



European Monitoring Centre
for Drugs and Drug Addiction

How CSO and EMCDDA monitoring can complement each other

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Insights Zone: Developing tools for monitoring of drug policy and practice from the view point of civil society organisations in Europe

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Conflict of interest

None to declare.



Longstanding, regular reporting on harm reduction

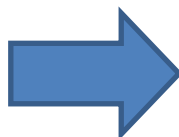
- Based on reporting by **national Focal Points**
- Harm reduction **policies and interventions**
- Focus on **drug-related infectious diseases** and **overdose** morbidity and deaths
- Epi-indicators as denominators for **coverage**
- **Evidence based** guidance
 - on prevention of infections in community settings/ prison (with ECDC);
 - on drug equipment and material (under preparation)
- **Best practice – best process:** Models of care, case studies/vignettes, Survey on ‘real life’ implementation experiences (with Correlation)



Latest reports and topic pages published 2019

- Rapid communication DRID
- Hepatitis Models of care
- Rapid communication DRD
- Take-home naloxone
- FAQs Drug-related deaths
- Hepatitis Elimination Barometer
- Checklist of barriers to THN (launch at LXAdd19)

EMCDDA
Harm
Reduction
Initiatives



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Combining strengths



EMCDDA

Civil Society Organisations

Data and estimates on drug use, harms + coverage of response, new trends
Policies, demand reduction, drug markets, supply reduction, early warning; several expert networks

Rich experience from harm reduction practice, Information on new trends
Topical network covering a range of populations; collaborator NLO; INDCR Network management;

Standardised indicators, annual monitoring + tools for more timely reporting e.g. EWS; trendspotter

Standardised monitoring survey among service providers; quick phone/mail surveys to improve understanding of new trends

Evidence base of interventions for service planners and practitioners
BPP; European Responses Guide; implementation experience: Models of care

Source for 'real-life' implementation experiences from service providers incl. peer workers, and from community members
Case studies collection

Support to different target groups in 30 Member countries + IPA, ENP
Input to evaluation of European drug strategies to Commission

Input for policy makers and service planners
Service user's experience of harm reduction accessibility and service quality;
Input to CSF, advocacy.



Added value for European monitoring

C-EHRN: a **unique network** of service providers and user organisations;

Combine data to get a ‘fuller picture’: EMCDDA intervention coverage rates combined with qualitative information from service providers and info on accessibility and quality from community members;

Work together to bridge the “know-do-gap” and to improve the quality of harm reduction in Europe. Joint work on models of care and ‘real world’ implementation practice.

Monitoring (issues for reflection for both organisations)

- ... the regular observation and recording of....
but not an end in itself.
- Why do you monitor? (what's in it for you?)
- How should the gathered information be used?
- Who are your customers, whom do you target with the information? (How) Do you reach them?
- What criteria should your monitoring meet? (quality)
- Sustainability?




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Thank you.

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