

Drug Checking in the Netherlands

A story of success for prevention

Judith Noijen – Jellinek Prevention

RedUse conference Vienna, September 13th 2018

The Dutch reality...

Dutch drug policy aimed at:

- Reduce demand & supply
- Prevention & Harm reduction

Coordinated by Ministry of Welfare, Health and Sports

- Scientific research
- Prevention, Education, HR and treatment
- Decriminalistion drug use
- Seperation of markets

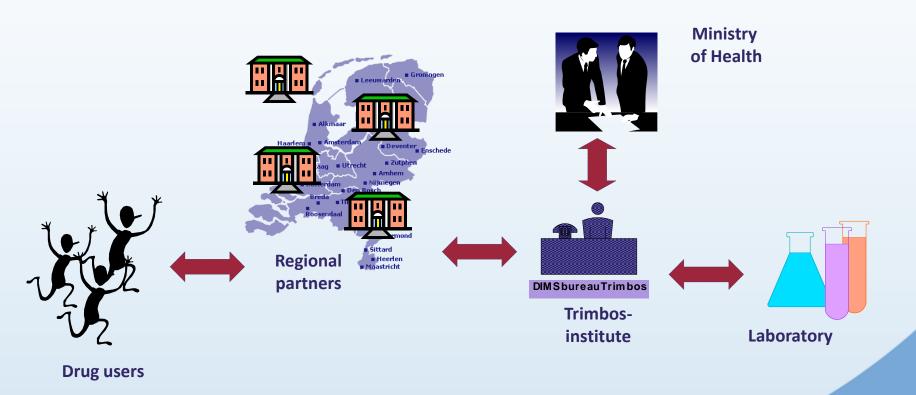


Drug Information and Monitoring System (DIMS)

- Dims:
- https://vimeo.com/254300597
- Video about our red alert system:
- https://vimeo.com/254300567



NL: Drug Information and Monitoring System (DIMS)





Scientific research DIMS

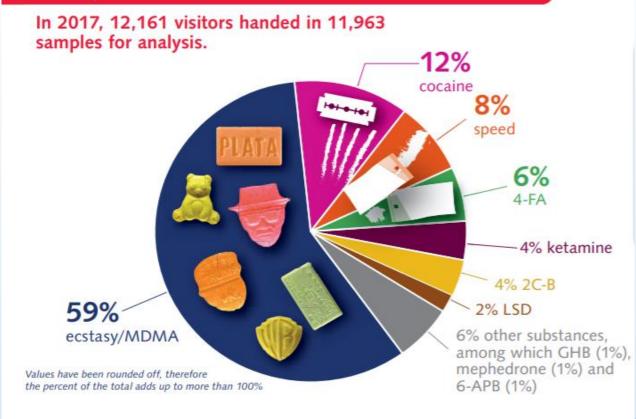
Monitoring tool:

- Collecting objective data on content, trends, of otherwise invisible and underground markets
- Sharing data by publish reports and scientific articles



DIMS Annual report 2017

Samples submitted to DIMS in 2017



DIMS annual report 2017 in English:



Prevention & Harm reduction DIMS

Red alert / early warning system:

 DIMS Occasionally warns on national, regional or local level for drugs involving extra risks.



The reality of Amsterdam?



Jellinek drugstestservice Amsterdam 2017

• Samples: 2509

- 58% Ecstasy pills
- 3% MDMA powder
- 11% cocaïne
- 6% amfetamine
- 4% ketamine



Scientific research Jellinek

Monitoring tool:

 Collecting (local) data on content, effects and risks of substances on the controlled market

Study determinants of specific behaviors

Collecting valuable information from service users through surveys



Prevention & Education Jellinek

Service-users

- Share the collected objective information to inform service user about the content of their sample
- Create awareness and risk perception
- Educate users about HR strategies
- Red Alerts

Others

 Sharing objective information and facts pro actively as well in respons to questions from other public health professionals, media, policy makers and politicians.



Treatment Jellinek

Treatment:

- Provides timely and valid data which is shared with treatment facilities and can be used to improve clinical care
- First contact some users have with 'Jellinek' is now based on a service and not treatment or care perspective
- Through Brief intervention referral to matched care/support/treatment



A story of succes?

Mission Jellinek Prevention:

To develop, evaluate and implement theory-based behaviour change interventions.

Guided by the Intervention Mapping Protocol

Example:

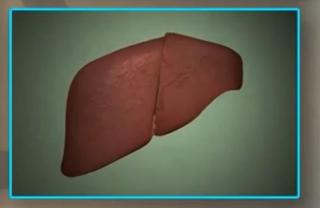
worrying increase severity MDMA related incidents at festivals











- The way we've doen research on beliefs and determinants related to mdma use (and other risk behaviours):
- PartyPanel: https://www.partypanel.eu/resultResources/15.1/report.html
- If interested in this kind of work here are some really usefull

resources: https://effectivebehaviorchange.com/



Needs assessment

Mapping the specific problem & setting or community

- Which behaviour(s) result or contribute to the problem
- Who is behaving that way and in what context?
- Which environmental factors contribute to the problem?

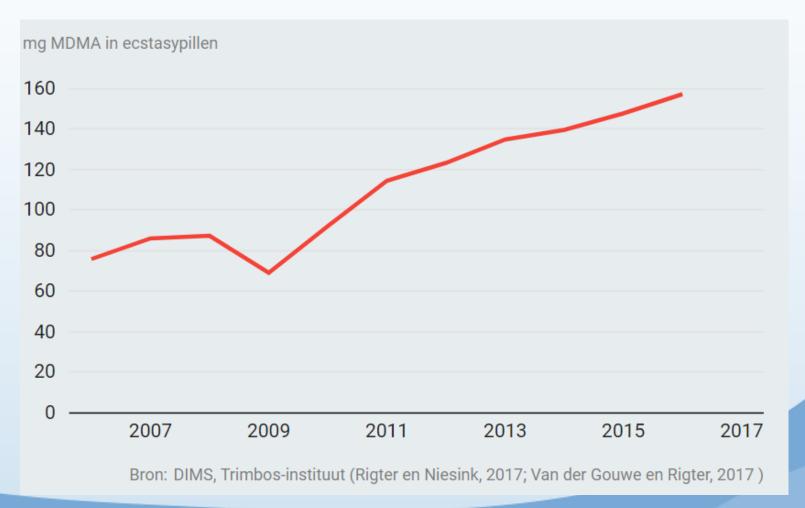


DC & Needs assessment

- Collecting real time and valid data about (local) controlled drug markets and (new) substances
 - Objectively mapping the problem and current situation
 - Related to specific drug taking behaviors and the level of risk users are taking
- Collecting information from new and/or hidden groups trough information exchange
 - Learning and understanding the different communities: define factors related to specific risk behaviors:

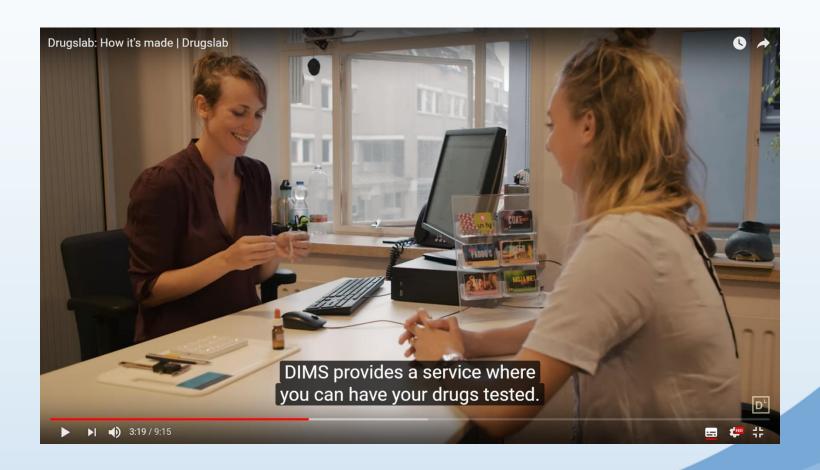


MDMA in Ecstasy tablets





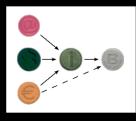
Information exchange at the service





Determinants of ecstasy use and harm reduction strategies

Informing evidence-based intervention development



Gjalt-Jorn Peters

RESEARCH REPORT

Social cognitive determinants of ecs target in evidence-based interventio a meta-analytical review

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OnlineOpen: This article is available free online at www.blackwell-synergy.com

ABSTRACT

Aims The health hazards and prevalence of ecstasy use have been docum review reporting on potentially modifiable antecedents of use is available, systematically research identifying cognitive correlates of ecstasy use. Suc targets for evidence-based interventions designed to discourage use. Methods were searched, inclusion criteria applied to resulting hits, and descendency selected publications. Reported associations between cognitive determinants use measures, were synthesized by calculating a weighted mean effect size, r, I support both to the theory of planned behaviour (TPB) and the expectancy useful determinants. Attitudes were associated most strongly with intention a perceived behavioural control. Conclusions Consideration of the strength ability of identified cognitions suggests that evidence-based interventions negative expectancies, perceived behavioural control and anticipated regret.

Keywords Determinants, drugs, ecstasy, expectancies, review, theory of

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BMC Public Health



Research article

Open Access

A structured review of reasons for ecstasy use and related behaviours: pointers for future research

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Abstract

Background: While the health risks of using ecstasy warrant intervention development, a recent meta-analysis of determinants of ecstasy use identified a number of lacunae in the literature. Specifically, no studies were included that address behaviours other than 'using ecstasy' (e.g. 'trying out ecstasy' or 'ceasing ecstasy use'). However, because meta-analyses aim to integrate study results quantitatively, the resulting rigid exclusion criteria cause many studies to be discarded on the basis of their qualitative methodology. Such qualitative studies may nonetheless provide valuable insights to guide future research. To provide an overview of these insights regarding ecstasy use, the current study summarizes and combines what is known from qualitative iterature on ecstasy use.

Methods: The databases PsycINFO and MedLine were searched for publications reporting reasons for estassy use and related behaviour, and the results were structured and discussed per behaviour and compared over behaviours.

Results: Two main categories of reasons were found. The first category comprised reasons to start using ecstasy, use ecstasy, use ecstasy more often, and refrain from ceasing ecstasy use. The second category comprised reasons to refrain from starting to use ecstasy, use less escatsay, and cease using ecstasy. Reasons for related behaviours within each of these two categories appear to differ, but not as substantially as between the two categories. A large number of reasons that were not yet explored in quantitative research emerged.

Conclusion: The current summary and combination of exploratory studies yields useful lists of reasons for each behaviour. Before these lists can inform interventions, however, they beg quantitative verification. Also, similarity of determinant configurations of different behaviours can be assessed by addressing determinants of several behaviours in one study. Another important finding is that meta-analytical integration of the literature may overlook important findings and implications. Thus, qualitative reviews remain useful instruments in setting the research agenda.



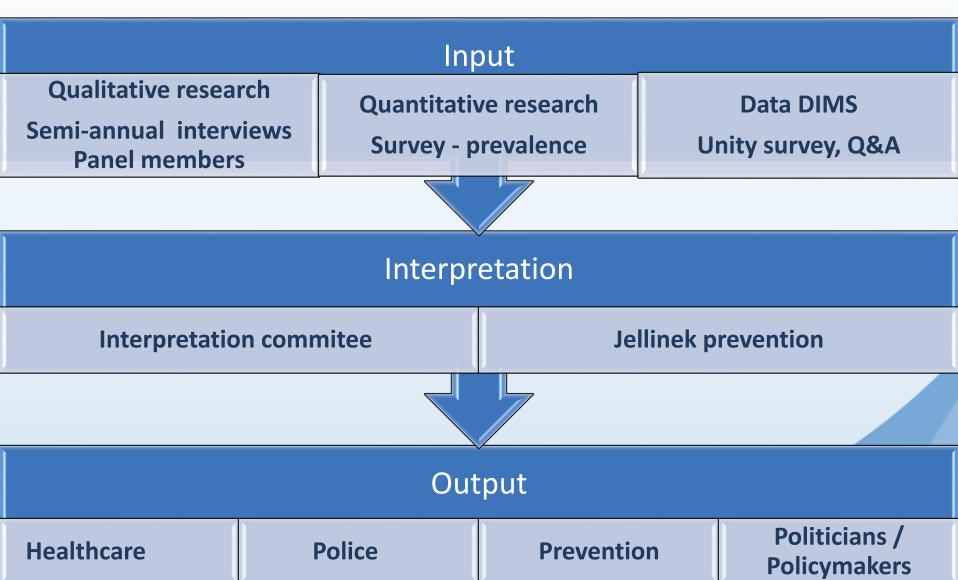
Service-user provides Jellinek:

Information on:

- Patterns of use (freq / dosing) setting, scenes, social norms
- Experienced positive and negative effects
- Applied Harm Reduction strategies
- Market: new substances, price, distribution
- On request: Information they collect from dealer
- Clientsatisfaction (Survey)
- Beliefs, attitude, intention related to their behaviour (Survey)

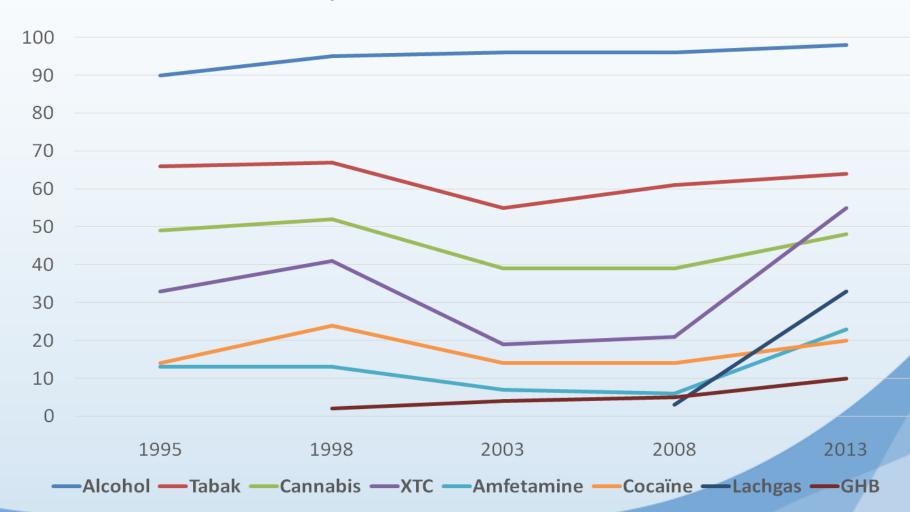


DC data integrated in Amsterdam Antenne: Annual monitoring mixed-methods report



Antenne 2014

Last month prevalence clubbers, Amsterdam





Information exchange to reach larger groups

Dissemination of up-to-date information about substances circulating on the market:

- Prevention / public health services
- Staff trainings, presentations
- Websites and online fora
- Unity peer education (training & materials)
- Celebrate Safe campaign (organisers, clubs & visitors)
- Service users own community, including dealer



Drugs Alert Team Amsterdam

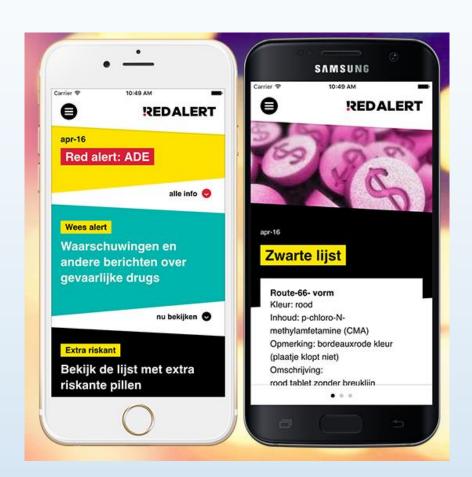
24-hrs phone service where everyone can report severe, strange or irregular drugrelated incidents:

- Emergency medical services
- Police, forensics, fieldwork
- Organisers/ clubowners / hotels
- Security staff

All partners try to collect (part of) the suscpisious sample to have it checked in the lab asap.



Red Alert







Succesfactors

- Collecting and using DC info to develop science based interventions & strong networks
- Collect reliable data on user level (diversity)
 - But we are missing international visitors and expats
- The relationship with service users
 - Offering an anonymous service
 - Individually tailored and non-judgemental info
 - Trained Peer educators added to the team
- Having a steady expert (Red Alert) team and DATA to collect info on incidents



The Dutch reality?

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Some of the confiscated drugs. Photo: Politie.nl

NEWS

Dutch ecstasy, amphetamine production among world's largest

Despite campaigns against illegal drugs in the Netherlands, the country is one of the world's largest producers of ecstasy and amphetamines. The government has vowed to do more to combat the "shameful situation."





Billions of euros worth of synthetic drugs were produced in the Netherlands last year, according to a police report published Saturday.



Netherlands becoming a narco-state, warn Dutch police

Officers say many victims do not report incidents and organised gangs have a free rein



▲ Most of the exclain taken in Europe and the US comes from Dutch Laboratories. Photograph: Portokalis/Getty Images/Stockphoto

The <u>Netherlands</u> is starting to resemble a narco-state with the police unable to combat the emergence of a parallel criminal economy, a report from the Dutch police association has warned.

RIME

DUTCH POLICE CHIEF WANTS TO GET RID OF PARTY DRUGS' 'NORMAL' IMAGE

By Janene Pieters on April 11, 2018 - 12:20



Erik Akerboom, Ministerie van Defensie / Wikimedia Commons

National Police Chief Erik Akerboom thinks that the use of drugs in the entertainment circuit has become too normalized and he wants to get rid of the "normal image" of this type of consumption, he said at an international police summit in Rotterdam on Tuesday, NU.nl reports.



MDMA Producers Are Dumping Tons of Waste in Nature Reserves

Every year, an enormous amount of chemical waste left over from the production of MDMA is illegally dumped, with devastating effects. And not much is done to prevent it from happening.



This article originally appeared on VICE Netherlands.

In May of 2018, Dutch forest ranger Erik de Jonge decided he'd had enough. "Dear ecstasy users. It's 3.39AM. We've been working since 6PM to clean up the waste from your little pills," he <u>tweeted</u>.



Amsterdam by night: 'Lawless jungle'?

Amsterdam 'lawless jungle' at night, says ombudsman



Tourists warned 'Amsterdam is crime hotbed after dark as cops struggle

DANGER AFTER DARK Amsterdam has become a 'lawless jungle' at night SSNESS' where cops cannot stop crime and violence, city officials warn

Street racing, drug dealing and illegal taxis are all said to be commonplace at night

in jungle" after dark where police are unable to deal with



'Police can no longer handle the lawless jungle after dark in Amsterdam' - ombudsman

So...who's to blame?

Drug users are supporting violent crime, says Dutch police chief

Society f in April 10, 2018



Photo: DEA

Dutch police chief Erik Akerboom has told an international conference in Rotterdam that more should be done to counteract the 'normalisation' of drug use.

- Drug users?
- Tourists?
- An out of balance drug policy?
- Drug Checking?

What comes next?



















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@ClubHconference

Thank you!

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