PILL TESTING, ECSTASY & PREVENTION

A SCIENTIFIC EVALUATION IN THREE EUROPEAN CITIES

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Ecstasy is the most common ‘party drug’ or ‘dance drug’ in the European Union. Pill-testing is one of the methods applied to reduce the risks related to the use of ecstasy. Pill-testing has been the subject of both scientific and political debate, and the question whether testing encourages the use of ecstasy is one of the major issues in this discussion.

In this report we present the findings of an empirical study conducted in three European cities (Amsterdam, Hanover and Vienna). All three cities offer ecstasy users facilities for pill-testing. Earlier studies addressing the question whether pill-testing influences the behaviour of ecstasy users did so on the basis of the hypothetical situation that this opportunity was available. Few studies were able to test what users in effect do when actually offered this opportunity. For this reason our study focuses not only on the stated intentions of ecstasy users, but in particular on their actual behaviour in relation to pill-testing.

In this introductory chapter we will start with a general overview of the current situation regarding ecstasy use in the EU. We will then summarize what is currently known about pill-testing, both technically and with regard to the possible influence of pill-testing on the behaviour of (potential) ecstasy users. We conclude with an outline of the report.

**Ecstasy as a party drug**

A vast majority of European citizens has never tried ecstasy.\(^1\) According to the latest general population survey conducted in Germany, in 2000, of those aged 18 to 59 1.5% in former West Germany and 2.0% in former East Germany had at some time tried the drug.\(^2\) In the Netherlands, the figure for 2000/2001 was 2.9% of the population aged 12 years and over.\(^3\) In a survey conducted in Upper Austria in 2000, the lifetime prevalence of ecstasy use among the general population aged 15 and over was 4.0%.\(^4\)

Of those who try ecstasy, most do not continue to use this substance for an extended period of time. For example, only 0.3% of the West German, 0.8% of the East German, 0.6% of the Upper Austrian, and 0.5% of the Dutch sample reported to have taken ecstasy during the previous 30 days.

Overall, ecstasy use is not widespread among younger teenagers. Surveys among students aged 15 to 16 years, conducted in thirty European countries, show that only a small percentage has ever tried ecstasy.\(^5\) This outcome may be ascribed to the fact that the first use of ecstasy generally takes place – if at all – at a later age than 15-16 years.

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1. EMCDDA (2002)
2. Kraus & Augustin (2001)
4. Haas et al. (2001)
5. Hibell et al. (2000)
years. Dutch researchers for example found that among the general population in the Netherlands 22.4 years is the mean age of first ecstasy use.\(^6\) Prevalence rates are higher among young adults. In the Netherlands, the highest proportion of ecstasy users was found among the group aged 20 to 24 (13.6%). In former West Germany the highest percentage was found among respondents aged 21 to 24 (5.7%), and in former East Germany among those aged 25 to 29 (5.8%). Surveys among specific groups of youth and young adults generally report higher prevalence rates. These figures, however, are to a large extent dependent on the population under survey. For example, a field study conducted in nine European cities showed that 34.4% of respondents interviewed in nightlife settings had at some time used ecstasy, and that 15.9% had taken the drug in the previous 30 days.\(^7\) In another European study, conducted in seven cities, figures for the lifetime and last month prevalence of ecstasy use were considerably higher (mean lifetime: 53%; mean last month: 29%).\(^8\) However, lifetime and last month figures for each city showed a considerable gap: 37.5% and 12.1% respectively for Vienna; 44.6% and 22.6% respectively for Berlin; 83.4% and 57.1% respectively for Amsterdam.\(^9\) These results for Amsterdam exceed those of all other field studies conducted in Amsterdam or elsewhere in the Netherlands. According to other, and probably more representative field surveys in Amsterdam, in 1998 65.6% of ‘trendy’ clubbers and ravers had ever tried ecstasy, against 33.7% of young cafe visitors in 2000.\(^10\)\(^11\)

In conclusion, figures on the use of ecstasy among young people very much depend on the population under survey. Between surveys conducted in nightlife settings in particular, significant variations are found in the extent of ecstasy use. As a consequence, general conclusions about the extent of ecstasy use in nightlife are tentative at best. In fact, even about the extent of ecstasy use among a specific group such as clubbers and ravers, general statements are far from easy to make. First of all, no uniform definition exists of this population. In addition, selecting comparable groups for a cross-national study is not an easy task. Although the music played in clubs and at raves shows strong similarities throughout Europe, there are some substantial variations, and these variations in some cases are labelled quite differently from one country to the next. For example, ‘techno’ is a commonly used term for what in the Netherlands is generally called ‘house’, while in the latter country ‘techno’ is used to refer to a specific type of ‘house’. Similar types of dance music are moreover played at a variety of parties, ranging from relatively small-scale festivals with a few hundred visitors to large-scale dance events visited by over a 100.000 people. Lastly, similar parties can draw a varied public. While some small parties are only open to well-to-do people dressed in expensive designer clothes, others aim at the alternative, politically involved anti-globalist scene.

Certain general conclusions can nevertheless be drawn. Ecstasy appears to be predominantly taken during late adolescence and early adulthood. Like most illicit drugs, ecstasy is used more commonly by men than women; within the same setting, however, the use among both genders is rather similar. In addition, ecstasy appears to be a ‘white’ drug; its use is less common among ethnic minority groups. This may

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\(^6\) Abraham, Kaal & Cohen (2002)  
\(^7\) Calafat et al. (1999)  
\(^8\) Simon (2002)  
\(^9\) Tossman, Boldt & Tensil (2001)  
\(^10\) Korf et al. (1999)  
\(^11\) Korf, Nabben & Benschop (2001)