



European Monitoring Centre
for Drugs and Drug Addiction

Babel and Bleak House

– what the European Legal Database on Drugs (ELDD)
can and can't tell us about drug laws in 30 countries

Brendan Hughes
Principal Legal Analyst, EMCDDA

Measuring and monitoring drug policy for research,
surveillance and practice

Lisbon Addictions, October 2019



Babel, and Bleak House...



God confused the language of the workers so they couldn't understand each other



Charles Dickens' long, complicated satire of the long, complicated English legal system

1. Origins and evolution of ELDD

- **1995:** EU agency EMCDDA starts work to collect, analyse and disseminate objective, reliable and comparable information about the drug problem in the EU.
 - Supervised by a Management Board of senior civil servants from the Member States.
 - Network of “national focal points” (usually health institutes) provide comparable statistics of use rates, problem users, deaths...
- Could the differences between comparable statistics in countries be influenced by the laws?



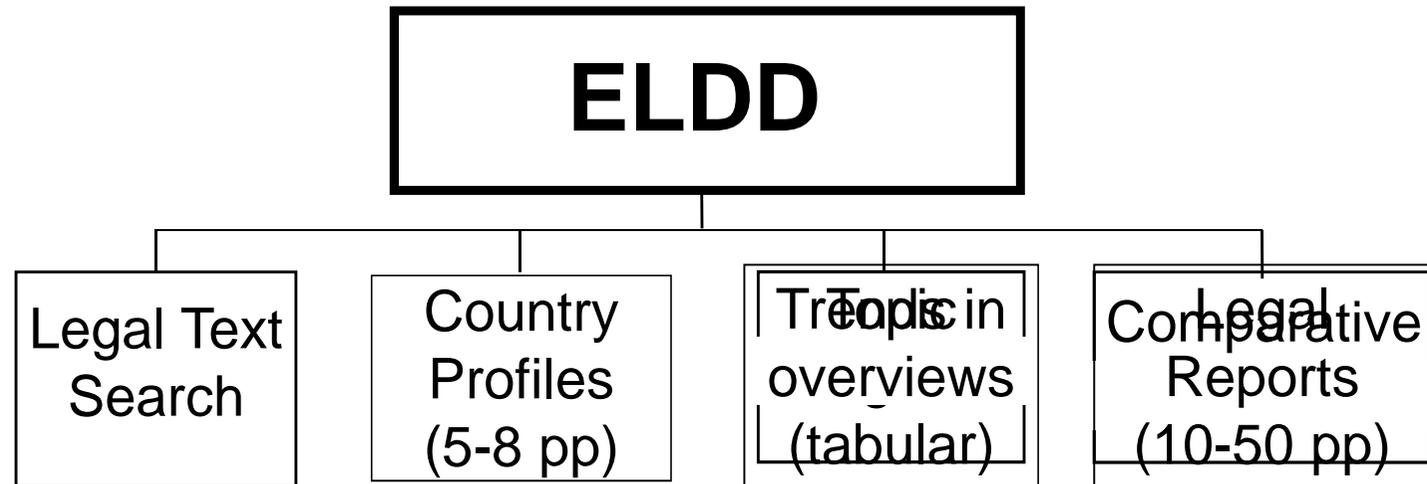
Laws on paper, or on
subscription-only
databases

Legal text

- **1999:** Management Board approved Legal Database project to host the laws (scanned!) and translations when available, and some analyses.
- New network established; each Management Board member nominates “Legal Correspondent” to give reliable information on each country’s laws (sensitive, but work for free). Often from Ministry of Health or Justice.
- **June 2001:** ELDD is free database on public website. Custom software allows Legal Correspondents to directly upload new laws.



4 main “doors” to ELDD (c.2004)



Increased EMCDDA mandate

1993: EMCDDA Regulation: Priority area 2 of the Annex is “National and Community strategies and policies (with special emphasis on ...**legislation**...)”.

2006: EMCDDA Regulation: Article 2...(i) ensuring improved comparability, objectivity and reliability of data at European level ...; in particular, the Centre shall develop **tools and instruments to help Member States to monitor and evaluate** their national policies and the Commission to monitor and evaluate Union policies; ...(ii) ...structuring information exchange ...(databases)



Evaluation and improvement 1

2008: ELDD Reflection exercise

Web stats showed:

- Little motivation to update the laws on our database (now available on national Ministry databases).
 - Few people read the texts of laws (24 languages of legalese)
 - Many people read the summary analyses and reports
- We concentrated on the analyses and reports
(Realist selection process; 7 years' experience of enquiries...)



Evaluation and improvement 2

New project: composite index of drug laws (monitor and evaluate)

➤ what factors of drug control laws are:

most requested / most important / objectively measurable?

2015: tabular Topic Overviews ► “Penalties at a Glance”, based on drug law index factors.

EMCDDA budget cuts; underused / outdated web pages dropped.

2019: law texts were dropped (low demand or supply); now link to the EU’s N-Lex national laws database.



THE POLICY
SURVEILLANCE
PROGRAM

A LawAtlas Project

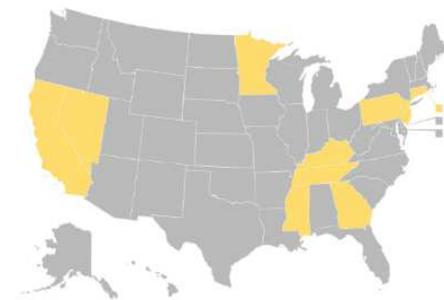
Surveillance of Drug Policy: Legal Data for Evaluation, Policy Analysis and More

Lisbon Addictions Conference, 2019

Scott Burris, JD

Center for Public Health Law Research

Temple University Beasley School of Law



THE
MILBANK QUARTERLY
A MULTIDISCIPLINARY JOURNAL OF POPULATION HEALTH AND HEALTH POLICY

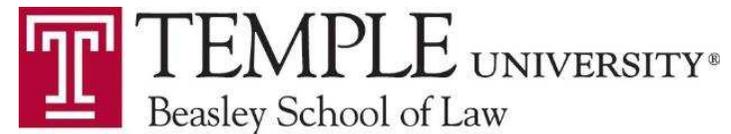
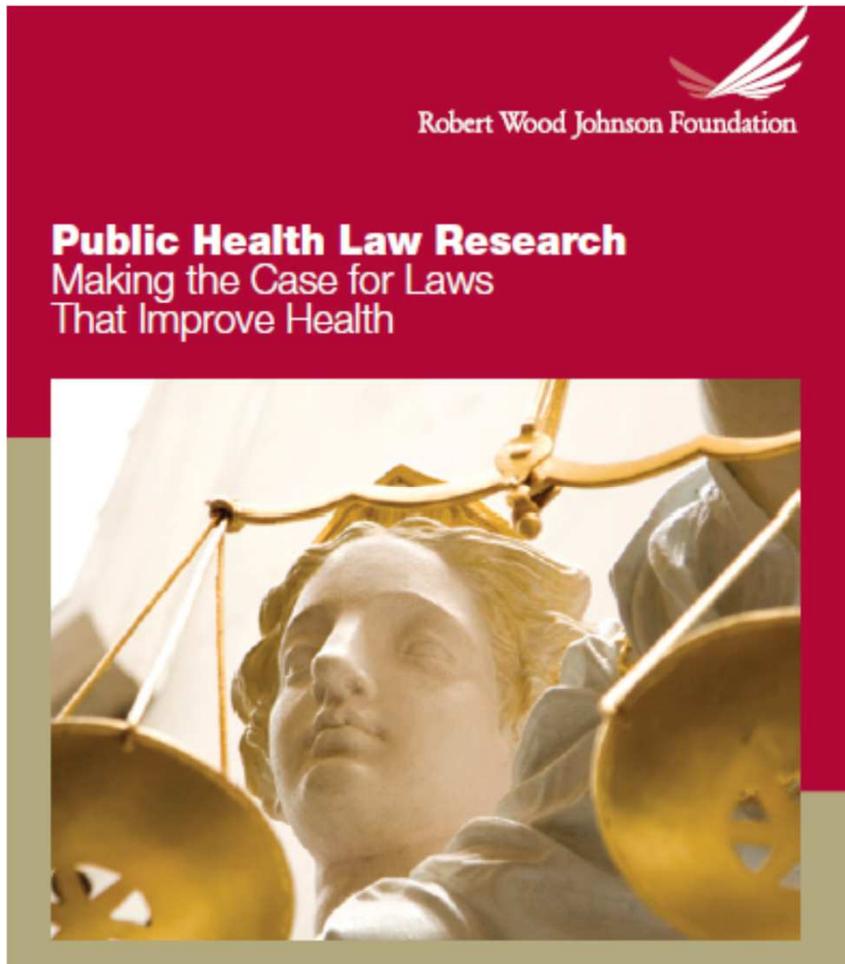
Making the Case for Laws That Improve
Health: A Framework for Public Health Law
Research

SCOTT BURRIS, ALEXANDER C. WAGENAAR,
JEFFREY SWANSON, JENNIFER K. IBRAHIM,
JENNIFER WOOD, and MICHELLE M. MELLO

*Temple University; University of Florida; Duke University; Harvard
University*

Part I: Origins

Public Health Law Research Program, 2009



**2009-16: \$20 million
RWJF national program**

Public Health Law Research (aka Legal Epidemiology)

“The scientific study of the relation of law and legal practices to population health.”

PHLR as normal science

PUBLIC HEALTH LAW Theory and Methods RESEARCH



Alexander C. Wagenaar and Scott Burris • *Editors*

Contents

PART ONE

Framing Public Health Law Research

PART TWO

Understanding How Law Influences Environments and Behavior

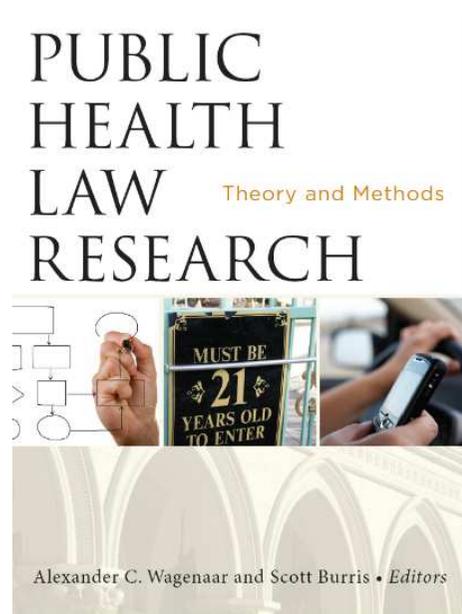
PART THREE

Identifying and Measuring Legal Variables

PART FOUR

Designing Public Health Law Evaluations

Methods and Tools



**POLICY
SURVEILLANCE**
The ongoing
systematic
collection and
analysis of laws
of public health
significance

Consistent methods...

- Reduce research and coding time
- Produce reliable results with known error rate
- Reduce cost of updating
- Are trainable



Measuring Law for Evaluation Research

Charles Tremper¹, Sue Thomas², and
Alexander C. Wagenaar³

Evaluation Review
34(3) 242-266
© The Author(s) 2010
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sagepub.com/journalsPermissions.nav
DOI: 10.1177/0193841X10370018
http://er.sagepub.com
SAGE

The Paradigm Shift: Transforming Text of Law into Numeric data

Syringe Distribution Laws_Data (1) - Excel

FILE HOME INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW

H22 : 0

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
1	jurisdictions	Effective Date	Valid Through	syringedis	sd-iteratio	sederegyns									
2	Alabama	2012-07-01	2017-07-01	1	0	0	0	0	0	0	0	0	0	1	1
3	Alaska	2012-07-01	2017-07-01	1	0	0	0	0	0	0	0	0	0	1	0
4	Arizona	2012-07-01	2017-07-01	1	0	0	0	0	0	0	0	0	0	1	1
5	Arkansas	2011-07-01	2011-07-26	1	0	0	0	0	0	0	0	0	0	1	1
6	Arkansas	2011-07-27	2017-07-01	1	0	0	0	0	0	0	0	0	0	2	1
7	California	2012-01-01	2014-12-31	0	1	0	0	0	0	0	0	0	0	1	1
8	California	2015-01-01	2017-07-01	0	0	0	0	0	1	0	0	0	0	2	1
9	Colorado	2012-07-01	2013-05-09	0	1	0	0	0	0	0	0	0	0	1	1
10	Colorado	2013-05-10	2015-06-30	0	1	0	0	0	0	0	0	0	0	2	1
11	Colorado	2015-07-01	2017-05-29	0	0	0	0	0	1	0	0	0	0	3	1
12	Colorado	2017-05-30	2017-07-01	0	0	0	0	0	1	0	0	0	0	4	1
13	Connecticut	2012-07-01	2015-06-30	0	1	0	0	0	0	0	0	0	0	1	1
14	Connecticut	2015-07-01	2016-09-30	0	0	0	0	0	1	0	0	0	0	2	1
15	Connecticut	2016-10-01	2017-06-30	0	0	0	0	0	1	0	0	0	0	3	1
16	Connecticut	2017-07-01	2017-07-01	0	0	0	0	0	0	0	0	1	0	4	1
17	Delaware	2012-07-01	2013-06-29	0	1	0	0	0	0	0	0	0	0	1	1
18	Delaware	2013-06-30	2014-04-10	1	0	0	0	0	0	0	0	0	0	2	1
19	Delaware	2014-04-11	2015-12-17	0	0	0	0	0	1	0	0	0	0	3	1
20	Delaware	2015-12-18	2016-08-10	0	0	0	0	0	1	0	0	0	0	4	1
21	Delaware	2016-08-11	2017-07-01	0	0	0	0	0	1	0	0	0	0	5	1

Law Atlas (www.lawalas.org)

POLICY SURVEILLANCE

Legal mapping can help policy-makers, advocates and researchers understand what the laws are on a given topic, know how the laws differ over time and across jurisdictions, and provides data so they may evaluate their impact.

More about us



Explore the Law

Access maps, tables, data and reports that describe the current state of health laws and how they have changed over time.

CHOOSE A TOPIC >>



Learning Library

Learn how to create your own policy surveillance and legal mapping projects.

ENTER THE LIBRARY >>



About Us

Learn more about the Policy Surveillance Portal, and our work at the Policy Surveillance Program at Temple University.

LEARN MORE >>

2014: PDAPS (www.pdaps.org)



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PDAPS

Prescription Drug
Abuse Policy System



A source of rigorous legal data for researchers and detailed policy information for the public.

PDAPS is funded by the National Institute on Drug Abuse to track key state laws related to prescription drug abuse. Click on any topic area to reach an interactive page where you can investigate the history and features of the law, or download data and other documentation for research.

 [News](#)

 [Topics](#)

2. Objectives and target audience

2001 objectives :

- collect and display texts of drug laws;
- provide analyses on specific subjects, in order to exchange good practices and inform policymakers.

2006 objectives: “To provide reliable statements on aspects of countries’ drug legislation, and to contribute to analysis and development of tools that help monitor and evaluate drug policies”

2017 EMCDDA Strategy 2025

Strategic objective 1.4

“Support the development, implementation, monitoring and assessment of policies...”



Revising target audience

2001 target audience:

EMCDDA target audience:

- Policymakers
- Practitioners /
Researchers
- Media / general public

2017 EMCDDA Strategy 2025

Key stakeholders:

- the EU institutions
- National decision/ policymakers
- professionals in the field.



Answering needs

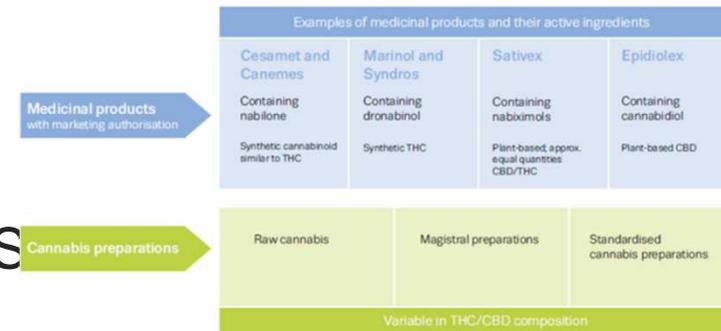
Increasing emphasis on:

- Comparability across Europe
- Common and accurate definitions of concepts, for clarity in public and policy debates

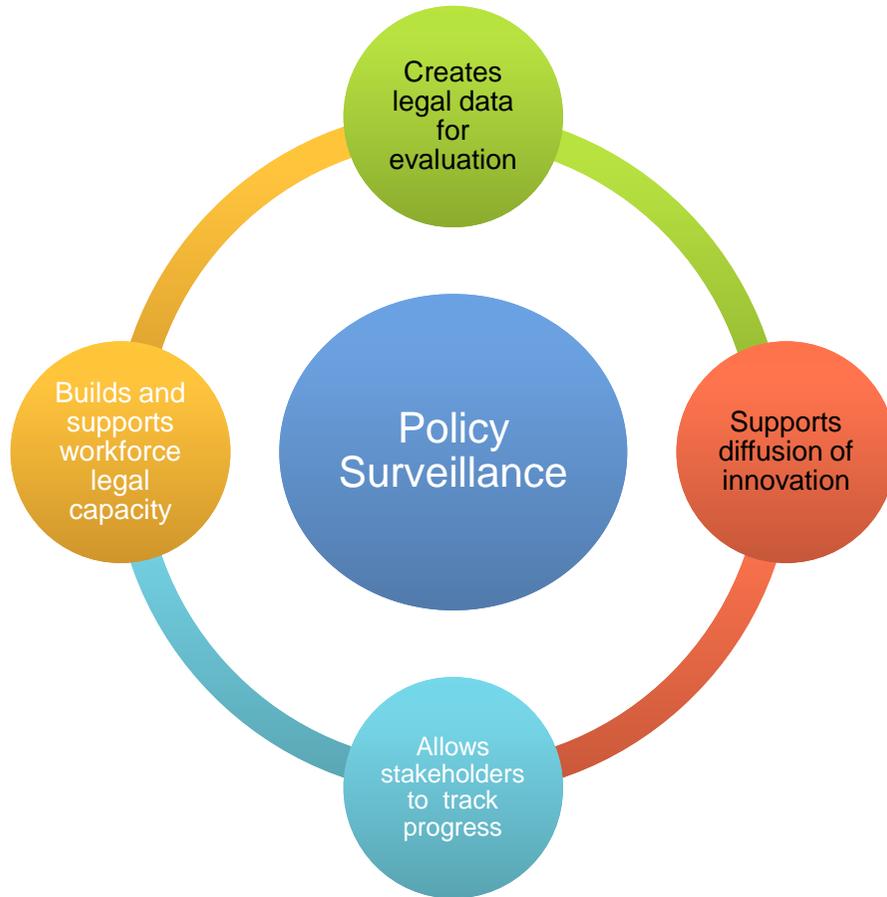


- ~~TOUGHEST DRUG LAWS IN EUROPE~~
- ~~DECRIMINALISATION = LEGALISATION~~
- ~~ALTERNATIVES TO PRISON~~
- ~~ILLEGAL DRUGS - LEGAL HIGHS~~
- ~~MEDICAL CANNABIS~~
- ~~LEGALISED CANNABIS~~

Cannabis and cannabinoids used for medical purposes — a broad typology



Part II: Objectives and Target Audiences



We Can Use Law Strategically, Scientifically and Effectively

We know law has powerful health effects because we have great science

Tobacco control

Road safety

Alcohol control

AR ANNUAL REVIEWS
For Librarians & Agents For Authors

JOURNALS A-Z **JOURNAL INFO** **PRICING & SUBSCRIPTIONS**

Home / Annual Review of Law and Social Science / Volume 9, 2013 / Burris, pp 95-117

Legal Regulation of Health-Related Behavior: A Half Century of Public Health Law Research

Annual Review of Law and Social Science
Vol. 9:95-117 (Volume publication date November 2013)
First published online as a Review in Advance on August 14, 2013
<https://doi.org/10.1146/annurev-lawsocsci-102612-134011>

Scott Burris and Evan Anderson

Yet unhealthy law is left to persistently fail...

Controlled Substances Act



Long title An Act to amend the Public Health Service Act and other laws to provide increased research into, and prevention of, drug abuse and drug dependence; to provide for treatment and rehabilitation of drug abusers and drug dependent persons; and to strengthen existing law enforcement authority in the field of drug abuse.

Acronyms CSA
(colloquial)

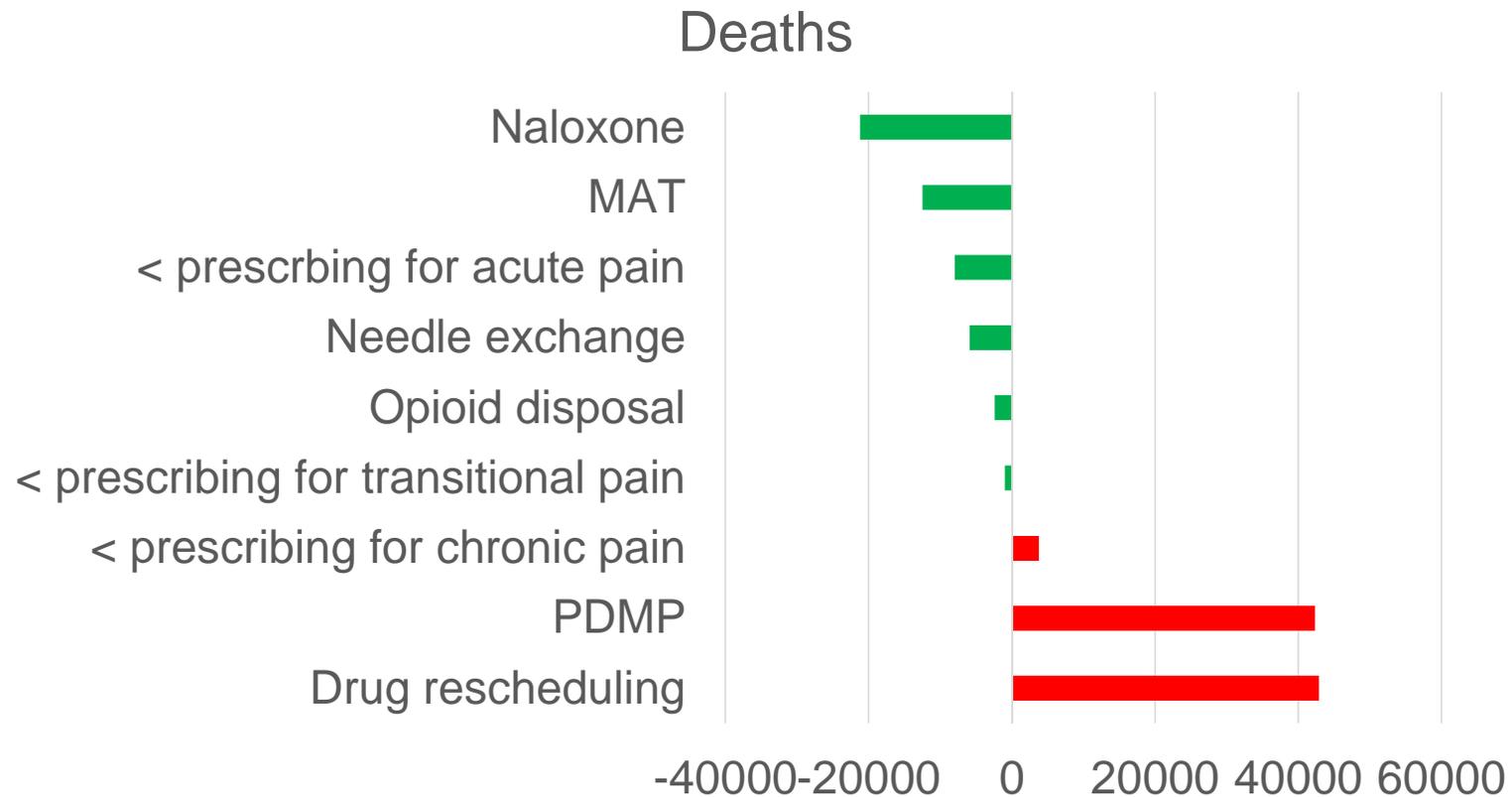
Enacted by the 91st United States Congress

Effective May 1, 1971

Passing a
law ≠
solving a
problem

And allowed to create iatrogenic harm

Predicted Impact of Policy Interventions on Opioid Deaths in Next Ten Years

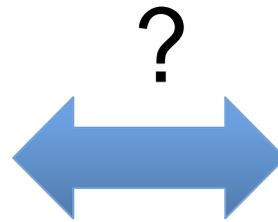


Pitt, A. L., Humphreys, K., & Brandeau, M. L. Modeling Health Benefits and Harms of Public Policy Responses to the US Opioid Epidemic. *American Journal of Public Health*, 0(0), e1-e7. doi: 10.2105/ajph.2018.304590

We're largely in groping in the dark

Law is not developed, implemented and evaluated strategically or systematically. Typically, we don't know:

- Whether and how it is working
- Whether it has side effects
- Where it has been adopted



But big challenges to effectively using law in public health – and drug control...

How do we know the impact of law?

How do we ensure the widespread adoption of laws that support health and safety?

How do we engage public health and drug control systems in public health law evaluation, implementation and diffusion?

Drug Policy Evaluation: Not Enough Not Good Enough

1. Lack of clear definition of comparative policy analysis
2. Problems in the specification of the policy under study
3. [Insufficient use of theory]

Challenges of working
in a multidisciplinary
field

See also Meacham, M., Zobel, F., Hughes, B., & Simon, R. (2010). Review of methodologies of evaluating effects of drug-related legal changes. Lisbon: EMCDDA.



Contents lists available at ScienceDirect

International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo



Research paper

Comparative policy analysis for alcohol and drugs: Current state of the field

Alison Ritter^{a,*}, Michael Livingston^b, Jenny Chalmers^a, Lynda Berends^c, Peter Reuter^d

^aDrug Policy Modelling Program, National Drug and Alcohol Research Centre, UNSW, Sydney, NSW 2052, Australia

^bCentre for Alcohol Policy Research (CAPR), Department of Public Health, School of Psychology and Public Health, La Trobe University, Melbourne, VIC 3000, Australia

^cCentre for Health and Social Research, Australian Catholic University, Melbourne, VIC 3000, Australia

^dSchool of Public Policy and Department of Criminology, University of Maryland, College Park, MD 20742, USA

ARTICLE INFO

Article history:

Received 29 July 2015

Received in revised form 19 January 2016

Accepted 1 February 2016

Keywords:

Comparative policy analysis

Alcohol policy

Drugs policy

Methods

ABSTRACT

Background: A central policy research question concerns the extent to which specific policies produce certain effects – and cross-national (or between state/province) comparisons appear to be an ideal way to answer such a question. This paper explores the current state of comparative policy analysis (CPA) with respect to alcohol and drugs policies.

Methods: We created a database of journal articles published between 2010 and 2014 as the body of CPA work for analysis. We used this database of 57 articles to clarify, extract and analyse the ways in which CPA has been defined. Quantitative and qualitative analysis of the CPA methods employed, the policy areas that have been studied, and differences between alcohol CPA and drug CPA are explored.

Results: There is a lack of clear definition as to what counts as a CPA. The two criteria for a CPA (explicit study of a policy, and comparison across two or more geographic locations), exclude descriptive epidemiology and single state comparisons. With the strict definition, most CPAs were with reference to alcohol (42%), although the most common policy to be analysed was medical cannabis (23%). The vast majority of papers undertook quantitative data analysis, with a variety of advanced statistical methods. We identified five approaches to the policy specification: classification or categorical coding of policy as present or absent; the use of an index; implied policy differences; described policy difference and data-driven policy coding. Each of these has limitations, but perhaps the most common limitation was the inability for the method to account for the differences between policy-as-stated versus policy-as-implemented.

The “First” Problem is with Measuring Law



Contents lists available at ScienceDirect

International Journal of Drug Policy

journal homepage: www.elsevier.com/locate/drugpo



Research paper

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23/57 classification studies were simple cross-sectional Y/N classifications?!??

“crude” as to content, time and implementation

Most of the remainder were methodologically muddled.

- See *Burris, S. (2017). Theory and methods in comparative drug and alcohol policy research: Response to a review of the literature. International Journal of Drug Policy, 41, 126-131.*

Better Way: Not New

A project of the National Institute on Alcohol Abuse and Alcoholism

Search



Welcome to the Alcohol Policy Information System

The Alcohol Policy Information System (APIS) provides detailed information on a wide variety of alcohol-related policies in the United States at both State and Federal levels. Detailed state-by-state information is available for the 35 policies listed below. APIS also provides a variety of informational resources of interest to alcohol policy researchers and others involved with alcohol policy issues.

Choose a topic below to see information on a specific policy area:

- Taxation**
 - Beer Taxes
 - Wine Taxes
 - Distilled Spirits Taxes
- Underage Drinking**
 - Possession/Consumption/Internal Possession
 - Purchase
 - Furnishing
 - Age of Server-On-Premises
 - Age of Seller-Off-Premises
 - Use/Lose: Driving Privileges
 - Hosting Underage Drinking Parties
 - False Identification
- Alcohol Beverages Pricing**
 - Drink Specials
 - Wholesale Pricing Practices and Restrictions
- Blood Alcohol Concentration (BAC) Limits**
 - Adult Drivers
 - Drivers Under 21
 - Recreational Boaters
- Transportation**
 - Open Container
 - Vehicular Insurance: Losses due to Intoxication
- Retail Sales**
 - Keg Registration
 - Beverage Service Training
 - Sunday Sales
- Alcohol Control Systems**
 - Beer-Retail
 - Beer-Wholesale
 - Wine-Retail
 - Wine-Wholesale
 - Distilled Spirits-Retail
 - Distilled Spirits-Wholesale
- Pregnancy and Alcohol**
 - Warning Signs: Drinking During Pregnancy
 - Criminal Prosecution
 - Civil Commitment
 - Priority Treatment
 - Child Abuse/Neglect
 - Reporting Requirements
- Health Care Services and Financing**
 - Health Insurance: Losses due to Intoxication ("UPPL")
 - Health Insurance Parity



Home

APIS Policy Topics

- Underage Drinking
- Maps & Charts
- About APIS
- About Alcohol Policy
- What's New
- Policy Changes at a Glance
- Change Log
- APIS Resources
- Contact APIS

Referenced
in > 100
peer-
reviewed
studies and
analyses

Research papers using the data: 150 from PDAPS and Law Atlas since 2015



Effects of state-level Earned Income Tax Credit laws in the U.S. on maternal health behaviors and infant health outcomes
Sara Markowitz ^{a, b}, Kelli A. Komro ^{b, c, d}, Melvin D. Livingston ^{c, d}, Otto Lenhart ^d, Alexander C. Wagenaar ^{b, d}



State naloxone access laws are associated with an increase in the number of naloxone prescriptions dispensed in retail pharmacies
Jing Xu ^a, Corey S. Davis ^{b, c}, Marisa Cruz ^c, Peter Lurie ^d
^a US Food and Drug Administration, 10903 New Hampshire Ave, Silver Spring, MD, 20993, USA
^b Network for Public Health Law, 3701 Wilshire Blvd, #750, Los Angeles, CA, 90010, USA
^c US Food and Drug Administration, 10903 New Hampshire Avenue, Silver Spring, MD, 20993, USA
^d Center for Science in the Public Interest, 1220 L St. N.W., Suite 300, Washington, DC, 20005, USA

Health Economics
Explore this journal >

RESEARCH ARTICLE

The effect of state laws designed to prevent nonmedical prescription opioid use on overdose deaths and treatment
Ioana Popovici [✉], Johanna Catherine Maclean, Bushra Hijazi, Sharmini Radakrishnan
First published: 18 July 2017 Full publication history

ADDICTION SSA SOCIETY FOR THE STUDY OF ADDICTION
Explore this journal >

Research Report

Mapping medical marijuana: state laws regulating patients, product safety, supply chains and dispensaries, 2017
Sarah B. Kileger, Abraham Gutman, Leslie Allen, Rosalie Liccardo Pacula, Jennifer K. Ibrahim, Scott Burris [✉]

WEB FIRST

By Stephen W. Patrick, Carrie E. Fry, Timothy F. Jones, and Melinda B. Buntin

Implementation Of Prescription Drug Monitoring Programs Associated With Reductions In Opioid-Related Death Rates
DOI: 10.1177/0898010116666666
HEALTH AFFAIRS 35, NO. 7 (2016) - ©2016 Project HOPE - The People-to-People Health Foundation, Inc.

AJPH RESEARCH

The Effect of an Increased Minimum Wage on Infant Mortality and Birth Weight
Kelli A. Komro, PhD, MPH, Melvin D. Livingston, PhD, Sara Markowitz, PhD, and Alexander C. Wagenaar, PhD

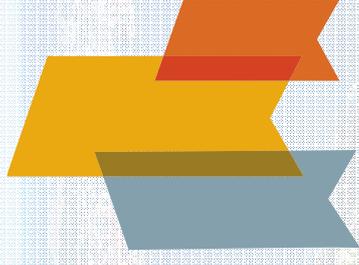
SCIENCE AND PRACTICE

Journal of the American Pharmacists Association xxx (2017) 1-9

Contents lists available at ScienceDirect
Journal of the American Pharmacists Association
journal homepage: www.japha.org
APhA

RESEARCH

Expanding state laws and a growing role for pharmacists in vaccination services
Cason D. Schmit ^{*}, Matthew S. Penn



cityhealth

AN INITIATIVE OF



de Beaumont
HOSPITALS



KAISER PERMANENTE®





SCORING CITIES' POLICIES

THREE CORE STEPS:

- 1** Collect and code all relevant laws, statutes, executive orders and regulations in each of the 40 cities.
- 2** Work with leading national issue experts to set scoring criteria; sort policies into gold, silver, bronze and no-medal categories.
- 3** Provide city leaders with an opportunity to vet their assessments for accuracy.

Naming, Ranking ... Incentivizing

THE **POLICY**
SURVEILLANCE
PROGRAM
A LawAtlas Project



AN INITIATIVE OF

the de Beaumont Foundation + Kaiser Permanente

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[JOIN US](#)

WE BELIEVE

Every person, in every city,
deserves to live the
healthiest possible life

Policy is one of our most powerful tools to improve people's lives and make cities thrive.

How's Philadelphia, PA Doing?

Philadelphia receives a silver in smoke free indoor air.

	 Bronze	 Silver	 Gold
Total number of met criteria	Total 2 out of 4 criteria listed below	Total 3 out of 4 criteria listed below	Total 4 out of 4 criteria listed below
1. Smoking is banned in non-hospitality workplaces, including workplaces, child care and long term care facilities			
2. Smoking is banned in public places			
3. Smoking is banned in restaurants			
4. Smoking is banned in bars			



CITIES THAT MOVED UP IN 2018

10 CITIES WITH IMPROVED OVERALL MEDAL STATUS *from 2017 to 2018*

- 
- Albuquerque
 - Austin
 - Kansas City
 - Long Beach
 - Louisville
 - Milwaukee
 - Portland
 - San Antonio
 - San Jose
 - Seattle

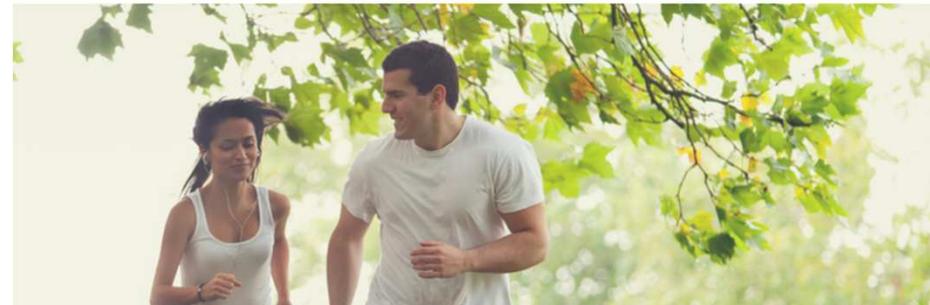


POLICY MEDALS

**In just one
year, cities
earned 24 new
policy medals.**



**24 NEW
MEDALS
IN 1 YEAR**



3. Contents/Scope & functions

EMCDDA – The drug problem in Europe

- Not alcohol or tobacco
- New Psychoactive Substances
- Misuse of medicines?



- Europe – The European Union, Norway, Turkey
- + Candidate and potential candidate countries
 - + Neighbourhood countries
 - + International relevance; OAS, WHO...
 - + Common tools?



Legal analysis over the years

- What was the motivation to pass or change the law? **Objective**
- How was it drafted, including political compromises to get approval? **Negotiation**
- What does the text of the law say? **Legal text**
- How is the law understood and implemented by different people and institutions? **Implementation**
- What is the final effect on society? **Evaluation**





Penalties for drug law offences in Europe at a glance

On this page you can examine and compare the penalties, or rehabilitative responses, for the core offences of drug use, possession for personal use, and supply-related offences, across countries in Europe. It also allows you to see how those penalties vary according to the type or quantity of the drug, and the addiction or recidivism of the offender.

[Download data](#)
Click here to learn more about the data used on this page.

Select countries

Select up to 3 countries to compare.

- Austria Belgium
- Bulgaria Croatia
- Cyprus Czechia
- Denmark Estonia
- Finland France
- Germany Greece
- Hungary Ireland Italy

Penalties at a glance

- Drug use
- Possession
- Supply

Drugs controlled

Penalties for possession of drugs for personal use

All countries in Europe specify possession of drugs for personal use as an offence – though it may be defined in different ways.

Select one or more questions and at least one country.

- What is the punishment for the offence?
- What are the alternatives to punishment for the offence?
- Penalty varies by drug?
- Penalty varies by quantity?
- Penalty (response) varies for addiction?
- Penalty varies for recidivism?



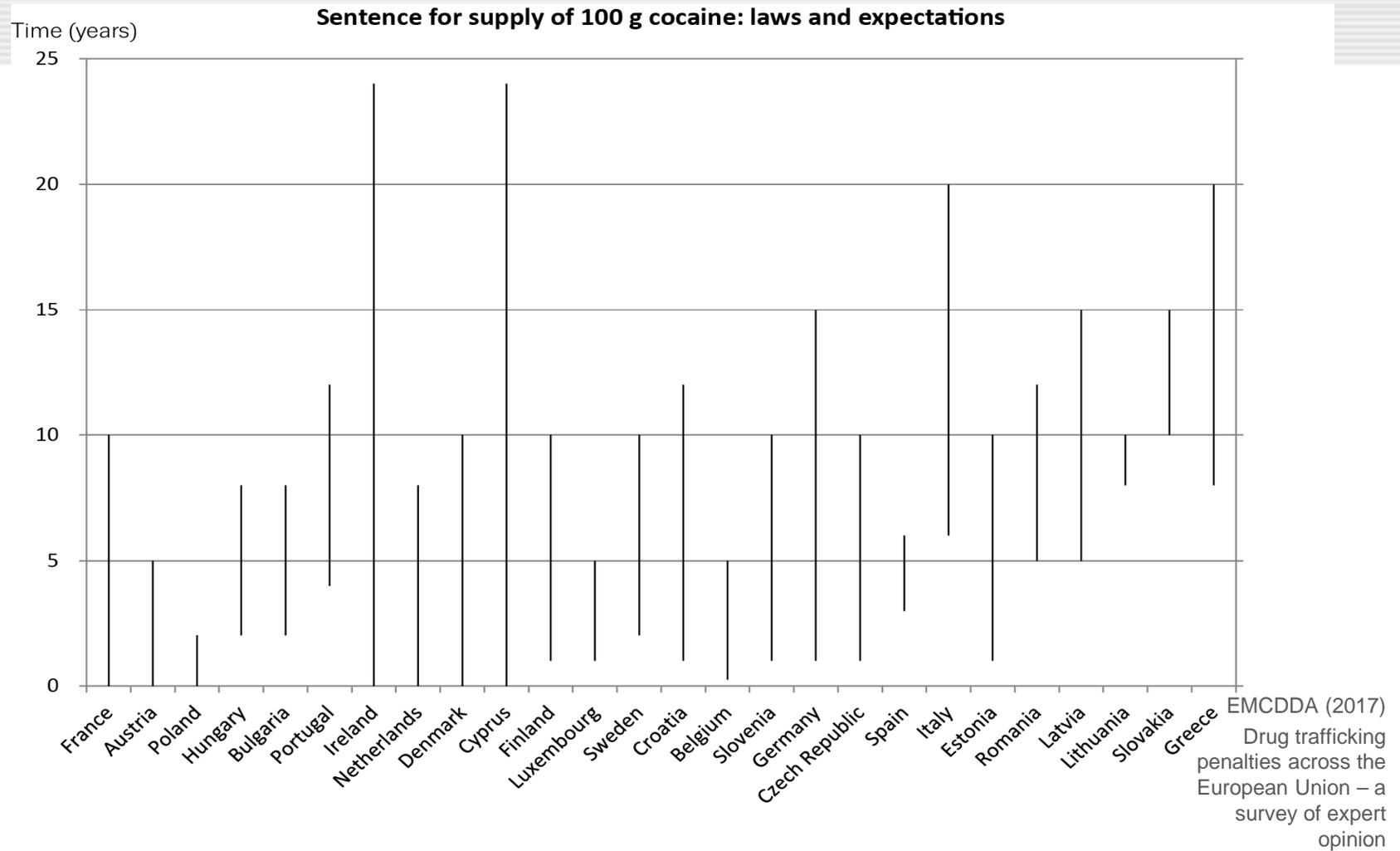
Select one or more questions and at least one country.

- What is the punishment for the offence?
 What are the alternatives to punishment for the offence?
 Penalty varies by drug?
 Penalty varies by quantity?
 Penalty (response) varies for addiction?
 Penalty varies for recidivism?

Question	Cyprus	Czechia	Netherlands
What is the punishment for the offence?	<p>Cyprus</p> <p>Possession of controlled drugs for personal use (defined by quantity limits) is a criminal offence punishable by up to 12 years imprisonment (for Class A drugs), up to 8 years imprisonment (for Class B drugs), up to 4 years (for Class C drugs) . No more than one year in prison for a first time offender aged under 25. The Narcotic Drugs and Psychotropic Substances Law of 1977, s.6(2), s.30(1), s.30(2), s.30A, Schedule III.</p>	<p>Czechia</p> <p>Possession of small amount of drugs for private use is a misdemeanour punished by a fine up to 15,000 CZK (Act of Violations). Possession of drugs for personal use in 'a quantity greater than small' is punishable under the Penal Code, but varies by drug. Possession of cannabis (or other substances containing THC) is punished by up to 1 year imprisonment; possession of other drugs is punished by up to 2 years imprisonment. The imprisonment extends to 6 months-5 years if the</p>	<p>Netherlands</p> <p>Possession of drugs is punishable by up to 1 year prison for drugs included in List I ('unacceptable risk') or up to 1 month prison for drugs included in List II ('other drugs'). However, according to prosecutor guidelines, possession of cannabis products up to 5 grams will in principle incur a police dismissal, and the offence remains not prosecuted if it refers to possession for personal use of cannabis products up to 30 grams. Opium Act, arts. 2C, 3C, 10(5), Opium Acts Directive,</p>

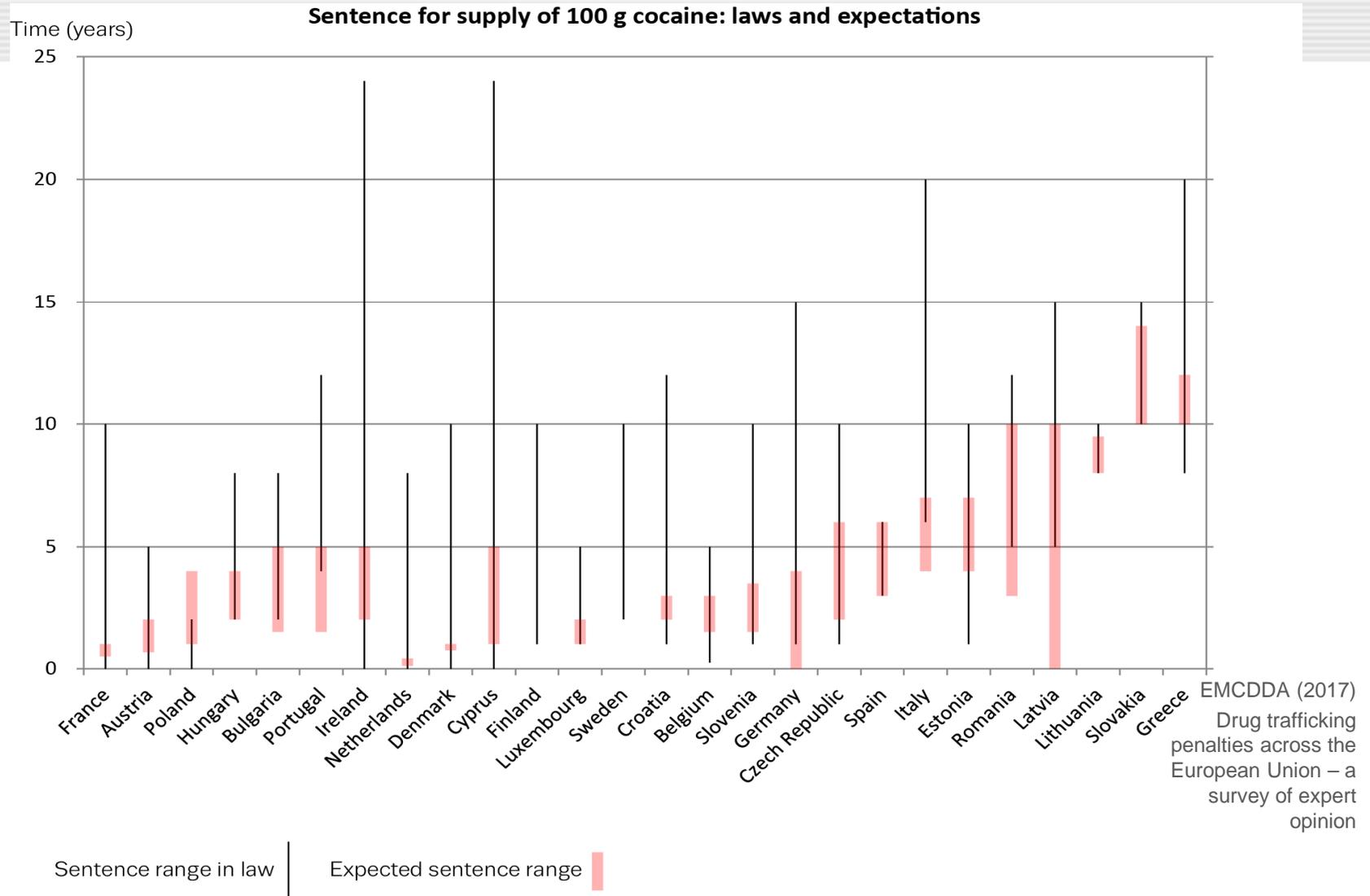


Supply of 100g cocaine: laws



Sentence range in law

Supply of 100g cocaine: laws and expectations



Estonia

Country Drug Report 2019

Share

← Estonia main page

Sections

Drug laws and drug law offences

National drug laws

The Act on Narcotic Drugs and Psychotropic Substances and Precursors Thereof regulates the field of narcotics and psychotropic substances in Estonia. Under this law, unauthorised consumption of narcotic drug or psychotropic substances without a prescription, or illegal manufacture, acquisition or possession of small quantities of any narcotic drugs or psychotropic substances, is punishable by a fine of up to EUR 1 200 (usually determined by the police) or by administrative detention for up to 30 days. However, proceedings for misdemeanours may be suspended for reasons of expediency.

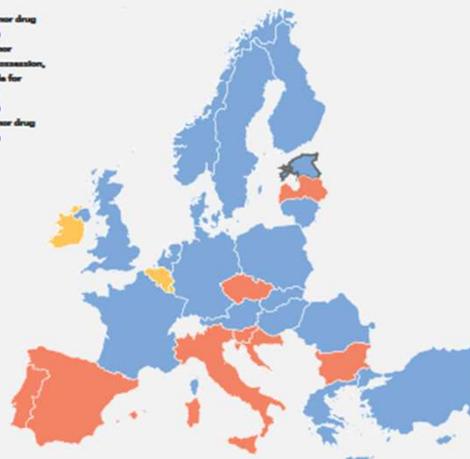
Any act of illegal possession or dealing in drugs not intended solely for personal use is considered a criminal offence, regardless of the type and amount of illicit drug. Activities such as illegal manufacture, acquisition, theft or robbery, storage, transport or delivery of narcotic drugs or psychotropic substances with the intent to supply are punishable by up to 3 years' imprisonment for the smallest quantities, with sentences increasing to 6-20 years' imprisonment, or even life, depending on the quantities involved and other defined aggravating circumstances, such as organised crime.

Since 2011, treatment may be offered to drug-dependent offenders as an alternative to prison only if the offender is sentenced to imprisonment for a period of 6 months to 2 years and agrees to undergo the treatment course.

Historically, new psychoactive substances (NPS) were primarily regulated by amending the four schedules of narcotic and psychotropic substances to add each new substance individually. In 2013, Schedule V was added to regulate trade in NPS with legitimate industrial uses, such as gamma-butyrolactone (GBL) and 1,4-butanediol (1,4-BD). The sale of substances in this schedule is an offence when there is the intention to cause intoxication. In 2016, Schedule VI was added; it includes 15 substance groups. Substances belonging to these groups, as well as their isomers, salts and ethers, do not need to be listed individually and are controlled automatically.

Legal penalties: the possibility of incarceration for possession of drugs for personal use (minor offence)

- For any minor drug possession
- Not for minor controlled possession, but possible for other drug possession
- Not for other drug possession



Country legal profiles

Used to be 7 pages,
now about 350 words.

Rationalised - now more
integrated into
EMCDDA core website.



Topics in focus; other outputs

EMCDDA PAPERS

Alternatives to punishment for drug-using offenders



Cannabis and driving

Questions and answers for policymaking
May 2018

TECHNICAL REPORT Drug trafficking penalties across the European Union a survey of expert opinion



→ Personal possession

- Belgium
- Czechia
- Germany
- Estonia
- Spain
- Italy**
- Cyprus
- Lithuania 1
- Lithuania 2

Threshold quantities for personal possession offences

Italy

Definition of quantity in law / DPR309/90 Art 72-75; Ministry of Health Decree of 11 April guidelines

Threshold between:	Non-criminal
Drugs listed and/or general rule?	Extensive list
Cannabis	THC 1g (AP)
Ecstasy	0.75g
Heroin	0.25g
Cocaine	0.75g

Register for email updates

Italy and Sweden: court decisions on low-THC cannabis products (17.07.2019)

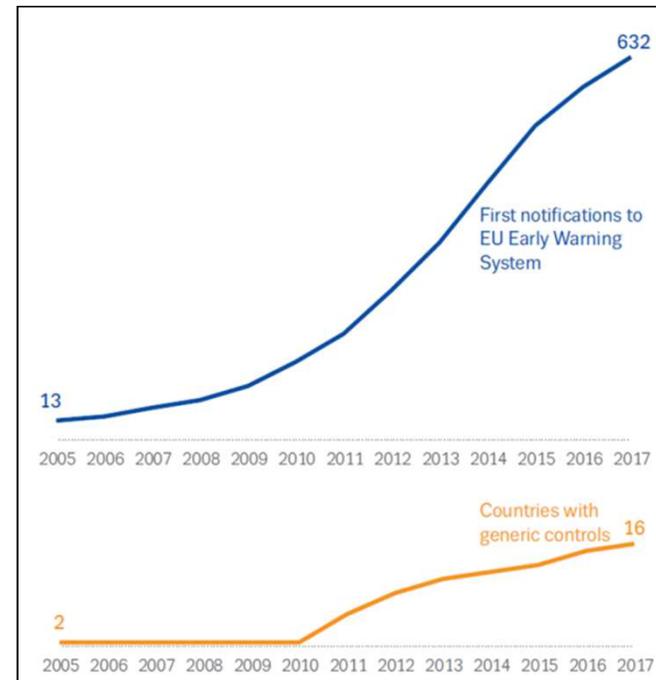
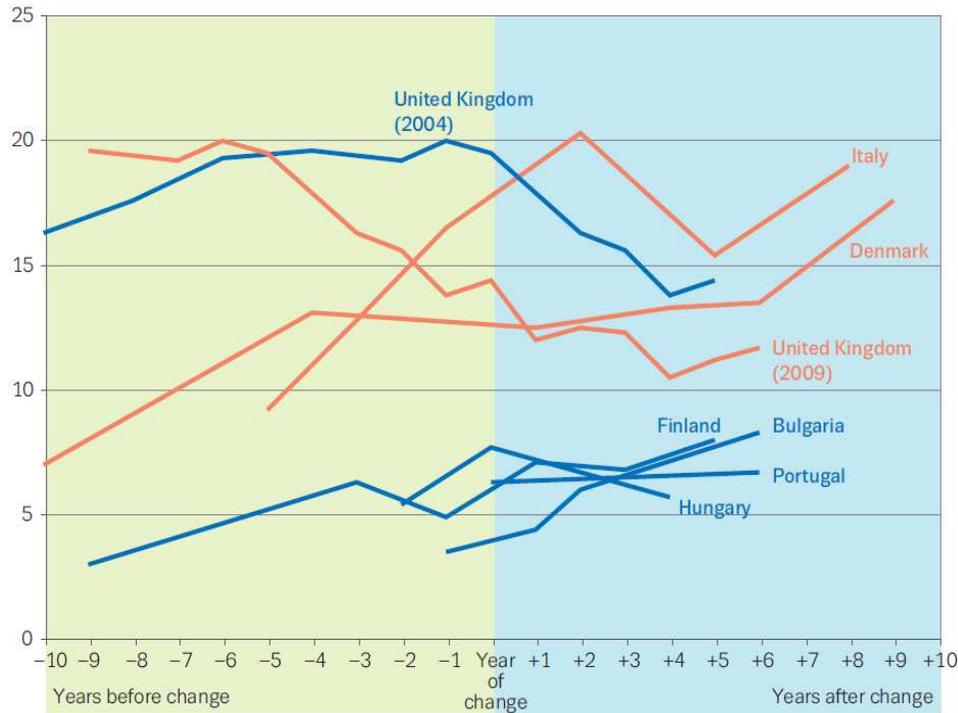
WHO recommends rescheduling of cannabis (25.03.2019)

Cannabis control and the right to privacy (3.01.2019)

Colorado publishes latest statistics on impact of cannabis legalisation



Laws; (in)dependent variable?



Mutual legal consultations: quid pro quo

Rapid information requests between the Legal and Policy Correspondents, from one country to others:

- National THC limits in food
- Is this substance under your drug laws (latest N₂O)
- Are cannabis seeds permitted for sale
- How to legally establish a drug consumption room
- Do your drug laws include sports doping substances
- Do treatment orders include Cognitive Behavioural Therapy
-





**Research Protocol for
Good Samaritan Overdose
Prevention Laws**

Prepared by Legal Science, LLC

August 2018

Part III: Scope and Functions

Access to the Granular Details and the text itself

Colorado

2008 7/1/11 2017 2/1/17

2/1/

Sources in effect over 1/1/17 - 2/1/17

medical-marijuana-patient-related-laws.rows - 2017-01-01 05:00:00 - 2017-02-01 05:00:00 - Colorado -

Effective: 1/1/17 - Through: 2/1/17

Colo. Const. Art. XVIII, Section 14 Medical use of marijuana for persons suffering from debilitating medical conditions

(1) As used in this section, these terms are defined as follows:

(a) "Debilitating medical condition" means:

(I) Cancer, glaucoma, positive status for human immunodeficiency virus, or acquired immune deficiency syndrome, or treatment for such conditions;

(II) A chronic or debilitating disease or medical condition, or treatment for such conditions, which produces, for a specific patient, one or more of the following, and for which, in the

EXPLORE FILTER RESET

1. Does the state have a law authorizing adults to use medical marijuana? Explore

1.1. Does the state law explicitly authorize local jurisdictions to enact laws related to medical marijuana? Explore

1.2. What is the effective date of the first medical marijuana law? Explore

2. What are the qualifying disease diagnoses for medical marijuana use? Explore

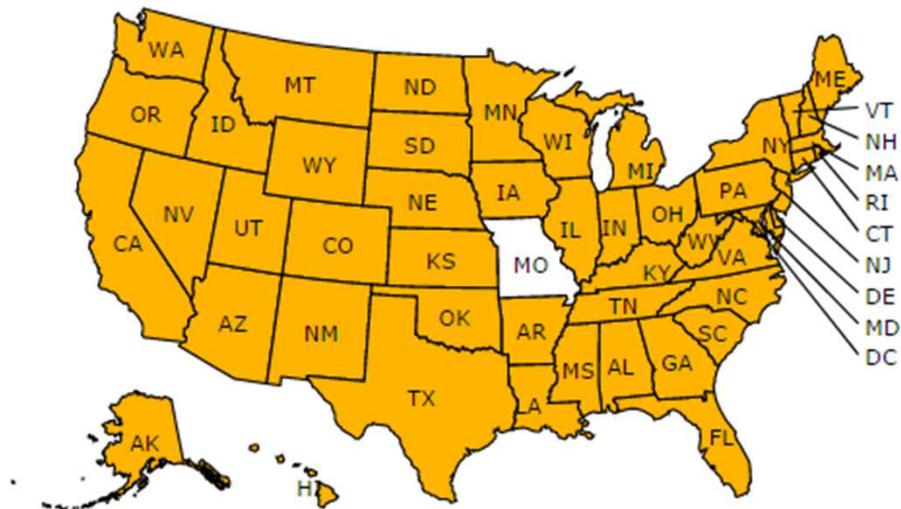
3. What are the qualifying symptom diagnoses for medical marijuana use? Explore

4. What are the state requirements for becoming a qualifying patient for medical marijuana use? Explore

Search:

Detailed Comparisons

PDMP Authorized



2016 | 50 state(s) meets the criteria.

Prescribers required to check

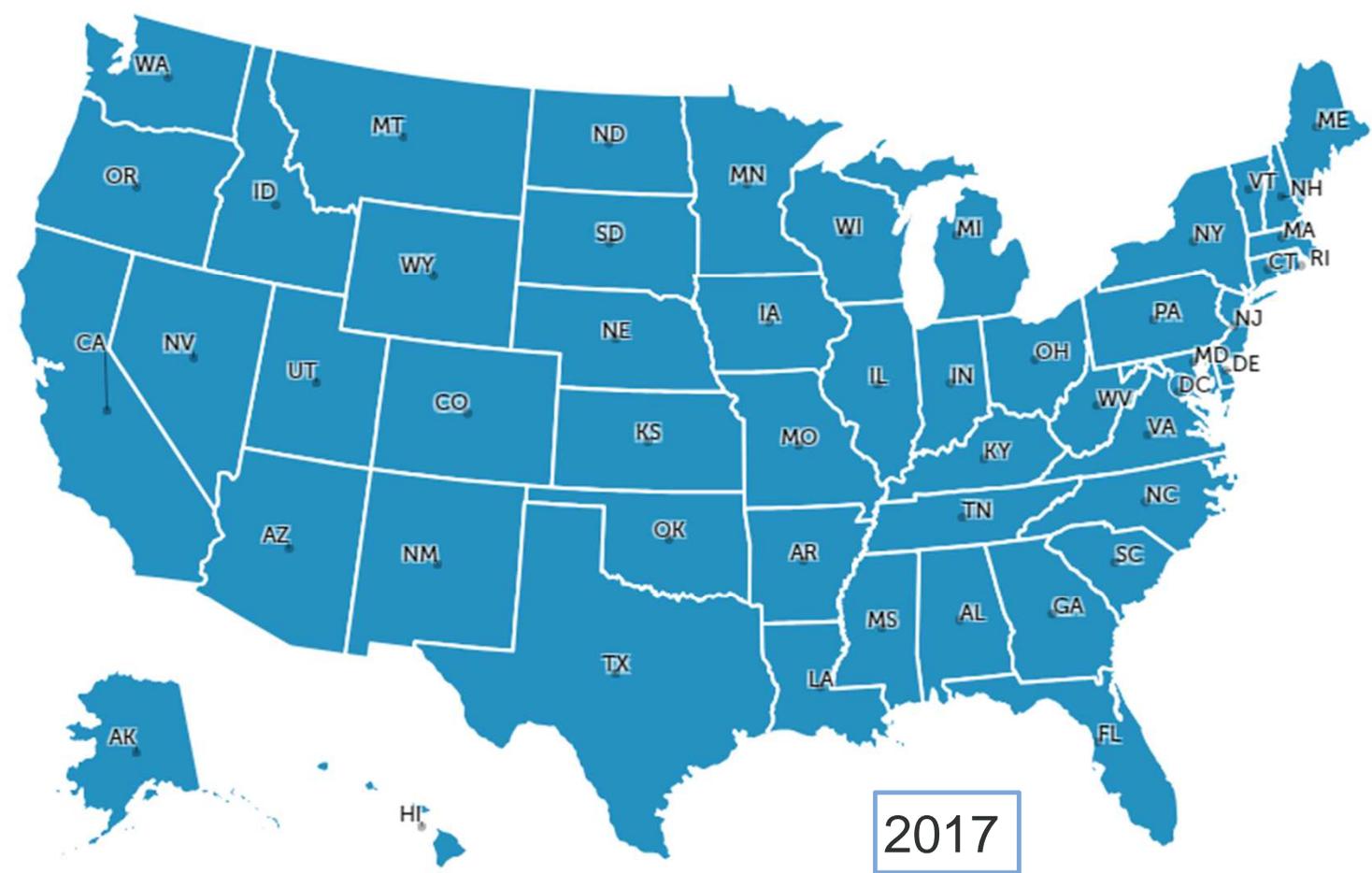


2016 | 17 state(s) meets the criteria.

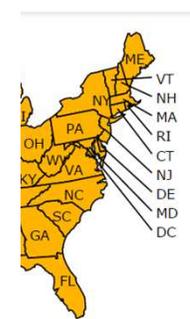
Tracking Trends: Naloxone Laws



2001



2017



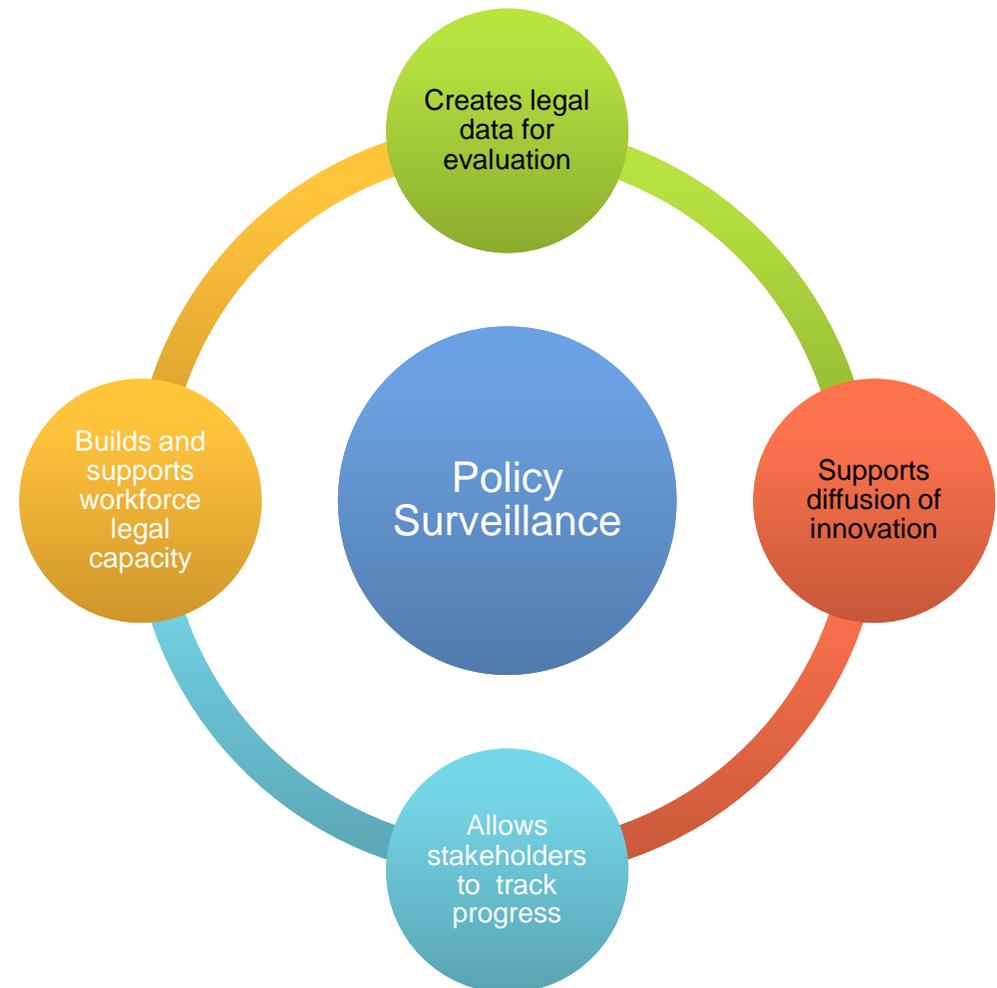
PDAPS Datasets

TOPIC	FEATURES MEASURED	DATE RANGE
Drug-Induced Homicide Laws	>5	2018
Involuntary Commitment for Substance Use	>20	2018-19
Expanded Access to Naloxone	>25	2001-17
Prescription Drug Monitoring Programs	>50	1998-2016
Recreational Marijuana	>20	2014-17
Medical Marijuana	>70	2014-17
Good Samaritan 911	>5	2007-18
Direct Dispensing of Controlled Substances	>15	2017
Opioid Prescribing Guidelines	>15	2017
Pain Management Clinic Laws	>30	2006-18
Drugged Driving Laws	>15	2006-16
Methadone Laws	>15	2006-15
MAT in State Prisons	3	2019
Medicaid Coverage of MAT	>5	2019
Effects of Incarceration on Medicaid Status	>5	2019

Law as Data: Changing the Value Equation

Four Pillars of Greater Efficiency:

1. **Tightly define scope and key features to measure.**
2. **Use transparent, reproducible and credible methods to turn text of law into quantitative data**
3. **Reduce costs and increase productivity through technology**
4. **Produce data with multiple uses**



Technology: Software Designed for Legal Mapping

The screenshot displays a software interface for legal mapping. On the left, a panel titled "International Tobacco Control Laws" shows a date range from 12/1/2008 to 3/1/2016 for the country of New Zealand. Below this is a timeline visualization and a "Questions" section with a progress bar at 3/3. A list of categories includes "Long-term healthcare facilities" (checked), "Restaurants", "Bars", and "Other". A "Citations" section allows dragging tags into the question title, with "Smoke-free Environments Act 1990" shown as an example. The main area displays the "Smoke-free Environments Act 1990" with a rich text editor toolbar and a list of legal provisions. A specific provision is highlighted in light blue, and a red arrow points from the "Long-term healthcare facilities" checkbox in the "Questions" panel to this highlighted text. A right-hand "Contents" panel lists the document's structure.

International Tobacco Control Laws

12/1/2008 → 3/1/2016
(country) New Zealand

Dec 2008 Oct 2009 Sep 2010 Aug 2011 Jul 2012 Jun 2013 May 2014 Apr 2015 Mar 2016

New Zealand 1 Ster...

Dataset Home Edit Record Save Record

Questions 3/3

- Long-term healthcare facilities
- Restaurants
- Bars
- Other

Citations (Drag citation tags in the source text and drop onto question title)

Smoke-free Environments Act 1990,

Smoke-free Environments Act 1990

12/1/2008 - 3/1/2016 | Version 1 | Managed by: sterling

← → B I [List] [Image] [Link] [Print] [Share] [Save] Saved

(c) since last giving the employer notice to that effect, none of the employees and volunteers who use it regularly or from time to time has given the employer written notice that he or she—

(i) no longer wishes the employer to permit smoking in it; or

(ii) now objects to other employees and volunteers smoking in it.

6 Dedicated smoking rooms in hospital care institutions, residential disability care institutions, and rest homes

(1) An employer may permit smoking by patients or residents of a workplace that is, or is part of, a hospital care institution, a residential disability care institution, or a rest home if

(a) the smoking takes place only in 1 or more dedicated smoking rooms; and

(b) each dedicated smoking room is equipped with or connected to a mechanical ventilation system to which subsection

(2) applies; and

(c) the employer has taken all reasonably practicable steps to minimise the escape of smoke from the dedicated smoking rooms into any part of the workplace that is not a dedicated smoking room; and

(d) for each dedicated smoking room, there is available for patients or residents who wish to

Contents

- Smoke-free Environments Act 1990
- Smoke free law
- Smoking prohibition
- long term healthcare

Legal Mapping and Evaluation Training

Learning Library

The Learning Library contains eight training modules that teach skills and competencies needed to complete policy surveillance and legal mapping projects.

The modules include detailed instructions, as well as slide decks and links to tools and resources.

We recommend beginning with Module 1 and working through the modules sequentially. The modules are:

- **Module 1:** Introduction to the Policy Surveillance Program, Policy Surveillance and Legal Mapping Techniques
- **Module 2:** Defining the Scope of the Project and Conducting Background Research
- **Module 3:** Question Development
- **Module 4:** Collecting and Building the Law
- **Module 5:** Coding the Law
- **Module 6:** Quality Control
- **Module 7:** Publication and Dissemination
- **Module 8:** Tracking and Updating the Law

Monthly Webinars

Join a monthly webinar to learn introductory and advanced policy surveillance methods. [Learn more >>](#)

Policy Surveillance Summer Institute 2018

Save the date for June 7-8, 2018, for the 3rd Policy Surveillance Summer Institute where attendees will learn introductory and advanced policy surveillance methods. [Learn more >>](#)

The Learning Library was developed using funding from the Robert Wood Johnson Foundation, with modules supported in part by the Centers for Disease Control and Prevention and ChangeLab Solutions under Cooperative Agreement Number NU38OT000141. The views expressed in written materials or publications and by the speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

www.LawAtlas.org

[Go to Module 1](#)

PUBLIC HEALTH LAW ACADEMY

Introduction to Public Health Law

Hot Topics in Public Health Law

Legal Epidemiology

Introduction to Legal Epidemiology

Introduction to Legal Mapping

[Advanced Legal Epidemiology Methods](#)

For Practitioners in Health Departments

For Researchers

For Educators

For Students

DESIGNED TO

MAKE RESEARCH WORKS OPENLY VISIBLE TO OTHER RESEARCHERS AND ENCOURAGE COLLABORATION

Credibility

Demonstrate credibility in an open public form.

Verified Resources

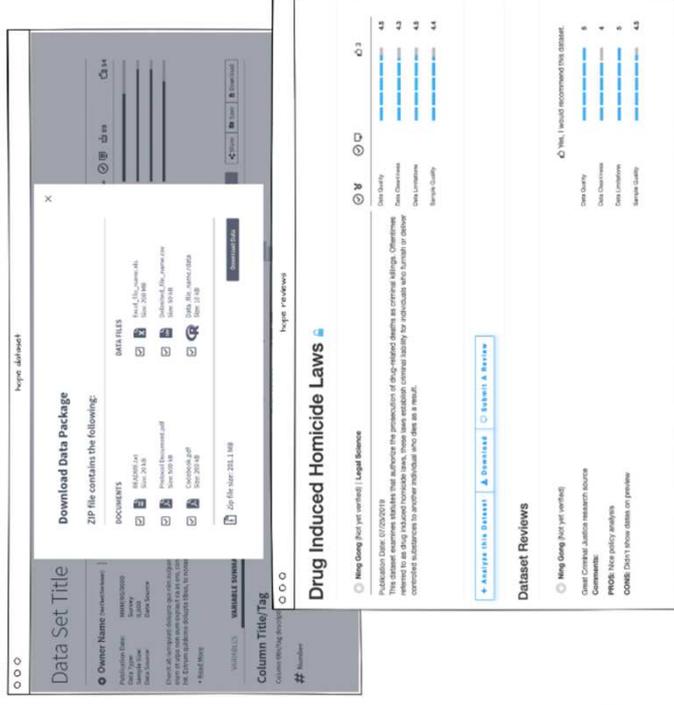
Innovative social review process to create verified datasets and analyses.

Transparency

Share the standard datasets and provide ways of publishing research methods.

Share and Fork Repositories

Multiple supported coding languages available to all users.



An C

Dataset Search

🔍 Enter Keywords

New Dataset

Sort By...

14 Search Results

Filter Results

- + Category
- + Access
- + Review

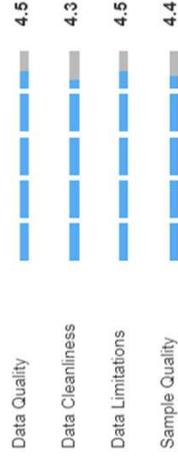
🔒 Drug Induced Homicide Laws

👍 3

🌟 Ning Gong (Not yet verified) | Legal Science

Publication Date: 07/25/2019

This dataset examines statutes that authorize the prosecution of drug-related deaths as criminal killings. Oftentimes referred to as drug induced homicide laws, these laws establish criminal liability for individuals who furnish or deliver controlled substances to another individual who dies as a result.



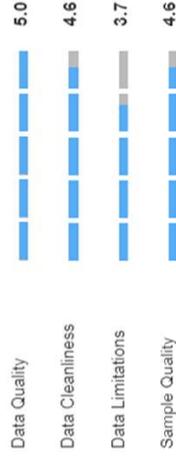
🔒 Naloxone Overdose Prevention Laws

👍 1

🌟 Ning Gong (Not yet verified) | Legal Science

Publication Date: 07/25/2019

Unintentional drug overdose is a leading cause of preventable death in the United States. Administering naloxone hydrochloride ("naloxone") can reverse an opioid overdose and prevent these unintentional deaths.



🔒 Good Samaritan Overdose Prevention Laws

👍 0

🌟 Ning Gong (Not yet verified) | Legal Science

Publication Date: 07/25/2019

Unintentional drug overdose is a leading cause of preventable death in the United States. Overdose bystanders may not call for medical assistance for fear of being arrested for drug-related crimes.



Analysis

Run and share your code

Analyses > Drug Policy System: Impact of State-Level Drug Policy on Overdose Deaths

Drug Policy System: Impact of State-Level Drug Policy on Overdose Deaths

Jarrold Olson (Not yet verified) | Battelle

08/29/2019 0

Opioid overdose rates have reached an epidemic level and state-level policy innovations have followed suit in an effort to prevent overdose deaths. State-level drug law is a set of policies that may reinforce or undermine each other, and analysts have a limited set of tools for handling the policy collinearity using statistical methods. This paper uses a machine learning method called hierarchical clustering to empirically generate "policy bundles" by grouping states with similar sets of policies in force at a given time together for analysis in a 50-state, ten-year interrupted time series regression with drug overdose deaths as the dependent variable. Policy clusters were generated from 138 binomial variables obtained by state and year from the Decomposition Drug Abuse Delinear System. Clustering reduced the

Appropriate Data	0
Conclusion Strength	0
Model Completeness	0

Fork this Analysis

Submit A Review

Analysis Reviews

4. Management, supervision, and inputs - funding

Initial custom software (obsolete after 20 years!)

Current funding for legal analysis/ consultation purposes is:

- approx. €20k for the annual meeting of Legal and Policy Correspondents
- One FTE; other contributors
- a few business trips each year
- plus any reports written by externals

Funding varies in line with EU general funding

....but increasingly broader policy inputs and outputs: EMCDDA
“Support to Policy” sector brings more integrated analyses –
Medical use of cannabis, driving, low THC...



Work remains sensitive, yet appreciated:

Political demand for analyses on PT decriminalisation, effective control of NPS...

and in due course to provide an update by the EMCDDA of the 2017 overview of cannabis legislation in the EU as well as continue to monitor and report on cannabis legislations at national level and in third countries

Recent assistance to Ministries or Parliamentary Committees in Luxembourg, Denmark (cannabis), Ireland, Norway (alternatives to punishment/ criminalisation)...



Performance monitoring

Latest web and social media metrics: laws are very popular.

Penalties at a glance	2900 Unique visitors / month
Cannabis policy	2800
Law Topics page	800
Drug classification systems	600
Threshold quantities	250
Drug driving laws	200

“Cannabis legislation in Europe (2017)” 1350 downloads /mth

...even only in English...



Periodic evaluation and re-shaping

ELDD Reflection Paper 2008:

- Monitoring of web statistics over 5-6 years (300 page views per day)
- Interviews of several stakeholders
- Assessing achievements against original objectives

EMCDDA Reitox NFPs reporting 2015 – rationalisation

Reitox NFP reporting now aligned with Penalties at a Glance



Thinking inside a much larger box

- Drug policy evolves in European Union member states; eg harm reduction becomes accepted, then DCRs, now perhaps cannabis legalisation?
 - EMCDDA analyses can evolve also, despite limited resources, with less taboos.
 - Selection of analyses has broadened in scope, driven by:
 - transnational events,
 - needs for solutions,
 - success of ground-up measures,
 - international events
- Objective, reliable, comparable, factual information.





Part IV: How? Management, Supervision, Funding

Sources of Support



OPTIC: Opioid Policy Tools and Information Center

?



Global Center for Legal Epidemiology

LawAtlas
*Creation and
Curation*
*Methods and
tools*

Research
Collaboration
“Stimulation”

Education
Training
*Capacity
Building*

A model

[English](#) [Deutsch](#) [Español](#) [Français](#) [Hrvatski](#) [日本語](#) [한국어](#) [Bahasa Malaysia](#) [Polski](#) ▼

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Informed decisions.
Better health.

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Featured review: Iodine deficiency disorders

The aim of this study was to examine the effect of adding iodine to foods and condiments

The featured review banner includes a background image of a young girl with long brown hair, a world map, and a stylized bar chart with horizontal bars of varying lengths.

Cochrane Colloquium Santiago
22-25 October 2019
Registration now open

The colloquium banner features a background image of a city skyline at sunset, with a prominent skyscraper in the center.

The Necessary Pieces

Commitment to

The importance and potential of legal epidemiology

Long-term support for PDAPS, LawAtlas and the model of open source legal data

Technological capacity to support ongoing development of legal mapping technology

Organizational capacity and willingness to lead by example:

Strong integration of law in the transdisciplinary model

- Research
- Capacity-building
- Advocacy



Any questions?

Royal Tunbridge Wells, UK:
August 2019

