2010 in Pays de la Loire - Health Barometer among the youth in the Pays de la Loire French region in 2010	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Determinants of drug use.	FR	FR	Public research center/institute	Several substances	NR	NR	Epidemiology	NR	<a href="http://www.santepaydelaloire.com/ors/etudes-et-publications/barometre-sante-jeunes/">http://www.santepaydelaloire.com/ors/etudes-et-publications/barometre-sante-jeunes/</a>
CHANGE, quitting addiction	Treatment responses. Determinants of drug use. Consequences of drug use. Methodology issues.	FR	FR	Public research center/institute	Comprehensive approach	100000	2011-2013	Psychology, sociology, addictology	Call for tender (MILDT 2011)	<a href="http://www.cermes3.cnrs.fr/spip.php?article818">http://www.cermes3.cnrs.fr/spip.php?article818</a>

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Cognitive deficits related to drug addiction and comorbid mental disorders	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	University	Comprehensive approach	190000	Jan 2013- Dec 2014	Epidemiology, neurosciences, psychology, addictology	Call for tender (ANR Programme blanc)	<a href="http://www.agence-nationale-recherche.fr/projet-anr/?tx_lwmsuivibilan_pi2[CODE]=ANR-12-BSH2-0012">http://www.agence-nationale-recherche.fr/projet-anr/?tx_lwmsuivibilan_pi2[CODE]=ANR-12-BSH2-0012</a>
Cohort Health and Mortality among drug users addressing addiction treatment and low threshold centres	Consequences of drug use.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	NR	Jan 2009- Dec 2017	Epidemiology	NR	<a href="http://www.ofdt.fr/ofdtdev/live/reserve/cohorte2009.html">http://www.ofdt.fr/ofdtdev/live/reserve/cohorte2009.html</a>

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Contribution of the Fibrosan to the care and treatment of hepatitis B and C within CSAPA (National treatment and prevention centre for addiction) : CSAPASCAN qualitative study	Prevention responses. Treatment responses. Harm reduction responses.	FR	/	Public research center/institute	Comprehensive approach	50000	Jan 2012- Jan 2013	Sociology	NR	<a href="http://www.grvs06.org/travaux.php#fibro">http://www.grvs06.org/travaux.php#fibro</a>
Correcting estimates of the rate of Drug related death in France	Consequences of drug use.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	13000	Jan 2009- Dec 2010	Epidemiology	NR	/

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Diagnosis on drugs and drug addiction in the Auvergne French region - 2013 update	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Harm reduction responses. Determinants of drug use. Consequences of drug use. Supply and markets.	FR	FR	Public research center/institute	Several substances	13770	Jan 2012- Nov 2012	Epidemiology	NR	<a href="http://www.ors-auvergne.org/mm_files/345.pdf">http://www.ors-auvergne.org/mm_files/345.pdf</a>
Does repression have a gender? Criminal justice for drug-using and drug-trafficking women	Treatment responses. Law enforcement responses. Drug related crime responses.	FR	/	Public research center/institute	Comprehensive approach	65000	Dec 2011- ...	Sociology	Call for tender (from the Ile-de-France region)	/
Driving under the influence of drugs and medicines (prevalence study and responsibility study)	Prevalence, incidence and patterns of drug use. Consequences of drug use.	FR	/	Public research center/institute	Several substances	35520	Oct 2006- Nov 2011	Epidemiology, statistics	FP6-2004-TREN-3	

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Drug trafficking based on unmonitored airfields and improvised landing platforms	Law enforcement responses. Drug related crime responses. Supply and markets. Methodology issues.	FR	/	Public research center/institute	Comprehensive approach	60000	Dec 2011- Dec 2012	Criminology, economics, epidemiology, legal sciences, sociology, geopolitics	NR	<a href="http://www.inhesj.fr/fr/2-1">http://www.inhesj.fr/fr/2-1</a>
Drug use in rural areas of the Northeast Meuse county: a specific investigation in the Lorraine region by the TREND task force	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Determinants of drug use.	FR	FR	Public research center/institute	Comprehensive approach	NR	Sep 2012- Jun 2013	Anthropology, demography, epidemiology, sociology	NR	<a href="http://www.cmsea.asso.fr/cmsea/images/actu/drogueruralmeuse.pdf">http://www.cmsea.asso.fr/cmsea/images/actu/drogueruralmeuse.pdf</a>
Drugs and fatal road crashes (SAM project)	Prevalence, incidence and patterns of drug use. Consequences of drug use.	FR	FR	Public research center/institute	Several substances	577624	Sep 2001- Apr 2011	Epidemiology, psychology, pharmacology, accidentology	NR	<a href="http://www.ofdt.fr/BDD/publications/docs/SAMsynth.pdf">http://www.ofdt.fr/BDD/publications/docs/SAMsynth.pdf</a>

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Early intervention, prevention and risk reduction related to base cocaine use: writing a guide for professionals	Prevention responses. Harm reduction responses.	FR	FR	Public research center/institute	Cocaine and crack	62500	Jan 2012-Sep 2013	Sociology, pharmacology	NR	<a href="http://www.grvs06.org/travaux.php#airds">http://www.grvs06.org/travaux.php#airds</a>
Economics of drugs and drug addiction	Supply and markets.	FR	/	University	Several substances	NR	NR	Economics	NR	/
Effects of high frequency stimulation of the subthalamic nucleus on motivation for cocaine in monkeys	Treatment responses.	FR	/	University	Cocaine	120000	Mar 2013-Dec 2016	Neurosciences, pharmacology, psychiatry	NR	/
Emerging trends and new drugs	Prevalence, incidence and patterns of drug use.	FR	FR	Institutions hosting Reitox national focal point	Several substances	NR	NR	Anthropology, sociology	NR	<a href="http://www.ofdt.fr/oftdev/live/donneesnat/trendsintes.html">http://www.ofdt.fr/oftdev/live/donneesnat/trendsintes.html</a>

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ENa-Caarud (National survey in low threshold services for drug users, CAARUD)	Prevalence, incidence and patterns of drug use. Treatment responses. Harm reduction responses. Consequences of drug use.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	140000	Jan 2010- ...	Epidemiology, sociology	NR	<a href="http://www.ofdt.fr/BDD_len/Bd_stats/80_Doc.xhtml">http://www.ofdt.fr/BDD_len/Bd_stats/80_Doc.xhtml</a>
EROPP (Survey on Representations, Opinions, and Perceptions Regarding Psychoactive Drugs)	NR	FR	/	Institutions hosting Reitox national focal point	Several substances	198000	Oct 2012- Sep 2013	Epidemiology, sociology	NR	<a href="http://www.ofdt.fr/BDD_len/Bd_stats/2_Doc.xhtml">http://www.ofdt.fr/BDD_len/Bd_stats/2_Doc.xhtml</a>
ESCAPAD 2011 (National survey on Health and drug use carried out during the Day of defense preparation)	Prevalence, incidence and patterns of drug use. Determinants of drug use, Consequences of drug use.	FR	FR	Institutions hosting Reitox national focal point	Several substances	194000	Jan 2011- Mar 2012	Epidemiology, sociology	NR	<a href="http://www.ofdt.fr/BDD_len/Bd_stats/4_Doc.xhtml">http://www.ofdt.fr/BDD_len/Bd_stats/4_Doc.xhtml</a>

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ESM: Factors associated to craving and drug use in patient who were addicted when starting a treatment. A study based on everyday life	Determinants of drug use.	FR	FR	Public research center/institute	Comprehensive approach	200000	Oct 2009- Dec 2012	Epidemiology, neurosciences, psychology, addictology	NR	/
ESPAD (European School Survey Project on Alcohol and other Drugs) in France in 2011	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	FR	FR	Institutions hosting Reitox national focal point	Several substances	215000	Mar 2011- May 2012	Epidemiology	NR	<a href="http://www.ofdt.fr/oftdev/live/donnees_nat/espada.html">http://www.ofdt.fr/oftdev/live/donnees_nat/espada.html</a>
ESPAD (European School Survey Project on Alcohol and other Drugs) in the Poitou-Charentes French region in 2011	Prevalence, incidence and patterns of drug use.	FR	/	Public research center/institute	Several substances	NR	Apr 2011- Jul 2013	Epidemiology	NR	<a href="http://www.ors-poitou-charentes.org/pdf/uJLAKFESPAD13.pdf">http://www.ors-poitou-charentes.org/pdf/uJLAKFESPAD13.pdf</a>

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European national drug policies	Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses.	FR	/	Public research center/institute	Comprehensive approach	NR	Sep 2012- Dec 2013	Legal sciences, political sciences, sociology	NR	/
Evaluation of a tool reducing HCV transmission risk for crack users	Harm reduction responses. Consequences of drug use. Methodology issues.	FR	FR	Public research center/institute	Crack	NR	2008-2014	Anthropology, epidemiology, political sciences, sociology	Call for tender (ANRS)	/
Evaluation of awareness-building training courses on the drug related harms	Prevention responses. Law enforcement responses. Consequences of drug use.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	57500	Jan 2010- Dec 2012	Epidemiology	NR	/

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Evaluation of consultations for cocaine users in out-patient drug addiction treatment centres	Treatment responses.	FR	/	Institutions hosting Reitox national focal point	Cocaine	13250	Feb 2012- Oct 2013	Epidemiology, sociology	NR	/
Evaluation of experimental female-oriented addiction care services	Treatment responses. Harm reduction responses.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	12500	Feb 2012- Oct 2013	Epidemiology, sociology	NR	/
Evaluation of experimental therapeutic collective housing for cocaine or crack users	Treatment responses.	FR	/	Institutions hosting Reitox national focal point	cocaine and crack	13250	Feb 2012- Oct 2013	Epidemiology, sociology	NR	/
Evaluation of fast access and short-term support units for drug addicted prison leavers	Treatment responses. Law enforcement responses.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	13250	Feb 2012- Oct 2013	Epidemiology, sociology	NR	/

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Evaluation of the therapeutic communities in France. Implementation and results	Treatment responses. Consequences of drug use.	FR	FR	University	Comprehensive approach	297754	Jan 2008- Nov 2013	Epidemiology, sociology, psychiatry, clinical science	Call for tender (OFDT-2008)	<a href="http://www.ofdt.fr/oftdev/live/publi/rapports/rap13/epfxeltb.html">http://www.ofdt.fr/oftdev/live/publi/rapports/rap13/epfxeltb.html</a>
Gender and addictions	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use.	FR	FR	Public research center/institute	Comprehensive approach	NR	Jan 2008- Jan 2012	Epidemiology, sociology, gender studies	NR	<a href="http://www.ncbi.nlm.nih.gov/pubmed/20132782">http://www.ncbi.nlm.nih.gov/pubmed/20132782</a>
Genetic dissection of the function of the glucocorticoid receptor in chronic stress effects on behavioral responses to drugs of abuse	Determinants of drug use. Mechanism of drug use and effects.	FR	/	Public research center/institute	Comprehensive approach	290000	Feb 2010- Dec 2013	Neurosciences, pharmacology, molecular genetics	Call for tender (ANR Programme blanc)	/

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HBSC in France (Health Behaviour in School-aged Children)	Prevalence, incidence and patterns of drug use.	FR	FR	Public research center/institute	Several substances	120000	2010-...	Epidemiology	NR	<a href="http://www.ofdt.fr/BDD_len/Bd_stats/67_Doc.xhtml">http://www.ofdt.fr/BDD_len/Bd_stats/67_Doc.xhtml</a>
Health and social environment of adolescent school children	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	FR	LX	University	Several substances	NR	Jun 2010-Dec 2015	Epidemiology, sociology	NR	/

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Heroin in France. A social and cultural history of the dissemination of its use and trafficking, 1968-2004	Prevalence, incidence and patterns of drug use. Law enforcement responses. Drug related crime responses. Determinants of drug use. Consequences of drug use. Supply and markets.	FR	FR	Public research center/institute	Heroin	238800	Jan 2013- Dec 2015	Anthropology, legal sciences, history, sociology	Call for tender (ANR Programme blanc)	<a href="http://www.agence-nationale-recherche.fr/projet-anr/?tx_lwmsuivibilan_pi2[CODE]=ANR-12-BSH1-0006">http://www.agence-nationale-recherche.fr/projet-anr/?tx_lwmsuivibilan_pi2[CODE]=ANR-12-BSH1-0006</a>
Increasing trends in screening for addictive behaviors among general practitioners in France	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Methodology issues.	FR	FR	Institutions hosting Reitox national focal point	NR	NR	Jan 2009- Sep 2011	Epidemiology, sociology, survey methodology	NR	<a href="http://www.ncbi.nlm.nih.gov/pubmed/21940125">http://www.ncbi.nlm.nih.gov/pubmed/21940125</a>

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International survey on the prevalence of Attention-deficit disorder (ADD) / Hyperactivity in fellows to presenting drug use related disorders	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use. Methodology issues.	FR	FR, NL	University	Several substances	NR	NR	Epidemiology, psychology, addictology	NR	/
Intracellular signaling mechanisms implied in the effects of psychostimulants	Consequences of drug use. Mechanism of drug use and effects.	FR	/	Public research center/ institute	Cocaine	500000	...-2015	Neurosciences, pharmacology	NR	/
Methaville	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses.	FR	/	Public research center/ institute	Methadone	NR	Jan 2009- Jan 2012	Epidemiology, psychology, pharmacology	NR	<a href="http://www.biomedcentral.com/1471-2458/12/488">http://www.biomedcentral.com/1471-2458/12/488</a>

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mGluR7 & addiction: regulation of the receptors and functions in the different phases of addiction (acquisition, expression, maintenance, relapse)	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	Public research center/ institute	Comprehensive approach	600000	Jun 2013- Dec 2018	Neurosciences, pharmacology	NR	/
National survey on Opiate substitution treatment	Treatment responses.	FR	/	Institutions hosting Reitox national focal point	OST	165500	Jan 2010- ...	Epidemiology	NR	/
Neurochemical memory: what are the cellular and molecular mechanisms of its origin? Is it a factor of vulnerability to relapse?	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	FR	/	Public research center/ institute	Several substances	550000	Oct 2010- Dec 2018	Neurosciences, pharmacology	NR	/

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Opioid addiction and impact of the substitution treatments	Treatment responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	FR	/	Public research center/ institute	Opiates and OST	500000	Mar 2012- Mar 2016	Neurosciences, pharmacology	Call for tender (ANR - SAMENTA 2012)	/
Gender inequalities and social inequalities in the use of drugs in France	Prevalence, incidence and patterns of drug use. Determinants of drug use.	FR	FR	Public research center/ institute	Several substances	NR	2008-2011	Epidemiology, sociology	PhD	<a href="http://tel.archives-ouvertes.fr/tel-00716697/">http://tel.archives-ouvertes.fr/tel-00716697/</a>
Polyconsumption of psychoactive substances during pregnancy	Prevalence, incidence and patterns of drug use. Treatment responses. Consequences of drug use. Mechanism of drug use and effects. Methodology issues.	FR	FR	Public research center/ institute	Several substances	NR	2009-2014	Sociology, paediatrics	NR	/

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Prevalence estimates of illicit drug use in general population	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Methodology issues.	FR	FR	Institutions hosting Reitox national focal point	Several substances	2000000	Jan 2009- Jan 2014	Epidemiology, sociology, statistics	NR	<a href="http://www.inpes.sante.fr/Barometres/barometre-sante-2010/index.asp">http://www.inpes.sante.fr/Barometres/barometre-sante-2010/index.asp</a>
Prevalence study of the psychiatric and neurocognitive impairment among monitored HIV and HCV co-infected patients (sub-study A999S CO13 HEPAVIH)	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Mechanism of drug use and effects.	FR	FR	Public research center/institute	Comprehensive approach	74881	Sep 2010- Dec 2013	Epidemiology, sociology	Call for tender (ANRS and ABBOTT)	<a href="http://www.anrs.fr/content/download/4576/25767/file/CSS5.pdf">www.anrs.fr/content/download/4576/25767/file/CSS5.pdf</a>

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PREVDROG-PRO	Prevention responses. Treatment responses. Drug related crime responses. Harm reduction responses. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	Public research center/institute	Several substances	99000	Nov 2011- Nov 2013	Demography, political sciences, psychology, sociology, ergonomomy	NR	<a href="http://www.federatiogn-pro-une-recherche-sur-les-usages-dalcool-drogues-et-medicaments-psychotropes-au-travail/">http://www.federatiogn-pro-une-recherche-sur-les-usages-dalcool-drogues-et-medicaments-psychotropes-au-travail/</a>
PrimInject: a national internet-based survey on the practices and context of the first injection among young drug users in France	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Methodology issues.	FR	/	Public research center/institute	Several substances	50000	Oct 2010- Mar 2011	Anthropology, epidemiology, sociology	NR	/

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Qualitative evaluation of a transdisciplinary network for preventing and treating addictive behaviours in the Valbonne Sophia-Antipolis French area: an innovative community system to be modelled to achieve a replicable methodology	Prevention responses. Treatment responses. Harm reduction responses. Methodology issues.	FR	/	Public research center/institute	Comprehensive approach	77000	Jul 2013-Oct 2014	Sociology	Call for tender (Ministry of Health and MILDT)	/
Qualitative study on the attractiveness of the young outpatient drug clinics (CJC)	Treatment responses.	FR	/	Institutions hosting Reitox national focal point	Several substances	NR	Jan 2011-Dec 2011	Political sciences, sociology	NR	/
Quantitative analysis of the perception of damages and benefits associated to addictive substance use	Determinants of drug use. Mechanism of drug use and effects. Methodology issues.	FR	FR	Public research center/institute	Several substances	84000	Mar 2010-Jul 2013	Addictology, statistics	NR	/

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QUIT-COC. Can the failures or the success of the hospital cocaine withdrawal be predicted?	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	Public research center/ institute	Cocaine	326598	Jan 2014- Jan 2017	Epidemiology, neurosciences, psychology	PHRC NATIONAL 2012	/
RELIONPREDIL- Experimental survey for the monitoring of prevention actions related to illicit or licit drugs	Prevention responses.	FR	/	Institutions hosting Reitox national focal point	Comprehensive approach	114500	Sep 2010- Dec 2012	Epidemiology	NR	/
Representations of addictions in Europe	NR	FR	SW, FI, RU	University	Comprehensive approach	NR	2009-2014	Psychology, sociology	NR	/
Research programme and intervention to reduce the risk of infection while being in custody (PRIDE)	Prevention responses. Treatment responses. Harm reduction responses.	FR	FR	Public research center/ institute	Comprehensive approach	12000	Jun 2013- Jun 2016	Epidemiology	ANRS	/

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Respiratory effects of drugs of abuse	Mechanism of drug use and effects.	FR	FR	Public research center/institute	Several substances	NR	Oct 2008-Nov 2012	Respiratory physiology, toxicology	NR	<a href="http://www.theses.fr/2012PA05P628">http://www.theses.fr/2012PA05P628</a>
SAGE	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Mechanism of drug use and effects.	FR	FR	Public research center/institute	Several substances	190000	Jan 2003-Jan 2005	Epidemiology, neurosciences, psychology, pharmacology, psychiatry, addictology	MILDT	/
SMILE Study of the molecular and cellular mechanisms of incentive learning	Mechanism of drug use and effects.	FR	/	Public research centre/institute	Comprehensive approach	2500000 (2500000)	Jun 2010-May 2013	Neurosciences	FP7-IDEAS ERC Advanced Grant	<a href="http://cordis.europa.eu/projects/rcn/94589_en.html">http://cordis.europa.eu/projects/rcn/94589_en.html</a>

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Social acceptability of the lower risk drug consumption rooms in France	Harm reduction responses. Consequences of drug use. Methodology issues.	FR	FR	Public research center/ institute	Heroin	NR	Sep 2013- 2016	Sociology	NR	/
Sociology of the addictions among the French youth	Prevention responses. Determinants of drug use. Methodology issues.	FR	FR	Public research center/ institute	Comprehensive approach	NR	Jan 2009- Dec 2010	Sociology	NR	<a href="http://www.cairn.info/resume.php?ID_ARTICLE=SOCIO_004_0517">http://www.cairn.info/resume.php?ID_ARTICLE=SOCIO_004_0517</a>
Stimago ANRS (French National AIDS and viral hepatitis research agency)	Treatment responses. Harm reduction responses.	FR	/	Public research center/ institute	Cocaine	60000	Jan 2014- Sep 2014	Epidemiology, pharmacology	NR	<a href="http://vih.org/20130530/produits-de-substitution-pour-la-cocaine-mythe-ou-realite">http://vih.org/20130530/produits-de-substitution-pour-la-cocaine-mythe-ou-realite</a>
Study of psychopathological and addictive profile of patients suffering from Buerger's disease	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses.	FR	FR	Public research center/ institute	Several substances	150000	Jan 2009- Jan 2016	Epidemiology, neurosciences, psychology, psychiatry, addictology	PHRC	/

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Study of the clinical, genetic and environmental factors associated to the declaration of psychotic symptoms in cocaine addicts	Harm reduction responses. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	Public research center/ institute	Cocaine	474000	Mar 2012- Dec 2014	Epidemiology, neurosciences, psychology, pharmacology	PHRC NATIONA L 2010	<a href="http://clinicaltrials.gov/ct2/show/NCT01569347?term=PSYCHO COKE&amp;rank=1">http://clinicaltrials.gov/ct2/show/NCT01569347?term=PSYCHO COKE&amp;rank=1</a>
Study on the opportunity and feasibility of a supervised injection facility in Metz city	Prevention responses. Harm reduction responses. Methodology issues.	FR	/	Public research center/ institute	Comprehensive approach	3000	Dec 2008- Dec 2010	Anthropology, epidemiology, sociology	NR	<a href="http://www.bdsp.ehsp.fr/Base/433302/">http://www.bdsp.ehsp.fr/Base/433302/</a>
Substitution treatments from the patient's point of view: what can we learn from their experience?	Treatment responses.	FR	NR	University	OST	55000	Jul 2009- Jul 2011	Sociology	NR	<a href="http://www.ofdt.fr/BDD/publications/docs/eftxelsb.pdf">http://www.ofdt.fr/BDD/publications/docs/eftxelsb.pdf</a>

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Subthalamic nucleus deep brain stimulation for the treatment of impulse control disorders	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	FR	CA, ES	University	Cocaine	548759	Mar 2011- Jun 2014	Neurosciences, pharmacology	EraNet-NEURON 2010	<a href="http://www.neuron-eranet.eu/_media/ST_NDBS-ICD.pdf">http://www.neuron-eranet.eu/_media/ST_NDBS-ICD.pdf</a>
Survey on the consumption of substances among the workers addressing the Occupational medicine in Aquitaine	Prevalence, incidence and patterns of drug use. Determinants of drug use.	FR	/	University	Comprehensive approach	NR	Sep 2009- Aug 2011	Epidemiology, addictology	NR	/
The Coquelicot Survey- Seroprevalence of HIV and HCV in drug users in France and determining factors of the at risk practices	Prevalence, incidence and patterns of drug use. Harm reduction responses. Consequences of drug use. Methodology issues.	FR	FR	Public research center/ institute	Comprehensive approach	350000	2010-2016	Epidemiology, sociology	NR	/

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The effect of Opiate Integrated Treatment including Methadone and Buprenorphine /Naloxone (Suboxone®) Maintenance Treatment for Injecting Drug Users at community in Ho Chi Minh City, Vietnam	Prevention responses. Treatment responses. Harm reduction responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets. Methodology issues.	FR	FR, USA	University	OST	NR	Aug 2012- JuL 2017	Anthropology, epidemiology, psychology, sociology, addictology	NIDA harm reduction and treatment access in Vietnam	/
The fight against drug in France (1966-1996): the impossible prohibition	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Supply and markets.	FR	/	Public research center/ institute	Several substances	NR	Sep 2008- Jun 2014	History, sociology	PhD	<a href="http://www.theses.fr/s74458">http://www.theses.fr/s74458</a>

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The influence of the collection method in the surveys measuring addictive practices	Prevalence, incidence and patterns of drug use. Methodology issues.	FR	FR	Public research center/ institute	Comprehensive approach	NR	Jan 2005- Jan 2011	Epidemiology, statistics	NR	<a href="http://www.drees.sante.gouv.fr/violences-et-sante-en-france-etat-des-lieux,7426.html">http://www.drees.sante.gouv.fr/violences-et-sante-en-france-etat-des-lieux,7426.html</a>
Trajectories of peoples presenting a drug addiction or a behavioural addiction and addressing the care system. Medical, neurobiological, sociological and psychological characteristics. A prospective multicentric and multidisciplinary study	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Harm reduction responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Methodology issues.	FR	FR	University	Several substances	NR	1994-2014	Epidemiology, neurosciences, psychology, sociology, addictology	NR	/

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Transversal approach of the role of the subthalamic nucleus in motivation and drug addiction: from rats to parkinsonian patients	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	FR	FR	University	Several substances	694714	Nov 2009- Apr 2014	Neurosciences, pharmacology	ANR, MNPS and Fondation de France	/
TREND report - Emerging drug-related phenomena in 2011 - Recent trends on the Metz city site	Determinants of drug use. Mechanism of drug use and effects. Supply and markets.	FR	FR	Public research center/ institute	Several substances	10000	NR	Anthropology, epidemiology, sociology, pharmacology	NR	<a href="http://www.ofdt.fr/oftd/fr/trend/metz11.pdf">http://www.ofdt.fr/oftd/fr/trend/metz11.pdf</a>
Young urban homelessness wandering in Bordeaux (French metropolis)	Prevalence, incidence and patterns of drug use. Treatment responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets. Methodology issues.	FR	/	University	Comprehensive approach	73000	Jan 2011- Dec 2013	Anthropology, legal sciences, sociology	NR	/

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2013-2014 AQUADRUGS project: An estimate of the consumption of narcotics in the general population through analysis of waste waters. Study of the trends of consumption and of the appearance of new substances through a national network survey	Prevalence, incidence and patterns of drug use. Methodology issues.	IT	/	Private research center/ institute	Several substances	170000	J2001 2013-Dec 2013	Epidemiology, toxicology, statistics	NR	/

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Anabolic steroid and new psychoactive compounds (Smart Drugs) abuse and dependence as a social evil that interests both the health care and legal systems. Organ damage in healthy young athletes: epidemiologic, biochemical, pathological, toxicological evidence and proposal of a new doping control model.	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	IT	IT	University	Several substances	89000	Mar 2013- Mar 2016	Toxicology	FIRB 2012	/

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Brain seeking - Project for the documentation of the effects of drugs through neuropathological neuroimaging techniques and testing of a treatment with Rtms	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	IT	/	Public research center/institute	Several substances	100000	Jun 2012- Jun 2014	Neurosciences	NR	/
Brainsearch	Consequences of drug use.	IT	IT, USA	Public research center/institute	Comprehensive approach	NR	NR	Neurosciences	NR	<a href="http://www.governo.it/AmministrazioneTrasparente/BandiContratti/Archivio/accordi_pa/politicheAntidroga/01_Progetto%20BRAINSEARCH.pdf">http://www.governo.it/AmministrazioneTrasparente/BandiContratti/Archivio/accordi_pa/politicheAntidroga/01_Progetto%20BRAINSEARCH.pdf</a>
Caino	Consequences of drug use.	IT		University	Several substances	NR	NR	Neurosciences	NR	/

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Cannabis abuse in adolescence as a risk factor for psychiatric diseases; an experimental approach (Adocannabis)	Consequences of drug use. Mechanism of drug use and effects.	IT	IT	Private research center/ institute	Cannabis	150000	Mar 2010- Sep 2013	Neurosciences, pharmacology	NR	/
Cerebral alterations induced by the use of cannabinoids and cocaine in adolescence: study of the molecular mechanisms in experimental models	Mechanism of drug use and effects.	IT	/	University	Several substances	70000	Mar 2012- ...	Neurosciences, pharmacology	NR	/
CiTos	Treatment responses.	IT	IT	University	OST	NR	NR	Clinical research	NR	/
Clinical, personological, neuropsychological and biological characteristics of cannabis-connected schizophrenia	Consequences of drug use. Mechanism of drug use and effects.	IT	IT	University	Cannabis	180000	Mar 2011- Mar 2014	Neurosciences	NR	/

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Comet Study	Consequences of drug use. Mechanism of drug use and effects.	IT	IT	University	Cannabis	30000	Oct 2012- Oct 2013	Legal sciences, forensic chemistry	NR	<a href="http://www.cometclinicaltrials.com/">http://www.cometclinicaltrials.com/</a>
Communication	Prevention responses. Drug related crime responses. Consequences of drug use. Supply and markets.	IT	/	University	Comprehensive approach	360000	Mar 2012- Mar 2014	Neurosciences, political sciences, sociology	NR	/
Community prevention strategy related to substance abuses	Prevention responses. Harm reduction responses. Determinants of drug use. Mechanism of drug use and effects. Methodology issues.	IT	IT	Public research center/ institute	Comprehensive approach	490000	Oct 2008- Oct 2011	Epidemiology, political sciences, psychology, sociology, pharmacology	NR	/

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Consortium of solidarity for prevention	Prevention responses. Determinants of drug use. Consequences of drug use. Supply and markets.	IT	/	University	Several substances	350000	Sep 2012- Sep 2013	Neurosciences, sociology	NR	/
Drug Prices	Supply and markets.	IT	/	University	Comprehensive approach	395000	Feb 2011- Sep 2013	Neurosciences, sociology	NR	/
D-TMS II – Study and research on transcranial magnetic stimulation in the therapy of cocaine dependence e prevention of relapse	Treatment responses. Determinants of drug use.	IT	/	University	Cocaine	250000	Sep 2010- Sep 2014	Neurosciences, psychology, pharmacology	NR	<a href="http://www.politicheantidroga.it/progetti-e-ricerca/progetti-dpa/sezione-8---ricerca/89-d-tms/presentazione.aspx">http://www.politicheantidroga.it/progetti-e-ricerca/progetti-dpa/sezione-8---ricerca/89-d-tms/presentazione.aspx</a>
ECS - EMOTION	Consequences of drug use.	IT	/	Public research center/ institute	Cannabinoids	NR	NR	Neurosciences	NR	/

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Exposure to cannabinoids during adolescence and development of cocaine and heroin addiction in adulthood	Prevention responses. Treatment responses. Consequences of drug use.	IT	/	University	Several substances	160000	2012-2013	Neurosciences, pharmacology, psychiatry	NR	/
Farmagen	Treatment responses.	IT	IT	Public research center/ institute	Opiates and OST	NR	NR	Neurosciences	NR	/
GENERISK2 - Evaluation of genetic vulnerability - identification of risk factors relating to the abuse of cannabis and related psychiatric disorders	Determinants of drug use.	IT	IT	University	Cannabis	57000	Mar 2012- Jul 2013	Neurosciences	NR	/
Impact	Consequences of drug use.	IT	IT	University	Several substances	NR	NR	Neurosciences	NR	/

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Key Indicator	Prevention responses. Supply and markets. Methodology issues.	IT	/	University	Several substances	180000	Nov 2012- Nov 2013	Demography, neurosciences, political sciences, sociology	NR	/
MeSI	Consequences of drug use.	IT	IT	University	Cannabis	NR	NR	Neurosciences	NR	/
NET OUTCOME 2012 - Building a permanent network for the treatment responses monitoring and the evaluation of "Outcome" in respect to delivered services	Treatment responses.	IT	IT, CA	University	Comprehensive approach	390000	Aug 2012- Aug 2014	Epidemiology, pharmacology	NR	<a href="http://www.governo.it/AmministrazioneTrasparente/BandiContratti/Archivio/accordi_pa/politicheAntidroga/01PROGETTO%20IMPERIA.pdf">http://www.governo.it/AmministrazioneTrasparente/BandiContratti/Archivio/accordi_pa/politicheAntidroga/01PROGETTO%20IMPERIA.pdf</a>
Neurotraining & TMS	Treatment responses.	IT	IT, USA	Public research center/ institute	Comprehensive approach	NR	NR	Neurosciences	NR	<a href="http://ang.dronet.org/ricerca/neurotraining.html">http://ang.dronet.org/ricerca/neurotraining.html</a>

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New consumption (drug) behaviour and risk reduction	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Determinants of drug use. Consequences of drug use.	IT	/	University	Several substances	490000	Feb 2007- Jun 2010	Epidemiology, psychology, sociology, pharmacology	NR	/
Noi No! (Not us!)	Prevention responses. Drug related crime responses. Determinants of drug use. Consequences of drug use. Supply and markets.	IT	/	University	Comprehensive approach	390000	Sep 2012- Sep 2013	Neurosciences, political sciences, sociology	NR	/

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PINS - And you, are you against drugs?	Prevention responses. Determinants of drug use. Consequences of drug use. Methodology issues.	IT	/	University	Several substances	357000	Dec 2011- Dec 2013	Political sciences, sociology	NR	/
SanInCittà	Prevention responses.	IT	/	Public research center/ institute	Several substances	250000	Dec 2011- Dec 2014	Anthropology, neurosciences, sociology	NR	<a href="http://www.eihp.it/dettagli/1/Progetto+SanInCitt%C3%A0.html">http://www.eihp.it/dettagli/1/Progetto+SanInCitt%C3%A0.html</a>
Schizca	Consequences of drug use.	IT	IT	University	Cannabis	NR	NR	Neurosciences	NR	/
Short and long term effects of marijuana intake in adolescent age on immune responses: transnational study in animal models and human	Consequences of drug use. Mechanism of drug use and effects.	IT	/	University	Cannabis	60000	Mar 2010- Mar 2012	Pharmacology	NR	/

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SMART SEARCH 2, identification and determination of new psychoactive substances in illicit preparations and biological samples by using novel technologies	Prevalence, incidence and patterns of drug use. Law enforcement responses. Methodology issues.	IT	IT, EU	University	NPS	70000	Sep 2012- Sep 2013	Forensic chemistry	NR	<a href="http://www.politicheantidroga.it/comunicazione/notizie/2010/dicembre/smart-search.aspx">http://www.politicheantidroga.it/comunicazione/notizie/2010/dicembre/smart-search.aspx</a>
SMART SEARCH search for pharmacologically active, potentially dangerous compounds in commercially available products by using HRMS	Prevalence, incidence and patterns of drug use. Law enforcement responses. Methodology issues.	IT	IT	University	NPS	70000	Mar 2010- Mar 2012	Forensic chemistry	NR	<a href="http://www.politicheantidroga.it/comunicazione/notizie/2010/dicembre/smart-search.aspx">http://www.politicheantidroga.it/comunicazione/notizie/2010/dicembre/smart-search.aspx</a>

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Survey	Prevention responses. Determinants of drug use. Consequences of drug use. Supply and markets.	IT	/	University	Several substances	237000	Nov 2011- Dec 2013	Demography, political sciences, sociology	NR	/
THC Gate	Mechanism of drug use and effects.	IT	/	University	Cannabis	60000	Mar 2010- Mar 2011	Neurosciences, pharmacology	NR	/
THC Gate	Consequences of drug use.	IT	/	University	Cannabis	NR	NR	Neurosciences	NR	/
VulCan Project: Evaluation of the condition of vulnerability to Cannabis use and to the development of addiction: neuroendocrine relationships and qualitative aspects	Treatment responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Methodology issues.	IT	IT	University	Several substances	160000	Mar 2010- Sep 2013	Neurosciences, pharmacology, forensic chemistry	NR	/

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Mindtrouble	NR	NL	NL	University	Comprehensive approach	400000	Mar 2011- Nov 2014	Epidemiology	NR	/
A prospective study of at risk cannabis use: Neurocognitive and neuro-imaging predictors of the course of drug use	Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	NL	NL	University	Cannabis	225000	Feb 2008- Jan 2013	Neurosciences, psychology, radiology, psychiatry	ZonMw- NIDA Binational Call	/
Acceptability, feasibility, mechanism of action and potential side effects of extended release depot naltrexone (XRNT) in opioid dependent patients	Treatment responses. Mechanism of drug use and effects.	NL	/	University	OST	100000	2012-2013	Neurosciences, pharmacology, psychiatry	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/acceptability-feasibility-mechanism-of-action-and-potential-side-effects-of-extended-release-depot/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/acceptability-feasibility-mechanism-of-action-and-potential-side-effects-of-extended-release-depot/samenvatting/</a>

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An integrative view of neuromodulation of cognitive control	Consequences of drug use. Mechanism of drug use and effects.	NL	/	University	Cocaine	250000	Sep 2008-Aug 2011	Psychology	VENI grant	<a href="http://www.nwo.nl/en/research-and-results/research-projects/88/2300150888.html">http://www.nwo.nl/en/research-and-results/research-projects/88/2300150888.html</a>
Antenna: Trends in alcohol, tobacco and drugs among Amsterdam youth	Prevalence, incidence and patterns of drug use. Prevention responses. Law enforcement responses. Harm reduction responses. Determinants of drug use. Supply and markets.	NL	/	University	Several substances	94000	Mar 2013-Aug 2014	Criminology, epidemiology, sociology	NR	/

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Attentional processes in the development and maintenance of substance abuse and dependence	Prevention responses. Treatment responses. Mechanism of drug use and effects.	NL	NL	University	Comprehensive approach	205472	Sep 2009- Jan 2014	Epidemiology, psychology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/attentional-processes-in-the-development-and-maintenance-of-substance-abuse-and-dependence/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/attentional-processes-in-the-development-and-maintenance-of-substance-abuse-and-dependence/samenvatting/</a>
Balancing costs and effects of Multi Systemic Therapy compared to Care As Usual in adolescents with antisocial behaviour: a methodological exploration	Treatment responses. Methodology issues.	NL	NL	University	Comprehensive approach	209000	Oct 2007- Jul 2012	Economics, epidemiology, orthopedagogy	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/balancing-costs-and-effects-of-multi-systemic-therapy-compared-to-care-as-usual-in-adolescents-with/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/balancing-costs-and-effects-of-multi-systemic-therapy-compared-to-care-as-usual-in-adolescents-with/samenvatting/</a>

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Boys and Girls - an interactive web-based series to promote healthy lifestyles among European adolescents	Prevalence, incidence and patterns of drug use. Prevention responses.	NL	EU	CBO	Comprehensive approach	400000	Oct 2010- Dec 2012	Prevention science	NR	<a href="http://www.boysandgirlsclubs.eu/">http://www.boysandgirlsclubs.eu/</a>
Cannabis and MDMA: the human neuropharmacology of memory impairment	Consequences of drug use. Mechanism of drug use and effects.	NL	/	University	Several substances	176714	2007-2013	Neurosciences, psychology, pharmacology	Open Competition schedule	<a href="http://www.nwo.nl/en/research-and-results/research-projects/80/2300132480.html">http://www.nwo.nl/en/research-and-results/research-projects/80/2300132480.html</a>
Cannabis as a cause of psychosis; an ecogenetic study linking cannabis-induced dopamine response to psychotic mechanisms and experiences in daily life	Consequences of drug use. Mechanism of drug use and effects.	NL	NR	University	Cannabis	292446	Oct 2007- Jan 2011	Epidemiology, neurosciences, psychology, pharmacology	NR	<a href="http://www.narcis.nl/research/RecordID/OND1320368/Language/en">http://www.narcis.nl/research/RecordID/OND1320368/Language/en</a>

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Cannabis dependence: predictors, course and treatment seeking	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Methodology issues.	NL	NL	Public research center/institute	Cannabis	749986	Mar 2008-Feb 2013	Criminology, epidemiology, psychology, sociology	Addiction: Risk Behaviour and Dependence	<a href="http://www.zonmw.nl/nl/projecten/project-detail/cannabis-dependence-predictors-course-and-treatment-seeking/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/cannabis-dependence-predictors-course-and-treatment-seeking/samenvatting/</a>
Chicken and Egg. A national study on the neurocognitive processes involved in the etiology of problematic use of licit and illicit drugs in adolescents and young adults	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	NL	NL	University	Several substances	220000	Apr 2009-Apr 2014	Epidemiology, psychology	Programme Risk Behaviour and Dependence, ZonMW	<a href="http://www.zonmw.nl/nl/projecten/project-detail/chicken-and-egg-a-national-study-on-the-neurocognitive-processes-involved-in-the-etiology-of-proble/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/chicken-and-egg-a-national-study-on-the-neurocognitive-processes-involved-in-the-etiology-of-proble/samenvatting/</a>

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Coffee shop, illegal cannabis market and public nuisance	Prevalence, incidence and patterns of drug use. Law enforcement responses. Supply and markets.	NL	/	University	Cannabis		Mar 2011- Mar 2013	Criminology	NR	/
Community Prevention System Change in the Netherlands and the United States	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Methodology issues.	NL	USA	Private research center/ institute	Several substances	108486	Jul 2011- Dec 2012	Criminology, epidemiology, political sciences, sociology, prevention science	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/community-prevention-system-change-in-the-netherlands-and-the-united-states/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/community-prevention-system-change-in-the-netherlands-and-the-united-states/samenvatting/</a>
Conciliating team and conciliating approach. <i>Susteam+ aanpak</i>	Law enforcement responses.	NL	NL	Public research center/ institute	Comprehensive approach	35000	Dec 2011- May 2013	Criminology, sociology	NR	/

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Deep Brain Stimulation in Chronic Treatment Refractory Drug Dependence: a Translational Study	Treatment responses.	NL	NL	University	Comprehensive approach	580000	NR	Neurosciences, psychiatry	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/deep-brain-stimulation-in-chronic-treatment-refractory-drug-dependence-a-translational-study/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/deep-brain-stimulation-in-chronic-treatment-refractory-drug-dependence-a-translational-study/samenvatting/</a>
Delineating risk factors for the initiation and maintenance of cannabis use, in comparison with tobacco use, in adolescence	Prevalence, incidence and patterns of drug use. Determinants of drug use.	NL	NL, FI	University	Cannabis	600000	Jan 2007- Jan 2012	Epidemiology, neurosciences, psychology	NR	<a href="http://www.nwo.nl/onderzoek-en-resultaten/onderzoek-sprojecten/52/2300133952.html">http://www.nwo.nl/onderzoek-en-resultaten/onderzoek-sprojecten/52/2300133952.html</a>

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Development and evaluation of a transfer-oriented version of the Healthy School and Drugs program	Prevention responses.	NL	NL	Private research center/institute	Several substances	494149	Jan 2012- Dec 2015	Psychology, education	ZonMW, Prevention Program	<a href="http://www.zonmw.nl/nl/projecten/project-detail/development-and-evaluation-of-a-transfer-oriented-version-of-the-healthy-school-and-drugs-program/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/development-and-evaluation-of-a-transfer-oriented-version-of-the-healthy-school-and-drugs-program/samenvatting/</a>
Developmental trajectories of substance use and externalizing problems from early adolescence into young adulthood	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	NL	NL	University	Several substances	669000	Dec 2007- Dec 2011	Epidemiology, psychology, sociology	Programme Risk Behavior and Dependence , ZonMW	<a href="http://www.narcis.nl/research/RecordID/OND1326695/Language/nl">http://www.narcis.nl/research/RecordID/OND1326695/Language/nl</a>

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Effectiveness of intensive community-based care for persons with complex addiction problems: contribution of specific program components	Treatment responses.	NL	NL	Bemoeizorg Eindhoven	Comprehensive approach	450622	Apr 2008- ...	Sociology	NR	<a href="http://www.narcis.nl/research/RecordID/OND1327456">http://www.narcis.nl/research/RecordID/OND1327456</a>
Effectiveness of intensive community-based care for persons with complex addiction problems: contribution of specific program components	Prevention responses. Treatment responses. Harm reduction responses.	NL	/	University	Comprehensive approach	335788	Apr 2008- Oct 2012	Sociology, statistics	Programme Risk behavior and dependence , ZonMW	<a href="http://www.narcis.nl/research/RecordID/OND1327456">http://www.narcis.nl/research/RecordID/OND1327456</a>
Effects and indicators of CBT for cannabis use in psychosis	Treatment responses.	NL	/	University	Cannabis	200000	Jul 2007- Jun 2011	Psychology, psychiatry	ZonMW OOG	<a href="http://www.zonmw.nl/nl/projecten/project-detail/effects-and-indicators-of-cbt-for-cannabis-use-in-psychosis/">http://www.zonmw.nl/nl/projecten/project-detail/effects-and-indicators-of-cbt-for-cannabis-use-in-psychosis/</a>

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Effects of a novel serotonergic drug on striatal dopamine D2 receptor availability and its relevance for the treatment of cocaine addiction	Mechanism of drug use and effects.	NL	NR	University	Cocaine	100000	Apr 2010- Apr 2012	Neurosciences, pharmacology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/effects-of-a-novel-serotonergic-drug-on-striatal-dopamine-d2-receptor-availability-and-its-relevance/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/effects-of-a-novel-serotonergic-drug-on-striatal-dopamine-d2-receptor-availability-and-its-relevance/samenvatting/</a>
Elderly and addiction: A state of the art study	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Methodology issues.	NL	NL	University	Several substances	24379	Jan 2010- Dec 2010	Sociology, psychiatry	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/ouderen-en-verslaving-een-overzichtstudie/voortgang/">http://www.zonmw.nl/nl/projecten/project-detail/ouderen-en-verslaving-een-overzichtstudie/voortgang/</a>

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Endophenotypes of adolescent substance use	Determinants of drug use.	NL	NL	Public research center/institute	Several substances	580000	Jan 2008- Jan 2013	Epidemiology, psychology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/endophenotypes-of-adolescent-substance-use/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/endophenotypes-of-adolescent-substance-use/samenvatting/</a>
Evaluation Brain24Use	Prevention responses.	NL	NR	Private research center/institute	Comprehensive approach	NR	Mar 2010- Mar 2015	Psychology, prevention science	NR	/
Further insights into aspects of the EU illicit drug markets (part 1): Cannabis market: user types, availability and consumption estimates	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Supply and markets. Methodology issues.	NL	BG, CZ, IT, SW, PT, UK	Public research center/institute	Cannabis	NR	May 2011- Jun 2013	Epidemiology	NR	<a href="http://ec.europa.eu/justice/anti-drugs/files/eu_market_full.pdf">http://ec.europa.eu/justice/anti-drugs/files/eu_market_full.pdf</a>

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Genetic and environmental influences on psychopathology and wellbeing during adolescence.	Prevalence, incidence and patterns of drug use. Determinants of drug use.	NL	/	Public research center/institute	Comprehensive approach	176000	Nov 2006- Dec 2010	Epidemiology, psychology, forensic chemistry	Open competition, bilateral agreement NWO	/
Has harm reduction really worked? Implications from trends in the incidence and prevalence of blood borne infections for design of interventions in injecting drug user populations	Prevalence, incidence and patterns of drug use. Harm reduction responses. Methodology issues.	NL	NL	Infectious disease epidemiology team UMCU	Several substances	350000	Nov 2009- Oct 2013	Demography, epidemiology, mathematics	ZonMw program for Infectious Disease Control	<a href="http://www.zonmw.nl/nl/projecten/project-detail/has-harm-reduction-really-worked-implications-from-trends-in-the-incidence-and-prevalence-of-blood/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/has-harm-reduction-really-worked-implications-from-trends-in-the-incidence-and-prevalence-of-blood/samenvatting/</a>
Human cognition and the basal ganglia: where response selection and inhibition meet	Consequences of drug use.	NL	NL	University	Several substances	NR	NR	Neurosciences, psychology	NR	<a href="http://www.fsw.leidenuniv.nl/psychologie/organisatie/cognitievepsychologie/medewerkers/medewerkers/colzato.html">http://www.fsw.leidenuniv.nl/psychologie/organisatie/cognitievepsychologie/medewerkers/medewerkers/colzato.html</a>

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Improving the reach of outreaching addiction prevention among vulnerable youngsters by region-tailored prevention strategies	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Determinants of drug use. Consequences of drug use. Methodology issues.	NL	/	Private research center/institute	Comprehensive approach	330910	Sep 2012- Nov 2014	Demography, epidemiology, psychology	Prevention 4, sub-program 2: Prevention of mental disorders	<a href="http://www.zonmw.nl/nl/projecten/project-detail/improving-the-reach-of-outreaching-addiction-prevention-among-vulnerable-youngsters-by-region-tailor/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/improving-the-reach-of-outreaching-addiction-prevention-among-vulnerable-youngsters-by-region-tailor/samenvatting/</a>
Impulsivity, a treatable risk factor in the onset and relapse to substance use disorders	Treatment responses. Determinants of drug use. Mechanism of drug use and effects.	NL	BE, NL	University	Several substances	760000	Feb 2008- Jul 2013	Neurosciences, psychology, psychiatry	Risky behavior and dependence	<a href="http://www.zonmw.nl/nl/projecten/project-detail/impulsivity-a-treatable-risk-factor-in-the-onset-and-relapse-to-substance-use-disorders/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/impulsivity-a-treatable-risk-factor-in-the-onset-and-relapse-to-substance-use-disorders/samenvatting/</a>

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Innovative approaches for cocaine pharmacotherapy (the case of rimonabant)	Treatment responses.	NL	/	University	Cocaine	250000	2008-2013	Neurosciences, pharmacology, psychiatry	Programme Substance Use and Dependence , ZonMW	/
Is the Measure of Placement in an Institution for Prolific Offenders promising?	Drug related crime responses.	NL	/	Public research center/ institute	Comprehensive approach	888	Mar 2011- Feb 2012	Criminology	NR	/
Mapping the cultural and economic geography of drug use in the EU	Supply and markets.	NL	UK, FR, DK	University	Comprehensive approach	10000	Jun 2013- ...	Anthropology, criminology, history	NR	/
Multinational overview of cannabis production regimes	Law enforcement responses.	NL	NR	Private research center/ institute	Cannabis	NR	NR	Review	NR	<a href="http://www.rand.org/content/dam/rand/pubs/research_reports/RR500/RR510/RAND_RR510.pdf">http://www.rand.org/content/dam/rand/pubs/research_reports/RR500/RR510/RAND_RR510.pdf</a>

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Negative psychosocial consequences of harmful alcohol use and illicit drug use.	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Consequences of drug use.	NL	/	Private research center/institute	Several substances	34840	Aug 2011- Dec 2011	Demography, epidemiology, psychology, sociology	Risk Behavior and Dependence programme	<a href="http://www.ivo.nl/UserFiles/File/Publicaties/2012%2007%20-%20Sociale%20gevolgen%20van%20verslaving%20-%20reeks%2071.pdf">http://www.ivo.nl/UserFiles/File/Publicaties/2012%2007%20-%20Sociale%20gevolgen%20van%20verslaving%20-%20reeks%2071.pdf</a>
Negative reinforcement in cocaine dependence: the integration of CRF and 5-HT stress and emotional systems	Mechanism of drug use and effects.	NL	USA	Public research center/institute	Cocaine	100000	Oct 2009- Aug 2012	Neurosciences	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/negative-reinforcement-in-cocaine-dependence-the-integration-of-crf-and-5-ht-stress-and-emotional-samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/negative-reinforcement-in-cocaine-dependence-the-integration-of-crf-and-5-ht-stress-and-emotional-samenvatting/</a>

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Neurocognitive aspects of drug dependence	Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	NL	/	University	Comprehensive approach	800000	Sep 2009- Sep 2013	Epidemiology, neurosciences, psychology, pharmacology	NR	/
Number of coffee shops in The Netherlands and local policies	Law enforcement responses. Harm reduction responses. Supply and markets.	NL	/	Private research center/ institute	Cannabis	25000	Apr 2013- Oct 2013	Sociology	NR	www.intraval.nl
Prevalence, treatment needs and new pharmacotherapeutic treatment options for crack dependent people in the Netherlands	Prevalence, incidence and patterns of drug use. Treatment responses. Harm reduction responses.	NL	NL	University	Crack	860000	Apr 2010- Oct 2014	Criminology, psychology, pharmacology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/prevalence-treatment-needs-and-new-pharmacotherapeutic-treatment-options-for-crack-dependent-people/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/prevalence-treatment-needs-and-new-pharmacotherapeutic-treatment-options-for-crack-dependent-people/samenvatting/</a>

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Problematic cannabis use. Effectiveness of the Adolescent Cannabis Check-Up	Prevention responses. Treatment responses.	NL	NL, AU	Public research center/institute	Cannabis	359200	Mar 2010-Mar 2013	Epidemiology, psychology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/problematic-cannabis-use-effectiveness-of-the-adolescent-cannabis-check-up/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/problematic-cannabis-use-effectiveness-of-the-adolescent-cannabis-check-up/samenvatting/</a>
Public service professionals and how to deal with substance abuse related aggression and violence	Harm reduction responses. Consequences of drug use.	NL	NR	Public research center/institute	Comprehensive approach	NR	NR	Management	NR	/
Recovery is up to you in addiction care 2	Consequences of drug use.	NL	/	University	Several substances	44831	Jan 2011-Feb 2013	Sociology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/herstellen-doe-je-zelf-in-de-verslavingszorg-2/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/herstellen-doe-je-zelf-in-de-verslavingszorg-2/samenvatting/</a>

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Regulation of the cannabis market in the Netherlands	Law enforcement	NL	/	University	Cannabis	/	Sep 2008-01/06/2011	Criminology	PhD	/
Serotonin transporter gene variation and sensitivity to conditioned cues: cause and cure in cocaine dependence	Mechanism of drug use and effects.	NL	NL	Public research center/institute	Cocaine	675000	Sep 2011-Sep 2015	Neurosciences	ZonMW Top subsidy	<a href="http://www.zonmw.nl/nl/projecten/project-detail/serotonin-transporter-gene-variation-and-sensitivity-to-conditioned-cues-cause-and-cure-in-cocaine/samenvattting/">http://www.zonmw.nl/nl/projecten/project-detail/serotonin-transporter-gene-variation-and-sensitivity-to-conditioned-cues-cause-and-cure-in-cocaine/samenvattting/</a>
Striatal circuits underlying the persistence of cocaine addiction	Mechanism of drug use and effects.	NL	USA	Public research center/institute	Cocaine	99555	Jan 2010-Jul 2011	Neurosciences, pharmacology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/striatal-circuits-underlying-the-persistence-of-cocaine-addiction/samenvattting/">http://www.zonmw.nl/nl/projecten/project-detail/striatal-circuits-underlying-the-persistence-of-cocaine-addiction/samenvattting/</a>

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Substance use among adolescents in Special Education and Residential Youth Care	Prevalence, incidence and patterns of drug use. Determinants of drug use.	NL	/	University	Several substances	553113	Apr 2008- Jul 2013	Epidemiology, sociology	Risk Behavior and Dependence programme	<a href="http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3098996/">http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3098996/</a>
Substance use and misuse in Intellectual Disability (SumID)	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Methodology issues.	NL	NL	Tactus Addiction Medicine	Several substances	NR	Apr 2009- Apr 2013	Epidemiology, psychology, addictology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/substance-use-and-misuse-among-intellectually-disabled-persons-sumid/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/substance-use-and-misuse-among-intellectually-disabled-persons-sumid/samenvatting/</a>
Swinging, substance use and sexual choices	Harm reduction responses. Determinants of drug use. Consequences of drug use.	NL	/	Mainline	Comprehensive approach	NR	Jul 2011- May 2012	Sociology	NR	<a href="http://www.mainline.nl/training-en-expertise/onderzoek/swingen.html">http://www.mainline.nl/training-en-expertise/onderzoek/swingen.html</a>

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The effectiveness of a cue-reminder intervention to reduce adolescents' substance use in social contexts	Prevention responses. Treatment responses. Harm reduction responses. Mechanism of drug use and effects.	NL	NL	University	Several substances	356405	Feb 2012- Mar 2016	Psychology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/the-effectiveness-of-a-cue-reminder-intervention-to-reduce-adolescents-substance-use-in-social-co/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/the-effectiveness-of-a-cue-reminder-intervention-to-reduce-adolescents-substance-use-in-social-co/samenvatting/</a>
The epigenetics of gene-environment mismatches in cocaine addiction	Prevention responses. Treatment responses. Determinants of drug use. Mechanism of drug use and effects.	NL	NL	University	Cocaine	150000	Apr 2012- Mar 2013	Neurosciences	NR	/

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The impulsive brain: genetic moderation of tonic dopamine and vulnerability to cannabis and cocaine abuse	Determinants of drug use. Mechanism of drug use and effects.	NL	NL	University	Several substances	500000	2009-2013	Neurosciences, psychology, pharmacology	NR	<a href="http://www.zonmw.nl/nl/projecten/project-detail/the-impulsive-brain-genetic-moderation-of-tonic-dopamine-and-vulnerability-to-cannabis-and-cocaine/samenvatting/">http://www.zonmw.nl/nl/projecten/project-detail/the-impulsive-brain-genetic-moderation-of-tonic-dopamine-and-vulnerability-to-cannabis-and-cocaine/samenvatting/</a>
The prevalence in Dutch prisons of behaviours that increase the risk of infectious diseases	Harm reduction responses, Consequences of drug use	NL	NR	University	Several substances	NR	NR	Epidemiology	NR	/

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The private club and the residence criterion for Dutch coffee shops	Law enforcement responses. Drug related crime responses. Harm reduction responses. Supply and markets.	NL	NL	Public research center/institute	Cannabis	214000	Jan 2012-Apr 2014	Criminology	NR	<a href="https://english.wodc.nl/onderzoeksdatabase/2021e-overkoepelend-rapport-en-literatuurstudie-coffeeshops-in-nederland.aspx?cp=45&amp;cs=6799">https://english.wodc.nl/onderzoeksdatabase/2021e-overkoepelend-rapport-en-literatuurstudie-coffeeshops-in-nederland.aspx?cp=45&amp;cs=6799</a>
The role of serotonin in cocaine addiction: identification of a new diagnostic marker for cocaine addicts who react to reversal behavioural therapy	Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	NL	/	Public research center/institute	Cocaine	50000	Dec 2010-Mar 2013	Neurosciences	NR	/
Under control? A process evaluation of the Short Lifestyle Training for addicted offenders	Treatment responses.	NL	NR	Public research center/institute	Comprehensive approach	NR	NR	Psychology	NR	/

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Why methylphenidate is not successful in cocaine dependent ADHD patients: a SPECT study comparing dopamine transporters before and after methylphenidate treatment in ADHD patients with and without cocaine dependence	Treatment responses. Consequences of drug use. Mechanism of drug use and effects.	NL	NR	University	Cocaine	262000	Jul 2009- Jul 2012	Neurosciences, pharmacology	NR	<a href="http://www.trialregister.nl/trialreg/admin/rctview.asp?TC=3127">http://www.trialregister.nl/trialreg/admin/rctview.asp?TC=3127</a>
Exploration of young homeless people, drug use and sexual behavior	Harm reduction responses. Determinants of drug use. Consequences of drug use.	NL	NL	Mainline	Comprehensive approach	29000	Jun 2012- Jan 2013	Sociology	NR	<a href="http://www.mainline.nl/training-en-expertise/onderzoek/zwerfjongeren-middelengebruik-en-seksueel-gedrag.html">http://www.mainline.nl/training-en-expertise/onderzoek/zwerfjongeren-middelengebruik-en-seksueel-gedrag.html</a>

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3rd National survey on psychoactive substance use in general population in Portugal, 2012	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Methodology issues.	PT	/	University	Several substances and gambling	405328	Jan 2012- Oct 2013	Sociology	NR	<a href="http://cesnova.fcsh.unl.pt/?area=102&amp;mid=000&amp;id=CNT516fcdfd06591">http://cesnova.fcsh.unl.pt/?area=102&amp;mid=000&amp;id=CNT516fcdfd06591</a>
Attachment in substance addicts	Prevention responses. Treatment responses. Determinants of drug use. Consequences of drug use. Methodology issues.	PT	USA	Public research center/ institute	Several substances	10000	Jan 2010- Dec 2013	Neurosciences, psychology	NR	/

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Characterization of clients of SICADs funded projects for risk reduction and harm minimization associated to illicit drug use	Prevalence, incidence and patterns of drug use. Harm reduction responses. Consequences of drug use. Mechanism of drug use and effects.	PT	/	Institutions hosting Reitox national focal point	Comprehensive approach	NR	Jan 2010- Dec 2012	Epidemiology, psychology, sociology	NR	/
Club Health - Healthy and safer nightlife of youth.	Prevalence, incidence and patterns of drug use. Prevention responses. Law enforcement responses. Drug related crime responses. Supply and markets.	PT	UK, ES, PT, NL	Private research center/ institute	Comprehensive approach	NR	NR	Anthropology, economics, epidemiology, psychology, sociology	NR	<a href="http://club-health.eu">http://club-health.eu</a>

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Does social behavior during adolescence a reflex of adverse early experiences? Effects of both maternal separation and environmental enrichment	Prevention responses.	PT	/	Public research center/institute	Comprehensive approach	86000	J2001 2013-May 2015	Neurosciences, psychology	All Scientific Domains - 2012	/
Drugs, law and behaviour	Prevalence, incidence and patterns of drug use. Law enforcement responses. Mechanism of drug use and effects. Methodology issues.	PT	/	University	Comprehensive approach	NR	Jan 2010- ...	Criminology	NR	/
ESPAD (European School Survey Project on Alcohol and other Drugs) in Portugal	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	PT	NR	Institutions hosting Reitox national focal point	Several substances	NR	Sep 2010- Oct 2013	Epidemiology, psychology, sociology	NR	<a href="http://www.espad.org/">http://www.espad.org/</a>

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Evaluation of the outcomes and the impact of substance use prevention programmes among adolescents	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use.	PT	/	University	Several substances	NR	Nov 2006- Mar 2014	Epidemiology, psychology	NR	/
Health behaviour in School Aged Children (HBSC)- Portugal	Prevalence, incidence and patterns of drug use.	PT	PT	Public research center/ institute	Comprehensive approach	80000	2009-Jun 2013	Epidemiology	NR	<a href="http://www.hbsc.org/">http://www.hbsc.org/</a>
Impact of methamphetamine on the blood-brain barrier: unmasking the underlying mechanisms and the role of neuroinflammation	Consequences of drug use. Mechanism of drug use and effects.	PT	PT	University	Methamphetamine	129388	Apr 2010- Sep 2013	Neurosciences, pharmacology	Calls for R&D projects, FCT	<a href="http://www.fct.pt/apoios/projectos/consulta/vglobal_projecto?idProjecto=98689&amp;idElemConcurso=2743">http://www.fct.pt/apoios/projectos/consulta/vglobal_projecto?idProjecto=98689&amp;idElemConcurso=2743</a>

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Implications of amphetamine psychostimulants abuse in brain aging	Prevention responses. Treatment responses. Harm reduction responses. Consequences of drug use. Mechanism of drug use and effects.	PT	PT	Public research center/institute	Amphetamines	199488	Mar 2010-Nov 2013	Neurosciences, pharmacology, forensic chemistry	NR	/
Is methamphetamine self-administration associated with the activation of the brain receptor for advanced glycation end product (RAGE)?	Consequences of drug use. Mechanism of drug use and effects.	PT	PT, USA	University	Methamphetamine	12500	Oct 2011-Oct 2012	Neurosciences	Stimulus Program for Research - FMUC	/
Kosmicare- Crisis intervention related to the uses of psychoactive substances in recreational settings	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Mechanism of drug use and effects.	PT	IT	University	Several substances	13000	Jan 2010-Jul 2017	Epidemiology, psychology, pharmacology, psychiatry	NR	/

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Microglial and neuronal changes in the hippocampus induced by methamphetamine: role of pro-inflammatory cytokines and neuropeptide Y	Consequences of drug use. Mechanism of drug use and effects.	PT	PT	Private research center/ institute	Methamphetamine	88000	May 2007- Sep 2010	Neurosciences, pharmacology	Proposals for R&D Projects, FCT	/
Music, Alcohol and Drugs - 2010. An analysis of the most popular songs	NR	PT	/	Institution hosting Reitox national focal point	Several substances	NR	May 2011- May 2012	Anthropology	NR	/
National School Survey 2011- Secondary school	Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets.	PT	/	Institutions hosting Reitox national focal point	Several substances	NR	Oct 2010- Oct 2013	Epidemiology, psychology, sociology	NR	/

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National School Survey 2011 - 3rd level of basic school	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	PT	/	Institutions hosting Reitox national focal point	Several substances	NR	Oct 2010- Oct 2013	Epidemiology, psychology, sociology	NR	/
Neuroprotecting mechanisms of carnitine in mitochondrial dysfunction	Treatment responses. Mechanism of drug use and effects.	PT	/	University	Methamphetamine	175890	Apr 2010- Sep 2013	Neurosciences, pharmacology, nuclear medicine	Competition for R & D Projects in all Scientific Domains - 2008	<a href="http://www.fct.pt/apoios/projectos/consulta/vglobal_projecto.html.pt?idProjecto=100630&amp;idElemConcurso=2746">http://www.fct.pt/apoios/projectos/consulta/vglobal_projecto.html.pt?idProjecto=100630&amp;idElemConcurso=2746</a>

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New psychoactive substances. The case of salvia divinorum	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets.	PT	/	Institutions hosting Reitox national focal point	Salvia	NR	Feb 2013-Sep 2013	Anthropology	NR	<a href="http://www.sicad.pt/BK/EstatisticaInvestigacao/EstudosConcluidos/Lists/SICAD_ESTUDOS/Attachments/8/Executive%20Summary.pdf">http://www.sicad.pt/BK/EstatisticaInvestigacao/EstudosConcluidos/Lists/SICAD_ESTUDOS/Attachments/8/Executive%20Summary.pdf</a>
Psychoactive substances use and lifestyles among college students	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use.	PT	NR	Institutions hosting Reitox national focal point	Several substances	NR	Apr 2012-Nov 2013	Epidemiology, psychology	NR	/

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Quality of life in children and young	Prevalence, incidence and patterns of drug use. Determinants of drug use. Mechanism of drug use and effects.	PT	PT	Public research center/ institute	Comprehensive approach	NR	2006-2013	Epidemiology, psychology	NR	www.kidscreen.org www.aventurasocial.com
Recreational setting interventions	Prevalence, incidence and patterns of drug use. Prevention responses. Law enforcement responses. Harm reduction responses. Mechanism of drug use and effects. Methodology issues.	PT	PT, BR, CAP VERT, ANGOLA	Public research center/ institute	Comprehensive approach	1000000	Mar 2010- Dec 2015	Epidemiology, psychology	NR	/

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Representations, perceptions and use of new psychoactive substances among Portuguese college students - 2013	Prevalence, incidence and patterns of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets.	PT	/	Institutions hosting Reitox national focal point	NPS	NR	Dec 2012- Jul 2013	Anthropology, epidemiology	NR	<a href="http://www.idt.pt/PT/Investigacao/Documents/2013/NSP%20final%2003-06%20-Site.pdf">http://www.idt.pt/PT/Investigacao/Documents/2013/NSP%20final%2003-06%20-Site.pdf</a>
Research group in risk, addiction and society	Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use. Methodology issues.	PT	ES, IT	University	Several substances	NR	Dec 2012- ...	Anthropology, epidemiology, psychology	NR	/

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Risk behaviours and differentiation Processes in families	Prevention responses. Treatment responses. Determinants of drug use. Consequences of drug use.	PT	/	Public research center/ institute	Several substances	NR	Oct 2013- Oct 2015	Psychology	NR	/
Social adventure at CED	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses.	PT	PT	University	Comprehensive approach	120000	2008-2012	Epidemiology, psychology	NR	/
Social representations of drugs and drug abuse among young people at the Rock in Rio Music Festival - 2012	Prevalence, incidence and patterns of drug use.	PT	/	Institutions hosting Reitox national focal point	Several substances	NR	Apr 2012- Dec 2012	Anthropology	NR	/

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Socio-chemistry of opioids in modern societies: the use of methadone in the drug addicts care	Treatment responses. Harm reduction responses. Mechanism of drug use and effects.	PT	/	University	Methadone	NR	2006-2014	Anthropology, neurosciences, sociology, pharmacology	NR	/
Study of addictive behaviours in night setting in Coimbra	Prevalence, incidence and patterns of drug use. Mechanism of drug use and effects.	PT	PT	University	Comprehensive approach	NR	Mar 2013- Mar 2014	Psychology, pharmacology	NR	/
Study on alcohol, tobacco and drugs use, by age group - Portugal 2011	Prevalence, incidence and patterns of drug use.	PT	/	Institutions hosting Reitox national focal point	Several substances	NR	Oct 2010- Oct 2013	Epidemiology	NR	/

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<p>"Surveys on user types, availability and consumption estimates" in dos estudos do "Study on the further analysis of the EU illicit drugs market and responses to it – responding to future challenges"</p>	<p>Prevalence, incidence and patterns of drug use. Law enforcement responses. Drug related crime responses. Consequences of drug use. Supply and markets.</p>	PT	NR	<p>Institutions hosting Reitox national focal point</p>	<p>Several substances</p>	NR	<p>Aug 2011- Aug 2012</p>	<p>Criminology, economics, epidemiology, political sciences, sociology</p>	NR	/
<p>Use of psychoactive substances among Portuguese adolescents: an approach to social epidemiology</p>	<p>Prevalence, incidence and patterns of drug use. Prevention responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets. Methodology issues.</p>	PT	/	<p>Institutions hosting Reitox national focal point</p>	<p>Several substances</p>	NR	<p>Dec 2013- Oct 2010</p>	<p>Epidemiology, psychology, sociology</p>	NR	/

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A qualitative sociology of how long-term drug injectors avoid hepatitis C	Prevalence, incidence and patterns of drug use, Mechanism of drug use and effects.	UK	/	University	Several substances	368,000 GBP	Sept 2009–Apr 2012	Sociology	NR	/
A rapid appraisal of public injecting drug use and drug related litter in Southend-on-Sea	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Harm reduction responses. Supply and markets. Consequences of drug use. Methodology issues.	UK	/	University	Several substances	29041	Oct 2010–Mar 2011	Criminology, epidemiology, sociology	NR	/

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A sociological investigation into the everyday lives of recovering heroin users	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Heroin and OST	322137 (£267,292)	Oct 2008- Dec 2010	Sociology	Economic and Social Research Council (ESRC)	<a href="http://www.esrc.ac.uk/my-esrc/grants/RES-062-23-1016/read">http://www.esrc.ac.uk/my-esrc/grants/RES-062-23-1016/read</a>
Addiction	Determinants of drug use.	UK	/	Public research center/ institute	Opiates and alcohol	2092131	Apr 2006- Mar 2011	Neurosciences	Medical Research Council (MRC)	/
Addressing stigma and discrimination towards recovering drug users	Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Consequences of drug use.	UK	NR	Private research center/ institute	Comprehensive approach	107666	Jan 2010- Mar 2014	Sociology	NR	<a href="http://www.ukdpc.org.uk/publication/getting-serious-about-stigma-problem-stigmatising-drug-users/">http://www.ukdpc.org.uk/publication/getting-serious-about-stigma-problem-stigmatising-drug-users/</a>

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ALSPAC and adolescent substance use trajectories: consolidation of a UK research resource	Determinants of drug use.	UK	/	University	Several substances	198033 (£164,076)	Apr 2009-Mar 2011	Epidemiology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/B7BC6118-5CE8-4004-BB2A-4C1F84C24A99">http://gtr.rcuk.ac.uk/project/B7BC6118-5CE8-4004-BB2A-4C1F84C24A99</a>
At the Sharp End: a pilot investigation into the health of older injecting drug users in Wirral	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Consequences of drug use.	UK	/	University	Several substances	NR	Mar 2010-May 2011	Epidemiology, sociology,	NR	<a href="http://www.cph.org.uk/wp-content/uploads/2012/08/at-the-sharp-end-a-pilot-investigation-into-the-health-of-older-injecting-drug-users-in-wirral.pdf">http://www.cph.org.uk/wp-content/uploads/2012/08/at-the-sharp-end-a-pilot-investigation-into-the-health-of-older-injecting-drug-users-in-wirral.pdf</a>
Atomoxetine as a pharmacological treatment for chronic cocaine and heroin abusers	Treatment responses.	UK	/	University	Several substances	392352	Apr 2013-Mar 2015	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/6A4950BD-6C5A-4B87-9059-F529F5866671">http://gtr.rcuk.ac.uk/project/6A4950BD-6C5A-4B87-9059-F529F5866671</a>

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Cannabidiol as a novel therapeutic agent for patients at ultra high-risk of psychosis: an experimental medicine approach	Treatment responses.	UK	UK	University	Cannabinoids	455302	Jan 2013- Jan 2015	Neurosciences, psychiatry	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/0C8EE617-3E76-48A8-A5BE-C726F0E0428A">http://gtr.rcuk.ac.uk/ project/0C8EE617- 3E76-48A8-A5BE- C726F0E0428A</a>
Cannabidiol: a novel treatment for cannabis dependence?	Treatment responses.	UK	/	University	Cannabinoids and cannabis	1345006	Jan 2013- Apr 2017	Psychiatry	Medical Research Council (MRC)	/
Cannabinoids in psychosis: mechanisms and therapeutics	Treatment responses.	UK	UK	University	Cannabinoids	29866	Oct 2008- Sep 2011	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/3DCE7543-2C7E-4461-A0EC-7FE6EB1FBD14">http://gtr.rcuk.ac.uk/ project/3DCE7543- 2C7E-4461-A0EC- 7FE6EB1FBD14</a>
Causal pathways to substance use and dependence in young people	Determinants of drug use. Consequences of drug use.	UK	USA	University	Several substances	627376	May 2009- Mar 2013	Epidemiology, sociology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/7E51FE4B-2D19-44C0-A97D-DA56DD63A994">http://gtr.rcuk.ac.uk/ project/7E51FE4B- 2D19-44C0-A97D- DA56DD63A994</a>

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CLAHRC: Post-Treatment Support: An exploratory, descriptive study of aftercare provision offered by addiction services in North and West Yorkshire	Treatment responses	UK	/	University	Several substances	/	Sept 2012- Dec 2013		National Institute for Health Research (NIHR)	<a href="http://www.york.ac.uk/healthsciences/research/mental-health/projects/clahrc-support/">http://www.york.ac.uk/healthsciences/research/mental-health/projects/clahrc-support/</a>
COMBAT Cocaine dependence treatment with modafinil & voucher-based reinforcement therapy for patients in methadone maintenance (trial pilot study)	Treatment responses.	UK	/	University	Several substances	NR	NR	Psychology, pharmacology	National Institute for Health Research (NIHR)	<a href="http://public.ukcrn.org.uk/search/StudyDetail.aspx?StudyID=6018">http://public.ukcrn.org.uk/search/StudyDetail.aspx?StudyID=6018</a>

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Contingency Management Programme	Treatment responses.	UK	UK	Private research center/institute	Several substances	NR	NR	Psychology	NR	/
Cost benefit analysis of drug treatment services for young people	Prevalence, incidence and patterns of drug use. Treatment responses. Drug related crime responses. Harm reduction responses. Consequences of drug use.	UK	/	Public research center/institute	Several substances	NR	Apr 2008-Feb 2011	Economics, epidemiology, sociology	NR	<a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/197952/DFE-RB087.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/197952/DFE-RB087.pdf</a>
Data linking with PHE	Prevalence, incidence and patterns of drug use.	UK	/	Public research center/institute	Several substances	NR	NR	Epidemiology	NR	/

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Dedicated drugs court feasibility study	Prevalence, incidence and patterns of drug use.	UK	UK	Public research center/institute	Comprehensive approach	NR	Mar 2009-Jan 2010	Epidemiology	NR	<a href="http://www.icpr.org.uk/media/5566/Feasibility%20of%20dedicated%20drug%20court%20pilot.pdf">http://www.icpr.org.uk/media/5566/Feasibility%20of%20dedicated%20drug%20court%20pilot.pdf</a>
Dedicated drugs court process evaluation	Prevalence, incidence and patterns of drug use.	UK	UK	Public research center/institute	Comprehensive approach	NR	Mar 2009-Mar 2010	Epidemiology	NR	<a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/217380/ddc-process-evaluation-study.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/217380/ddc-process-evaluation-study.pdf</a>
Developing a UK Evidence Base for Contingency Management in Addiction Treatment: Adjunctive Incentive-based interventions to improve treatments to reduce drug use and associated harms	Treatment responses	UK	UK	Private Research Centre	Comprehensive approach	£2,093,411	Jan 2009-Dec 2015	Other medical sciences	National Institute for Health Research (NIHR)	/

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Developmental pathways into adolescent substance abuse: neurophysiologic, genetic and environmental determinants	Determinants of drug use	UK	/	University	Several substances	1491367	Sep 2010- Sep 2015	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/0A0DADC2-8D8D-43F9-9A6F-A0FF9B250F7F">http://gtr.rcuk.ac.uk/project/0A0DADC2-8D8D-43F9-9A6F-A0FF9B250F7F</a>
Drug combined monitoring service 2012/2013	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Harm reduction responses.	UK	/	University	Several substances	253339	Apr 2012- Mar 2013	Epidemiology, sociology	NR	/
Drug use in Ireland and Northern Ireland	Determinants of drug use. Consequences of drug use.	UK	UK	Public research center/ institute	Several substances	302439	3	Demography	NR	<a href="http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health/stats-drug-alcohol.htm">http://www.dhsspsni.gov.uk/index/stats_research/stats-public-health/stats-drug-alcohol.htm</a>

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Drug-related deaths analysis	Treatment responses. Consequences of drug use.	UK	/	Public research center/institute	Comprehensive approach	NR	Mar 2013-Dec 2013	Epidemiology	NR	/
Drug Recovery Wing (DRW) Pilots Evaluation	Treatment responses.	UK	/	University	Several substances	NR	Oct 2012-Août 2015	Other medical sciences	/	<a href="http://www.york.ac.uk/healthsciences/research/mental-health/projects/drugrecoverywingpilotsevaluation/#tab-2">http://www.york.ac.uk/healthsciences/research/mental-health/projects/drugrecoverywingpilotsevaluation/#tab-2</a>
Estimates of the prevalence of opiate and/or crack cocaine use	Prevalence, incidence and patterns of drug use. Treatment responses.	UK	UK	Public research center/institute	Several substances	78637	Jun 2013-Oct 2013	Epidemiology	NR	<a href="http://www.nta.nhs.uk/facts-prevalence.aspx">http://www.nta.nhs.uk/facts-prevalence.aspx</a>
Estimating the numbers of children of problematic drug users and their residential circumstances to inform United Kingdom	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Several substances	NR	Apr 2010-Oct 2010	Demography, epidemiology	NR	<a href="http://informahealthcare.com/doi/pdf/10.3109/09687630902960314">http://informahealthcare.com/doi/pdf/10.3109/09687630902960314</a>

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Evaluation of jobcentre plus intensive activity trial	Prevalence, incidence and patterns of drug use.	UK	/	Public research center/institute	Comprehensive approach	NR	Mar 2010-Apr 2011	Epidemiology	NR	<a href="https://www.gov.uk/government/publications/evaluation-of-the-jobcentre-plus-intensive-activity-trial-in-house-research-no-2">https://www.gov.uk/government/publications/evaluation-of-the-jobcentre-plus-intensive-activity-trial-in-house-research-no-2</a>
Evaluation of The Quays project, Wirral, Merseyside	Prevalence, incidence and patterns of drug use. Treatment responses.	UK	/	University	Several substances	1161648	Mar 2009-Dec 2013	Demography, epidemiology	NR	<a href="http://www.cph.org.uk/wp-content/uploads/2013/11/The-Quays-Evaluation_Final.pdf">http://www.cph.org.uk/wp-content/uploads/2013/11/The-Quays-Evaluation_Final.pdf</a>
Exploring the potential of D-cycloserine and cannabidiol to enhance cue exposure therapies in substance dependence	Treatment responses.	UK	/	University	Cannabinoids	261991	Jul 2009-Sep 2011	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/469CE298-CE4C-482B-8664-DC8268A1E311">http://gtr.rcuk.ac.uk/project/469CE298-CE4C-482B-8664-DC8268A1E311</a>

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Families of drug users: policies & practice across the UK	Treatment responses. Consequences of drug use.	UK	UK	Public research center/institute	Comprehensive approach	56872	Feb 2010-Mar 2012	Epidemiology	NR	<a href="http://www.ukdpc.org.uk/publication/the-forgotten-carers/">http://www.ukdpc.org.uk/publication/the-forgotten-carers/</a>
GABA-A receptors in accumbens neural circuits underlying drug abuse: novel targets for treatment.	Treatment responses. Determinants of drug use.	UK	DE	University	Comprehensive approach	1205228	Oct 2010-Jan 2014	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/B0D02070-D808-470D-8902-5AB7637FF171">http://gtr.rcuk.ac.uk/project/B0D02070-D808-470D-8902-5AB7637FF171</a>
GABAA receptors in acumbens neural circuits underlying drug abuse: novel targets for treatment	Treatment responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects.	UK	UK	University	Comprehensive approach	1209810	Oct 2010-Sep 2013	Neurosciences, psychology, pharmacology	NR	/
Genetic influences underlying impulsivity and risk for drug addiction	Determinants of drug use.	UK	DE	University	Cocaine	265965	Dec 2009-Dec 2011	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/BF035715-8E35-4B93-BE4C-2CC0649D9003">http://gtr.rcuk.ac.uk/project/BF035715-8E35-4B93-BE4C-2CC0649D9003</a>

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Harbour Steps	Treatment responses.	UK	/	University	Cocaine	NR	NR	Epidemiology	NR	/
HELPER Programme (Substance Misuse)- A phase-specific psychological therapy for people with problematic cannabis use following a first episode of psychosis (ReCAP)	Prevalence, incidence and patterns of drug use. Treatment responses. Mechanism of drug use and effects.	UK	/	Private research center/institute	Cannabis	1702045	Jan 2009- Apr 2011	Epidemiology, sociology	NR	<a href="http://www.controlled-trials.com/ISRCTN88275061">http://www.controlled-trials.com/ISRCTN88275061</a>
How does ethanol alter opioid tolerance?	Consequences of drug use.	UK	/	University	Several substances	557730	Jun 2012- May 2015	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/57620782-47B2-4653-AD41-2528B6D79BB4">http://gtr.rcuk.ac.uk/project/57620782-47B2-4653-AD41-2528B6D79BB4</a>
Human drug dependence: Cognitive predisposition and neural mechanisms	Determinants of drug use/	UK	UK, AU	University	Comprehensive approach	426652	Oct 2008- Oct 2011	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/5308B197-CCD4-410B-AFAD-1BABCBD6FD6">http://gtr.rcuk.ac.uk/project/5308B197-CCD4-410B-AFAD-1BABCBD6FD6</a>

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Incidence, prevalence, harms and intervention effects for problem and injecting drug use: crime, morbidity & mortality	Prevalence, incidence and patterns of drug use. Treatment responses. Drug related crime responses. Harm reduction responses. Determinants of drug use.	UK	/	University	Several substances	844040	NR-Sep 2013	Demography, epidemiology, sociology	NR	<a href="http://gtr.rcuk.ac.uk/project/C2D79DC4-3DA2-4B08-B230-367D7AA325B4">http://gtr.rcuk.ac.uk/project/C2D79DC4-3DA2-4B08-B230-367D7AA325B4</a>
Incidence, prevalence, harms and intervention effects for problem and injecting drug use: crime, morbidity & mortality	Drug related crime responses. Consequences of drug use. Methodology issues.	UK	UK, USA	University	Several substances	842380	Feb 2011- Dec 2014	Epidemiology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/C2D79DC4-3DA2-4B08-B230-367D7AA325B4">http://gtr.rcuk.ac.uk/project/C2D79DC4-3DA2-4B08-B230-367D7AA325B4</a>
Insights on the natural history of problem drug user (PDU) offending	Drug related crime responses. Consequences of drug use. Methodology issues.	UK	/	University	Several substances	219597 £181 687	Jan 2013- Feb 2014	Criminology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/98DA2A52-FACC-4DDA-9BCE-0D91B87ABFCD">http://gtr.rcuk.ac.uk/project/98DA2A52-FACC-4DDA-9BCE-0D91B87ABFCD</a>

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Interventions for alcohol and drug misuse in acute settings: a systematic review	Prevalence, incidence and patterns of drug use. Treatment responses. Consequences of drug use.	UK	UK	Public research center/institute	Several substances	NR	...-2013	Epidemiology, sociology	NR	<a href="http://www.york.ac.uk/inst/crd/projects/interventions_alcohol_drug_misuse.htm">http://www.york.ac.uk/inst/crd/projects/interventions_alcohol_drug_misuse.htm</a>
Interactions between problem substance users and hospital staff	Treatment responses, Consequences of drug use	UK	/	University	Several substances	/	Nov 2010-Oct 2011	Ethnography, Sociology	National Institute For Health Research (NIHR)	/
Making drug policy better: governance and implementation issues in drug policy-making	NR	UK	NR	Public research center/institute	Comprehensive approach	NR	Sep 2010-Dec 2013	Political sciences, sociology	NR	<a href="http://www.ukdpc.org.uk/publication/how-to-make-drug-policy-better/">http://www.ukdpc.org.uk/publication/how-to-make-drug-policy-better/</a>

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Mapping and exploration of drug markets in Southend-on-Sea	Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Consequences of drug use. Supply and markets.	UK	/	University	Several substances	21781	May 2011- Feb 2012	Criminology, sociology	NR	/
Mapping and exploration of drug markets in the city of Plymouth	Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Consequences of drug use. Supply and markets. Methodology issues.	UK	/	University	Several substances	18151	Sep 2012- Sep 2013	Criminology, epidemiology, sociology	NR	<a href="http://www.ukdpc.org.uk/publication/charting-new-waters/">http://www.ukdpc.org.uk/publication/charting-new-waters/</a>

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Meeting the health needs of problematic drug users through community pharmacy: a qualitative study	Prevalence, incidence and patterns of drug use. Treatment responses. Mechanism of drug use and effects.	UK	/	University	Several substances	14518	Mar 2010- Dec 2010	Demography	NR	<a href="http://informahealthcare.com/doi/pdf/10.3109/14659890903513459">http://informahealthcare.com/doi/pdf/10.3109/14659890903513459</a>
Modelling sexual healthcare for substance misusing women	Prevalence, incidence and patterns of drug use. Prevention responses. Harm reduction responses. Consequences of drug use.	UK	/	Private research center/ institute	Comprehensive approach	NR	Sep 2009- Sep 2010	Epidemiology, sociology	NR	<a href="http://about.brighton.ac.uk/snm/research/areas/health-promotion/projects/womens-health.php">http://about.brighton.ac.uk/snm/research/areas/health-promotion/projects/womens-health.php</a>
Modelling the determinants and implications of the disparate trends in HCV and HIV amongst injecting drug users	Treatment responses. Consequences of drug use.	UK	UK, USA, AU	University	Several substances	400326	Oct 2008- Sep 2011	Epidemiology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/2018BB67-93AA-42C1-8E6F-502B6AEE8B6F">http://gtr.rcuk.ac.uk/project/2018BB67-93AA-42C1-8E6F-502B6AEE8B6F</a>

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Molecular and physiological mechanism of GABA(A) receptor function in striatal circuits underlying addiction	Determinants of drug use.	UK	UK	University	Cocaine	297873	Jun 2009- May 2010	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/664F93DB-1F37-4126-B38C-1AE03AB6C66D">http://gtr.rcuk.ac.uk/project/664F93DB-1F37-4126-B38C-1AE03AB6C66D</a>
N-ALIVE (NALoxone InVestigation)	Treatment responses.	UK	/	University	Opiates	NR	NR	Epidemiology	NR	<a href="http://www.kcl.ac.uk/iop/depts/addictions/research/drugs/N-ALIVE.aspx">http://www.kcl.ac.uk/iop/depts/addictions/research/drugs/N-ALIVE.aspx</a>
Naltrexone implants in opioid dependence: a proof of mechanism study with pk and pd measures	Treatment responses.	UK	/	University	Opiates	324656	Aug 2008- Jul 2012	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/2E6C438F-4EF0-46A5-80B2-49664201015D">http://gtr.rcuk.ac.uk/project/2E6C438F-4EF0-46A5-80B2-49664201015D</a>
National and local prevalence estimates for England	Prevalence, incidence and patterns of drug use.	UK	/	University	Several substances	NR	Jul 2012- Sep 2013	Epidemiology	NR	<a href="http://www.nta.nhs.uk/facts-prevalence.aspx">http://www.nta.nhs.uk/facts-prevalence.aspx</a>

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National Drug Treatment Monitoring System (NDTMS) 2012/2013	Prevention responses. Treatment responses. Drug related crime responses. Harm reduction responses.	UK	UK	University	Comprehensive approach	363705	Apr 2011- Mar 2013	Demography, epidemiology, sociology	NR	<a href="https://www.ndtms.net/default.aspx">https://www.ndtms.net/default.aspx</a>
Neural and psychological basis of compulsive drug seeking and relapse prevention in drug addiction	Determinants of drug use.	UK	/	University	Several substances	2226317	Oct 2006- Sep 2011	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/0170C062-0C49-41B1-B8B2-E41A25650FC6">http://gtr.rcuk.ac.uk/project/0170C062-0C49-41B1-B8B2-E41A25650FC6</a>
Neural mechanisms and treatment of compulsive drug seeking habits and relapse in cocaine and alcohol addiction	Determinants of drug use.	UK	/	University	Several substances	2845251	Oct 2011- Sep 2016	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/1EEC48BC-0DB6-469A-933C-366CE3EA0A8B">http://gtr.rcuk.ac.uk/project/1EEC48BC-0DB6-469A-933C-366CE3EA0A8B</a>

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Neurobiological correlates of trait impulsivity and drug abuse vulnerability	Determinants of drug use.	UK	/	University	Several substances	1165254	Sep 2008-Mar 2012	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/7D843BE3-8F4A-48FC-813B-3DA258CC79E9">http://gtr.rcuk.ac.uk/project/7D843BE3-8F4A-48FC-813B-3DA258CC79E9</a>
Neurobiology of cognition and craving in opiate addiction: implications for relapse	Determinants of drug use.	UK	/	University	Opiates	301143	Sep 2009-Feb 2012	Neurosciences	Medical Research Council (MRC)	/
Neurocognitive endophenotypes of stimulant drug dependence	Determinants of drug use.	UK	UK	University	Cocaine	778637	Oct 2008-Sep 2012	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/A65B11D4-75B2-46B7-9F98-EFBBB5DBC95E">http://gtr.rcuk.ac.uk/project/A65B11D4-75B2-46B7-9F98-EFBBB5DBC95E</a>
Neurotransmitters in opiate and alcohol addiction (1)	Determinants of drug use.	UK	/	University	Several substances	1764641	Mar 2005-Feb 2011	Neurosciences	Medical Research Council (MRC)	/
Neurotransmitters in opiate and alcohol addiction (2)	Determinants of drug use.	UK	/	University	Several substances	1928330	Mar 2011-Feb 2016	Neurosciences	Medical Research Council (MRC)	/

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New drugs for addiction: focus on attenuating core behavioural components of heroin, cocaine and alcohol addiction	Determinants of drug use.	UK	FR	University	Several substances	1890906	Jan 2011- Apr 2015	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/B38DF1F5-1462-4B52-B248-C9CB26A9705D">http://gtr.rcuk.ac.uk/project/B38DF1F5-1462-4B52-B248-C9CB26A9705D</a>
New drugs for addiction: focus on attenuating core behavioural components of heroin, cocaine and alcohol addiction and relapse prevention	Treatment responses. Harm reduction responses. Determinants of drug use.	UK	UK	University	Several substances	1869777	Apr 2010- Jun 2013	Epidemiology, neurosciences, psychology, pharmacology	NR	<a href="http://gtr.rcuk.ac.uk/project/B38DF1F5-1462-4B52-B248-C9CB26A9705D">http://gtr.rcuk.ac.uk/project/B38DF1F5-1462-4B52-B248-C9CB26A9705D</a>
Opiate substitute therapy	Treatment responses.	UK	/	University	OST	NR	Apr 2011- Mar 2013	Epidemiology, sociology	NR	/

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Part one: To update the reviews of the evidence for the optimal provision of needle and syringe programmes.	Prevalence, incidence and patterns of drug use. Harm reduction responses. Consequences of drug use.	UK	/	University	Several substances	26878	Sep 2013- Aug 2013	Epidemiology, sociology	NR	/
Patterns of substance use & support needs of residents in young people's hostels & foyer accommodation in Liverpool: final report June 2010	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Several substances	NR	Nov 2009- Apr 2010	Demography, epidemiology, sociology	NR	<a href="http://www.cph.org.uk/wp-content/uploads/2012/08/patterns-of-substance-use--support-needs-of-residents-in-young-peoples-hostels--foyer-accommodation-in-liverpool-final-report-june-2010.pdf">http://www.cph.org.uk/wp-content/uploads/2012/08/patterns-of-substance-use--support-needs-of-residents-in-young-peoples-hostels--foyer-accommodation-in-liverpool-final-report-june-2010.pdf</a>

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Perceptions of food choices of people aged 50 and over in contact with a specialist drug service: a pilot qualitative interview study	Prevalence, incidence and patterns of drug use. Harm reduction responses. Consequences of drug use.	UK	/	University	Comprehensive approach	NR	Jun 2011- Jun 2012	Epidemiology	NR	<a href="http://informahealthcare.com/doi/pdf/10.3109/14659891.2012.707282">http://informahealthcare.com/doi/pdf/10.3109/14659891.2012.707282</a>
Post-discharge audit	Treatment responses. Harm reduction responses.	UK	UK	Public research center/ institute	Comprehensive approach	11794	Apr 2013- Oct 2013	Epidemiology	NR	/
Powder cocaine & problematic drug users: A comparative study of the characteristics of DIP clients in Merseyside (April 09 – March 10)	Prevalence, incidence and patterns of drug use. Drug related crime responses. Harm reduction responses. Consequences of drug use.	UK	/	University	Cocaine	NR	Apr 2009- Oct 2010	Demography, epidemiology, sociology	NR	<a href="http://www.cph.org.uk/wp-content/uploads/2012/08/powder-cocaine--problematic-drug-users-a-comparative-study-of-the-characteristics-of-dip-clients-in-merseyside-april-08--march-09.pdf">http://www.cph.org.uk/wp-content/uploads/2012/08/powder-cocaine--problematic-drug-users-a-comparative-study-of-the-characteristics-of-dip-clients-in-merseyside-april-08--march-09.pdf</a>

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Prevalence of, and risk factors for, human immunodeficiency virus, hepatitis B and hepatitis C infections among men who inject image- and performance-enhancing drugs in England & Wales	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	NR	University	Several substances	NR	Mar 2011- Apr 2013	Demography	NR	<a href="http://bmjopen.bmj.com/content/3/9/e003207.full">http://bmjopen.bmj.com/content/3/9/e003207.full</a>
Preventing substance misuse: randomised controlled trial of the strengthening families 10-14 UK Programme	Prevalence, incidence and patterns of drug use. Prevention responses.	UK	NR	University	Several substances	2540861 (£2,144,954)	Sept 2009- Jun 2014	Epidemiology, sociology	Medical Research Council (MRC) National Prevention Research Initiative	<a href="http://decipher.uk.net/research-page/strengthening-families-rct/">http://decipher.uk.net/research-page/strengthening-families-rct/</a>

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Prison-based Naloxone-on-release RCT to reduce drugs-related deaths	Harm reduction responses.	UK	/	University	Opiates	NR	Oct 2008-Sep 2012	Epidemiology	Medical Research Council (MRC)	/
Script in a day for injecting drug users: feasibility trial.	Treatment responses.	UK	/	University	Opiates	149,246 (£108,700)	Mar 2011-Sep 2012	Other medical sciences	National Institute for Health Research (NIHR)	<a href="http://decipher.uk.net/research-page/script-in-a-day/">http://decipher.uk.net/research-page/script-in-a-day/</a>
Search results for: Older and sicker: changing mortality of drug users in treatment in the North West of England.	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Several substances	NR	Sep 2009-Sep 2010	Demography, epidemiology	NR	<a href="http://www.researchgate.net/publication/41509456_Older_and_sicker_Changing_mortality_of_drug_users_in_treatment_in_the_North_West_of_England">http://www.researchgate.net/publication/41509456_Older_and_sicker_Changing_mortality_of_drug_users_in_treatment_in_the_North_West_of_England</a>

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Service provision for people with mental health and substance misuse problems - the relationship between stigma and social exclusion	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Comprehensive approach	132926	Apr 2011- Mar 2012	Epidemiology, sociology	NR	<a href="http://www.cfmhas.org.uk/research/">http://www.cfmhas.org.uk/research/</a>
Steroid and image enhancing drugs programme	Prevalence, incidence and patterns of drug use. Harm reduction responses.	UK	/	University	Steroids and medicines	30235	Apr 2013- ...	Epidemiology	NR	<a href="http://www.siedsinfo.co.uk/">http://www.siedsinfo.co.uk/</a>
Substance use among 15-16 year olds in the UK - ESPAD in the UK	Prevalence, incidence and patterns of drug use.	UK	/	University	Several substances	42346	Nov 2010- Nov 2011	Epidemiology	NR	<a href="http://www.cph.org.uk/wp-content/uploads/2012/08/substance-use-among-15-16-year-olds-in-the-uk.pdf">http://www.cph.org.uk/wp-content/uploads/2012/08/substance-use-among-15-16-year-olds-in-the-uk.pdf</a>
Surveillance and auditing of avoidable deaths in Cumbria	Prevalence, incidence and patterns of drug use.	UK	/	University	Several substances	239866	Apr 2012- Mar 2015	Epidemiology	NR	/

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Survey of smoking, drinking & drug use among young people in England	Prevalence, incidence and patterns of drug use.	UK	UK	Public research center/institute	Several substances	NR	Sep 2012- Jul 2013	Epidemiology, psychology	NR	<a href="http://www.hscic.gov.uk/catalogue/PUB11334">http://www.hscic.gov.uk/catalogue/PUB11334</a>
Taking drugs seriously: controlling new drugs	Law enforcement responses. Harm reduction responses. Determinants of drug use. Methodology issues.	UK	NR	Public research center/institute	NPS	84703	May 2010- May 2011	History, sociology	NR	<a href="http://www.ukdpc.org.uk/publication/demos-ukdpc-legal-highs/">http://www.ukdpc.org.uk/publication/demos-ukdpc-legal-highs/</a>
The ConMan Programme - Service user module	Prevalence, incidence and patterns of drug use. Treatment responses.	UK	/	University	OST	NR	....-Feb 2014	Demography, epidemiology, sociology	NR	<a href="http://england.ukcrn.org.uk/StudyDetail.aspx?StudyID=6116">http://england.ukcrn.org.uk/StudyDetail.aspx?StudyID=6116</a>
The Glasgow Effect	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Several substances	53551	Mar 2013- Mar 2014	Epidemiology	NR	/

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The impact of exercise referral for people aged 40 and over in drug addiction services	Prevalence, incidence and patterns of drug use. Treatment responses.	UK	/	University	Several substances	21036	Apr 2010- Mar 2013	Epidemiology, sociology	NR	/
Transdermal delivery of a buprenorphine/naltrexone combination for the treatment of polydrug abuse	Treatment responses.	UK	USA, UK	University	Several substances	244214	NR	Neurosciences, forensic chemistry	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/CB61FC9F-B200-4D37-AC23-2FE82C300E92">http://gtr.rcuk.ac.uk/project/CB61FC9F-B200-4D37-AC23-2FE82C300E92</a>
Understanding and responding to those bereaved through their family members substance misuse	Consequences of drug use.	UK	/	University	Several substances	456004	Sep 2012- Sep 2015	Sociology	Economic and Social Research Council (ESRC)	<a href="http://gtr.rcuk.ac.uk/project/50E9D52A-187A-4B14-B0AB-D0BA36D6070C">http://gtr.rcuk.ac.uk/project/50E9D52A-187A-4B14-B0AB-D0BA36D6070C</a>

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Understanding the dopamine signals triggered directly by striatal acetylcholine: The circuits, their timing and the actions of addictive drugs	Determinants of drug use.	UK	USA	University	Comprehensive approach	599423	Aug 2013-Aug 2016	Neurosciences	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/CD4B3365-FB6D-4A07-B9E3-00ED8C46640A">http://gtr.rcuk.ac.uk/project/CD4B3365-FB6D-4A07-B9E3-00ED8C46640A</a>
Visual versus written cues: a comparison of drug injectors' responses. Have surveys using the written word underestimated risk behaviours for hepatitis C?	Prevalence, incidence and patterns of drug use. Harm reduction responses. Consequences of drug use.	UK	/	University	Several substances	NR	Apr 2007-Mar 2010	Demography, epidemiology	NR	<a href="http://informahealthcare.com/doi/pdf/10.3109/10826081003754021">http://informahealthcare.com/doi/pdf/10.3109/10826081003754021</a>
What determines an individual's vulnerability to the harmful effects of cannabis?	Determinants of drug use.	UK	UK	University	Cannabis	699548	Oct 2008-Mar 2012	Neurosciences, psychology	Medical Research Council (MRC)	<a href="http://gtr.rcuk.ac.uk/project/A6F45EF7-72CF-4CE3-A547-8A3938B13DB3">http://gtr.rcuk.ac.uk/project/A6F45EF7-72CF-4CE3-A547-8A3938B13DB3</a>

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Y-SBNT: Family and Social Network Intervention for Young People who Misuse Alcohol and Drugs	Treatment responses	UK	/	University	Several substances	/	Jun 2013- Nov 2015	Other medical sciences, Economy	National Institute for Health Research (NIHR)	/
BOYS AND GIRLS PLUS Raising awareness among teenagers on risks associated with drug use through an innovative prevention methodology based on the web series "Boys and Girls"	Prevention responses.	BE	AT, IT, NL, PL, UK, DE, CZ	University	Several substances	(496689)	2008-2013	Prevention science	(DPIP) Action grants	<a href="http://www.boysandgirlsclubs.eu/">http://www.boysandgirlsclubs.eu/</a>

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E-SBIRTES (Electronic Screening, Brief Intervention and Referral to Treatment for (poly) drug users in Emergency Services)	Prevention responses. Treatment responses.	BE	ES, HU, NL, UK	Public research center/institute	Several substances	467179 (373743)	24 months	Psychology	(DPIP) Action grants	<a href="http://www.esbirtes.eu/">http://www.esbirtes.eu/</a>
Click for Support - Guidelines for effective web based interventions in the field of selective drug prevention	Prevention responses.	DE	AT, BE, CY, FI, GR, IT, LV, LU, NL, PT, SI, SK	Private research center/institute	Comprehensive approach	(370479)	2013-2015	Prevention science	(DPIP) Action grants	<a href="http://www.clickforsupport.eu/">http://www.clickforsupport.eu/</a>
CARE – Quality and continuity of care for drug users in prisons	Prevalence, incidence and pattern of use. Prevention treatment. Harm reduction responses.	DE	EE, LT, HU, PL, RO	University	Comprehensive approach	382765 (306212)	Jan 2013- Dec 2014	Epidemiology, sociology, criminology	(DPIP) Action grants	<a href="http://www.harm-reduction.org/projects/care-quality-continuity-care-drug-users-prisons">http://www.harm-reduction.org/projects/care-quality-continuity-care-drug-users-prisons</a>

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SNIFE - Social Norms Intervention for the prevention of Polydrug use	Prevention responses.	DE	BE, DK, ES, SK, UK	University	Several substances	470990 (376792)	Nov 2010- Feb 2013	Sociology, psychology	(DPIP) Action grants	<a href="http://medhealth.leeds.ac.uk/info/615/research/321/snipe">http://medhealth.leeds.ac.uk/info/615/research/321/snipe</a>
Spice' and synthetic cannabinoids: Fast responses by means of forensic, toxicological and socio-scientific analyses with direct impact on prevention measures	Supply and markets. Prevalence, incidence and patterns of drug use	DE	AT, FI	Public research center/ institute	Spice and synthetic cannabinoids	500625 (400500)	Jan 2011 - Dec 2012	Epidemiology, sociology, forensic chemistry	(DPIP) Action grants	<a href="http://sofis.gesis.org/sofiswiki/Spice_and_synthetic_cannabinoids_-_fast_responses_by_means_of_forensic_toxicological_and_socio-scientific_analyses_with_direct_impact_on_prevention_measures">http://sofis.gesis.org/sofiswiki/Spice_and_synthetic_cannabinoids_-_fast_responses_by_means_of_forensic_toxicological_and_socio-scientific_analyses_with_direct_impact_on_prevention_measures</a>

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SPICE II Plus: New synthetic cannabinoids and stimulants – evaluating risk behaviour, problematic use and toxicity for developing specific approaches in primary and secondary prevention	Prevalence, incidence and patterns of drug use. Prevention responses.	DE	NR	University	Cannabinoids	1038930 (768808)	Mar 2013- Feb 2015	Epidemiology, sociology, forensic chemistry	(DPIP) Action grants	/
WISEteens -Web-based screening and brief Intervention for SubstanceE using Teens	Prevention responses. Treatment responses.	DE	BE, CZ, SE	Public research centre/ institute	Several substances	595569 (476455)	24 months	Psychology	(DPIP) Action grants	www.wiseteens.eu/
Women, minorities, drug-help services (WEDworks)	Prevention treatment. Harm reduction responses.	DE	BG, EE, LV, RO, SI	Private research centre/institute	Comprehensive approach	623370(498696)	Jan 2013- 2014	Psychology, sociology	(DPIP) Action grants	http://www.wedworks.eu/

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European implementation of CAPPYC (Cannabis Abuse Prevention Program for Young Consumers) and evaluation of their results using a scale measuring attitudes towards drug use	Prevalence, incidence and patterns of drug use. Prevention responses.	ES	PT, IT, RO	Private research centre/institute	Cannabis	(320600)	Apr 2014- Dec 2015	Epidemiology, prevention science	(DPIP) Action grants	/
Reducing hepatitis C sexual and drug taking risk behaviours among female drug users in Europe (REDUCE): translating evidence into practice	Prevalence, incidence and patterns of drug use. Harm reduction responses	ES	AT, IT, PL, UK	Public research center/institute	Comprehensive approach	584759 (467807)	Oct 2011- Sept 2013	Psychology, sociology	(DPIP) Action grants	<a href="http://www.thereduceproject.imim.es/">http://www.thereduceproject.imim.es/</a>

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Internet Tools for Research in Europe on New Drugs (I-TREND): interdisciplinary and integrated approaches to substances, users and markets	Prevalence, incidence and patterns of drug use. Mechanism of drug use and effects.	FR	CZ, NL, PL, UK	Institutions hosting Reitox national focal point	NPS	441048 (317555)	Apr 2013- Apr 2015	Sociology, epidemiology, forensic chemistry	(DPIP) Action grants	<a href="http://www.i-trend.eu">http://www.i-trend.eu</a>
New methodological tools for policy and programme evaluation	Prevalence, incidence and patterns of drug use. Prevention, treatment, law enforcement and harm reduction responses. Supply and market. Methodology issues.	IT	BE, CZ	University	Comprehensive approach	610496(48 8397)	2011-2013	Sociology, political sciences, economics, forensic chemistry	(DPIP) Action grants	<a href="http://www.drugpolicyevaluation.eu/web/">http://www.drugpolicyevaluation.eu/web/</a>

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TRIP - Testing in Recreational-settings prevention- Interventions addressed to Polydrug users	Prevention responses. Harm reduction responses.	IT	DK, UK, HU	Public research center/ institute	Several substances	421559 (337247)	2011-2013	Prevention science	(DPIP) Action grants	<a href="http://www.synergia-net.it/en/european-projects-list/trip---testing-in-recreational-settings-prevention-interventions-addressed-to-polydrug-users-pre121-pe42.html">http://www.synergia-net.it/en/european-projects-list/trip---testing-in-recreational-settings-prevention-interventions-addressed-to-polydrug-users-pre121-pe42.html</a>
Overdose prevention among hard-to-reach users of non-opioid substances	Prevention responses.	NL	BE	Public research centre/institute	GHB	(78861)	NR	Toxicology	(DPIP) Action grants	<a href="http://www.mainline.nl/en/international/what-we-do/ghb-overdose-prevention.html">http://www.mainline.nl/en/international/what-we-do/ghb-overdose-prevention.html</a>

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LOCAL-PASS - A local approach towards the reduction of psychoactive substance use	Prevalence, incidence and patterns of drug use. Prevention responses.	NL	IT, PT, BG	Novadic Kentron	NPS	567521 (454017)	Mar 2013- Feb 2015	Epidemiology, sociology	(DPIP) Action grants	<a href="http://www.adiktologie.cz/en/articles/detail/414/4272/A-LOCAL-approach-towards-the-reduction-of-psychoactive-substance-use-LOCAL-PASS-">http://www.adiktologie.cz/en/articles/detail/414/4272/A-LOCAL-approach-towards-the-reduction-of-psychoactive-substance-use-LOCAL-PASS-</a>
CORRELATION - HEPATITIS C INITIATIVE (hepC European Initiative. Hepatitis C and Drug use)	Prevention treatment. Harm reduction responses.	NL	DE, DK, FI, PT, RO, SE	Private research centre/institute	Comprehensive approach	550875 (440700)	Feb 2013- ...	Epidemiology	(DPIP) Action grants	<a href="http://www.hepatitis-c-initiative.eu/">http://www.hepatitis-c-initiative.eu/</a>
New psychoactive substances among problem drug users - towards effective and comprehensive health responses in Europe	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Harm reduction responses.	PT	NR	Private research centre/institute	NPS	(403728)		Epidemiology, sociology, addictology	(DPIP) Action grants	/

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EU-MADNESS (EUropean wide, Monitoring, Analysis and knowledge Dissemination on Novel/Emerging pSychoactiveS): integrated EU NPS monitoring & profiling to prevent health harms and update professionals	Prevalence, incidence and patterns of drug use. Determinants of drug use. Consequences of drug use. Supply and markets. Methodology issues.	UK	NR	University	NPS	(635215)		Epidemiology, sociology, toxicology, forensic chemistry, pharmacology, neurosciences	(DPIP) Action grants	/
EuroHRN II: Supporting innovative measures to address the reduction of drug related harm in Europe	Harm reduction responses.	UK	DE, FR, LI, NL, PT	Private research center/ institute	Comprehensive approach	(390 078 with 80% of co- funding)	Jan 2013- ...	Epidemiology	(DPIP) Action grants	<a href="http://www.eurohrn.eu/">http://www.eurohrn.eu/</a>
European Drug Emergencies Network (Euro-DEN)	Prevalence, incidence and pattern of use. Treatment responses.	UK	NO, SP, PT	Private research centre/instit ute	NPS	492147 (393718)	NR	Epidemiology, pharmacology	(DPIP) Action grants	<a href="http://informahealthcare.com/doi/abs/10.3109/15563650.2014.898771">http://informahealthcare.com/doi/abs/10.3109/15563650.2014.898771</a>

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HCV Treatment as prevention in Europe: model projections of impact and strengthening evidence base on intervention coverage and effect and HCV morbidity	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Harm reduction responses. Determinants of drug use.	UK	BE, CZ, FR, DE, IT, NL, SL, NO	University	Several substances	(290435)		Epidemiology, toxicology, prevention science	(DPIP) Action grants	/
ORION - Overdose Risk InfOrmatioN Project	Prevention responses.	UK	DE, DK, IT, LVR	University	Comprehensive approach	482109 (389687)	24 months 2011-2013	Psychology	(DPIP) Action grants	<a href="http://orion-euproject.com/">http://orion-euproject.com/</a>
Promoting excellence in drug prevention in the EU	Prevention responses.	UK	AT, CZ, FR, GR, HU, IT, PL	University	Comprehensive approach	590955 (472764)	May 2013-Feb 2015	Sociology, psychology, epidemiology	(DPIP) Action grants	<a href="http://prevention-standards.eu/">http://prevention-standards.eu/</a>

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SRAP - Addiction prevention within Roma and Sinti communities	Prevalence, incidence and patterns of drug use. Prevention responses	IT	BG, ES, FR, IT, RO, SI, SK	Public research center/institute	Several substances	(661389)	Jul 2010- Jul 2013	Epidemiology, psychology, sociology	(EAHC) Project grant	<a href="http://srap-project.eu/">http://srap-project.eu/</a>
Recreational Drugs' European Network: an ICT prevention service addressing the use of novel compounds in vulnerable individuals (ReDNet)	Prevention responses. Methodology issues.	UK	BE, DE, ES, HU, NO, PL	University	NPS	(499910)	2010-2012	Sociology	(EAHC) Project grant	<a href="http://www.rednetproject.eu/">http://www.rednetproject.eu/</a>
PARADISE - Psychosocial factors relevant to brain disorders in Europe	Prevalence, incidence and patterns of drug use. Treatment responses. Methodology issues.	DE	FI, IT, PL, UK, ES, CH, BE	University	Comprehensive approach	1482092	Jan 2010- Jun 2013	Neurosciences, psychiatry, psychology	FP7-HEALTH Coordination (or networking) actions	<a href="http://paradiseproject.eu/">http://paradiseproject.eu/</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
ATOME - Access to opioid medication in Europe	Treatment responses. Prevention responses.	DE	CH, IT, LT, NL, RO, UK	University	Opiates	2812017(2 449062)	Dec 2009- Nov 2014	Psychology, epidemiology, sociology, pharmacology, psychiatry, toxicology	FP7- HEALTH Small or medium- scale focused research project	<a href="http://www.atome-project.eu">http://www.atome-project.eu</a>
TACTICS - Translational Adolescent and Childhood Therapeutic Interventions in Compulsive Syndromes	Mechanism of drug use and effects.	NL	DE, FR, IE, IL, UK, USA	University	Comprehensive approach	7871883 (6000000)	Jan 2012- Dec 2016	Neurosciences, pharmacology	FP7- HEALTH Small or medium- scale focused research project	<a href="http://www.tactics-project.eu/">http://www.tactics-project.eu/</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
DECIDE - Developing and evaluating communication strategies to support Informed decisions and practice based on evidence	Methodology issues.	UK	DE, ES, FI, IT, NL, NO,	University	Opiates	3795697 (2999312)	Jan 2011- Dec 2015	Criminology, toxicology, political sciences	FP7-HEALTH Small or medium-scale focused research project	<a href="http://www.decide-collaboration.eu/">http://www.decide-collaboration.eu/</a>
MESSI - Mesocorticolimbic System: functional anatomy, drug-evoked synaptic plasticity & behavioural correlates of Synaptic Inhibition	Mechanism of drug use and effects.	CH (Switzerland)	/	University	Comprehensive approach	2499506 (2499506)	Mar 2013- Feb 2018	Neurosciences	FP7-IDEAS ERC Advanced Grant	<a href="http://cordis.europa.eu/projects/rcn/107061_en.html">http://cordis.europa.eu/projects/rcn/107061_en.html</a>
MORAPOL - Change in Policy Fields: the impact of international and domestic factors on morality policies in 25 OECD countries between 1980 and 2010	Responses to the drug situation.	DE	/	University	Comprehensive approach	2056800 (2056800)	Sep 2011- Aug 2013	Political sciences	FP7-IDEAS ERC Advanced Grant	<a href="http://cordis.europa.eu/projects/rcn/94845_en.html">http://cordis.europa.eu/projects/rcn/94845_en.html</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
REWARDVIEW - What you get is what you see: How reward determines perception	Mechanism of drug use and effects.	NL	/	University	Comprehensive approach	2494525(2494525)	May 2013-Apr 2018	Neurosciences	FP7-IDEAS ERC Advanced Grant	<a href="http://cordis.europa.eu/projects/rcn/108976_en.html">http://cordis.europa.eu/projects/rcn/108976_en.html</a>
UTM - Updating the mind: The mechanisms behind behavioural change	Mechanism of drug use and effects.	UK	/	University	Comprehensive approach	1138918 (1138918)	Feb 2013-Jan 2018	Neurosciences, psychology	FP7-IDEAS ERC Starting Grant	<a href="http://cordis.europa.eu/projects/rcn/105964_en.html">http://cordis.europa.eu/projects/rcn/105964_en.html</a>
ADDICTION - Beyond the genetics of addiction	Mechanism of drug use and effects.	NL	/	University	Several substances	1491963 (1491963)	Dec 2011-Nov 2016	Neurosciences	FP7-IDEAS ERC Starting Grant	<a href="http://jacquelinemvink.com/erc-project.html">http://jacquelinemvink.com/erc-project.html</a>
ADDICTIONCIRCUITS - Drug addiction: molecular changes in reward and aversion circuits	Mechanism of drug use and effects.	SE	/	University	Comprehensive approach	1500000 (1500000)	Oct 2010-Sep 2015	Neurosciences	FP7-IDEAS ERC Starting Grant	<a href="http://cordis.europa.eu/projects/index.cfm?fuseaction=app.details&amp;TXT=addiction+circuits&amp;FRM=1&amp;STP=10&amp;SIC=&amp;PGA=&amp;CCY=&amp;PCY=&amp;SRC=&amp;LNG=en&amp;REF=96278">http://cordis.europa.eu/projects/index.cfm?fuseaction=app.details&amp;TXT=addiction+circuits&amp;FRM=1&amp;STP=10&amp;SIC=&amp;PGA=&amp;CCY=&amp;PCY=&amp;SRC=&amp;LNG=en&amp;REF=96278</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
BASALGANGLIANET WORKS - Basal ganglia and the control of locomotion	Mechanism of drug use and effects.	FR	SP	Public research center/institute	Cannabinoids	161293 (161293)	Dec 2011- Dec 2012	Neurosciences	FP7- PEOPLE International Incoming Fellowships (IIF)	<a href="http://cordis.europa.eu/projects/rcn/96318_en.html">http://cordis.europa.eu/projects/rcn/96318_en.html</a>
HEROGEN - The Molecular Genetics of Heroin Dependence	Mechanism of drug use and effects.	UK	/	University	Heroin	200371 (200371)	Oct 2012- Sep 2014	Neurosciences	FP7- PEOPLE International Incoming Fellowships (IIF)	<a href="http://cordis.europa.eu/projects/rcn/104819_en.html">http://cordis.europa.eu/projects/rcn/104819_en.html</a>
ILMA - The interplay of learning and motivational systems in addictive behaviour	Mechanism of drug use and effects.	UK	/	University	Comprehensive approach	210092 (210092)	Apr 2012- Mar 2014	Neurosciences	FP7- PEOPLE International Incoming Fellowships (IIF)	<a href="http://cordis.europa.eu/projects/rcn/100896_en.html">http://cordis.europa.eu/projects/rcn/100896_en.html</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
BASALGANGLIADYN AMIC - Dynamic of neuronal network interactions in the basal ganglia	Mechanism of drug use and effects.	ES	/	Public research center/ institute	Comprehensive approach	100000 (100000)	Sept 2008- Aug 2012	Neurosciences	FP7- PEOPLE Internationa l Re- integration Grants (IRG)	<a href="http://cordis.europa.eu/projects/rcn/89136_en.html">http://cordis.europa.eu/projects/rcn/89136_en.html</a>
GABA CELL TYPES - Differentiation of gabaergic interneuron subtypes in the mouse cerebral cortex	Mechanism of drug use and effects.	ES	/	University	Comprehensive approach	100000 (100000)	Oct 2007- Sep 2011	Neurosciences	FP7- PEOPLE Internationa l Re- integration Grants (IRG)	<a href="http://cordis.europa.eu/projects/rcn/86703_en.html">http://cordis.europa.eu/projects/rcn/86703_en.html</a>
OPTO-REW - Optogenetic investigation of GABAergic interneurons in the limbic system during reward and addiction	Mechanism of drug use and effects.	SE	/	University	Several substances	100000 (100000)	Mar 2011- Feb 2015	Neurosciences	FP7- PEOPLE Internationa l Re- integration Grants (IRG)	<a href="http://cordis.europa.eu/projects/rcn/98244_en.html">http://cordis.europa.eu/projects/rcn/98244_en.html</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
ZF OPTOMODULOMICS - Dopaminergic modulation of neuronal circuit function in the zebrafish olfactory system	Mechanism of drug use and effects.	CH (Switzerla nd)	/	Private research center/ institute	Comprehensive approach	184709 (184709)	Aug 2013- Jul 2013	Neurosciences	FP7- PEOPLE Intra- European Fellowships (IEF)	<a href="http://www.fmi.ch/">http://www.fmi.ch/</a>
CANNABIDIM - Molecular modelling of the cannabinoid CB1 receptor homodimer and its interaction with ligands: the role of membrane cholesterol and the CRIP1a protein	Mechanism of drug use and effects.	FI	UK	University	Cannabinoids	272231 (272231)	Aug 2012- Jul 2014	Neurosciences	FP7- PEOPLE Intra- European Fellowships (IEF)	<a href="http://cordis.europa.eu/projects/rcn/102770_en.html">http://cordis.europa.eu/projects/rcn/102770_en.html</a>
MODEL OF IMPULSIVITY - Characterization of a rodent model of impulsivity with implications for drug addiction	Mechanism of drug use and effects.	UK	/	University	Cocaine	Not available (171867)	June 2009- May 2011	Neurosciences	FP7- PEOPLE Intra- European Fellowships (IEF)	<a href="http://cordis.europa.eu/projects/rcn/90401_en.html">http://cordis.europa.eu/projects/rcn/90401_en.html</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
SEWPROF - A new paradigm in drug use and human health risk assessment: Sewage profiling at the community level	Prevalence, incidence and patterns of drug use.	EU	UK, BE, NO, ES, DE, NL, CH, IT	University	Comprehensive approach	4178231	Oct 2012- Sep 2016	Forensic chemistry, physiology, biochemistry, toxicology, statistics	FP7- PEOPLE Networks for Initial Training (ITN)	<a href="http://sewprof-itn.eu/">http://sewprof-itn.eu/</a>
MATRIXRESILIENCE - Role of hevin in the neuroplasticity of stress-related disorders and addiction	Consequences of drug use. Mechanism of drug use and effects.	FR	/	University	Cocaine	100000	Sep 2013- Aug 2017	Pharmacology	FP7- PEOPLE Support for training and career development of researchers (CIG)	<a href="http://cordis.europa.eu/projects/rcn/109779_en.html">http://cordis.europa.eu/projects/rcn/109779_en.html</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
SSBD - Drug-related information seeking and scanning from media and interpersonal sources as an indicator of drug use risk: an innovative approach to drug use prevention	Prevalence, incidence and patterns of drug use.	IL (Non Member State)	/	University	Cannabis, prescription drugs	100000 (100000)	May 2013-Apr 2017	Epidemiology, statistics	FP7- PEOPLE Support for training and career development of researchers (CIG)	<a href="http://cordis.europa.eu/projects/rcn/108416_en.html">http://cordis.europa.eu/projects/rcn/108416_en.html</a>
CUSTOM (drugs and precursor sensing by complementing low cost multiple techniques)	Law enforcement responses. Methodology issues.	IT	ES, FI, FR	Private research centre/institute	Several substances	3486406	Jun 2012-Nov 2013	Chemistry	FP7- SECURITY Collaborative project (generic)	<a href="http://www.custom-project.eu/site/index.php">http://www.custom-project.eu/site/index.php</a>
LINKSCH - Grasping the links in the chain: understanding the unintended consequences of international counter-narcotics measures for the EU	Supply and markets.	UK	DE, FR, NL	University	Cannabis, heroin	1067166 (881742)	Feb 2012-Jan 2015	Geopolitics, history	FP7- SECURITY Small or medium-scale focused research project	<a href="http://linksch.gla.ac.uk/">http://linksch.gla.ac.uk/</a>

Title	Major research area	MS <i>Project Coordinator</i>	MS <i>Partners</i>	Project coordinator affiliation	Substance	Project total cost <i>EU contribution</i>	Project time period <i>Start - End</i>	Major scientific disciplines	Contract type	project website
ERANID - European Research Area Network on Illicit Drugs - Towards integrated European research in illicit drugs: cause and nature of drug problems; interventions and policies	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets. Methodology issues.	NL	BE, FR, IT, PT, UK	Public research center/institute	Several substances	2225492 (1999725)	Jan 2013- Dec 2016	Anthropology, criminology, demography, economics, epidemiology, history, legal sciences, neurosciences, philosophy, political sciences, psychology, sociology, pharmacology, psychiatry, toxicology	FP7-SSH Coordination (or networking) actions	<a href="http://www.eranid.eu/">http://www.eranid.eu/</a>

Title	Major research area	MS <i>Project Coordinator</i>	MS <i>Partners</i>	Project coordinator affiliation	Substance	Project total cost <i>EU contribution</i>	Project time period <i>Start - End</i>	Major scientific disciplines	Contract type	project website
ALICE RAP- Addictions and lifestyles in contemporary Europe reframing addictions project	Prevalence, incidence and patterns of drug use. Prevention responses. Treatment responses. Law enforcement responses. Drug related crime responses. Harm reduction responses. Determinants of drug use. Consequences of drug use. Mechanism of drug use and effects. Supply and markets. Methodology issues.	ES	DE, AT, BE, CY, DK, ES, EE, FI, FR, GR, IE, HU, IT, LV, LT, LU, MT, NL, PL, PT, UK, SE, SI, SK, CZ	University	Several substances	10165766 (7978226)	Jan 2011- Dec 2016	Anthropology, criminology, demography, economics, epidemiology, history, legal sciences, neurosciences, philosophy, political sciences, psychology, sociology, pharmacology, psychiatry, toxicology	FP7-SSH Large-scale integrating project	www.alicerap.eu

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
INCANT trial (International Cannabis Need of Treatment)	Treatment responses.	EU	USA	Public research center/ institute	Cannabis	NR	Nov 2003- Nov 2011	Psychology, addictology	NR	<a href="http://www.mdft.org/mdft/media/files/Ri_gter_et_al_2010I_I NCANT_a_transnati onal_randomized_tri al_of_multidimensio nal_family_therapy_ versus_treatment_as _usual_for_adolesce nts_with_cannabis_u se_disorder.pdf">http://www.mdft.org/mdft/media/files/Ri_gter_et_al_2010I_I NCANT_a_transnati onal_randomized_tri al_of_multidimensio nal_family_therapy_ versus_treatment_as _usual_for_adolesce nts_with_cannabis_u se_disorder.pdf</a>
Nightlife young risk behaviours in Mediterranean versus other European cities: are stereotypes true?	Prevalence, incidence and patterns of drug use. Consequences of drug use.	SP	UK, GR	Public research center/ institute	Several substances	348720	Mar 2005- Mar 2008	Demography, Epidemiology, Sociology	NR	<a href="http://eurpub.oxfordjournals.org/content/21/3/311.full.pdf+html">http://eurpub.oxfordjournals.org/content/21/3/311.full.pdf+html</a>
Substance use, violence, and unintentional injury in young holidaymakers visiting Mediterranean destinations	Prevalence, incidence and patterns of drug use. Consequences of drug use.	UK	/	University	Several substances	402780	Dec 2008- Dec 2010	Economics, psychology, sociology	NR	<a href="http://onlinelibrary.wiley.com/doi/10.1111/j.1708-8305.2010.00489.x/full">http://onlinelibrary.wiley.com/doi/10.1111/j.1708-8305.2010.00489.x/full</a>

<b>Title</b>	<b>Major research area</b>	<b>MS Project Coordinator</b>	<b>MS Partners</b>	<b>Project coordinator affiliation</b>	<b>Substance</b>	<b>Project total cost EU contribution</b>	<b>Project time period Start - End</b>	<b>Major scientific disciplines</b>	<b>Contract type</b>	<b>project website</b>
Variability factors of the appropriate methadone doses to reach stability	Treatment responses. Mechanism of drug use and effects.	FR	FR	Public research center/institute	Methadone	100000	Apr 2008- Dec 2013	Neurosciences, psychology, pharmacology	NR	<a href="http://clinicaltrials.gov/ct2/show/NCT00894452?term=VORSPAN&amp;rank=1">http://clinicaltrials.gov/ct2/show/NCT00894452?term=VORSPAN&amp;rank=1</a>

## Annex B: Questionnaires

### Questionnaire on

# Policy framework(s) related to drug research since

January 2010

Please specify:

<p>Your name: Your e-mail: Your institutional affiliation: (in ENGLISH and, into brackets, in your native language) Type of organisation</p> <p>Your professional title: Your country: The postcode of your organisation:</p>	<p><input type="checkbox"/> Funding institution/authority <input type="checkbox"/> Non-funding authority <input type="checkbox"/> Research organisation/team</p>
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Does your country have one or more legal or regulatory framework(s) for drug related research policy?

- Yes, a Law  
 Yes, a white paper released by the government (an official set of proposals that is used as a vehicle for their development into law)  
 Yes, a green paper (government consultation document of policy proposals for debate without any commitment to action)  
 Yes, regulations  
 Yes, other document  
 No  
 No information available

*If yes, please provide the reference(s) and/or link(s):*

*If you answered "other document", please specify:*

Please add any additional comments on the legal regulatory framework on drug related research policy in your country here:

Is there any national strategy in your country thoroughly dedicated to drug related research?

- Yes, there is a dedicated national strategy on drug related research
- Yes, the strategy is part of a larger national strategy on drugs
- Yes, the strategy is part of a larger national strategy on other issues
- No, there is no national strategy dedicated to drug related research
- No information available

*If yes, please specify the name of the strategy and provide a link towards any relevant document/url.*

*If yes, please specify time span (if any) of the strategy:*

If your organisation is involved in the national strategy, please provide a brief summary of this strategy:

Please add any additional comments on the national strategy on drug related research in your country, here:

Is there a specific budget attached to the implementation of the national strategy? *(please provide one answer)*

- Yes
- No
- No information available

*If yes, please specify the amount of this budget:*

Specify the currency

Do strategies exist other than those at the national level?

- Yes, at regional level
- Yes, at local level
- No
- No information available

*If yes, please specify the name of the strategy and provide a link towards any relevant document/url:*

*If yes, please specify the scope of the strategy:*

- Drug related research
- Drugs
- Other issues
- No information available

Do the national/regional/local strategies set any grant programmes for funding drug research?

- Yes, at national level
- Yes, at regional level
- Yes, at local level
- No
- No information available

If your organisation is involved into a regional/local strategy, please provide a brief summary of the regional/local strategy on drug related research here:

Does your country have one or more authorities responsible for **defining** drug research strategies? *(a single answer required)*

- Yes, one authority
- Yes, several authorities acting independently
- Yes, several authorities acting in the framework of a national coordination
- No
- No information available

*If yes, please provide the name(s), location in government/administration and tasks carried out by the authority(ies):*

Name of the related strategy(ies)	Name of the authority responsible	Location in government/administration	Tasks of the authority responsible relevant to drug research

Does your country have one or more authorities responsible for the **implementation** of the drug research strategies? *(a single answer required)*

- Yes, one authority
- Yes, several authorities acting independently
- Yes, several authorities acting in the framework of a national coordination
- No
- No information available

*If yes, please provide the name(s), location in government/administration and tasks carried out by the authority(ies)*

Name of the related strategy(ies)	Name of the authority responsible	Location in government/administration	Tasks of the authority responsible relevant to drug research

Is there any formal network established in your country between people undertaking drug research (e.g. academic organisations, health organisations, etc) and people funding drug research?

- Yes
- No

*If yes, please provide the name(s) of the network(s) or its/their main coordinator(s):*

Thank you for taking the time to complete this questionnaire. You will be informed by email when the outputs of this study will be available.

## Questionnaire on

# Grant programmes dedicated to drug related research since January 2010

Please specify:

Your name:	
Your e-mail:	
Your institutional affiliation:	
Type of institution	<input type="checkbox"/> Funding institution/authority <input type="checkbox"/> Non-funding authority <input type="checkbox"/> Research organisation/team
The postcode of your institution:	
Your professional title:	
Your country:	

Name of the call dedicated to drug related research:

What is the project code or grant registration/identification number (if any)?

Does this call for tenders form part of a larger funding/grant programme?  
(a single answer required)

- Yes it is part of a funding programme scheduled by the National strategy  
 Yes it is part of a funding programme scheduled by a regional/local strategy  
 Yes it is part of a non-governmental funding programme  
 No

If yes, please specify the name of this funding programme and (if any) the related drug research strategy?

Is this call funded by several institutions? (please provide one answer)

- Yes, by two institutions  
 Yes, by three or more institutions  
 No, by only one institution

Please specify the name(s) and level(s) of funding institution(s):

	Name	Level
Funding institution 1		Specify in the drop-down list
Funding institution 2		Specify in the drop-down list
Funding institution 3		Specify in the drop-down list

Date of launch of the call:

(mm/yyyy)

Is this call run on a regular basis? *(please provide one answer)*

- Yes, yearly
- Yes, every two years
- Yes, on another time basis
- No

*If you answered "on another time basis", please specify:*

What is the amount of the eligible budget?

(i.e. budget available for funding the research teams applying in the call)

Specify the currency

What is the amount of the budget allocated for the implementation of granted projects?

Specify the currency

- Not yet determined (Selection of project ongoing)

What proportion of the project costs can be reimbursed?

%

What drug research area(s) are covered by the call?

- Prevalence, incidence and patterns of drug use
- Prevention responses
- Treatment responses
- Law enforcement responses
- Drug related crime responses
- Harm reduction
- Determinants of drug use
- Consequences of drug use
- Mechanism of drug use and effects
- Supply and markets
- Methodology issues

What are the main objectives of the call?

Are these objectives related to the priorities set in any national/state/regional/local drug research strategies (if any)? Please, specify:

Which of the following parties are involved in **defining** the topics of the call?

- Academic partners from one discipline
- Academic partners from several disciplines
- Research agency/institute/organisation
- National government
- Regional government
- Local government
- Private company
- Other

*If you answered "other", please specify:*

Are these parties organised in a formal structure? *(please provide one answer)*

- Yes, in a steering committee
- Yes, in another formal structure
- No

*If you answered "another formal structure", please specify:*

Is there a formal structure for the application? *(please provide one answer)*

- Yes
- No
- No information available

Which application system is used?

- Electronic
- Paper
- No information available

Is the call opened to the participation of foreign researchers? *(please provide one answer)*

- Yes, international participation is compulsory
- Yes, international participation is encouraged
- Yes, international participation is possible
- No
- No information available

What type of selection procedure is conducted?

- Steering Committee
- Paid independent expert review (external review)
- Free of charge independent expert review (external review)
- Paid foreign experts review
- Free of charge foreign experts review
- Other

*If you answered "other", please specify:*

What are the criteria used for granting the applications?

- Research team qualifications and expertise
- Sound methodology
- Ability to help policy makers to make sound policy decisions
- Multidisciplinary
- Cost
- Cross-national project
- Knowledge transfer
- Other criterion(a)

*If other criteria than the listed ones are used for granting application, please specify:*

Is there any procedure for monitoring and reviewing the granted projects?

- Yes, a financial/administrative procedure
- Yes, a scientific/technical procedure
- No
- No information available

*If you answered “yes”, please specify who is responsible for monitoring and reviewing the granted projects?*

How often are the granted projects reviewed financially/administratively?

Specify the (average) number per year:

How are the granted projects reviewed financially/administratively?

- Written report(s)
- Interview(s)
- Site visit(s)
- Seminar(s)
- Other financial/administrative support(s)

*If you answered “Other financial/administrative support”, please specify:*

How often are the granted projects reviewed scientifically/technically?

Specify the (average) number per year:

How are the granted projects reviewed scientifically/technically?

- Written report(s)
- Interview(s) by ethical committee
- Interview(s) by internal review board or steering committee
- Site visit(s)
- Seminar(s)
- Other scientific/technical mean(s)

*If you answered “other scientific/technical support”, please specify:*

Is there a formal structure for the final report? (a single answer required)

- Yes
- No
- No information available

Do(es) the funding institution(s) promote dissemination of results? (please provide one answer)

- Yes
- No
- No information available

*If yes, please specify:*

- Oral communication at a scientific event
- Scientific article
- Report
- Internet dissemination
- Other support

*If you answered “other support”, please specify:*

Are there any formal networks established in your country for people undertaking drug research (e.g. academic organisations, health organisations, etc) and people funding drug research?

- Yes

No

*If yes, please provide the name(s) of the network(s) or its/their main coordinator(s):*

Thank you for taking the time to complete this questionnaire. You will be informed by email when the outputs of this study will be available.

## Questionnaire on

# Drug research projects launched since January 2010

Please specify:

Your name:	
Your e-mail:	
Your institutional affiliation	
Type of organisation	<input type="checkbox"/> Funding institution/authority <input type="checkbox"/> Non-funding authority <input type="checkbox"/> Research organisation/team
The postcode of your organisation:	
Your professional title:	
Your country:	

What is the title of the project?

Please, provide the website of the project (if any):

What is the project code or grant registration/identification number (if any)?

Are several research organisations/research teams involved in this project? *(please provide one answer)*

- Yes, two research organisations  
 Yes, three research organisations  
 Yes, four research organisations  
 Yes, more than four research organisations  
 No, only one research organisation

Who is (are) the research organisation(s)/ research team(s) in charge of implementing the research project?

Name	
Organisation/team 1	
Organisation/team 2	
Organisation/team 3	
Organisation/team 4	
Any additional organisation(s)/team(s)	

What is the rationale of the project? What needs have justified the project?

What are the main goals of the project?

Please provide the reference(s) of the summary of project if any (including electronic ones):

What are the scientific discipline(s) involved in the project?

- Anthropology
- Criminology
- Demography
- Economy
- Epidemiology
- History
- Legal sciences
- Neurosciences
- Philosophy
- Political sciences
- Psychology
- Sociology
- Pharmacology
- Other medical sciences
- Other discipline

*If you answered "Neurosciences or other medical sciences", please specify:*

*If you answered "Other discipline", please specify:*

What are the drug research area(s) covered by the project?

- Prevalence, incidence and patterns of drug use
- Prevention responses
- Treatment responses
- Law enforcement responses
- Drug related crime responses
- Harm reduction responses
- Determinants of drug use
- Consequences of drug use
- Mechanism of drug use and effects
- Supply and markets
- Methodology issues

Please, specify the type of the study:

- Action research
- Case study
- Causal study
- Cohort study
- Cross-sectional study
- Descriptive study
- Experimental study
- Exploratory study
- Historical study
- Longitudinal study
- Observational study
- Sequential study

Other study (transnational, Evaluation, Monitoring,...)

*If you answered "other study", please specify:*

What is the duration of the project?

Starting date: mm/yyyy

End: mm/yyyy

Is this project funded by several institutions? *(please provide one answer)*

Yes, by two institutions

Yes, by three or more institutions

No, by only one institution

*What is (are) the project funding institution(s)? Please specify the name and geographical level*

	Name	Level
Funding institution 1		Specify in the drop-down list
Funding institution 2		Specify in the drop-down list
Funding institution 3		Specify in the drop-down list

What is the allocated amount of funding of the project?

Specify the currency

What is the funding mechanism for this project?

Call for tenders (project commissioned through a competitive bidding process)

Direct award without a tendering procedure

Other funding mechanism

*If you answered "call for tenders", please specify the name of the call and respective code (if any):*

*If you answered "other funding mechanism", please specify:*

What proportion of the project costs can be reimbursed?

%

Is there a specific procedure for monitoring and reviewing this project?

Yes, a financial/administrative procedure

Yes, a scientific/technical procedure

No

No information available

*If yes, please specify who is responsible for monitoring and reviewing the project:*

How often is this project reviewed financially/administratively for any management reason?

time(s) a year

How is the project reviewed financially/administratively?

Written financial or administrative report(s) addressed to funding institutions

Interview(s)

Site visit(s)

Seminar(s)

Other financial/administrative/management support(s)

*If you answered "other financial/administrative support", please specify:*

How often is this project reviewed scientifically?

time(s) a year

How is the project reviewed scientifically?

Written scientific report(s)

- Interview(s) by a ethical committee
- Interview(s) by a review board or steering committee
- Site visit(s)
- Seminar(s)
- Other scientific/technical support(s)

*If you answered "other scientific/technical support", please specify:*

*Is there a formal structure for the final report? (please provide one answer)*

- Yes
- No
- No information available

*How have (will) the results be disseminated?*

- Scientific article in national peer reviewed journals
- Scientific article in international peer reviewed journals
- Article in another type of journal
- Confidential report addressed to funders
- Non confidential report
- Oral communication at a scientific event
- Other dissemination support

*If you answered "other dissemination support", please specify:*

*Are (some) results already available?*

- Yes, they are available on line
- Yes, they are available in hard copy support only
- No
- No information available

*What is the dissemination language of these results?*

- Bulgarian
- Czech
- Danish
- Dutch
- English
- Estonian
- Finnish
- French
- German
- Greek
- Hungarian
- Irish
- Italian
- Latvian
- Lithuanian
- Maltese
- Polish
- Portuguese
- Romanian
- Slovak
- Slovene
- Spanish
- Swedish
- Other language(s)

Please provide the reference(s) of the published results (including electronic ones)?

What has been the main impact of the project (if completed)?

Thank you for taking the time to complete this questionnaire. You will be informed by email when the outputs of this study will be available.

## Annex C: EU policy frameworks cited

Commission staff working document on Strengthening EU Research Capacity on Illicit Drugs

<http://register.consilium.europa.eu/doc/srv?l=EN&f=ST%2017247%202009%20INIT>

Communication from the Commission to the European parliament and the Council -Towards a stronger European response to drugs (European Commission 2011)

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2011:0689:FIN:EN:PDF>

Council conclusions on strengthening EU research capacity on illicit drugs (Council of the EU 2009)

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European plan to combat drugs (1990) CELAD Report to the European Council meeting in Rome on 13 and 14 December 1990, Brussels, 10 December 1990.

[http://bdoc.ofdt.fr/pmb/opac\\_css/index.php?lvl=notice\\_display&id=44171](http://bdoc.ofdt.fr/pmb/opac_css/index.php?lvl=notice_display&id=44171)

EU Drugs Strategy (2005-2012)

[http://www.emcdda.europa.eu/attachements.cfm/att\\_10375\\_EN\\_EU%20Drugs%20Strategy\\_EN.pdf](http://www.emcdda.europa.eu/attachements.cfm/att_10375_EN_EU%20Drugs%20Strategy_EN.pdf)

EU Drugs Action Plan for 2009-2012

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EU Drugs Strategy (2013-2020)

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2012:402:0001:0010:en:PDF>

EU Action Plan on Drugs (2013-2016)

<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2013:351:0001:0023:en:PDF>

## Annex D: National policy frameworks cited

“Federal Policy Note on the problematic of drugs, 2001” (Belgium)

“Common Declaration on a Global and Integrated approach on Drugs, 2010” (Belgium)

“Government Plan for combating drugs and drug addiction 2008-11” (France)

“Government Plan for combating drugs and addictive behaviours 2013-17” (France)

“Action plan 2013-15” (FR)

“Piano di Azione Nazionale 2013-15” (IT)

“Piano di Azione nazionale Antidroga 2010-13”

Dipartimento Politiche Antidroga (DPA) Statement on Scientific International Collaborations”

Dutch White Paper of 1996 “Drugs Policy in the Netherlands – Continuity and Change”

<http://www.politicheantidroga.it/media/327698/paesi%20bassi.pdf>

“Kamerbrief over ontwikkelingen van het Nederlands drugsbeleid” (the Dutch Policy letter of 27 May 2011)

<http://www.rijksoverheid.nl/documenten-en-publicaties/kamerstukken/2011/05/27/kamerbrief-over-ontwikkelingen-van-het-nederlands-drugsbeleid.html>

Portuguese Resolution of Council of Ministers n°46/99 1999 Portuguese Drug Strategy

Portuguese plan 2005-12. National Plan against Drugs and Drug Addiction 2005-12

Portuguese plan 2013-15 “Plano Estratégico 2013-15”

UK Addiction and substance misuse research Strategy of 2009

<http://www.mrc.ac.uk/funding/science-areas/neurosciences-mental-health/related-content/addiction-research-strategy/>

HM (Her Majesty's) Government (2010a). The Cross-Government Drugs Research Strategy.

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[http://www.dhsspsni.gov.uk/new\\_strategic\\_direction\\_for\\_alcohol\\_and\\_drugs\\_%282006-2011%29.pdf](http://www.dhsspsni.gov.uk/new_strategic_direction_for_alcohol_and_drugs_%282006-2011%29.pdf)

"New Strategic Direction for alcohol and drugs: A Framework for Reducing Alcohol and Drug Related Harm in Northern Ireland 2011-2016 –Phase 2"

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Welsh policy document 2008-18 "Working together to reduce harm: The substance misuse strategy for Wales 2008-18"

<http://www.drugscope.org.uk/Resources/Drugscope/Documents/PDF/Good%20Practice/welshstrategy.pdf>

Recommended citation \_\_\_\_\_

Milhet M., Díaz Gómez C., Mutatayi C., *Comparative analysis of research into illicit drugs across Europe (2010-2013)*, Brussels, European Commission, To be published by the European Commission , 334 p

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