









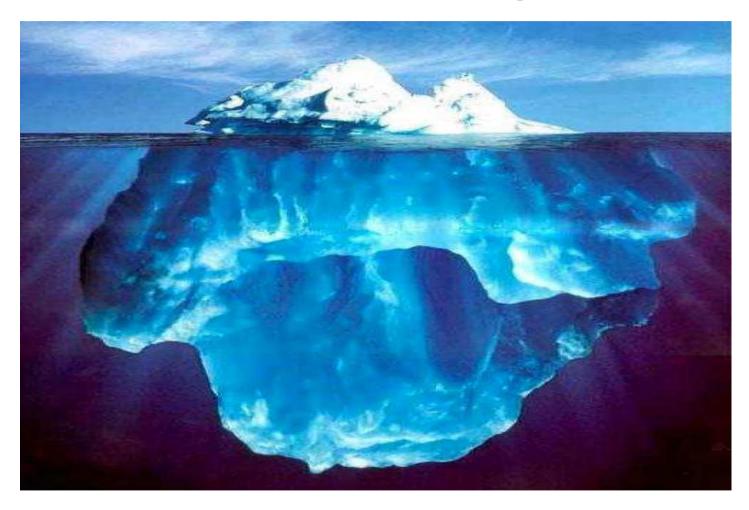
Main challenges when estimating drug-related public expenditure

Cláudia Costa Storti

Developing guidelines for planning, monitoring and reporting on

drug related public expenditure
Organized by the European Commission (TAIEX) and the
Croatian Office for Combating Drug Abuse
Dubrovnik, 14–15.05.2013

Drug-related public expenditure – What do we know at European level?





emcdda.europa.eu 2

Drug related public expenditure: what do we know?

Limited knowledge at European level:

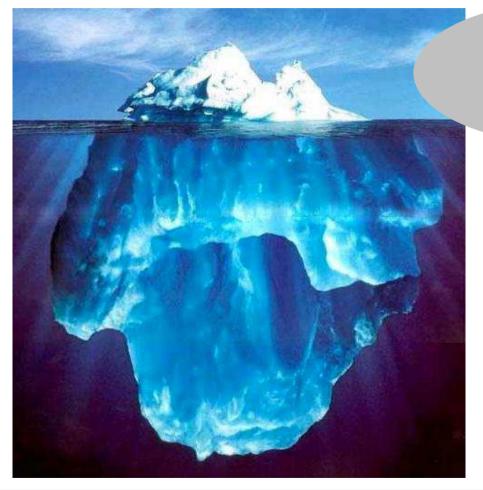
- 1. What do we know?
- 2. Methods
- 3. Results

- Still no European picture
- Data limitations
- Some countries, some years

Drug-related public expenditure –

Limited knowledge at European level

1. What we know?



Drug-related public expenditure!



Limited at European level!

- No estimate of how much is the total European drug-related public expenditure;
- It is still not possible to fully compare national estimates;

WHY?

Countries report:

1. What we

know?

- Different percentages of the total;
- Different years;
- Apply different methods to estimate the same type of expenditure.

Not enough!

- 1. Introduction
- 2. What we know?
- 3. The Belgian case study
- 4. Social costs
- 5. Developments

Methods to collect data, depend on type of public accountancy available in each country:

- Labelled expenditures
- Unlabelled expenditures.



- 1. Introduction
- 2. What we know?
- 3. The Belgian case study
- 4. Social costs
- **5. Developments**

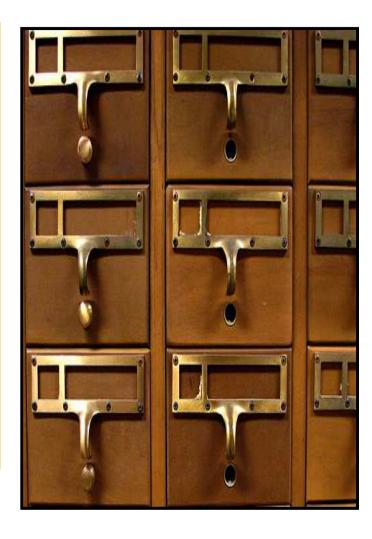


<u>Labelled</u> <u>expenditures</u>

are
well
identified
expenditures.
Reflect the
government's publicly
announced
commitment in the field
of drugs



- 1. Introduction
- 2. What we know?
- 3. The Belgian case study
- 4. Social costs
- 5. Developments

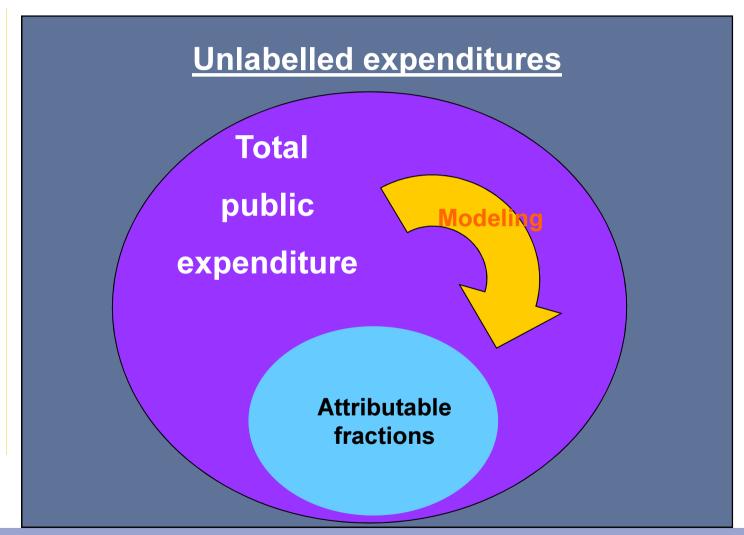


Unlabelled

expenditures

The non-announced (and some times unplanned) public expenditures faced by the government in tackling with drugs.

- 1. Introduction
- 2. What we know?
- 3. The Belgian case study
- 4. Social costs
- 5. Developments





- Public expenditures: What do we Annual Report

2012 EMCDDA

А	. 1	ntro	al	-4	
1				CTI	\mathbf{n}

- 2. What we know?
- 3. The Belgian case study
- 4. Social costs
- **5. Developments**

Estimates of drug-related public expenditure							
Country	Year	Allocation of drug-related public expenditure (%)		Proportion of GDP (%) (¹)			
		Demand reduction	Supply reduction				
Belgium	2008	38.0	68.0	0.11			
Croatia (²)	2010	66.0	34.0	0.03			
Cyprus (3)	2010	31.0	42.9	0.04			
Czech Republic	2006	8.2	91.8	0.17			
Estonia (2)	2010	76.2	23.8	0.01			
France	2005	51.6	48.4	0.07			
Germany	2006	35.0	65.0	0.22-0.26			
Greece (2)	2009	82.0	18.0	0.05			
Hungary	2007	24.7	75.3	0.04			
Ireland (2) (4)	2010	65.1	23.4	0.17			
Italy	2009	53.4	46.6	0.25			
Latvia (2)	2008	40.9	51.3	0.04			

Public expenditures: What do we

2012 EMCDDA Annual Report

Estimates of drug-related public expenditure

Country	Year	Allocation of drug-related public expenditure (%)		Proportion of GDP (%) (¹)		
		Demand reduction	Supply reduction			
Lithuania (²)	2008	69.3	17.7	0.02		
Luxembourg	2009	43.0	57.0	0.10		
Netherlands	2003	25.0	75.0	0.46		
Portugal	2005	52.5	47.5	0.03		
Slovakia	2006	30.0	70.0	0.05		
Finland	2009	45.5	54.5	0.07		
Sweden	2002	25.0	75.0	0.28		
United Kingdom 2005/06		38.3	60.7	0.48		
(1) Due to differences between countries in methodology, data quality and completeness, values for drug-related public expenditure as a proportion of gross domestic product (GDP) are indicative only, and should not be taken to represent the full extent of national public expenditure on the drug problem.						
(2) Labelled expenditure only.						

1. Introduction

2. What we know?

3. The Belgian case study

4. Social costs

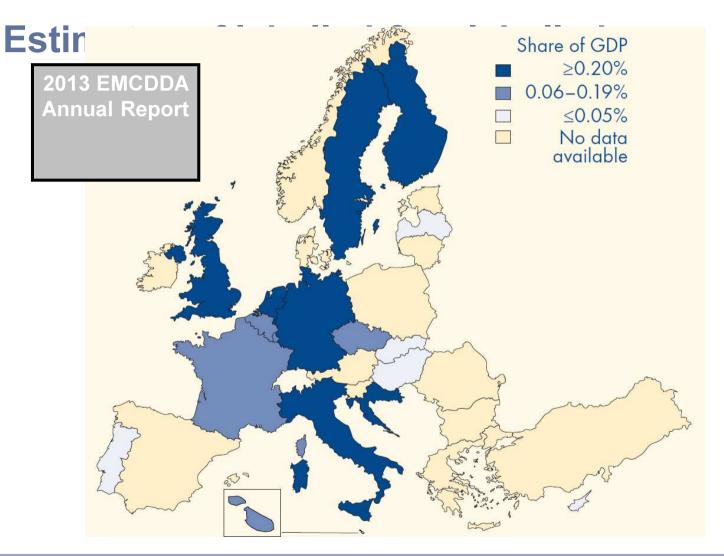
5. Developments

<u>A</u>

25.9 % of total expenditures financed drug-related coordination activities.



- 2. What do we know?
- 3. The Belgian case study
- 4. Social costs
- **5. Developments**



·A·

Public expenditures: What do we know? – Summary of information reported until 2012:

- 1. Introduction
- 2. What we know?
- 3. The Belgium case study
- 4. Social costs
- 5. Developments

Estimates of total (<u>labelled and unlabelled</u>) drug related expenditures) suggest:

- 1. Drug related expenditures vary widely in percentage of GDP, from country to country;
- 2. Estimates for the 2002-2010 period, point to values varying between 0.48% 0.03% of GDP;
- 3. Higher income countries tend to spend more on drug-related expenditures.



1 Introduction

- 2. What we know?
- 3. The Belgium case study
- 4. Social costs
- 5. Developments

Estimates of total (<u>labelled and unlabelled</u>) drug related expenditures suggest:

- 4. Out of the 13 countries with estimates of labelled and unlabelled, 9 countries spend more resources on supply-reduction activities (between 54.5% and 91.8% of total expenditures)
- 5. Out of 13 countries with labelled and unlabelled expenditures, only 4 spend about half and half on supply/demand reduction initiatives;
- 6. Labelled expenditures represent less than 10% of the total drug-related expenditures.

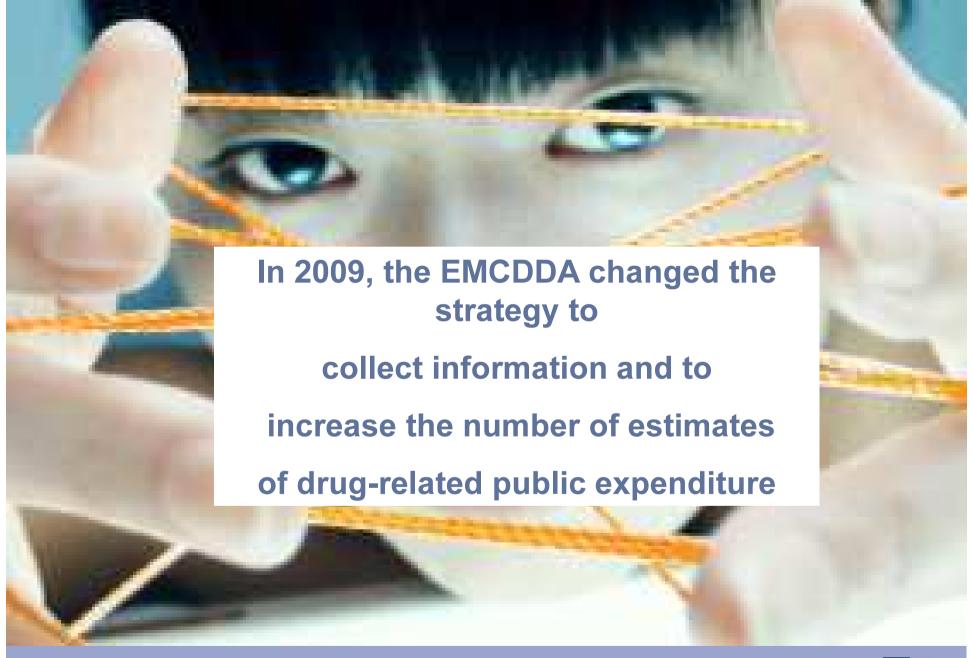
Public expenditures: challenges –

Conclusions:

The collection of drug-related expenditure in Europe still faces many important challenges:

- 1. Data collected at national level is still limited and unequal;
- 2. Data coverage differs across countries;
- 3. Methods used to estimate the various components of public expenditure differ across countries;
- 4. National results are not fully comparable;
- 5. The analysis of European data requires caution

- 1. Introduction
- 2. What we know?
- 3. The Belgium case study
- 4. Social costs
- 5. Developments





Drug-related public expenditure - Main challenges -

Comments or questions?

Thanks for your attention!

Cláudia Costa Storti, MSc

Scientific analyst — Economic analysis • Policy, evaluation and content coordination unit Tel. (351) 211 21 02 54 • Fax (351) 213 58 44 41

European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)